SHEA Newsletter

Edited by Robert A. Weinstein, MD

The Society of Hospital Epidemiologists of America

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APIC President Comments

The Association for Practitioners in Infection Control (APIC) was established in 1972 as a multidisciplinary, voluntary professional association consisting of individuals of all disciplines who are committed to developing and improving the practice of infection control, with the final outcome being improved patient care.

To accomplish this mission APIC has developed a broad organizational structure including numerous committees and task forces to focus on specific goals to meet the needs of our 7,000 plus members. The majority of these committees have a multidisciplinary representation, and several committee members belong to both APIC and SHEA (The Society of Hospital Epidemiologists of America).

During the past year APIC and SHEA have joined together to facilitate the accomplishment of shared organizational goals. These include the Severity of Illness Task Force and the AIDS Task Force, both of which are progressing very well. Other areas of mutual cooperation include the joint scientific sessions at the APIC Annual Educational Conference, the president of-each organization attending the other organization's hoard meetings, and recent discussion regarding joint involvement in educational prograrns for hospital administrators.

As both organizations are striving to improve the practice of infection control, many of our objectives are similar and would profit by cornhining the expertise of our memberships. I can easily envision the two organizations working together to develop the concept of the expanded role of hospital epidemiology. Other specific areas that would benefit from the melding. of expertise include promotion of research activities and effecting health care regulations and legislation that impact on infection control.

Currently there are several APIC/SHEA members serving on the APIC Research Committee, which is developing methods for teaching epiderniologic methods in infection control and investigating the potential for APIC-sponsored research projects. During the coming year I hope to see expanded SHEA involvement in these research activities.

The processes for effecting regulations and legislation are under developrnent in APIC. Thejoining of APIC and SHEA in these efforts would create a stronger political base and potentially he more effective in creating change. This goal will take time to evolve, hut both organizations would he prudent to consider joint efforts in this area for the future.

The two organizations have begun working together in many areas that will help to better serve both our memberships' needs. I trust that these joint efforts wilt continue to expand as our two organizations strive to enhance the field of infection control.

Elizabeth A. Bolyard, RN, MPH, CIC
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Please send me an application form and information about membership in The Society of Hospital Epidemiologists of America (SHEA).

My address is: (Please print) _____

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Mail this request to Timothy R. Townsend, MD, SHEA Secretary Brady 119, Johns Hopkins Hospital, 600 N. Wolfe St., Baltimore, MD 21205.

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