On March 16th, 2016, 59 stakeholders gathered at The Grand Historic Venue in Baltimore, MD to attend the 4th Annual Meeting of the National Hepatitis Corrections Network (NHCN).

The goal for the 4th annual meeting was to “to provide space to discuss issues of hepatitis testing, treatment, education, and linkage to care in correctional settings and create a list of action steps that can be taken to improve hepatitis management in corrections.”

Attendees came from 21 states, plus The District of Columbia and Australia. Of the 59 attendees, 32 were attending their first NHCN meeting. Represented were correctional administrators and medical directors, correctional healthcare providers, legal and policy experts, correctional education experts, academic researchers, departments of health (state and federal), and community-based organizations. Representatives were purposefully chosen to be cross-disciplinary and geographically diverse.

The meeting took place one day prior to the 9th Academic and Health Policy Conference on Correctional Health hosted by University of Massachusetts Medical School and the Academic Consortium on Criminal Justice Health. 24 of the 59 attendees from the NHCN meeting also attended the Academic and Health Policy Conference on Correctional Health.

The agenda included:

- A welcoming talk by NHCN directors.
- A presentation by Dr. Andrew Lloyd from the University of New South Wales in Australia entitled “An International Perspective: Barriers, Opportunities, and Successes in Hepatitis Service Provision in Australian Prisons”.
- An in-depth panel on HCV treatment initiatives in large urban jails that included representatives from Riker’s Island, Maricopa County, AZ, and San Francisco County, CA.
- An update on HCV management in state prison systems by Dr. Lara Strick from the Washington Department of Corrections.
- Two breakout roundtable discussions. One on peer-based health education programs in prisons and another on syringe access programs in corrections.
- Several in-depth networking sessions: one to identify changes that have occurred in local communities over the past year and another to identify concrete action steps.
- Purposeful discussions related to viral hepatitis research in corrections as well as another focused on HCV treatment decision support tools for providers working in corrections.
- A lot of space for open discussion and networking.

Highlights included:

- An increase to 59 participants in year three (from 55 in year 3, 39 in year 2, and 15 in year 1).
- On the meeting evaluation, 100% of meeting attendees said that they would attend again and 97% would recommend this meeting to others.
- On the meeting evaluation, 100% of meeting attendees indicated they were either “Satisfied” or “Very Satisfied” with the conference content, 97% were either “satisfied” or “very satisfied”
with the quality of presenters, 95% were either “satisfied” or “very satisfied” with the applicability of information presented, and 89% were either “satisfied or “very satisfied” with the workshop format. No respondents reported “Unsatisfied” or “Very Unsatisfied” with any metric.

- Better representation geographically than past meetings
- Stronger representation from policy stakeholders
- Great balance between didactic presentations and interactive workshops – not boring
- Strong networking opportunities
- Incredibly strong interest in the topic and attending the meeting

**Areas for improvement** include:

- Bringing more voices from incarcerated, formerly incarcerated populations as well as HCV patients.
- Bringing in legislators/politicians who have influence on policy decisions.
- Some kind of Federal Bureau of Prisons representation.
- Moving from challenges to tangible solutions and realistic action steps.
- Follow up/thru post-meeting, maintaining momentum.

**Overall**, this was an excellent and productive meeting of the National Hepatitis Corrections Network. We departed with new connections, thoughtful ideas, and potential avenues for follow through. We will continue to highlight the action steps created by our network this year, which will also drive NHCN priorities going forward.