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www.ipac-canada.org
Welcome to the first edition of the IPAC News supplement, and the first edition of the Canadian Journal of Infection Control as a standalone scientific journal. A phenomenal amount of work, over a number of years, has gone into transitioning CJC to a peer-reviewed journal that provides a recognized forum for sharing research findings and practical implications to advance our work in infection prevention and control. Chingiz Amirov, his editorial team, and the staff at IPAC Canada have put in many tireless hours to get the journal to this point, and we applaud their success.

On another note, this is my last President’s Message, and in June, it will be with mixed emotions that I hand the gavel (yes, there actually is a gavel) over to Molly Blake. I am happy to be handing the reins over to such an accomplished IPAC professional; however, I think I will be going through some degree of withdrawal from working with so many highly competent and passionate mover-shakers in this field, and being involved in the thick of IPAC Canada activities! This role has allowed me to grow professionally and has afforded me many extraordinary opportunities to bring the Canadian experiences and context to other parts of the globe, and similarly to share my new-found global appreciation of IPAC issues with the members here in Canada. Yes, it was hard work; nonetheless, I relished each and every opportunity to work with others to bring political advocacy on Infection prevention and control issues to the fore, create greater awareness and need for a coordinated IPAC vision and approach for pan-Canadian concerns, and to ensure IPAC Canada remains relevant to professionals in this field. Certainly there is a lot of work left to be done – indeed it will never end (AMR has made certain of that) – but I was energized and honoured to be a part of shaping the infection prevention and control landscape nationally.

If I could make just one suggestion, it would be that members make a point of apprising themselves of the activities that are under way by your national organization, and leveraging the work done by IPAC Canada and the members within to support your day-to-day work activities. Whether you are in a huge tertiary-care academic facility, or a community-based long term care facility, or delivering services in prehospital care settings, there is work being done organizationally to support you in your roles. Get involved, get informed. It sounds cliché, but it’s worth the effort. So yes, read those IPAC Canada broadcasts and e-news messages that invade your inbox! IPAC Canada is doing A LOT!

At risk of this sounding like one of those miserable Academy Award acceptance speeches, many, many thanks to the IPAC Canada staff, the IPAC Canada board, and the thought leaders and scientific minds in this organization who have worked long and arduous hours to create guidelines, statements and audit tools, engage in political advocacy, and generate a groundswell of interest in who we are and what we can do. Our dance card is pretty full these days! Mostly, I want to thank the infection control colleagues, the ICPs closest to me, who over the years have provided me with the utmost support and encouragement.

Best of luck to Molly Blake and the ever-evolving board as they continue to move forward in June 2017.

Hope to see many of you in Charlottetown, Prince Edward Island this June for the National Education Conference: New Paradigm Ahead! The island awaits!
Vers un **nouveau paradigme**

Soyez les bienvenus, lecteurs de ce tout premier numéro du supplément *IPAC News* (bulletin de PCI Canada) et de la première édition du *Canadian Journal of Infection Control* (CJIC) comme publication scientifique autonome. Que de travail accompli depuis quelques années pour transformer CJIC en une publication avec comité de lecture et en une tribune reconnue et vouée à la diffusion des résultats de la recherche et de leur incidence sur l’évolution de notre travail. Chingiz Amirov, le comité de rédaction et le personnel de PCI Canada ont consacré des heures infinies pour en arriver là! Nous applaudissons chaleureusement leur succès.

Dans un autre ordre d’idées, vous lisez aujourd’hui mon dernier « message du président ». En juin, je céderai le marteau de président (si, si, il y a bel et bien un marteau) à Molly Blake avec des émotions contradictoires. Je suis ravi de passer les rennes à une professionnelle accomplie de la PCI, mais je crains le syndrome de sevrage! En effet, je serai désormais privé de la compagnie de gens influents, passionnés et compétents, et d’une participation très directe aux activités de PCI Canada! La présidence m’a fait évoluer sur le plan professionnel et m’a fourni maintes occasions extraordinaires de faire connaître l’expérience du Canada dans d’autres parties du monde autant que de partager avec les membres de PCI Canada les connaissances qu’il m’a été donné de glaner autour du monde. Oui, le travail est exigeant, mais j’ai savouré chaque occasion de travailler avec d’autres à promouvoir la prévention et le contrôle des infections, à sensibiliser divers publics, à convaincre de la nécessité d’une vision et d’une démarche coordonnées à l’échelle pancanadienne et à faire en sorte que PCI Canada conserve sa pertinence pour les spécialistes du domaine. Bien entendu, il reste beaucoup à faire; en fait, il y aura toujours de quoi faire (la résistance aux antimicrobiens y veille). Je sors toutefois dynamisé et honoré de cette occasion de contribuer au modelage du paysage pancanadien de la prévention et du contrôle des infections.

Si vous me permettez une seule suggestion, j’oserai conseiller à tous les membres de s’informer des activités actuellement offertes par PCI Canada et de tirer parti du travail accompli par l’organisation et ses membres pour faciliter votre quotidien. Que vous travaillez pour un vaste centre hospitalier universitaire spécialisé dans les soins tertiaires, un centre communautaire de soins de longue durée ou un service de soins prêhospitariaux, notre association veille à vous faciliter la tâche. Informez-vous et participez! Oui, on le répète souvent, mais ça en vaut le coup. Lisez ces messages et ces alertes qui s’accumulent dans votre boîte de courriel! PCI Canada est très actif. Et même hyperactif!

Au risque d’avoir l’air de prononcer un de ces larmoyants discours des Academy Awards : je remercie mille fois le personnel et le conseil d’administration de PCI Canada, les penseurs et les scientifiques qui ont consacré des heures longues et ardues à l’association pour formuler des lignes directrices et des déclarations, concevoir des outils de vérification, infléchir les politiques et générer une vague d’intérêt inédit envers notre association et notre travail. Notre carnet de bal est plutôt rempli! Pour finir, je tiens à remercier en particulier mes collègues du contrôle des infections, ceux qui m’ont entouré au plus près et qui m’ont prodigué les plus solides encouragements au fil des ans. Je souhaite la meilleure des chances à Molly Blake et aux membres actuels et futurs du conseil d’administration, qui prendront la relève en juin 2017.

J’espère vous rencontrer en grand nombre à Charlottetown, à l’Île-du-Prince-Édouard, en juin prochain, à l’occasion de la conférence de formation pancanadienne : *New Paradigm Ahead* (Vers un nouveau paradigme)! L’île vous attend!

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Suzanne Rhodenizer Rose, IA, B.Sc.Inf., MHS, PCI
Présidente, PCI Canada

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Image: Scandinavie, Églises de Stockholm, Suède.
A Bright Publishing Future

This is an important moment for IPAC Canada. We now have a stand-alone scientific journal that marks another historic step forward. The number and quality of scientific articles demonstrates confidence in our publication and its growing national and international reputation as a leader in infection prevention and control (IPAC) education and research. The Editorial Board has also expanded and now speaks to the expertise of our reviewers in the many disciplines of IPAC. Congratulations are extended to Editor-in-Chief Chingiz Amirov, the Editorial Board, and Craig Kelman & Associates for working so diligently towards this goal.

The next objective in our quest for growth and formal recognition as a biomedical scientific periodical is getting indexed in MEDLINE/PubMed and obtaining an Impact Factor. Obtaining an impact factor (through Thomson-Reuters listing) and gradually bringing it up to a peer-periodical benchmark is a key mid-term objective for CJIC. In the interim, we are indexed/abstracted by the CINAHL/EBSCO (Cumulative Index to Nursing and Allied Health Literature).

Our Editor-in-Chief has been working closely with l’Association des infirmières en prévention des infections (AIPJ) to encourage the submission of French language articles. In addition, in 2018 we will commence a series of white paper supplements. This will be a standalone, first semi-annual and then quarterly, electronic and print periodical featuring industry-authored white papers on various innovative IPAC products and technologies. We are having a contest for an official title for this white paper supplement. See contest rules below.

Over the past several months, the Association News segment of the journal has given way to the publishing space required to showcase IPAC research. Knowing our direction towards a scientific journal, we have obliged very happily. Of course, we still need to get out information to our members and prospective members about IPAC Canada itself. Accordingly, we will publish and post an Association News supplement in the spring and fall issues of CJIC moving forward.

CREATE IT, BRAND IT, AND WIN!

IPAC Canada will soon be launching a new type of publication that needs a title. Read a brief description below, come up with a great title, and submit it! The author of the winning title will receive $100 CAD and be recognized in the first issue.

The publication to be launched in spring 2018 will:

• Be a standalone, quarterly, electronic and print periodical, featuring industry-authored white papers on various innovative IPAC products.
• Be thematically organized, i.e., each issue will cover one particular theme or a type of product.
• Provide the IPAC community with a single source of comprehensive product information delivered in a standard format.
• Have the content based on specific author guidelines, and vetted by the editor.

While we are open to all suggestions, ideally, the title should reflect the white paper, product-based, industry-authored nature of the publication. It should be concise, catchy, yet professional.

Email your suggestions by May 30, 2017 to Chingiz Amirov at editor-in-chief@ipac-canada.org
2017 SealedAir Diversey Scholarship

Through the generous support of SealedAir Diversey, 19 IPAC Canada members have been supported to attend the 2017 annual conference. The recipients include members with novice, intermediate, and advanced expertise. IPAC Canada thanks SealedAir Diversey for the opportunity for selected candidates to have the support needed to attend the conference. We commend all applicants for the quality of their work in infection prevention and control. Watch for an announcement of the 2018 scholarship guidelines. Deadline date for 2018 scholarship application: January 31, 2018.

Natalie Bruce, Ottawa, ON
Karen Cargill, Innisfail, AB
Jennifer Chard, Clarenville, NL
Brenda Chaulk-Furlong, Stephenville, NL
Alisa Cuff, Lewisporte, NL
Joanne Dow, London, ON
Shelly Faye, Yorkton, SK
Nicki Gill, Kelowna, BC
Jennifer Happe, Red Deer, AB
Rosemarie Howie, London, ON

Dione Kolodka, Calgary, AB
Bridget Maxwell, Halifax, NS
Kathy Maxwell, Toronto, ON
Mandeep Minhas, Hinton, AB
Kishori Naik, Toronto, ON
Swastika (Swas) Narayan, Abbotsford, BC
Kanwaljit (Kam) Riarh, Abbotsford, BC
Ashley Ryan, St. John’s, NL
Cara Sudoma, Toronto, ON

2017 Sage Products LLC (now part of Stryker) Scholarship Winner

Ariefa Khatoon, DPON, BScN, RN, RM, IC of Karachi, Pakistan has been chosen as the winner of the 2017 Sage Products LLC (now part of Stryker) International Attendee Scholarship. As President of the Infection Prevention Nurses Association, Ms. Khatoon has organized IPAC programs in seven major cities of Pakistan across more than 50 hospitals, has published English and Urdu educational materials, taught and trained healthcare workers in clinical rounds, surveillance, and audits.

Ms. Khatoon has received her education at Jinnah Medical & Dental College (BSCN), the Indus School of Nursing Karachi (DPON) and from Dow University (MScN(c)). She has also received a diploma in midwifery from Jinnah Post Graduate Medical Center Karachi. Her infection control experience has been at The Indus Hospital (Children Cancer Hospital) where she managed infection control, was a clinical instructor, and a researcher. She is also recognized as a pioneer of establishing pediatric oncology nursing education at The Indus Hospital. Previously she worked at Patel Hospital as an Infection Control Practitioner implementing Infection Control Policies, establishing a surveillance program, and educating employees.

Ms. Khatoon has organized and presented several seminars on infection control and has conducted many workshop throughout Pakistan. She is editor of the IPNA Newsletter (English) and Infection Free Pakistan (Urdu).

She is the author of many papers on infection prevention and control and pediatric topics.

IPAC Canada is pleased that Ms. Khatoon will be attending our 2017 conference in Charlottetown. We extend our thanks to Sage Products LLC for their support of this scholarship.
Karen Clinker Named Honourary Member

The Board of Directors of IPAC Canada is pleased to announce that Honourary Membership has been bestowed on Karen Clinker.

Before retirement, Karen was Network Infection Prevention and Control Consultant in Northwestern Ontario Infection Control Network, as part of Public Health Ontario, for over eight years. In her regional role, Karen quickly established strong connections with stakeholders while working remotely with only video or teleconference connection to her peers. She quickly became the go-to person for other IPAC issues.

A former Director of Programs & Projects, Karen has worked tirelessly to improve the benefits for our members. Under Karen’s leadership, the IPAC Canada Audit Tool Committee developed 52 audit tools along with 11 ancillary annexes. The process took several years and Karen kept her team focused and driven the entire time. The audit tools have been internationally acknowledged as an important and useful resource for infection prevention and control professionals.

Karen first raised the idea of a program-wide audit tool. The development committee started work in January 2013, finishing in June 2016. The initial audit tool morphed into a full IPAC Program Standard with accompanying audit tool and auditor workbook. Karen worked tirelessly on the project, tweaking information and researching the work of other organizations to ensure that the work was current, fresh and user-friendly. The resulting work will always be a testament to Karen’s dream.

IPAC Canada Honourary Member Shirley McDonald commented on Karen’s work with First Nations: “Karen approached me to work with her on the development of resource materials for First Natoins, specifically simple visual tools for environmental cleaning and reprocessing. Karen was horrified by the lack of knowledge and standardization in the north, and her passion for change was (and always has been) infectious! The resulting work was a great testament to her drive and grit in seeking projects through to completion, and went a long way to ensure patient safety in northern Ontario communities.” IPAC Canada Honorary Member Pat Piaskowski remarks: “Karen has been formally acknowledged by First Nations and Inuit Health (FNIH) and others as a true leader, mentor and support for improving IPAC in FN (First Nations).”

At the local level, Karen was an active member of the Northwestern Ontario chapter. At the national level, Karen was an active and innovative leader of the Programs and Projects portfolio of the IPAC Canada Board of Directors.

Shirley again speaks about Karen: “In every sense of the word, Karen is a leader. She has vision and passion, energy and drive, and these transform others to produce their best work.”

Acknowledgement of Karen’s accomplishments will be made at the Opening Ceremonies of the 2017 conference (Sunday, June 18, 2017).

Faith Stoll 2017 Champion Of Infection Prevention and Control

The 2017 3M Champion of Infection Prevention and Control has been awarded to Faith Stoll, RN, BScN, CIC for lifetime service to the profession.

Faith is an Infection Control Practitioner with the Nova Scotia Health Authority. She has a background in medical laboratory technology and nursing. Faith has taken on many roles with IPAC Nova Scotia, including Education Committee, Chapter President, and Webmaster. Passionate about all things infection prevention and control, she recently served as an IPAC Canada representative on the Pan-Canadian standardized surveillance definition project, and co-chair of the working group on Pan-Canadian case definitions for acute and long-term care facilities. She participated in two revisions of the Routine Practices E-Learning Tool and participated on the development and revision of the Core Competencies for HCWs document. Recently, Faith has also taken on the role of the Audit Tool Secretary for IPAC Canada. In her nomination essay, nominator Kim Rafuse states, “From the onset, Faith has been a committed professional in the field of infection prevention who is always willing to help and rise to the challenge.”

When not living and breathing infection prevention and control, Faith can be found motorcycling with her husband, rug hooking, or highland dancing.

Acknowledgement of Faith’s lifetime service award will be made at the Opening Ceremonies of the 2017 conference (June 18, Charlottetown). In addition, Faith will present an overview of the initiatives she has undertaken in infection prevention and control at the Breakfast of Champions on Tuesday, June 20.
The proposed revisions of Bylaw Number 1 are the culmination of careful and thorough review by the IPAC Canada Board of Directors with guidance from legal counsel. It is important to note that these revisions are the legal governance of the organization. The IPAC Canada Policy Manual provides the guiding rules of the organization.

Following is a summary of the revisions that are proposed and the rationale for change. Member input was sought via an online comment board with a deadline of March 31, 2017. The Board will finalize the proposed amendments for posting prior to the 2017 Annual General Meeting and then members will be requested for ratification at the June 21, 2017 Annual General Meeting. Following ratification of the revised Bylaw Number 2 by IPAC Canada membership, the final document will be translated to French.

<table>
<thead>
<tr>
<th>CURRENT BY-LAW</th>
<th>PROPOSED CHANGE</th>
<th>RATIONALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Definition</td>
<td>Add definition for “Business/Industry Member”: An individual employed by or representing a commercial entity involved in the sale or manufacture of products or services pertaining to infection prevention and control.</td>
<td>For clarification</td>
</tr>
<tr>
<td></td>
<td>Add definition for “Corporate Member”: Companies/corporations/agencies which support the objectives of IPAC Canada and provide additional support to IPAC Canada.</td>
<td>For clarification. Corporate Membership is further defined in Article 10(v).</td>
</tr>
<tr>
<td>2. Interpretation</td>
<td>This by-law replaces the Corporation’s By-law #1…</td>
<td>By-law 2 will replace By-law 1 of the Corporation (IPAC Canada).</td>
</tr>
<tr>
<td>10. Membership Conditions</td>
<td>Voting Categories: Active Members shall be…and may vote in all elections, with the exception noted in (ii).</td>
<td>To clarify Active Members right to vote and hold office, with the exclusion of new (ii)</td>
</tr>
<tr>
<td></td>
<td>New (ii) Business/Industry Members and Corporate Member representatives may register as Active Members with all the rights therein but may not hold office as a national Director.</td>
<td>To remove perceived conflict of interest and competitive advantage by Business/Industry Members or Corporate Member representatives holding office at the national Board level.</td>
</tr>
<tr>
<td></td>
<td>Renumber current (ii) to (iii)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(v) renumber to (vi) Corporate Members are…and not vote in any elections. Individual representatives of a Corporate Member may apply for Active Membership.</td>
<td>To clarify individual representatives of a Corporate Member may apply for Active membership.</td>
</tr>
<tr>
<td>16. Effect of Termination of Membership</td>
<td>Subject to the articles…Member, Business/Industry Member, Student Member, Retired Member or Corporate Member…exist.</td>
<td>To add Business/Industry Member to the list of members.</td>
</tr>
</tbody>
</table>
28. Election of National Directors, Number of Directors and Remuneration

(a) Directors shall be elected...ceases to be a director. See exclusion in 10 (ii).

To clarify that Business/Industry Members may not hold a national Board position.

(b) There shall be no fewer than nine and no more than 12 directors.

To increase maximum allowable number of national Directors.

29. Term of Office of National Directors and Removal of Directors

New (c) The Past President shall serve for a term of one year following completion of term as President.

To add Past President to the Board of Directors for a one year term. This gives immediate support to the incoming President elect and President but only requires one year of additional service from the Past President. The Past President position was eliminated with the 2013 by-law amendments, reducing the term of service for the President position to two years each for President-elect and President, with no additional term as Past President. Following that decision, the Board has found that it is more useful to the Board to have a sitting Past President. The term proposed is one year, which would then create a five-year presidential term, instead of a four-year term.

Renumber current (c) and (d)

Current (e) to be renumbered (f) No fewer than five and no more than eight Directors shall... each year.

To increase the number of Directors who may take a three-year term.

35. Appointment of Officers

The officers of the Corporation shall be the President, the President Elect, the Past President, the Treasurer and the Secretary. All officers must be directors.

To add the position of Past President as an Officer of the Corporation.

36. Description of Offices

Add (c) Past President. The Past President shall perform duties as may from time to time be directed by the Board.

To clarify the role of the Past President.

Renumber (c) through (e)

Signature Page

Change the dates and signatures as appropriate.
<table>
<thead>
<tr>
<th>STRATEGIC GOALS</th>
<th>OBJECTIVES</th>
<th>STRATEGY</th>
<th>RESPONSIBILITY</th>
<th>TIMEFRAME</th>
<th>UPDATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raise our Leadership Profile</td>
<td>1.1 Increase public, government and organizational awareness of IPAC Canada</td>
<td>1.1.1 Assess current state of awareness and develop a communication strategy</td>
<td>Consultant</td>
<td>2016</td>
<td>Assessment completed first quarter of 2016. Communication plan developed first quarter of 2016.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.1.2 Invite a public representative to sit on Board</td>
<td>Board</td>
<td>2016</td>
<td>Stephen Palmer elected as Public Representative for three year term to 2019.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.1.3 Seek representation on decision making and policy tables</td>
<td>Board</td>
<td>Ongoing</td>
<td>Current representation at PHAC – EWG, PHAC – AMS, C.N.A., CPSI, CBIC, Accreditation Canada.</td>
</tr>
<tr>
<td></td>
<td>1.2 Improve level and speed of responsiveness to issues</td>
<td>1.2.1 Identify infrastructure and identify a rapid/real time response system</td>
<td>Staff and Consultant</td>
<td>2016 onwards</td>
<td>Real time response system discussed with Consultant; assistance received from Consultant.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3 Increase political advocacy and influence</td>
<td>1.3.1 Increase engagement at federal, provincial and territorial level</td>
<td>Board</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>1.3.2 Partner with non-traditional groups</td>
<td>Board, Chapter Presidents</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3.3 Improve advocacy skills set within IPAC</td>
<td>Education Core Committee, Consultant</td>
<td>2016 onward</td>
<td>President-elect and Executive Director received media and government relations training from consultant; Board advocacy skills mentored by consultant.</td>
</tr>
<tr>
<td></td>
<td>1.4 Establish an international presence</td>
<td>1.4.1 Support developing countries on initiatives such as Twin City</td>
<td>Chapters</td>
<td>Ongoing</td>
<td>Some chapters have designated a Twin City or country for assistance. IFIC mentorship information forwarded to chapters. Discussion with Infection Control Africa Network regarding twinning in Africa.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.4.2 Leverage association with international organizations</td>
<td>Board</td>
<td>Ongoing</td>
<td>Working relationships established with APIC, IPS, IPCI, Australia, New Zealand. Communication with South Africa on collaboration workshop.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.4.3 Continue to promote international call outs and opportunities for members</td>
<td>Staff</td>
<td>Ongoing</td>
<td>International education and professional opportunities posted and promoted.</td>
</tr>
<tr>
<td>Recalibrate Our Product Mix</td>
<td>2.1 Offer informed commentary on standards and guidelines across federal, provincial and territorial jurisdictions</td>
<td>2.1.1 Maintain a functional repository of federal, provincial and territorial guidelines</td>
<td>Standards and Guidelines, Web Communications Manager</td>
<td>Ongoing</td>
<td>Links/Resources section of website constantly updated.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.1.2 Review and disseminate information, updates, etc. through membership</td>
<td>Standards and Guidelines, Chapter Presidents</td>
<td>Ongoing</td>
<td>Resource information provided on website as well as e-communications.</td>
</tr>
<tr>
<td></td>
<td>2.2 Accelerate development and dissemination of audit tools</td>
<td>2.2.1 Utilize survey results to inform audit tool kit development</td>
<td>Audit Tool Committee, Programs &amp; Projects, Specific interest groups, Ad hoc experts</td>
<td>Ongoing</td>
<td>To be included in Needs Assessment Survey 2017. New audit tools to be developed by Programs &amp; Projects; current tools to be reviewed by Audit Tool Committee.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.2.2 Review information/approval process and formalize Terms of Reference of Audit Tool Committee</td>
<td>Audit Tool Committee, Programs &amp; Projects, Executive Director/Board</td>
<td>2016</td>
<td>Completed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.2.3 Develop an App for audit tools</td>
<td>Audit Tool Committee</td>
<td>2016-2017</td>
<td>Board engaged HandyMetrics to develop audit tool app; currently working with Focus Group; launch anticipated in 2017.</td>
</tr>
<tr>
<td></td>
<td>2.3 Enhance education emphasis to reflect fundamental infection and control principles</td>
<td>2.3.1 Identify broad high-level principles related to identified education needs</td>
<td>Education Core Committee</td>
<td>Ongoing</td>
<td>Provide education sessions that would ensure the interests of both novice and experienced ICPs; gather information through Needs Assessment.</td>
</tr>
<tr>
<td>STRATEGIC GOALS</td>
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<tr>
<td>2.3.2 Increase use of technology in educational delivery in real time</td>
<td></td>
<td>Education Core Committee</td>
<td>2017 onwards</td>
<td>Use of Adobe Connect provided for interest groups, chapters and committees.</td>
<td></td>
</tr>
<tr>
<td>2.4 Continue to develop CJIC as a cited peer review journal</td>
<td>2.4.1 Dedicate CJIC to scientific information and field material, migrating non-scientific components to other communication venues</td>
<td>Editor and Editorial Board</td>
<td>2016 onwards</td>
<td>More scientific articles are being published. Association News to move to Supplement in 2017. PubMed application to occur in 2018/19.</td>
<td></td>
</tr>
<tr>
<td>2.4.2 Promote CJIC as a peer-reviewed citable journal</td>
<td>Editor and Editorial Board</td>
<td>Ongoing</td>
<td>Promotion of CJIC with other associations enhanced, e.g., APl, APIC, IHI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.4.3 Establish on-line searchable index</td>
<td>Editor and Editorial Board, Web Communications Manager</td>
<td>2017 onwards</td>
<td>Under construction.</td>
<td></td>
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</tbody>
</table>

Grow Our Capacity

3.1 Promote the value of IPAC Canada memberships to key target audiences

| 3.1.1. Develop messages for specific target groups | Membership Core Committee, Special Interest Groups | Ongoing | In 2016, the following groups were targeted for membership: foot care, midwives, respiratory (Ontario) housekeepers, Medical Device Reprocessing, and PICnet BC. |
| 3.1.2 Enhance current new member promotion package | Staff | Ongoing | Web-based new member package regularly updated. |
| 3.1.3 Profile successful chapters and develop a repository of successful practices | Chapter Council, Web Communications Manager | 2017 onwards | Under discussion. |

3.2 Make innovative use of technology to engage and educate

| 3.2.1 Seek opportunities to integrate technology into product mix | Programs and Projects Education Core Committee | Ongoing | Technology Committee tabled. Adobe Connect utilized for education and networking. Technological advances under regular discussion. |
| 3.2.2 Develop a social media strategy | Social Media Manager | 2016 | Under discussion with Consultant; Social Media Manager communicates IPAC Canada news and other info on Twitter. |
| 3.2.3 Use on-line connectivity tools to enhance collaboration committee work | Web Communications Manager | Ongoing | Adobe Connect and Google Docs used for committee collaboration; website technology under discussion. |
| 3.2.4 Enhance website to include on-line searchable member directory | Web Communications Manager | 2017 onwards | Under discussion. |

3.3 Expand mentorship

| 3.3.1 Develop a handbook for mentors | Membership Core Committee | 2016 | Completed |
| 3.3.2 Develop a Chapter Council | Board, Staff, Chapters | 2016 | Completed |
| 3.3.3 Implement mentor programs for chapter executives, new members, individuals with new roles | Membership Core Committee, Chapters | Ongoing | Mentor program launched in 2017. |

3.4 Build and leverage relationships with industry

| 3.4.1 Identify ways to use scientific knowledge to leverage industry to support our needs | Corporate Relations Committee (CRC) Director (MD), Specific Interest Groups | Ongoing | Ongoing discussions with CRC and Board. |
| 3.4.2 Support industry adherence to IPAC principles and practices in products and services | Standards and Guidelines Committee, Corporate Relations Committee | Ongoing | Under discussion. |
| 3.4.3 Partner with industry to address technology needs | Corporate Relations Committee | 2016 onwards | Under discussion. |

3.5 Seek additional sources of funding

| 3.5.1 Establish a formal fundraising program | Board Consultant | Ongoing | Under discussion. |
| 3.5.2 Increase industry sponsorships | Corporate Relations Committee | Ongoing | Under discussion. |
| 3.5.3 Identify and apply for relevant grants | Staff/Consultant in consultation with specific Committees and Interest Groups | Ongoing | Under discussion. |
Notice is hereby served that the Annual General Meeting (AGM) of Infection Prevention and Control Canada will be held on Wednesday, June 21, 2017 at the Prince Edward Convention Centre, Charlottetown, Prince Edward Island. Registration will open at 0715. IPAC Canada members must register and pick up a voting card before entering the AGM. The AGM will commence at 0745. Registration will close at 0745 and the doors will be closed. After the doors are closed, attendees may enter the AGM, but may not vote unless registered.

Members may vote on business arising at the AGM by proxy using Form #15 2017 which must be submitted to the IPAC Canada Secretary at the IPAC Canada office no later than Monday, June 19, 2017. The AGM Agenda, Rules of Order and Proxy Form #15 2017 will be posted to the website in early 2017 and an announcement made of their availability.

Marilyn Weinmaster, Secretary
IPAC Canada
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New and certified CIC®s from a variety of healthcare settings have spent hours studying, digesting facts, and reading current literature. This information and life experience, along with a successful completion of the CIC® examination, ensure infection prevention and control professionals deserve to place a CIC® after their names. Congratulations to the following October-December 2016 list of graduates.

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- Paul R. Chisholm, CIC
- Mary F. Coulter, RN, CIC
- Ka Wai Leung, BSN, RN, MPH, CIC
- Janessa C. McGuire, CIC
- Tracey L. Reid, RN, CIC
- Sonalben Shah, MSc, CIC
- Mary-Theresa U. Usuanlele, CIC

**Recertified**
- Mirza Z. Ali, CIC
- Anne K. Augustin, CIC
- Gail L. Busto, CIC
- Janice M. de Heer, CIC
- Monica C. DiFonzo, CIC
- Janine A. Domingos, CIC
- Roy MG Dyalsingh, MBBS, MHS, CIC
- Janice Fackelmann, RN(EC), CIC
- Michael A. Gardam, MD, CIC
- Natalie J. Goertz, BScN, CIC
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For information see the Learning Object Repository page at https://ipac-canada.org/learning-object-repository-2.php
The following candidates have been nominated for positions open on the Board of Directors in 2017. Additional nominations may be presented by not less than two IPAC Canada members at the Annual General Meeting (Wednesday, June 21, 2017, Charlottetown).

Additional nominees must be present to confirm their willingness to be nominated, or have provided a written confirmation to the nominator(s).

President-elect (two-year term)  Barbara Catt, RN, BScN, MEd, CIC
Followed by two-year term as President  Sunnybrook Health Sciences Centre
Toronto, ON

Secretary (three-year term)  Jennifer Happe, BSc, MSc
Red Deer Regional Hospital
Red Deer, AB

Director (three-year term)  Kim Allain, BSc, RN, MHSc, CIC
Nova Scotia Health Authority
Halifax, NS

Director (three-year term)  Ramona Rodrigues, RN, BSc, MSc(A), CIC, CNS
McGill University Health Centre
Montreal, QC

PHILOSOPHY: As a leader, I believe it is important to empower others, recognize and support our strengths and capitalize on opportunities to overcome our weaknesses. Education and mentoring are integral for success whether a novice or an experienced ICP. It is important to share and collaborate as we continue to move forward in an age of antimicrobial resistance, new pathogens and a continuous battle to prevent healthcare-associated infections. We all bring together our own experiences whether in a small community hospital, a long-term care home, or in the public sector. It is these experiences that will lead us to growth and development as an important organization in Canada. We need to engage membership as well as encourage participation on committees and working groups. By encouraging membership and engaging our members, we can reach many of our strategic goals!

JENNIFER HAPPE, BSc, MSc started her career as a medical researcher investigating alternative therapies for Clostridium difficile infection (CDI), including novel antibiotics and fecal transplants, before transitioning into the role of an Infection Control Professional (ICP) in Central Alberta. Jennifer has a varied portfolio and oversees acute care and mental health units at Red Deer Regional Hospital, acute and long-term care units at Lacombe Hospital, and cancer care at the Central Alberta Cancer Center. Jennifer’s enthusiasm for infection prevention and control led to her appointment as the Chair of IPAC Canada’s Surveillance and Epidemiology Interest Group (SAEIG) and an IPAC Canada representative on the Canadian Patient Safety Institute (CPSI) national surveillance definition standardization project. She has been instrumental in facilitating
the review of acute care and long-term care case definitions. When she’s not busy with work, Jennifer enjoys traveling and volunteering at the SPCA.

**PHILOSOPHY:** My passion for infection prevention is founded on making a difference in the lives and wellbeing of patients, families and communities. A few years ago I stepped away from benchtop research with the federal government to use my knowledge in microbiology and epidemiology to directly support efforts to reduce the incidence of healthcare associated infections in central Alberta. Membership in IPAC Canada has afforded me the opportunity to grow both personally and professionally by allowing me to connect with a broad network of professionals with the same passion and values for patient advocacy, education, innovation, and research. I am delighted to support IPAC Canada as Secretary to the Board of Directors to facilitate communication within the organization and collaboration between our membership and stakeholders in the pursuit of best practices in our field. It is by teamwork that our vision is achieved.

**RAMONA RODRIGUES, RN, BSc, MSc(A), CIC, CNS** is nominated for her second term on the Board of Directors. She is a Clinical Nurse Specialist in IPAC at McGill University Health Center in Montreal. She has been an ICP for 29 years and a member of IPAC Canada for 28 years. Ramona is a member of the Program Wide Standard development committee and has participated on the Distance Education Endorsement Committee. She is a member and Past President of PCI Montreal as well as an IPAC Canada national conference committee member. Ramona is very active in her profession in Quebec including acting as a member of the Regional Table for IPAC, Regional Housekeeping Table, Program Reviewer and Lecturer. In her current Board position, she chairs the meetings of Chapter Presidents, Interest Group Chairs and the new Chapter Council.

**PHILOSOPHY:** I believe that through collaborations we can learn from the collective wisdom of those we serve. Building upon each other we can achieve more together than we can individually. Through joint partnerships with colleagues across Canada and other professionals who share our values, we can commit to the wellness and safety of Canadians by promoting best practices in infection prevention and control. My hope is to continue to increase the value of the Infection Prevention and Control professional in their practice setting, advance visibility and find ways to stimulate and promote interest amongst our membership, thereby promoting the specialization and field. In order to accomplish these goals, we must continue to foster involvement of membership at the local, chapter and committee level, provide opportunities, stimulate engagement and share achievements. We need to continue to strategically identify key stakeholders to work with, identify and mentor new leaders and readily adapt to changes.

Marilyn Weinmaster, IPAC Canada Secretary  
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- Within the pages of each issue, we actively encourage our readers to REUSE and RECYCLE.
- In order to reduce our carbon footprint on the planet, we utilize a carbon offset program in conjunction with any air travel we undertake related to our publishing responsibilities for the magazine.

So enjoy this magazine...and KEEP THINKING GREEN.