

Dear ACIPC Members

In recent weeks you will have seen that the College has published its first set of media releases for 2016 covering a range of topics. These topics have included non-reimbursement for preventable healthcare-acquired infections; the health and welfare of asylum seekers, refugees and children in detention; and the recent measles outbreak in Victoria, Australia and the importance of vaccination.

These media releases have raised the profile of the issues therein and generated considerable discussion and debate. The purpose of a media release is to express a view about a particular matter at a point in time, and in a timely manner. ACIPC media releases do not represent the view of a single individual, and they do not represent the view of any one office bearer of the College. Moreover, they in no way seek to unilaterally speak for each and every member on particular issues. They represent the view of the College more broadly as an institution through the duly elected representatives on the ACIPC Executive Council. All media releases, like other forms of official College correspondence and communication, are prepared, sanctioned and approved by the ACIPC Executive Council. All members of the ACIPC Executive Council are formally afforded the opportunity to raise, comment on and approve media releases for the College, and they do so. This is standard practice for the College, and it is what occurred for these media releases.

Some readers, including College members and others in the wider community, have expressed their agreement or support for the recently published media releases published by the College. Others have expressed opposing views. And others have expressed no view at all. That is the express purpose and intended consequence of these instruments. In expressing a particular view, media releases raise the profile of the issue at hand with individuals, communities, groups and society more broadly for discussion and debate. What follows is a matter of course. Some will agree; others will disagree. Some will be ambivalent; others indifferent, or silent. What is important is that the discussion and debate is permitted to occur, and that it occurs in a way that allows individuals to form their own view, however popular or not at the time, free of duress and undue influence. Moreover individuals should be able to, and are expected to, express their opinion professionally in contributing to the discussion and debate. These are hallmarks of a democratic and civilised society. At the heart of our work as a College and as professionals is scholarly, respectful and informed democratic discussion and debate. In promulgating these media releases, the ACIPC Executive Council welcomes and encourages scholarly, respectful and informed discussion and debate by its members on all matters relating to our work and to College business, on those terms. Media releases are one such vehicle to enable this to occur.

Some readers have raised concerns regarding the relevance of the ACIPC media release around the health and welfare of asylum seekers, refugees and children in detention to our core business of infection prevention and control. The media release was prompted by the issues raised by the AMA President, Professor Brian Owler, in a speech he gave on 21 February 2016. In his speech, Professor Owler referred specifically to a recent and highly publicized Australian case, where a 24-year old Iranian asylum seeker died from a treatable condition. He died of sepsis, preventable sepsis. Sepsis is a focus of individual infection control professionals, of our profession as a whole, and it is the business of our College.

Some readers have expressed concerns that, in promulgating these media releases, the College has entered the political domain for the first time and in a manner out of step with other scholarly professions or our history. The College is not, as many have already pointed out, a principally political organisation. That is not our principal mandate. However, the ACIPC Executive Council suggests that if we consider the substance of the three most recent media releases, it would be very difficult to see how any of these issues do not have political dimensions. The reality is that in



our contemporary society there are few aspects to health and healthcare that are truly apolitical or free from political consequence. Accordingly professional colleges, learned societies, governments and non-government organisations across Australia and around the world believe it is important to be engaged in a broader conversation about health and healthcare. Many of these have exercised their constitutional jurisdiction and function to express an opinion in time regarding particular matters through media releases and other instruments. This has been the College's course of action: to contribute to the conversation, discussion and debate in meaningful ways at this time. Importantly, media releases are instruments set in time, place and context. By their nature, they reflect a position at a given point in time. They do not represent an inexorable binding alignment to any particular view expressed therein, nor do they imply an enduring alignment, political or otherwise, with any other agency who expresses similar views at the time. Equally, they do not represent enduring disagreement with any agency that expresses a contrary view. Times change, and particular positions expressed at one time are inevitably called into question as information and circumstances change. If they didn't, and if it wasn't for individuals like Pasteur, Fleming and Semmelweiss and many others who each expressed particular positions in their time, we would all be in a very different place today. Vaccines and pasteurisation do prevent disease, antibiotics do treat infection, and infection control is fundamental to our health and wellbeing.

What is common to these media releases and the various other facets of College business is their overarching purpose. We are the peak body for infection prevention and control professionals in the Australasian region. Our focus is the prevention and control of infection in our communities. At the heart of this is the health and well-being of individuals and the community. Advancing the health and well-being of others calls for advocacy at all levels, and that includes peak bodies. Advocacy is an important hallmark of a profession and individual professionals. Yet by its very nature, we will not always all agree. And that is OK. ACIPC members are entitled and encouraged to form their views about matters that are before them, and to express representations of those views professionally and respectfully. The ACIPC Executive Council expects no less of its members, and certainly no less of itself. We welcome your active participation in your College through scholarly, respectful and informed discussion and debate as we grow and develop our profession of infection prevention and control.

With kind regards

Professor Ramon Shaban ACIPC President On behalf of the ACIPC Executive Council

Professor Ramon Shaban, ACIPC President Professor Marilyn Cruickshank, President Elect Ms Belinda Henderson, Immediate Past President Ms Wendy Beckingham Dr Sharon Salmon Ms Donna Cameron Mr Phil Russo Dr Deborough Macbeth Ms Fiona Wilson Dr Thea van de Mortel Mr Peter Martin

