Do you have all your Continuing Education credits for 2015? It's Conference Time across the country!

Oregon Chapter Conference

Shared Practice in the Corrections Community

October 2 - 3, 2015
The Mill Hotel on Coos Bay

Savannah River Conference

Program

Friday, September 18, 2015
1:00 - 2:00 PM  Registration, Cocktails and Vendor Time
3:00 - 4:00 PM  Dinner Presentation
Prison Terminal: The Last Days of Private Jack Hall
Edgar A. Barens, MFA, BFA

Saturday, September 19, 2015
7:30 - 8:00 AM  Breakfast and Vendor Time
9:00 - 10:00 AM  Telehabilitation in Correctional Facilities
Kevin Woods, BSE, PT
Jan L. Barrett, BPT, ATC

10:15 - 11:15 AM  Social Media in the Workplace
Cheva Fair, BSE, PhD
Testing for Tuberculosis in Correctional Settings
Rahel Paradiso, BSE, MS

12:15 - 1:15 PM  Lunch
Luncheon Presentation
The Evolution of Substance and Alcohol Abuse Therapy from Antabuse to Vivatrol
Heather Hendy Sklad, PharmD, BCGPS

1:30 - 2:30 PM  Recent Trends in Correctional Healthcare Litigation
Beth Bower, BSE, MBA, JD

2:45 - 4:45 PM  Neurobiology of Addiction
Manuel Montero de Oca, MD

Sunday, September 20, 2015
8:00 - 9:00 AM  Breakfast and Vendor Time
9:30 - 10:30 AM  Something About Opioid

10:45 - 11:45 AM  The Prison Rape Elimination Act of 2003

11:00 - 12:00 PM  Closing Session and Raffle Prize Presentations

South East Regional Conference

Expanding the Possibilities
Marriott Savannah Riverfront Hotel
September 18 - 20, 2015

Please join us in the Hospitality Room Thursday evening for snacks, drinks and great conversation, bring your stories.

October 2nd Friday
7:00  Registration
7:30  Breakfast
7:45  Opening Welcome
8:00  "Divinity and Inclusion: Gay Sirs, Divinity and Inclusion Admin.
10:00  Break  Vendor Time
10:30  "Assessing Health Care Coordination"
12:00  Lunch

October 3rd Saturday
7:30  Registration
8:00  DCCHS Membership Meeting
8:45  "Exam of the patient with Abdominal pain:"
9:00  10:30  Break and Check out
11:00  CQI Projects
12:00  Closing

Accommodations:
The Mill Hotel on Coos Bay
3281 Tremont Ave
North Bend, OR 97459
888-953-8888
541-756-8888
004SA Group Rate
$90.00 single or double Standard Room
(excl. Sep. 19 2015)

DCCHS Testing available Thursday 1:00 – 3:00 PM
I am delighted to have been asked to be the new editor of CORHEALTH. I have been a member of ACHSA for two years and attended the Southeast Chapter meetings and the 2014 national meeting in New Orleans. The meetings have been interesting and informative and I have enjoyed getting to meet some of my colleagues from other disciplines. I believe this is a very valuable and beneficial organization and I hope to insure that this newsletter is something our members look forward to receiving.

ACHSA is the only correctional healthcare organization with the word “service” in its name. Most of our members are direct care providers who deliver hands-on
CORHEALTH

THE NEWSLETTER OF THE AMERICAN CORRECTIONAL HEALTH SERVICES ASSOCIATION

services to our patients/inmates. We are focused on the practical aspects of providing vitally needed services on a daily basis to a very difficult and challenging population under stressful circumstances. Most of the time we are so focused on getting our jobs done that we have little time for keeping up with advances in our fields or networking with colleagues. We are often unaware of changes involving other disciplines or of innovative programs or problematic issues in other states. National and chapter conferences and this newsletter can go a long way to provide us with information we need to do our jobs more effectively.

Many if not most of us are experts at doing our specific jobs in our usual locations. Many of us have years of experience and have learned strategies for addressing challenging situations. Many of us are struggling with problems which we see as intractable, but which others may have addressed successfully in a different setting. I am a psychiatrist and the Medical Director for MHM Services in Georgia. I feel like I know a lot about mental health and the Georgia prison system, but much less about current issues in other disciplines and other state prison systems or jails.

I am hoping that this newsletter can be a forum where correctional healthcare professionals from across the U.S. can share their problems and solutions, focusing on down-to-earth creative solutions to common problems that we all face, a place where we can share our frustrations and minor victories, new information that others might not have heard yet and trends or issues on the horizon. Many of these issues are going to be especially challenging for correctional healthcare professionals, including ones such as the increasing use of extended restrictive housing, gang violence, treatment of gender dysphoria, and the increasing prevalence of hepatitis C along with the advent of new and effective but extremely expensive treatments, just to name a few.

In this issue we are including an article by my colleague, Sidney Moore, and I wrote for the MHM newsletter on an innovative method of providing mental health treatment to inmates in restrictive housing and an article by Marie Williams on animal-assisted therapy. These are examples of the kinds of articles we would like to include in future newsletters. We would also consider republishing articles of interest to our members from other publications with their permission. I would like to invite each of you to consider writing articles about anything you think might be of benefit to other members. If you have been to an interesting conference, we would like to hear about it. My personal knowledge of correctional healthcare is limited, but as a group we have a huge amount of knowledge and expertise which other members would love to hear about. Please send your submissions to me at jrowles@mhm-services.com. The next issue will be published in October. Thank you and I am looking forward to hearing from you.

TAKING THE PSYCHIATRIST TO THE CELL

J. Mark Rowles, MD, MPH

Sidney Moore, RN

Two years ago in response to a dramatic increase in gang activity and violence including several murders, the Georgia Department of Corrections implemented a formal program of extended restrictive housing placement called the “Tier Program.” Inmates identified as gang members or predators were placed in restricted housing with minimal privileges and required to demonstrate desired behaviors in order to gain increases in privileges and perhaps ultimately return to the general population. Some of these inmates were already identified as having psychiatric diagnoses, while others developed new mental health problems after placement in restricted housing.

While the increased numbers of inmates in restrictive housing resulted in decreases in inmate violence, it also required increased labor for security staff to provide constitutionally required services. Many facilities were already experiencing excessive vacancies because of difficulties in recruitment and retention of correctional officers. Officers struggled to provide meals and showers to the inmates. Providing transportation to appointments outside the housing...
units was even more difficult. While security acknowledged the importance of getting inmates transported to appointments with psychiatric providers, it was frequently impossible to provide the needed escort, resulting in inmates going for extended periods without psychiatric monitoring.

It became increasingly clear that if psychiatrists insisted on waiting until inmates could be transported to private offices that they would not be seen frequently enough to allow for adequate monitoring and timely renewal of psychiatric medications. Fortunately Georgia MHM is one of the nation’s leading providers of telepsychiatry in corrections, so we were able to modify our existing practices and technology to allow us to see the inmates in their housing units in a private space via telepsychiatry or when that was not possible to see the inmate in his cell while maintaining confidential communications with the psychiatrist.

When the inmate is seen in his housing unit or his cell, he is provided with a headset with earphones and a microphone. He is able to hear the psychiatrist via the earphones confidentially without others being able to hear and the psychiatrist is able to hear anything he says into the microphone. Most inmates report being very comfortable communicating with the psychiatrist in this way. A laptop computer connected to the headset is placed on a cart in front of the inmate allowing the psychiatrist to see the inmate and the inmate to see the psychiatrist. The cart can easily be moved and placed in front of the cell if needed.

Not only does this allow inmates in restricted housing to be seen more easily, but the technology allows the use of other modalities which enhance the interaction. Mental Health Counselors or other staff can be conferenced into the session, allowing the counselor to reinforce the therapeutic communication or provide the psychiatrist with additional information. The use of the laptop can also enable the psychiatrist or counselor to use audio and video files or pictures to provide psychoeducational materials to the inmate during the therapeutic encounter.

While this use of technology will never replace the ideal of having a patient seen by a psychiatrist in a private office, it does ensure that patients are seen at clinically meaningful intervals for evaluation and monitoring even in restricted housing. Since extended placement in restrictive housing has been demonstrated to contribute to mental health problems, it is especially important that strategies such as this be developed for close monitoring and intervention for such inmates.

A MESSAGE FROM THE PRESIDENT
Gayle Burrow, BSN, MPH, CCHP-RN

Since 1976, ACHSA has had a mission to serve as an effective forum for current issues and needs confronting correctional health issues. For all of these years, we have focused on education, skill development and support for personnel, organizations and decision makers involved in correctional health care services. Throughout the up’s and down’s of the organization, we have sponsored an annual multidisciplinary educational conference for learning and networking.

The unique focus of ACHSA has always been the state or regional chapters, so the mission could be expanded to those who could not attend a national conference but could travel within a jurisdiction or state. The numbers of chapters...
Animal Assisted Therapy at Whitworth Women’s Facility

Marie Williams

A little over a year ago, with the support of Warden Brooks L. Benton, a new animal assisted therapy program was launched at Whitworth Women’s Facility. The goal of the program was to increase inmate participation and involvement in mental health programs and sessions, overcome resistance, increase rapport and investment, and provide comfort while addressing challenging and distressing issues such as past trauma and abuse.

**Formal definition of animal-assisted therapy:**

"AAT is a goal-directed intervention in which an animal that meets specific criteria is an integral part of the treatment process. AAT is directed and/or delivered by a health/human service professional with specialized expertise, and within the scope of practice of his/her profession.

AAT is designed to promote improvement in human physical, social, emotional, and/or cognitive functioning [cognitive functioning refers to thinking and intellectual skills]. AAT is provided in a variety of settings and may be group or individual in nature. This process is documented and evaluated." (From Standards of Practice for Animal-Assisted Activities and Therapy)

**The Key Features of AAT:**

There are specified goals and objectives for each individual.

Clemson Kennel Club’s AKC dog show on January 3rd and 4th 2015 and was awarded first place in two classes and second place in two classes. Several staff members from Whitworth Women’s Facility came to the competition to cheer her on.
Progress is measured." http://www.petpartners.org/Page.aspx?pid=320

Eowyn, our therapy canine, joined the staff of Whitworth Women’s Facility in May of 2014. Eowyn is an English Cream Golden Retriever bred by Joanne Cava of Tanglewood Goldens and was specially selected for temperament characteristics most likely to lead to success as a therapy canine. Puppy temperament testing of potential therapy canines includes formal tests such as the Volhard Puppy Aptitude Test. http://www.volhard.com/pages/pat.php

After selecting the best candidate animal, the training began. Training was initially a twenty-four hour per day process that focused on socialization and exposure to all types of environments and stimuli. Eowyn attended puppy day care and play classes and was taken almost everywhere her handler went and was deliberately exposed to every type of noise and environment possible with a focus on supporting and encouraging her natural adaptability to noise and stress. Eowyn attended two puppy obedience classes and completed her AKC STAR puppy certification on June 5, 2014. The AKC STAR puppy certification encompasses both a responsible owner pledge and the development of key puppy behaviors, socialization, and basic obedience. http://www.akc.org/dog-owners/training/akc-star-puppy/test-items-pledge/ In an attempt to provide additional opportunities for socialization and interaction, Eowyn competed in a dog show in the Junior Puppy category on July 19 and 20th of 2014 and earned her National Junior Puppy and International Junior Puppy titles. Eowyn then competed in Clemson Kennel Club’s AKC dog show on January 3rd and 4th 2015 and was awarded first place in two classes and second place in two classes.

Several staff members from Whitworth Women’s Facility came to the competition to cheer her on.

Eowyn attended two additional obedience classes and a series of private sessions with an additional trainer and completed her AKC CGC certification on February 26, 2015. “The CGC Program teaches good manners to dogs and responsible dog ownership to their owners. The 10-step Canine Good Citizen test is a non-competitive test for all dogs, including purebreds and mixed breeds. The CGC award is a prerequisite for many therapy dog groups.” http://www.akc.org/dog-owners/training/canine-good-citizen/cgc-test-items-and-pledge/ The training continues beyond the AKC CGC title. In an effort to provide a stimulating and less formal activity, Eowyn recently completed a “scent class” the focus of which was to teach her to hunt and find scents using her natural ability to smell. The AKC has recently released a new CGCA title and current evaluators for this title are limited. http://www.akc.org/dog-owners/training/akc-community-canine/test-items/

There are a number of therapy dog certification organizations available. Therapy Dogs International is a widely recognized therapy dog organization that offers certification and insurance with membership to teams that successfully become certified. Another popular choice for therapy dog certification is Pet Partners. http://www.tdi-dog.org/images/TestingBrochure.pdf

Since beginning her work at Whitworth Women’s Facility, Eowyn has attended hundreds of individual sessions and has been a key therapeutic factor in the ongoing trauma groups offered at the facility. She has been called on to respond to crisis calls and has participated in sessions in ISO/SEG and has been successful in diffusing situations with agitated inmates. She even delivers tissues!

Eowyn also works in a private practice office and engages in recreational and community events and benefits throughout the week. She can be found at the soccer field and dog park and recently was a walker in a local MS Walk benefit. In the future, she will likely participate in dock diving, scent, agility, conformation, read with rover, and hospital/nursing home/hospice visits.

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Join your fellow ACHSA members for an education conference in your area this fall!

The Member Organization for Correctional Healthcare Professionals!