

## Correctional Health Care Perspectives: What We Know Now

March 12-13, 2010 - Pre-conference March 11



- Perspectives from leading medical and nursing experts and health care colleagues
- Sharing what they know about successful programs, innovative treatment practices, illustrative case studies, and relevant research findings
- Covering a wide range of topics – nursing, medical, mental health, women’s health, infectious disease, chronic disease, aging and dying
- Of interest to physicians, nurses, medical directors, and allied health professionals who provide care and treatment for correctional patients.

Providing health care for incarcerated patients adds a whole range of specialized and ever-changing problems to those encountered in treating traditional patient populations.

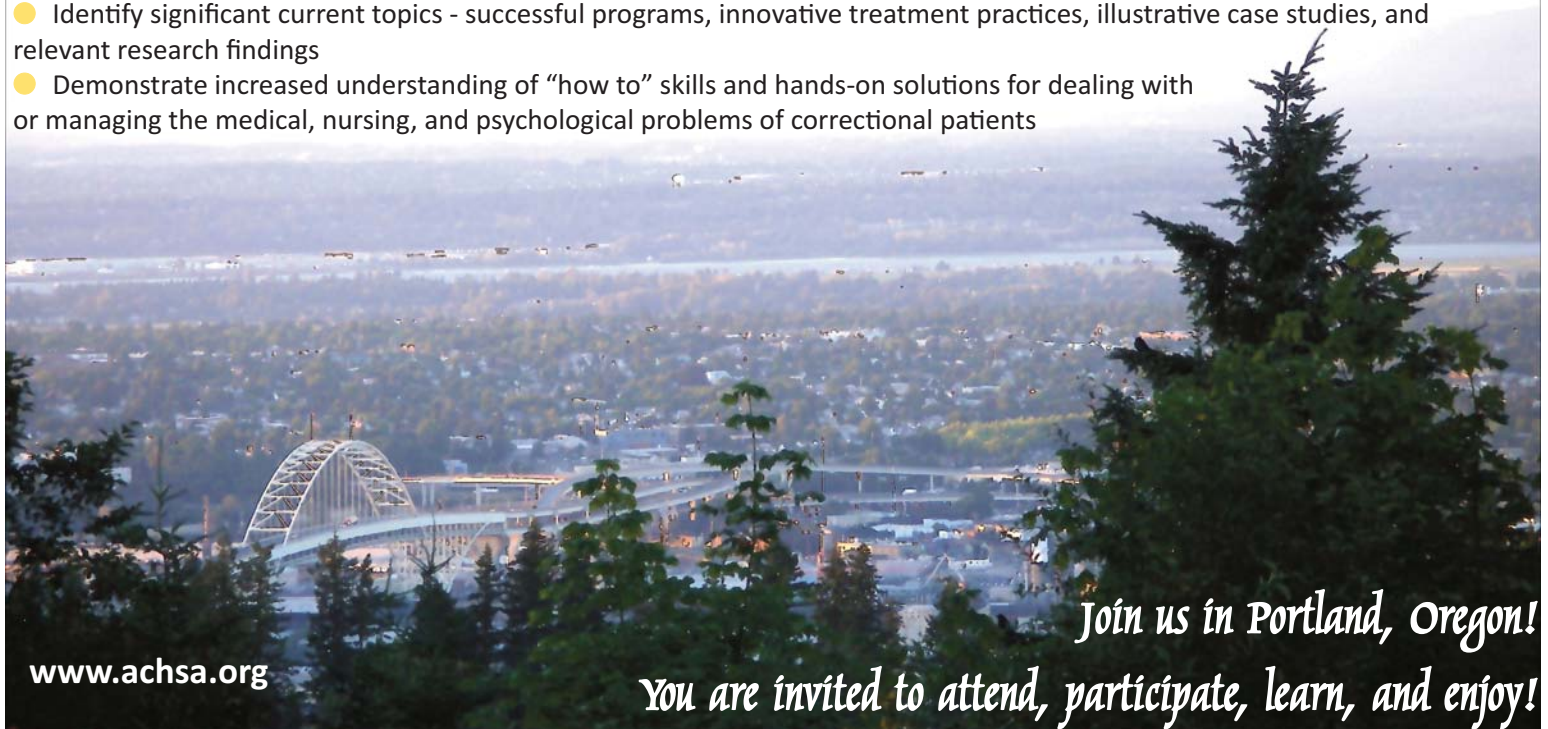
That’s why ACHSA exists: To provide the “how to” skills and hands-on solutions developed by the nation’s foremost practitioners for dealing with or managing correctional patients.

ACHSA conference participants are corrections and community-based providers who are interested in learning from the experience of leading medical and nursing experts and enjoy networking opportunities with health care colleagues nationwide.

The goal of the conference is simple: To help attendees succeed in a very challenging field.

### At the conclusion of the conference participants should be able to:

- Demonstrate increased knowledge of major medical and nursing issues of patients in our nation’s jails, detention facilities, and prisons including mental health, women’s health, infectious disease, chronic disease, aging and dying
- Identify significant current topics - successful programs, innovative treatment practices, illustrative case studies, and relevant research findings
- Demonstrate increased understanding of “how to” skills and hands-on solutions for dealing with or managing the medical, nursing, and psychological problems of correctional patients



*Join us in Portland, Oregon!*

*You are invited to attend, participate, learn, and enjoy!*

## Pre-conference THURSDAY March 11

8:00-11:30

### 2010 ACHSA Nursing Forum

Our Nursing Forum will focus on issues, problems, and concerns of providing inmate healthcare in our jails and prisons across the country - management headaches, staffing crises, and clinical practice problems - an interactive exchange for nursing staff to discuss and explore ideas, problems, and solutions to support nursing in all correctional settings.

1:00-5:00

### "So you want to work behind the walls?"

The provision of quality healthcare within the walls of correctional facilities has dramatically changed since Estelle v. Gamble in 1976 when the U.S. Supreme Court ruled that inmates have a right to reasonable, adequate health services

for serious medical needs. As healthcare professionals, our success in providing cost-effective, safe and constitutionally mandated care in this unique environment is dependent upon a comprehensive understanding of its idiosyncrasies. This workshop is designed to introduce basic principles to assist the novice correctional healthcare worker (HCW) in making a transition from "free world" health care to "care within the walls." It will also provide managers and administrators with valuable tools to train staff as they care for inmates. This workshop is a preview of ACHSA's upcoming training manual for correctional HCWs.

**CCHP Exam 2:00-4:00** (check in 1:30)

Application/registration deadlines:

February 4/ February 18

For information:

MatissaSammons@ncchc.org or 773-880-1460

## Preliminary Program

## Conference FRIDAY March 12

**7:30-8:30**

### Pre-meeting treats in exhibit area

8:30-9:00

Opening remarks; DSA presentation

9:00-10:00

### Keynote Presentation

**What we have learned from our past to help us plan for today and tomorrow**

Robert D. Jones, MD

**10:00-10:30**

### Mid-morning refreshment break in exhibit area

10:30-11:30

Concurrent breakout sessions (3)

### Prison Terminal: Life and Death in a Prison Hospice

Edgar A. Barens

### Prisoner Access to Condoms: Challenges, Successes and Best Practices informed by the California Prison Pilot Program

Kimberley D. Lucas, MPH; Jamie L. Miller, MPH; Vimal J. Singh

### Building Infrastructure to Manage Corrections Specific Risks for Exposure to Blood Borne Diseases

Jackie Zalumas, PhD, RN, FNP-BC

**11:45-12:45**

### Lunch

12:00-1:00

### Luncheon Plenary

Steve Shelton, MD

1:15-2:15

Concurrent breakout sessions (3)

### Aging Inmates: Implications for the Health Care System

Linda J. Redford, RN, PhD

### Re-Assessment and Follow-up: Key Factors in Providing Comprehensive Nursing Care

Susan Laffan, RN, CCHP-A

### In Search of Solutions: Does Behavior Management Work?

John S. Wilson, PhD; Sharen E. Barboza, PhD

2:30-3:30

Concurrent breakout sessions (3)

### Predicting and Avoiding Patient on Staff Violence in the Clinical Setting

Paul J. Morris, RN

### Aging and Dying in Corrections: Methods, Models and Tools for Building and Sustaining a Quality EOL Care Program - Part 1

Carol A McAdoo; Linda J. Redford, RN, PhD

### Care of the diabetic foot

Holly Mathis, MSN, RN, ANP-BC; Melanie Wahl, RN, CCHP

**3:30-4:00**

### Afternoon treats

4:00-5:00

Concurrent breakout sessions (3)

### Establishing a Sustainable Quality Measurement System for California Prisons

Steven M. Asch, MD, MPH

### Aging and Dying in Corrections: Methods, Models and Tools for Building and Sustaining a Quality EOL Care Program - Part 2

### Nursing Skills for Managing the Mentally Ill in Corrections

Inez Tann, RN, BS, CCHPs

**5:00-6:00**

### Reception in exhibit area

*Plan to have some fun in Portland!*

ACHSA Oregon Chapter members are planning some after-hours activities (dining? sightseeing? shopping? ??) for Thursday and/or Friday evenings.

# Continuing Education Credits

**Physicians:** The Emory University School of Medicine designates this educational activity for a maximum of 13 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of Emory University School of Medicine and the American Correctional Health Services Association. The Emory University School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

**Nurses:** An application has been submitted to the Georgia Nurses Association for approval of 19.5 contact hours. Please contact ACHSA for more information. (13 conference, 6.5 pre-conference)

**Social Workers:** An application has been submitted to the National Association of Social Workers, Georgia Chapter (NASW-GA) for approval of 13 clock hours for social work licensing purposes. Please contact ACHSA for more information.



## Preliminary Program

## Conference SATURDAY March 13

**7:30-8:30**

**Buffet breakfast**

8:00-9:00 Plenary

**H1N1 Outbreak: Our Experience and Lessons Learned**

Earl Goldstein, MD; Nancy Booth, RN, MSN, CCM

9:15-10:15 Concurrent breakout sessions (3)

**Delusions, Hallucinations or Little Green Men-- Detection of Malingered Psychosis**

Rosanne E. Harmon, BSN, MSN, PMHNP; Rachel Bomberger, BSN, MSN, PMHNP

**Anticoagulation Management in Corrections**

Sr. Mary Jane Bookstaver, OP, BSN, MBA; Melanie Wahl, RN, CCHP

**Correctional Health Care Standards, The Next Chapter: Patient Safety**

Marc F. Stern, MD, MPH

10:30-11:30 Concurrent breakout sessions (3)

**Implementation of formulary, and related costs and savings**

Liz Rantz, MD

**Screening for Hepatitis C as a Strategy to Enhance HIV Prevention and Health Promotion Efforts in a County Jail (SHAPE)**

Eduardo E. Nettle; Vicky Sherwin; Stephen Descoteaux, MD; Valerie Al-Hatchem, RN, MSN, MPH

**The relationship of mental health symptoms and trauma experiences in first-time female inmates**

Michelle R. Guyton, PhD; Christopher Brown, MS; Jessica Hinman, MS; Elizabeth Stotler-Turner, MS

**11:45-12:45**

**Buffet lunch**

12:15-1:15 Plenary

**Epidemiological Criminology**

Roberto Hugh Potter, PhD

1:15-1:45 ACHSA annual meeting

1:45-3:15 Concurrent breakout sessions (3)

**Involuntary Psychotropic Administration: The Harper Solution**

Marc F. Stern, MD, MPH; Bruce C. Gage, MD

**Sudden Death in Custody Related to Acute Psychotic Delirium**

Holly Mathis, MSN, RN, ANP-BC; Melanie Wahl, RN, CCHP

**Obstetrical Emergencies: Two Lives at Risk**

Susan Laffan, RN, CCHP-A

**3:30-5:00**

**Closing plenary / afternoon treat**

**Centers for Disease Control and Prevention: Public Health and Corrections Update**

Laurie C. Reid, RN, BSN, MS; Robin MacGowan, MPH; Samantha P. Williams, PhD

For updated information:  
[www.achsa.org](http://www.achsa.org)

Contact ACHSA:  
877-918-1842 or 770-650-5771  
or [achsa@bellsouth.net](mailto:achsa@bellsouth.net)

# Course Descriptions

## Keynote Presentation

### What we have learned from our past to help us plan for today and tomorrow

*Robert D. Jones, MD, Medical Director, Arizona Department of Juvenile Corrections*

Drawing from over 30 years of Correctional, Public Health, and Military experience in a variety of clinical and administrative positions, Dr. Jones will outline the history of how health care has changed within correctional facilities and why we ethically, morally, and legally need to do what we do and how that should determine our course of action in the future.

### Prison Terminal: Life and Death in a Prison Hospice

*Director/Producer, Independent Documentary Filmmaker; Visiting Media Specialist, University of Illinois Chicago (UIC) Jane Addams College of Social Work*

Prison Terminal is a moving verité film that breaks through the walls of one of America's oldest prisons to document the final months in the life of a terminally ill prisoner and the prisoner hospice volunteers who care for him. The film draws from footage shot over a 6-month period behind the walls of the Iowa State Penitentiary. It enters the personal lives of the prisoners as they build a hospice program from the ground up. It tells the personal stories of the people who make the hospice function, from the prisoner hospice volunteers, community hospice trainers, and correctional and medical staff, to the dying prisoner and his family. The completed documentary will demonstrate the holistic benefits of a prison-based hospice and provide a fascinating and often poignant account of how the hospice experience can profoundly touch even the forsaken lives of the incarcerated.

### Prisoner Access to Condoms: Challenges, Successes and Best Practices informed by the California Prison Pilot Program

*Kimberley D. Lucas, MPH, Research Scientist, California Department of Public Health, Office of AIDS, Epidemiologic Studies Section; Jamie L. Miller, MPH, Unit Manager, California Department of Public Health, STD Control Branch, Corrections, STD Specialty Clinics, & Substance Abuse Unit; Vimal J. Singh, Associate Warden, California Department of Corrections and Rehabilitation, Solano State Prison*

The California prison system condom pilot program is unique in being directed by the Governor's October 2007 veto of legislation that would have required the Department to allow health agencies and non-profits to distribute condoms to inmates. This presentation will summarize: 1) the public health rationale and international recommendations for HIV/STD prevention in correctional settings; 2) progress in implementing the guidelines internationally; 3) program evaluation findings. Key challenges, successes and lessons learned drawing on experiences with the one-year pilot in California will be discussed from both the public health and custody perspectives.

### Building Infrastructure to Manage Corrections Specific Risks for Exposure to Blood Borne Diseases

*Jackie Zalumas, PhD, RN, FNP-BC, Professor, Georgia Baptist College of Nursing of Mercer University*

Rates of infectious diseases, especially HIV and hepatitis C, are higher among the incarcerated than in the general population. The

high-risk population may pose a health risk to health care and custody personnel and to case management, parole, and police personnel in the community. The high rates of HIV and hepatitis C, mental illness, IV drug use, and unsafe sex practices make potential for exposure to blood and body fluids a very real occupational threat. The presentation will review the corrections specific risk factors that determine a need for this study, present results of phase one and phase two implementation and results, and discuss implications of the study for capacity building and best practices in corrections settings for occupational safety with regard to exposure to blood and body fluids.

### Luncheon Plenary

*Steve Shelton, MD, Medical Director, Oregon Department of Corrections*

### Aging Inmates: Implications for the Health Care System

*Linda J. Redford, RN, PhD, Director-Central Plains Geriatric Education Center, University of Kansas Medical Center*

This presentation will highlight the changing demographics of American prisons and the need for geriatric training for correctional health care providers. Inmates are often physiologically older than their chronological years and manifest the effects of chronic conditions at a much earlier age. Lifestyles, substance abuse, and the likelihood of lifelong lack of optimal health care puts them at high risk of debilitating conditions and co-morbidities. Add to this the actual chronological aging of many inmates and accumulating burdens of disease and disability in the inmate population and we have a critical need for health care providers who understand the effects of aging on the body, can effectively address chronic conditions within the prison context and can optimize positive clinical outcomes while controlling costs.

### Re-Assessment and Follow-up: Key Factors in Providing Comprehensive Nursing Care

*Susan Laffan, RN, CCHP-A, Co-owner of Specialized Medical Consultants*

Nursing health care providers must understand the importance of recognition of potential harmful or life threatening events. This is accomplished by the initial assessment of the patient, and more importantly, the re-assessment and follow-up of that patient's care. One of the most disturbing factors seen in malpractice cases is not that the initial assessment and treatment were incorrect, but that there was no re-assessment and/or follow-up and then the patient experienced a bad outcome.

### In Search of Solutions: Does Behavior Management Work?

*John S. Wilson, PhD, Senior Clinical Operations Specialist, MHM Services, Inc.; Sharen E. Barboza, PhD, Director of Clinical Operations, MHM Services, Inc.*

Behavioral management interventions that address inmates' recurrent self-injurious behavior have been observed to be successful anecdotally, but empirical support for these interventions is scant. This presentation illustrates the application of behavioral interventions with one of the most challenging inmates staff are likely to encounter; quantifies the success of these interventions by tracking frequency of self-injury, frequency of crisis interventions, and medical costs over an 18 month period; and reviews ethical considerations and prerequisites for effective

# Course Descriptions

behavior management interventions.

## **Predicting and Avoiding Patient on Staff Violence in the Clinical Setting**

*Paul J. Morris, RN, Health Services Administrator, Muscogee County Jail, Columbus, GA*

A brief history of the study of violence prediction and current statistical trends relating to patient on medical staff violence; an introduction to assessment tools to predict violent behavior, signs of escalating potential for impending violence, de-escalation techniques and the situations where they can be appropriately applied.

## **Aging and Dying in Corrections: Methods, Models and Tools for Building and Sustaining a Quality EOL Care Program**

*Carol A McAdoo, National Hospice and Palliative Care Organization; Linda J. Redford, RN, PhD, Director-Central Plains Geriatric Education Center, University of Kansas Medical Center*

The workshop is designed for prison health professionals and staff who are interested in improving the quality of care for aging or dying inmates as well as for those who are thinking about designing a program to improve the care of this very vulnerable population. Participants will leave this presentation with current data, models, guidelines, resources and ideas to make excellence easy!

## **Care of the diabetic foot**

*Holly Mathis, MSN, RN, ANP-BC, Correctional Medical Services Complex Case Manager; Melanie Wahl, RN, CCHP, Correctional Medical Services, Director of Medical Resource Services*

Peripheral neuropathy is a significant risk factor for and a common cause of ulcerations, amputations and gangrene. Preventing and detecting foot problems is easy to do, and requires a minimum of equipment to perform correctly. This presentation demonstrates American Diabetes Association recommended diabetic foot examination techniques and reviews patient education. Come prepared to take off your shoes!

## **Establishing a Sustainable Quality Measurement System for California Prisons**

*Steven M. Asch, MD, MPH, RAND, Santa Monica, CA*

Description of work RAND has conducted over the past year for the CDCR to develop a quality of care measurement system. During this presentation, RAND's work and the resultant measures set will be described. Although CDCR is unique in its size and complexities, many of the issues facing the California receiver in his efforts to improve health care quality are also faced by other prison health care systems, and are likely to be of national interest. The indicators and processes RAND identified through this work may be used by other prison systems to devise performance measurement systems to improve care in the prison setting.

## **Nursing Skills for Managing the Mentally Ill in Corrections**

*Inez Tann, RN, BS, CCHP, Program Manager, MHM, Georgia Department of Corrections*

Nurses who work in correctional settings whether jails, prisons, juvenile settings or community corrections encounter patients with mental health issues. As nurses we are required to treat the whole person from head to toe. This discussion will help the nurse, whether trained in psychiatry or not, to be able to perform an

adequate mental health assessment of inmates presenting with mental health issues or symptoms.

## **H1N1 Outbreak: Our Experience and Lessons Learned**

*Earl Goldstein, MD, San Diego County Sheriff, Medical Director; Nancy Booth, RN, MSN, CCM, San Diego County Sheriff, Infection Control Nursing Supervisor*

A summary of a novel H1N1 outbreak in a jail setting and its implications to operations and collaboration with internal and external agencies. Through this experience, there were many lessons learned which has enabled the Division to revise practices and develop a model for future pandemics.

## **Delusions, Hallucinations or Little Green Men— Detection of Malingered Psychosis**

*Rosanne E. Harmon, BSN, MSN, PMHNP, Psychiatric Mental Health Nurse Practitioner for the Oregon Department of Corrections; Rachel Bomberger, BSN, MSN, PMHNP, Psychiatric Mental Health Nurse Practitioner for the Oregon Department of Corrections*

In correctional settings, the appropriate provision of mental health services to inmates and the accurate identification of Inmates' mental health needs are a primary concern to a system with limited resources. Malingers tie up medical personnel, mental health professionals and psychiatric units, while valuable resources and money is lost. Detecting malingered mental illness is considered an advanced psychiatric skill, partly because you must understand thoroughly how genuine psychotic symptoms present. The goal of this presentation is to facilitate how to detect malingered mental illness from psychosis by reviewing the characteristics of psychosis, how to assess malingering and the reasons why patients malingere.

## **Anticoagulation Management in Corrections**

*Sr. Mary Jane Bookstaver, OP, BSN, MBA, Physician Liaison Manager, Correctional Medical Services; Melanie Wahl, RN, CCHP, Senior Director, Patient Care Services, Correctional Medical Services*

This panel discussion presentation will address an approach to development and implementation of an intensive anticoagulation management program. The program consists of use of evidence-based guidelines for anticoagulation management coupled with a team approach to improve patient health. Participants will learn strategies for management of complex patients and methods for tracking improvements.

## **Correctional Health Care Standards, The Next Chapter: Patient Safety**

*Marc F. Stern, MD, MPH, Associate Affiliate Professor, Dept of Health Services, University of Washington School of Public Health*

Correctional standards nationally and internationally have focused on providing a minimal level of quality of health care, largely driven by a need to protect basic human rights and/or to avoid cruel and unusual punishment. Over the past 10 years the rest of the health care community has intensified its focus on increasing patient safety. Under funding from the Langeloth Foundation, a panel of national correctional health care experts were assembled this past Fall at the John Jay College of Criminal Justice to examine how such emerging community standards might be adapted to the correctional setting. Through a consensus process, they proposed a set of 60 patient safety standards for corrections. Part of the funding for this project envisioned dissemination of the expert

# Course Descriptions

panel's conclusions, vigorous debate in the correctional health care community, and adoption of some or all of the standards by administrators and accreditors.

## **Implementation of formulary, and related costs and savings**

*Liz Rantz, MD, Medical Director, Montana Dept Corrections*

Discussion of how the Montana Department of Corrections implemented a strict formulary, and additional staff time, and resultant savings of about 15% of drug costs.

## **Screening for Hepatitis C as a Strategy to Enhance HIV Prevention and Health Promotion Efforts in a County Jail (SHAPE)**

*Eduardo E. Nettle, Correctional Health Program Manager, Office of HIV/AIDS (OHA), Bureau of Infectious Disease (BID), Massachusetts Department of Public Health (MDPH); Vicky Sherwin, Barnstable County Sheriff's Department; Stephen Descoteaux, MD, Barnstable County Sheriff's Department; Valerie Al-Hatchem, RN, MSN, MPH, Infectious Disease Clinical Services of Cape Cod Healthcare (IDCS)*

A pilot initiative was developed in an effort to enhance access to HIV screening and provide responsive viral hepatitis services as an enhancement to an HIV prevention framework. This initiative integrates HCV screening as a component of a funded HIV counseling and testing program in a county jail. Service integration is successful, as measured by testing acceptance rates, increased testing numbers and changes in the socio-demographic profile of inmates screening for both HCV and HIV and who may not have tested for HIV otherwise.

## **The relationship of mental health symptoms and trauma experiences in first-time female inmates**

*Michelle R. Guyton, PhD, Assistant Professor, School of Professional Psychology, Pacific University; Christopher Brown, MS, School of Professional Psychology, Pacific University; Jessica Hinman, MS, School of Professional Psychology, Pacific University; Elizabeth Stotler-Turner, MS, School of Professional Psychology, Pacific University*

We will present data from the Women's Adjustment to Prison study where we comprehensively assessed the mental health histories and current symptoms of 150 first-time female inmates in a northwest state prison. During the presentation, we will focus on the prevalence and types of trauma experienced by the female inmates, current symptoms of acute mental illness and personality disorders, and how this relates to adjustment at the onset of incarceration.

## **Epidemiological Criminology**

*Roberto Hugh Potter, PhD, Professor/Director of Research, Department of Criminal Justice and Legal Studies, College of Health and Public Affairs, University of Central Florida*

This presentation presents a new development in the corrections area. Epidemiological Criminology or "epicrim" explicitly links the theory, methods and policy of public health with that of criminal justice. A considerable overlap between the two disciplines already exists and this effort makes those linkages explicit. The presentation provides examples of those commonalities.

## **Involuntary Psychotropic Administration: The Harper Solution**

*Marc F. Stern, MD, MPH, Associate Affiliate Professor, Dept of Health Services, University of Washington School of Public Health;*

*Bruce C. Gage, MD, Clinical Associate Professor, Univ of Washington School of Medicine, Chief of Psychiatry, WA Department of Corrections*

All correctional facilities have struggled at one time or another with the mentally ill patient who is refusing to take medications voluntarily, but whose mental health status is so severe as to put his or her health in jeopardy. Yet most health care providers are not familiar with the Supreme Court decision *Washington v Harper* which addresses just this issue and provides a potential solution. This presentation will provide participants with working knowledge of Harper.

## **Sudden Death in Custody Related to Acute Psychotic Delirium**

*Holly Mathis, MSN, RN, ANP-BC, Correctional Medical Services Complex Case Manager; Melanie Wahl, RN, CCHP, Correctional Medical Services, Director of Medical Resource Services*

Acute Psychotic Delirium (APD) can lead to death when compounded with positional asphyxia. Recognizing the signs, attention to apprehension techniques and a collaborative action plan to manage APD can reduce mortality. Risk factors for APD and its manifestations, measures to reduce positional asphyxia and developing a collaborative action plan are discussed.

## **Obstetrical Emergencies: Two Lives at Risk**

*Susan Laffan, RN, CCHP-A, Co-owner of Specialized Medical Consultants*

Health Care providers must understand that when they are providing care to a pregnant patient they are actually providing care to two patients at the same time. Most pregnancies in the United States evolve and result in no harm to the mother or baby, yet if a complication does arise, then both lives may be at risk. Complications can excel at an extremely fast pace once set in motion. The session will focus on the pregnant patient and complications that may arise.

## **Centers for Disease Control and Prevention: Public Health and Corrections Update**

*Laurie C. Reid, RN, BSN, MS, CAPT, US PHS, Public Health Advisor, Centers for Disease Control & Prevention; Robin MacGowan, MPH, LCDR, US PHS, Health Scientist, Centers for Disease Control & Prevention; Samantha P. Williams, PhD, Research Psychologist, Centers for Disease Control & Prevention*

Many persons in correctional settings have multiple risk factors for HIV, STD, Viral Hepatitis and Tuberculosis. Since inmates bring their complex social problems and health issues to incarceration from the community; criminal justice settings provide an excellent opportunity for conducting screening and testing, medical treatment, care and prevention services inside facilities. CDC recently hosted a Corrections and Public Health Consultation to discuss and exchange ideas, strategies and best practices for collaboration and provision of infectious disease prevention and treatment within and beyond correctional facilities. This presentation will highlight specific CDC initiatives focused on reducing infectious diseases within corrections, as well as provide a summary of the consultation. Participants will also be provided CDC resources to further assist them as they develop their individual facility programs, and information on how to access other CDC resources.

# The BEST Little Conference on Correctional Health!

## ACHSA Professional Development Conference

Red Lion Hotel on the River, Jantzen Beach, Portland, OR, March 11-13, 2010

### Conference Attendee Registration Form

#### Attendee Name/Address

Name \_\_\_\_\_

Degrees/Credentials (for badge) \_\_\_\_\_

Employer/Institution/Affiliation (for badge) \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Email \_\_\_\_\_

**Conference Tuition** - includes events beginning Friday March 12 at 7:30 am and ending Saturday March 13 at 5:00 pm; includes meals, course materials, and certificate (13 CME/CE hours for physicians, nurses, social workers)

● **ACHSA Member** \_\_\_\_\_ \$240 after February 17 \_\_\_\_\_ \$290

● **Non-member** \_\_\_\_\_ \$315 after February 17 \_\_\_\_\_ \$365

● **ACHSA Oregon Chapter Group Rate** \_\_\_\_\_ \$200 after February 17 \_\_\_\_\_ \$240

Family/Guest (*NOT* employed in corrections) of Registered Attendees - includes meals \_\_\_\_\_ \$100

Guest Name (for badge) \_\_\_\_\_

#### Pre-conference Course Tuition - Thursday March 11

● \_\_\_\_\_ \$50 Nursing Forum 8:00-11:30 am (3 CE hours for nurses)

● \_\_\_\_\_ \$50 Jail School 1:00-5:00 pm (3.5 CE hours for nurses)

\_\_\_\_\_ \$75 for *BOTH* Nursing Forum and Jail School

**... or register online at  
[www.achsa.org](http://www.achsa.org)**

**Total Payment Amount \$** \_\_\_\_\_

\_\_\_\_\_ Check enclosed (payable to ACHSA)

\_\_\_\_\_ Charge my Visa/MasterCard/American Express card

Card Number \_\_\_\_\_

Expiration Date (mm/yy) \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Cardholder Billing Address (if different from registration name/address above)

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mail form and payment to: ACHSA, 250 Gatsby Place, Alpharetta, GA 30022-6161**

Or fax form for debit/credit card payments to: 770-650-5789

For more information: 877-918-1842 or 770-650-5771 or [achsa@bellsouth.net](mailto:achsa@bellsouth.net)

Tax ID Number: 23-2029093

# Correctional Health Care Perspectives: What We Know Now

March 11-13, 2010

## Location:

### Red Lion Hotel on the River Jantzen Beach, Portland

Address:

909 N. Hayden Island Drive, Portland, OR 97217

## Hotel Information:

We have arranged a special room rate of \$109 (single or double) plus taxes for reservations made on or before February 17, 2010.

For reservations, call 1-503-283-4466 or toll-free 1-800-RED LION (733-5466). Mention the ACHSA conference to get this rate.

This rate will be honored for three days prior and three days after the conference dates based upon availability.

## Amenities:

Complimentary shuttle to and from airport.

Free parking.

Complimentary shuttle service to nearby shopping, dining, and MAX light rail.

Complimentary fully-equipped business center.

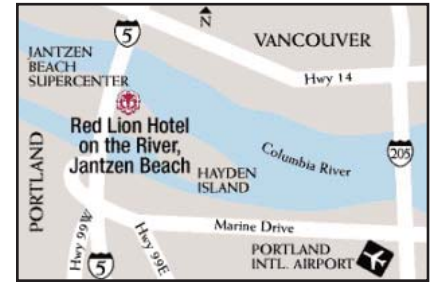
Room service, on-site restaurant and lounge.

Free high-speed internet access.

Guest room refrigerators and microwaves.

Complimentary fitness center.

100% non-smoking.



## Deadline:

Hotel reservations must be made by February 17, 2010 to get the special room rate of \$109.