Correctional Health Care Leadership Institutes
for Physicians and Health Administrators

Building the Capacity to Lead and Succeed

July 19–20, 2013 | Paris Hotel | Las Vegas, NV

Supported by
Society of Correctional Physicians
**GENERAL INFORMATION**

**WELCOME**

Welcome to Las Vegas and the Correctional Health Care Leadership Institutes. The Institutes are taught by experts and filled with great information that you’ll use again and again.

The Leadership Institutes have been created by and for correctional physicians and other health professionals and tailored for your unique needs. For the next two days, you will be immersed in a collegial learning environment, networking with peers and experts for professional growth and success. Find new solutions, make new connections and return to work with new tools for leadership success.

**REGISTRATION AND BOOKSTORE HOURS**

Friday, July 19, 6:30 am – 5:30 pm  
Saturday, July 20, 6:30 am – 5:45 pm

**CONFERENCE LEARNING OBJECTIVES**

At the conclusion of this conference, participants should be able to:

- Examine the role of correctional leaders (e.g., administrators, physicians) in a correctional setting, including administrative roles, organizing health services, and applying legal and ethical practices
- Employ process improvement systems such as quality improvement, utilization review and risk management to operate an effective correctional health care delivery system
- Manage correctional health care staff, including recruitment, retention and supervision
- Describe strategies for integrating health care services and personnel into a correctional setting

**CONTINUING EDUCATION CREDIT**

**CCHPs**: Certified Correctional Health Professionals may earn up to 15 contact hours of Category I continuing education for recertification.

**Nurses**: The National Commission on Correctional Health Care is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

NCCCHC designates this educational activity for a maximum of 15 contact hours.

**Physicians**: The National Commission on Correctional Health Care is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. NCCHC designates this live activity for a maximum of 15 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**CONFERENCE PROCEEDINGS**

Please check after the conference to get all updates. You will also receive a postconference email with a link.

**PROGRAM COMMITTEES**

**Physicians Leadership Institute**

- TeCora Ballom, DO  
- Carl Keldie, MD  
- Phillip Farabaugh, MD  
- Robert Greifinger, MD, FSCP  
- Newton Kendig, MD  
- Nicholas Makrides, DMD  
- Nicholas Scharff, MD, MPH  
- Steven Shelton, MD, CCHP-A  
- Marc Stern, MD, MPH, CCHP  
- Todd Wilcox, MBA, MD, CCHP-A

**Health Administrators Leadership Institute**

- Russell Blair, MSN, CCHP  
- Vickie Freeman  
- JoRene Kerns, BSN, RN, CCHP  
- William Kissel, MS, CCHP  
- Capt. Jerri McGinnis, BSN, MBA, CCHP-RN  
- Cheryl Price, MSW  
- Thomas Tegeler, MPH, RN, CCHP  
- Ronald Wiborg, MBA, CCHP  

Staff Liaison: Brent Gibson, MD, MPH

**Meeting registration entitles you to the following:**

- Admission to all sessions  
- Breakfast and lunch both days  
- Social mixer on Friday night  
- Daily networking and exhibit breaks  
- Opportunity to purchase specialty items from the NCCHC bookstore  
- Conference proceedings

**MANY THANKS TO OUR SPONSOR**

Wexford Health Sources, Inc., for funding for the attendee file folios
TABLETOP EXHIBITS

The following companies offer products and services to support correctional health care and will be on display Friday and Saturday.

**Alkermes, PLC**
852 Winter Street
Waltham, MA 02451
781-609-6000
www.alkermes.com
As a fully integrated global biopharmaceutical company, Alkermes is a leader in innovative medicines that address the unmet needs and challenges of people living with debilitating diseases.

**Bristol-Myers Squibb**
P. O. Box 4500
Princeton, NJ 08543
609-897-2000
www.bms.com
Bristol-Myers Squibb welcomes you to Las Vegas. We invite you to visit our exhibit and learn about our products and services.

**Post Medical, Inc.**
555 North Point Center East
Alpharetta, GA 30022
866-330-4845
www.postmedical.com
Post Medical’s core business is the research, development and production of original products relating to the safe handling and disposal of infectious medical waste.

**Wexford Health Sources, Inc.**
501 Holiday Dr., Foster Plaza Four
Pittsburgh, PA 15220
888-633-6468 (888-MED-MGMT)
www.wexfordhealth.com
Wexford Health controls offender health care costs without sacrificing quality of care. We provide cost-effective, clinically sound medical, mental health and pharmacy programs; clinical staffing; and TPA (claims) services.

**ADDITIONAL EXHIBITS**

**Certified Correctional Health Professional (CCHP)**
1145 W. Diversey Parkway
Chicago, IL 60614
773-880-1460
www.ncchc.org/cchp
The CCHP program is the only national certification dedicated to recognizing the special skills and knowledge necessary to provide correctional health care. Includes specialty certifications for nurses, mental health and advanced certification.

**National Commission on Correctional Health Care**
1145 W. Diversey Parkway
Chicago, IL 60614
773-880-1460
www.ncchc.org
NCCHC’s mission is to improve the quality of health care in jails, prisons and juvenile confinement facilities. NCCHC offers a broad array of resources to help correctional health care systems provide efficient, high-quality care.

**Society of Correctional Physicians**
1145 W. Diversey Parkway
Chicago, IL 60614
773-883-5375
www.societyofcorrectionalphysicians.org
SCP promotes professional excellence in the field of correctional medicine. It is the only membership organization committed solely to meeting the needs of correctional physicians.

**NCCHC DISCLOSURE POLICY**
In accordance with the disclosure policy of the National Commission on Correctional Health Care, everyone who is in a position to control the educational content of the Correctional Health Care Leadership Institutes (including planners, presenters and moderators) has been asked to disclose all relevant financial interests with any commercial interest that might be germane to the content of their presentations. Such disclosure is not intended to suggest or condone bias in any presentation but rather is elicited to provide information that attendees might deem important to their evaluation of a given presentation.

No planners, presenters or moderators of the Leadership Institutes disclosed a relevant financial relationship with a commercial interest.
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<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>6:30 AM – 5:30 PM</td>
<td>Registration and Bookstore</td>
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<tr>
<td>7:00 AM – 8:00 AM</td>
<td>Welcome Breakfast</td>
<td>Versailles 3</td>
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<tr>
<td>8:00 AM – 9:00 AM</td>
<td>Health Care in the Correctional Culture I: Ethical Obligations</td>
<td>Versailles 1-2</td>
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<td></td>
<td>- Ronald Shansky, MD, MPH</td>
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<td>9:00 AM – 9:15 AM</td>
<td>Networking Break</td>
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<td>Health Care in the Correctional Culture II: Inmates as Patients</td>
<td>Bordeaux</td>
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<td>- Rebecca Lubelczyk, MD, CCHP, FSCP</td>
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<td>- Steven Shelton, MD, CCHP-A</td>
<td>Chablis</td>
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<td>Exhibit Break</td>
<td>Versailles 4</td>
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<td>10:45 AM – 11:45 AM</td>
<td>Health Care in the Correctional Culture III: Permits, Passes and Perks</td>
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<td>- Steven Shelton, MD, CCHP-A</td>
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<td>- Nicholas Scharff, MD, MPH</td>
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<td>11:45 AM – 1:15 PM</td>
<td>Lunch - The Affordable Care Act and Corrections: How This Will Affect Your Practice - Part 1</td>
<td>Versailles 3</td>
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<td>- Jeffrey Traczewski, MBA, CCHP</td>
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<td>Health Care in the Correctional Culture IV: Working With Custody</td>
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<td>2:45 PM – 3:45 PM</td>
<td>Physicians as Managers IV: Mechanics of Utilization Management for Physicians</td>
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<td>- Sharon Lewis, MD</td>
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<td>Networking Break</td>
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<td>4:00 PM – 5:00 PM</td>
<td>Health Care in the Correctional Culture V: Staying Out of Trouble</td>
<td>Bordeaux</td>
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<td>- Todd Wilcox, MD, MBA, CCHP-A</td>
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<td>5:00 PM – 6:00 PM</td>
<td>Social Mixer</td>
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**FRIDAY, JULY 19**
## SCHEDULE AT A GLANCE

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<thead>
<tr>
<th>Time</th>
<th>Physicians—Essentials</th>
<th>Physicians—Advanced</th>
<th>Health Administrators—Essentials</th>
<th>Health Administrators—Advanced</th>
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<td>7:00 AM – 5:45 PM</td>
<td>Registration and Bookstore</td>
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<tr>
<td>7:00 AM – 7:30 AM</td>
<td>Continental Breakfast Room: Versailles 3</td>
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<td>7:30 AM – 8:30 AM</td>
<td>Health Care in the Correctional Culture VI: Being Sued Deana Johnson, JD Room: Bordeaux</td>
<td>Physicians as Managers VI: Developing Rational and Defensible Staffing Plans Todd Wilcox, MD, MBA, CCHP-A Room: Versailles 1-2</td>
<td>Management Issues That Affect Cost: Productivity, Staffing and Administration. How to Best Utilize Public Resources Ronald Wiborg, MA, MBA, CCHP Room: Chablis</td>
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<td>8:45 AM – 9:45 AM</td>
<td>Day-to-Day Practice I: Mental Health for Nonmental Health Professionals William Kissel, MS, CCHP Room: Bordeaux</td>
<td>Physicians as Managers VII: Personnel Issues Becky Pinney, MSN, CCHP-RN Room: Versailles 1-2</td>
<td>Legal Dilemmas With Special Implications in Correctional Health Settings Deana Johnson, JD Room: Chablis</td>
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<td>9:45 AM – 11:15 AM</td>
<td>Exhibit Break Room: Versailles 4</td>
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<td>10:15 AM – 11:15 AM</td>
<td>Day-to-Day Practice II: Pharmacy and Formulary Challenges in Jails and Prisons Rick Morse, MBA, CCHP Room: Bordeaux</td>
<td>Physicians as Managers VIII: Professional Burnout Ivor Garlick, MD, CCHP Room: Versailles 1-2</td>
<td>Important Techniques in Communicating With Counsel Deana Johnson, JD Room: Chablis</td>
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<tr>
<td>11:15 AM – 12:30 PM</td>
<td>Lunch — The Affordable Care Act and Corrections: How This Will Affect Your Practice – Part 2 Jeffrey Traczewski, MBA, CCHP Room: Concord C</td>
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<td>12:30 PM – 1:00 PM</td>
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<td>1:00 PM – 2:00 PM</td>
<td>Day-to-Day Practice III: Effective Use of Technology Todd Wilcox, MD, MBA, CCHP-A Room: Versailles 1-2</td>
<td>Strategic and Practical Implications of Contracting Health Services Rick Morse, MBA, CCHP Room: Versailles 3-4</td>
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<td>Networking Break</td>
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<td>2:15 PM – 3:15 PM</td>
<td>Day-to-Day Practice IV: Diagnostic Errors and Biases Ivor Garlick, MD, CCHP Room: Versailles 1-2</td>
<td>Certification for Correctional Health Professionals: Why It Should Matter to You Matissa Sammons, CCHP &amp; Steven Shelton, MD, CCHP-A Room: Versailles 3-4</td>
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<td>Networking Break</td>
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<td>3:30 PM – 5:15 PM</td>
<td>The Prison Rape Elimination Act: What You Need to Know as a Health Care Leader Supported by the National PREA Resource Center via Grant No. 2010-RP-BX-K001 awarded by the Bureau of Justice Assistance Linda McFarlane, LCSW, MSW, &amp; Robert Dumond, LCMHC, MA Room: Versailles 3-4</td>
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<td>5:15 PM – 5:30 PM</td>
<td>Closing Remarks Room: Versailles 3-4</td>
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FRIDAY, JULY 19

8:00 AM - 9:00 AM

Health Care in the Correctional Culture I: Ethical Obligations
Ronald Shansky, MD, MPH, Correctional Health Care Consultant

This presentation attempts to facilitate the development of leadership approaches that contribute to improved and sustained quality of correctional health service. This will be accomplished by leaders learning about the history of correctional health litigation and the progress made as a result. There is also a focus on the differences and similarities between correctional health services and community health services. Correctional health professional ethics complete the tools provided to stimulate progress in improving inmate health services.

Educational Objectives
• Review the history of correctional health care litigation and its positive and negative impacts
• Describe the differences between correctional medicine and community medicine
• Summarize professional ethics in a correctional environment

9:15 AM - 10:15 AM

Health Care in the Correctional Culture II: Inmates as Patients
Rebecca Lubelczyk, MD, CCHP, FSCP, MCI Norfolk, MHM Correctional Services, Inc.

Correctional medicine is a specialty for which there is no formal training. However, by observing and understanding the cultural differences that interact in a correctional medical encounter, better, objective and more efficient care can be delivered to inmates, thereby reducing stress on the health care and custody staff.

Educational Objectives
• Express understanding of the role of the correctional staff
• Demonstrate insight as to why patients do something or ask for something
• Identify ways to set medical boundaries as well as personal boundaries

Physicians as Managers I: Writing Effective Policies and Procedures
Steven Shelton, MD, CCHP-A, Oregon Department of Corrections

This session will discuss what constitutes a mission statement and a policy statement in a correctional health care environment. Elements of policy and procedure statements will also be addressed with an emphasis on how to write an effective policy. Working in teams, attendees will dissect and analyze sample policies on complex correctional health care issues. Time permitting, attendees will have an opportunity to obtain feedback on one of their own institutional health care policies.

Educational Objectives
• Write an effective correctional health services policy statement
• Explain the elements of policy statements
• Analyze several policy and procedure examples of complex medical-legal issues

Correctional Health Care Accreditation: The Benefits to Your Program
Tracey Titus, RN, CCHP, National Commission on Correctional Health Care

Limited resources, grievances, litigation and providing the three basic rights can be challenging for correctional health systems. A well-managed, organized health care system empowers administrators and staff to minimize these challenges. NCCHC’s Standards for Health Services are widely recognized as the benchmark for establishing and measuring a correctional health services system. As the leader in correctional health services accreditation, NCCHC has a history of success in guiding the nation’s jails, prisons and juvenile facilities toward continual improvement. Attendees will better understand the importance and benefits of correctional health care accreditation.

Educational Objectives
• Review the legal context of accreditation
• List at least three reasons why accreditation is important
• Describe use of the Standards for Health Services to prepare for accreditation

Please visit www.NCCHC.org/leadership-institutes for speaker biographies.
10:45 AM - 11:45 AM

Health Care in the Correctional Culture III: Permits, Passes and Perks
Steven Shelton, MD, CCHP-A, Oregon Department of Corrections

In corrections, health services encompasses every possible medical and quasimedical request and interaction, such as requests for shoes, low bunks, cough syrup and work assignments. There are also “difficult” patients who are not very ill but take up lots of health service time. This session will present some thoughts, discussion and suggestions on ways to view and deal with these issues, thereby helping your clinic flow more smoothly and making your day less frustrating.

Educational Objectives
- Discuss dynamics of some commonly requested items
- Explore alternatives for dealing with requests for perks and passes
- Identify strategies for dealing with difficult patient encounters

Physicians as Managers II: Quality Improvement/Measuring Change
Nicholas Scharff, MD, MPH, Pennsylvania Department of Corrections

The principal impact of a quality improvement program should be change, but change requires motivation. Health personnel can be motivated by data if they care about it and believe it. What to study should be based on known or suspected problems amenable to intervention. Data elements should be as quantitative and unambiguous as possible. Postintervention studies should quantify improvement. This process works best if it is voluntary and the data are objective, so the presentation of the data should be respectful and encouraging. Serial studies demonstrating improvement can facilitate culture change.

Educational Objectives
- Explain quality improvement as a process for shaping and reshaping a health care system
- Formulate useful study topics
- Write useful indicators

Monitoring of Services: Pharmacy and Utilization Management
Gina Jules, PharmD, CCHP, Armor Correctional Health Services, Inc.

Correctional health care is growing and will continue to have a significant impact on pharmacy expenditures. Pharmaceutical service is an essential component in correctional health care, and managing expenses while optimizing patient care should always be the focal point. As increasingly scarce resources are allocated to the correctional budget, the site administrators and medical staff must monitor pharmacy and utilization services. Cost reduction may be achieved by identifying, resolving and preventing drug therapy cost.

Educational Objectives
- Identify cost-savings strategies
- Review pharmacy in a correctional institution
- Explain how to optimize patient care while monitoring pharmacy and utilization management

Inmate Management to Reduce Costs: Increase Inmate Responsibility, User Fees and Early Release of Elderly and Terminally Ill Inmates
Sharon Lewis, MD, Georgia Department of Corrections

Health care budgets reductions dictate implementation of strategies to reduce cost and expenses. As in the free world, health care delivery systems in corrections must encourage inmate participation in their medical care and employ structures in which they share financial responsibility for care. In addition, an early release process using defined criteria allows inmates to access community resources for their medical care.

Educational Objectives
- Compare health care systems in the free world with the correctional health care delivery system
- Outline the components of a “summary of health care benefits” in the correctional environment
- Explore early release opportunities related to age and medical conditions

11:45 AM - 1:15 PM

The Affordable Care Act and Corrections: How This Will Affect Your Practice - Part 1
Jeffrey Traczewski, MBA, CCHP, Correct Care Solutions

Key provisions of the Patient Protection and Affordable Care Act will take effect in 2014. This wide-ranging law has a number of elements that will have an impact on correctional health care, primarily in jails but also with some opportunities for prisons. Learn about the ways that the ACA will affect delivery and cost of correctional health services and what facilities should be doing to prepare for the changes ahead.

Educational Objectives
- Review provisions of the Affordable Care Act that affect correctional populations and their health care
- Summarize steps a facility can take now to prepare for the initial changes caused by the ACA
- Discuss the related changes and opportunities in the Medicaid program
### SESSION DESCRIPTIONS

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| **Health Care in the Correctional Culture IV: Working With Custody**  
Donald Kern, MD, MPH, CCHP  
William Teel, Las Vegas Metropolitan Police Department  
The corrections industry has its own set of operating parameters, in some ways unique when compared to other clinical settings. Developing “cultural competency” for the corrections industry is essential for health care providers to succeed in their jobs. An expert corrections physician and an expert corrections command staff member will discuss potential pitfalls and opportunities in providing health care in correctional settings and respond to issues identified by audience members.  
**Educational Objectives**  
- Describe classification issues  
- Identify facility security concerns  
- Demonstrate improved communication skills |
| **Physicians as Managers IV: Mechanics of Utilization Management for Physicians**  
Sharon Lewis, MD, Georgia Department of Corrections  
A well-designed utilization management program in the correctional environment is integral to managing expense. Correctional UM programs are more complicated than those in the community. They must comply with constitutional health care standards, and they encompass a broader scope of responsibility, not only making authorization decisions but also addressing security, transportation, bed space management and coordination of appointments. Monitoring and analysis of key indicators facilitate strategic planning of the overall health care delivery system and can identify opportunities for improvement.  
**Educational Objectives**  
- Review the components of a UM process in the correctional environment  
- Explain different options for development of a UM process  
- Discuss various supporting documents and measurements to complement the UM process |
| **Aspects of Managed Care Analysis: Restructuring, Partnerships and Sharing Government Services**  
Ronald Wiborg, MA, MBA, CCHP, Creative Government Solutions  
Correctional health care managers sometimes use the excuse that “this is how we have always done it” to resist change. That doesn’t work given today’s economic realities and the increased emphasis on reentry and prevention of recidivism. This presentation will address how to analyze a correctional health services operation to determine whether restructuring could help, including use of managed health care or other partnerships. Restructuring does not have to be complicated or massive to make improvements.  
**Educational Objectives**  
- Weigh issues surrounding how to restructure operations  
- Investigate useful partnerships, both new and existing  
- Discuss what information to share with partners |
| **Basics of Administration of a Quality Mental Health Program**  
James DeGroot, PhD, Georgia Department of Corrections  
Over the past 20 years, the role of correctional mental health administrators has evolved from administering relatively small and inexpensive programs to administering relatively large, very visible, highly litigious and very costly programs. This interactive presentation discusses the building blocks needed to develop and maintain quality correctional mental health delivery systems.  
**Educational Objectives**  
- Cite six fundamental building blocks required to administrate a quality correctional mental health program  
- Evaluate the thoroughness of mental health policies and procedures  
- Identify deficiencies in oversight strategies in one’s own mental health program |
| **Operating Expenses for Mental Health Services**  
William Kissel, MS, CCHP, NaphCare, Inc.  
This program will focus on the specific cost centers associated with a correctional behavioral health program as well as management strategies that will maintain clinical integrity and ensure focused financial oversight. Specific areas of discussion include staffing, formulary management, associated medical costs and proactive systems of management aimed at the reduction of crisis.  
**Educational Objectives**  
- Discuss cost-effective clinical staffing  
- Describe optimal pharmacy/formulary management  
- Explore proactive systems of care to ensure quality care while reducing financial risk |
Health Care in the Correctional Culture V: Staying Out of Trouble

Todd Wilcox, MD, MBA, CCHP-A, Salt Lake County Metro Jail

This talk is an introduction to medical, operational and legal problems that frequently arise in correctional health care settings and tend to be problematic from the standpoint of quality, efficiency, accreditation and litigation. The talk presents the checklist items to be aware of as well as potential solutions for implementing changes to address the problems.

Educational Objectives
- Review basic operational issues that frequently impact correctional health care delivery systems
- Identify potential areas of risk for providers and health care systems commonly seen in plaintiff cases
- Describe tricks, mechanisms and policy changes to address these problem areas

Physicians as Managers V: Quality Improvement/Outcome Measurement

Nicholas Scharff, MD, MPH, Pennsylvania Department of Corrections

This session will focus on survey design for quality improvement studies. After identifying the study purpose and the information that will serve that purpose, participants will identify indicators of those informational objectives. For each indicator, they will compose questions that yield precise and unambiguous results that can be quantified, summarized and presented in objective form to those the survey is intended to influence.

Educational Objectives:
- Identify the goal of a quality improvement study
- Identify indicators relevant to the study question
- Write questions that will yield relevant, quantifiable information

Costs in Specialized Units: Suicide Prevention and Segregation

James DeGroot, PhD, Georgia Department of Corrections

Over the past 15 years, the number of lockdown units has increased in an attempt to maintain public safety. Rather than reducing violence against one’s self and others, they have exacerbated violence and created legal, ethical, moral, fiscal and clinical problems. Effective and ineffective responses to violence will be discussed, focusing on specific evidence-based interventions to reduce self-destructive behavior.

Educational Objectives:
- Discuss the legal, ethical/moral, fiscal, and clinical implications of segregation units, focusing on direct and indirect costs
- Compare responses to increased violence that don’t work in maintaining public safety and reducing cost with responses that do work
- Examine evidence-based interventions that reduce both suicidal and self-injurious behavior and/or cost

Outsourcing of Mental Health Services

William Kissel, MS, CCHP, NaphCare Inc

This session will present an overview of the benefits, negatives and operational steps associated with outsourcing behavioral health services in a correctional setting. Specific topics will include the need to ensure experience and understanding of behavioral health in corrections, basic staffing requirements, formulary management, programming requirements, integrated care, records management, continuous quality improvement and contract development and monitoring.

Educational Objectives:
- Discuss the pros and cons of outsourcing
- Summarize the requirements of outsourcing
- List the components of a basic quality behavioral health program

Health Care in the Correctional Culture VI: Being Sued

Deana Johnson, JD, MHM Correctional Services, Inc.

There are important differences between state law malpractice and federal Section 1983 claims. This lecture explores those distinctions, reviewing the most prevalent types of federal claims brought against correctional health care providers and comparing them to state law malpractice claims. Real-life scenarios will help participants understand the nuances of each, including presuit requirements, the burden of proof, the finder of fact and reporting requirements.

Educational Objectives:
- Compare the stringent state law presuit requirements to the lack of federal presuit requirements
- Describe the heavy burden of proof that an inmate must meet to prevail against a medical provider
- Cite the advantages and disadvantages of having a jury of your peers decide your case

Physicians as Managers VI: Developing Rational and Defensible Staffing Plans

Todd Wilcox, MD, MBA, CCHP-A, Salt Lake County Metro Jail

This talk outlines the administrative approach to creating and implementing a staffing plan for a facility. It will cover how to perform needs assessment, match staffing to models and calculate staffing levels. This session will provide attendees with momentum to propel them forward in creating or revising a staffing plan that meets their institution’s needs, with a clear direction on how to achieve the necessary resources to accomplish it.

Educational Objectives:
- Create a model of assessment of facility staffing needs
- Develop an objective staffing model
- Discuss how to implement the staffing plan
Management Issues That Affect Cost: Productivity, Staffing and Administration. How to Best Utilize Public Resources
Ronald Wiborg, MA, MBA, CCHP, Creative Government Solutions

Future budget increases will be few and far between. How do you make improvements without an infusion of new funding? Creativity and common sense can help you manage your budget and have a positive impact on productivity. Learn how to make improvements to current methods and save money at the same time, including how to encourage your staff to share problems and solutions to address management and budget issues.

Educational Objectives
• Explore ways to make improvements to current methods and save money
• Identify strategies to get staff to help in addressing management and budget issues
• Discuss the relationship of correctional health care to the larger system of services used by criminal justice clients and their families

Legal Dilemmas With Special Implications in Correctional Health Settings
Deana Johnson, JD, MHM Correctional Services, Inc.

One of the greatest risks in practicing in correctional health care is the litigious environment. Inmates have ease of access to both the court system and licensing boards in which to lodge complaints. While the majority of these cases are ultimately unsuccessful, understanding the process and your rights as a provider are key to maintaining your peace of mind. This talk covers the process from when a claim is first reported to the insurance carrier through the completion of the licensing board or court proceeding.

Educational Objectives
• State the protections and limitations of your professional liability insurance
• Describe the differences between federal and state court systems
• List key differences between federal Section 1983 claims and state law malpractice claims

Day-to-Day Practice I: Mental Health for Nonmental Health Professionals
William Kissel, MS, CCHP, NaphCare, Inc.

This presentation will give the nonmental health provider a solid understanding of correctional mental health care, including its history, legal issues and core cases, the most common diagnoses, basic program requirements, formulary management, components of a quality suicide prevention program and reentry.

Educational Objectives
• Review the history of correctional behavioral health
• Identify the most common diagnoses treated in correctional behavioral health care
• Summarize elements of a core corrections-based suicide prevention program

Physicians as Managers VII: Personnel Issues
Becky Pinney, MSN, CCHP-RN, Corizon

The correctional physician leader plays a vital role in effective personnel management. This talk will share valuable information regarding the physician’s role in personnel matters at their facility, including fundamentals related to recruitment, hiring, on-boarding, directing and supervising other providers, as well as the financial and legal implications of personnel management. Related topics include effective interaction with other medical personnel and how to positively interact with the responsible health authority in personnel matters.

Educational Objectives
• Express the importance of physician participation in all aspects of personnel issues for those employees under their control
• Examine the various aspects of personnel management
• Describe the impact of effective management on patient safety and care as well as staff morale

Day to Day Practice II: Pharmacy and Formulary Challenges in Jails and Prisons
Rick Morse, MBA, CCHP, Morse Correctional Healthcare and Consulting

This workshop will focus on how to identify and correct deficiencies in pharmacy management and medication administration as well as how to implement technology to improve patient safety, utilization management and reporting. Relevant association will be made to problems common in correctional environments. Key issues to be addressed include formulary changes, implementing controls, managing providers, staffing considerations, monitoring key operational and financial benchmarks, true costs of overutilization, KOP programs, mental health diversion programs, selecting technology and avoiding RFP pitfalls.

Educational Objectives
• List the key pharmacy benchmarks
• Identify the hidden costs of overutilization
• Discuss the common problems associated with pharmacy management

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Physicians as Managers VIII: Professional Burnout
Ivor Garlick, MD, CCHP, Corizon

There is a growing body of literature attesting to the increasing amount of stress and burnout in health care and its negative impact on physicians’ lives and performance. The top external factors, work-related factors and personal life-related contributing factors will be presented. The top three work and personal life impacts will be discussed. Finally, strategies to mitigate these stressors will be delineated.

Educational Objectives
• Explain what is meant by burnout syndrome
• State the impact that burnout has on patient safety and the quality of care
• Describe techniques to minimize the effects of burnout on patient care and help manage risk

Important Techniques in Communicating With Counsel
Deana Johnson, JD, MHM Correctional Services, Inc.

For health care providers particularly, being accused of wrongdoing by a patient and served with a lawsuit can be an uncertain time. This presentation provides an overview of what to expect at each stage of the litigation and tips on how you can best help your lawyer defend you.

Educational Objectives
• Demonstrate an understanding of each stage of the litigation process
• Describe how to best assist your lawyer in defending your claim
• Review what to expect in deposition and how to disarm the cross examiner

11:15 AM - 12:30 PM

The Affordable Care Act and Corrections: How This Will Affect Your Practice - Part 2
Jeffrey Traczewski, MBA, CCHP, Correct Care Solutions

Key provisions of the Patient Protection and Affordable Care Act will take effect in 2014. This wide-ranging law has a number of elements that will have an impact on correctional health care, primarily in jails but also with some opportunities for prisons. Learn about the ways that the ACA will affect delivery and cost of correctional health services and what facilities should be doing to prepare for the changes ahead.

Educational Objectives
• Review provisions of the Affordable Care Act that affect correctional populations and their health care
• Summarize steps a facility can take now to prepare for the initial changes caused by the ACA
• Discuss the related changes and opportunities in the Medicaid program

1:00 PM - 2:00 PM

Day-to-Day Practice III: Effective Use of Technology
Todd Wilcox, MD, MBA, CCHP-A, Salt Lake County Metro Jail

Correctional health care systems are generally years behind in the use of health care technology in the clinical setting compared to private sector systems. This talk focuses on the different types of technology that can be incorporated into correctional health care systems, including electronic medical records, point-of-care laboratory testing, documentation systems and diagnostic testing. The focus will be on what really works, how to justify the investment and how to implement it successfully.

Educational Objectives
• Describe the different types of medical technology that can be incorporated into correctional health care settings
• Summarize implementation issues, including return-on-investment analysis for this type of system change
• Discuss how to implement technology projects successfully in clinical settings

Strategic and Practical Implications of Contracting Health Services
Rick Morse, MBA, CCHP, Morse Correctional Healthcare and Consulting

This workshop will explore the pros and cons of outsourcing health services. Particular attention will be focused on the basic objectives the correctional agency is trying to achieve and why some contracts succeed while others struggle. The various types of health services contracts will be examined as well the dynamics that often inhibit their success.

Educational Objectives
• Review the various types of health services contracts
• Summarize the components of a well-designed health services contract
• Explore how to develop synergy and collaboration in a health services contract

2:15 PM - 3:15 PM

Day-to-Day Practice IV: Diagnostic Errors and Biases
Ivor Garlick, MD, CCHP, Corizon

This talk will present examples of cases of diagnostic failure, discuss the reasons for and the consequences of these errors, and explain when errors occur as well as the emotional and cognitive biases that influence a provider’s decisions. Strategies to help the provider to reduce the incidence and avoid diagnostic errors will be described.

Educational Objectives
• Discuss the scope of diagnostic error as a leading cause of morbidity, mortality and malpractice
• Identify the cognitive and affective factors and biases that contribute to diagnostic error
• Examine strategies, including metacognition, to help minimize diagnostic error
Certification for Correctional Health Professionals: Why It Should Matter to You
Matissa Sammons, CCHP, National Commission on Correctional Health Care
Steven Shelton, MD, CCHP-A, Oregon Department of Corrections
The rewards of a career in correctional health care are many: experience with a wide variety of patients, playing an important role in public health and working with other dedicated professionals, to name just a few. But correctional settings also present unique challenges: strict security regulations, crowded facilities, the myriad legal and public health considerations of providing care to incarcerated populations and more. Achieving professional certification is the surest way to prove that you have the tools to meet these challenges.

Educational Objectives
• State the eligibility criteria for CCHP and CCHP-Advanced certification
• Produce an application for certification that meets the program requirements
• Describe the purpose and content outline of the CCHP and CCHP-A exams

The Prison Rape Elimination Act: What You Need to Know as a Health Care Leader
Linda McFarlane, LCSW, MSW, Just Detention International
Robert Dumond, LCMHC, MA, Consultants for Improved Human Services
The National Standards to Prevent, Detect, and Respond to Prison Rape are binding on all corrections facilities by August 2013. This workshop will explain the standards and how they affect medical and mental health care policy and practice. It will cover the role of health care leadership in the coordinated response, a foundational best practice included in the standards. It also will address the impact of sexual trauma and how the experience of being incarcerated presents challenges for survivors of such abuse and those charged with treating them.

Educational Objectives
• Review the scope and intent of the PREA standards and how they relate to medical and mental health care in corrections
• Discuss the role of health care leadership in both compliance with the PREA standards and best practices around prevention of and response to sexual abuse in detention
• Examine the impact of trauma on incarcerated populations

This session will be videotaped.

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Mark Your Calendar!
NATIONAL CONFERENCE ON CORRECTIONAL HEALTH CARE
October 26-30, 2013 • Nashville

SPRING CONFERENCE ON CORRECTIONAL HEALTH CARE
April 5-8, 2014 • Atlanta

CORRECTIONAL HEALTH CARE LEADERSHIP INSTITUTES
July 18-19, 2014 • Denver (Broomfield, CO)

CORRECTIONAL MENTAL HEALTH CARE CONFERENCE
July 20-21, 2014 • Denver (Broomfield, CO)

NATIONAL CONFERENCE ON CORRECTIONAL HEALTH CARE
October 18-22, 2014 • Las Vegas

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