

Association for Professionals in
Infection Control and Epidemiology, Inc.

Chief Executive Officer
Position Profile
December 2010

This profile provides information about the Association for Professionals in Infection Control and Epidemiology, Inc. (APIC) and the position of Chief Executive Officer. The profile is designed to assist individuals in assessing their interest in and qualifications for the position.

The search for the CEO of APIC is being conducted by Pamela Kaul, President, Association Strategies, Inc., 1111 North Fairfax Street, Alexandria, VA 22314. Applicants should submit a cover letter and resume to the Association Strategies, Inc., website: www.assnstrategies.com. The deadline for applications is February 15, 2011. To learn more about APIC, go to www.apic.org.

Chief Executive Officer Position Profile for the **Association for Professionals in Infection Control and Epidemiology, Inc.**

Profile Methodology

The profile for the position of Chief Executive Officer of the Association for Professionals in Infection Control and Epidemiology, Inc. (APIC) was developed using organizational data, discussions with key stakeholders, and responses to an online survey of current and past committee members, chapter leaders, members of the Board of Directors and Search Committee, staff and representatives of related organizations. The survey was conducted to identify and prioritize the skills, knowledge, experience, qualifications and qualities required and desired in a CEO. Information regarding programs and services considered most effective, organizational and cultural factors, and challenges and opportunities for APIC was also developed from the survey responses.

About the Organization

APIC is a professional association dedicated to improving health and patient safety by reducing risks of infection and other adverse outcomes in medical care. A 501(c)(3) organization located in Washington, D.C., it has more than 13,000 members, including nurses, epidemiologists, physicians, microbiologists, clinical pathologists, laboratory technologists and public health practitioners.

APIC members have primary responsibility for infection prevention, infection control and hospital epidemiology in healthcare settings around the globe. Infection preventionists work in a variety of settings, including hospitals, long-term care facilities, ambulatory care facilities, home care, hospices, public and behavioral health, and emergency preparedness. The organization was founded in 1972 as the Association for Practitioners in Infection Control, in recognition of the need for an organized, systematic approach to the control of infections acquired as a result of hospitalization. The name was changed to the Association for Professionals in Infection Control and Epidemiology, Inc., in 1994 to recognize the organization's maturation and evolution into the broader context of healthcare delivery.

Today, APIC has 113 chapters throughout the United States and Canada, and it advances its mission through education, research, collaboration, public policy, practice guidance, strategic partnerships and credentialing, as well as through the services offered by the for-profit subsidiary, APIC Consulting Services, Inc. (ACSI).

The areas of focus for infection preventionists include (1) prevention of healthcare-associated infections and all other transmittable infections; (2) procedures, including environmental factors – hygiene, facility cleanliness, adherence to policies and regulations for infection prevention, and risk assessment; and (3) positive results and financial effectiveness to ensure that infection outbreaks are reduced or eliminated in order to minimize their effect on an institution's bottom line.

Vision 2012: Creating a Preferred Future: APIC's programs, services and activities are guided by *Vision 2012*, a strategy whose goal is to position the organization as the recognized leader in infection prevention and control by practitioners, policy makers, healthcare executives and consumers. As such, APIC works toward achieving the following goals:

- Emphasizing prevention and promoting zero tolerance for health-care associated infections and other adverse events;
- Ensuring that appropriate standards and measures are set by which infection prevention and control programs are evaluated by regulatory agencies, healthcare executives, payers and consumers;
- Achieving recognition of infection prevention and control as a separate and distinct profession whose members are positioned for leadership roles in health care;
- Serving as a catalyst for leading-edge research for the prevention of infection; and
- Taking a leadership role in emergency preparedness related to infection prevention and control, including emerging and reemerging diseases, bioterrorism, natural disasters and other issues.

Structure, Governance and Staff: APIC is governed by a 16-member Board of Directors. Under the direction of the CEO (who serves as an ex officio member of the Board), the 38-member

professional staff administers the programs, services and activities of the organization within a \$12 million operating budget and supports the work of numerous committees.

ASCI, a wholly-owned subsidiary of APIC, has a separate Board of Directors. ACSI's team of experts provide consulting services to healthcare facilities by assessing their infection prevention programs and providing guidance in program development, interventions, administration, and long-term performance improvement initiatives to ensure a state of continuous readiness and compliance.

The APIC Research Foundation, a division of APIC, focuses on advancing the profession primarily through a combination of education and research. It supports research to prevent healthcare-associated complications and evaluate the efficacy of infection prevention practices. This is accomplished by building a robust endowment that facilitates collaboration among practitioners, researchers, industry and other members of the infection control community.

Key External Interactions: In addition to working closely with the Board of Directors, staff and chapter leaders, the CEO represents APIC's interests through interaction with a wide range of related organizations, including federal, state and local government organizations; regulatory agencies; nursing and physician organizations; industry partners; consumer safety advocacy groups; and international organizations related to infection prevention and control. These include but are not limited to:

- American Hospital Association;
- Society for Healthcare Epidemiology of America;
- American Medical Association;
- American Nurses Association;
- Association of periOperative Registered Nurses;
- American Nurses Credentialing Center;
- Centers for Disease Control;
- U.S. Department of Health and Human Services;
- Health Resources and Services Administration;

- Institute for Healthcare Improvement;
- Agency for Healthcare Research and Quality;
- Centers for Medicare and Medicaid Services;
- Infectious Disease Society of America;
- The Joint Commission;
- Council of State and Territorial Epidemiology;
- Association of State and Territorial Healthcare Officials;
- National Quality Forum;
- Certification Board of Infection Control and Epidemiology, Inc.
- Division of Healthcare Quality Promotion;
- Business Roundtable;
- National Institutes of Health;
- The International Federation of Infection Control; and
- World Health Organization.

Programs and Services

APIC offers a range of extensive and robust programs, services and activities to advance the profession of infection prevention and control. APIC's premier event is the Annual Conference, a three-day event featuring presentations by nationally and internationally renowned scholars, practitioners and speakers; workshops; social and networking events; and continuing education opportunities. The Annual Conference draws more than 3,600 infection preventionists and related professionals representing more than 25 countries.

Other educational offerings include webinars, electronic news updates, and online courses in evidence-based application of infection prevention and control, ambulatory care and long-term care solutions. Additional programs and services include:

1. The *Public Policy Program*, through which APIC monitors, analyzes and shapes legislation and regulatory proposals on behalf of its members at the state and federal levels. APIC works to ensure the adoption of legislation and regulations that promote evidence-based

practices, protect patients and strengthen the practice of infection prevention and control. The program includes updates on issues and initiatives, a library of public policy information, contact information for legislators, and a legislative map that tracks the progress of state and federal legislation.

2. *APIC AnywhereTM*, an online education center that delivers instant access to comprehensive learning resources, including clinical and professional content developed by leading experts; an interactive online format; and accredited continuing education credit. The center includes *APIC Text Online*, a certification review course, a conference education library, webinars and webcasts, a healthcare-associated infection elimination library.
3. *Education for the Prevention of Infection*, a comprehensive portfolio of offerings and a curriculum to support the education needs of members from the novice to the seasoned professional.
4. *Membership Sections*, eight special interest groups for members practicing in like fields within infection prevention and control that provide forums for members to engage one another, increase communication and identify specific education needs and products. The sections are Ambulatory Care, Long-Term Care, Behavioral Health, Minority Health, EMS/Public Safety, Pediatrics, Home Care and Veterans Affairs.
5. The *Certification Program*, through which infection preventionists can demonstrate a mastery of standardized and current knowledge that is recognized and respected within and outside the field. The certification examination is developed by APIC's independent credentialing arm, the Certification Board for Infection Control and Epidemiology.
6. The *Career Center*, a state-of-the-art online resource that matches job seekers with employment opportunities and advances the career growth and progression for professionals in the field.

7. *APICList*, online communities that provide opportunities for interactive discussion, news, group announcements and a document library.
8. The recently launched *International Membership Program*, which provides international members unique opportunities to connect with one another, keep up with advances in infection prevention, and learn in-country via local networks.
9. An extensive offering of publications, brochures and pamphlets for both healthcare professionals and the general public.
10. The *APIC Strategic Partnership*, a formal, ongoing relationship with healthcare companies united in the common goal of reducing the risk of infection and supporting APIC programs and services.
11. An extensive awards program that recognizes those professionals devoted to infection prevention, control and epidemiology and honors contributions in the areas of service, administration, research, lectureship and excellence.

Other key APIC initiatives include:

- Development of standards for public reporting of healthcare-associated infections;
- Building the business case for infection prevention as a significant “profitability partner” rather than a cost center;
- Addressing the changing environment through encouragement of the adoption of surveillance technology;
- Playing a leadership role in emergency preparedness; and
- Promotion of a culture where targeting zero healthcare-associated infections is embraced and supported.

Organizational Culture

Responses from stakeholders and the APIC staff's own assessment of the organizational culture yield consistent results: The professional staff is described as deeply committed to the APIC mission; supportive of and responsive to members; knowledgeable and hard-working; and energetic, creative and engaged in furthering the association's goals. Perhaps most telling are the core values that the professional staff has developed to guide its efforts: (1) Agility – the ability to be open-minded, intellectually nimble and capable of quickly assimilating new ideas into the fabric of the organization's resources; (2) innovative leadership – in responding to emerging issues, finding solutions through careful deliberation and disciplined yet bold risk-taking; (3) integrity -- passion, honesty, conscientiousness and pride, with careful use of APIC's financial resources that reflects accountability, transparency and loyalty; (4) stewardship -- personal ownership and investment of their best ideas, efforts and talents; and (5) teamwork – working collaboratively and collegially with a common purpose. The staff also notes that due to the many demands on resources and the escalating needs of the membership, they often find themselves in a position of being reactive rather than proactive. They cite the need for more time to thoughtfully plan and implement, and for a stronger alignment of resources with the strategic goals.

The staff notes that the organization has experienced significant growth in recent years, and that a focus on revenue generation and financial stability has solidified its position moving forward. It suggests that now the organization would benefit from a more internal focus on (1) the needs and professional development of the staff; (2) the communications and procedural infrastructure; (3) the specific and changing needs of the membership; and (4) demonstration of member benefits and value. Stakeholders also suggest that ways be sought to expand staff members' engagement with the membership (to “get out into the field”) in order to avoid a possible perception of insularity.

The volunteer leadership is described as deeply committed and dedicated to moving the organization forward, and as largely visionary and mission-focused. The relationship between the Board and staff is described as a partnership based on mutual respect and collaboration. The

membership at large is supportive of the organization and very appreciative of the programs and services that APIC provides. There is acknowledgement of the fact that as the organization grows, attention must be paid to addressing the differing needs and expectations of long-term vs. newer members.

Strengths, Challenges and Opportunities

The current U.S. climate can be characterized as one of growing opportunities and new emerging healthcare segments; a dynamic federal and state policy environment; and increasing demand for services and expertise. Membership is growing and diversifying domestically (and at a beginning level in the international market) at an unprecedented rate. The organization is financially sound despite the continued uncertainty of the U.S. economy. The field of infection prevention is constantly changing, as rapidly evolving pathogens, new regulations, new technologies and public awareness have led to a sharpened focus on infection prevention.

The marketplace in the field of infection prevention and control is increasingly crowded, which presents both opportunities and challenges for APIC as it works to retain its position as the leading voice in the field. To this end, many cite the importance of APIC strengthening its alliances with related organizations, government and regulatory agencies, and of actively seeking more collaborative partnerships and activities for the benefit of the industry.

As is the case with many membership associations, APIC would benefit from more effort being devoted to engaging a greater number of members in the organization's activities and especially in leadership roles. This suggests that leadership development programs or activities would be beneficial in increasing members' "ownership," heightening their active participation in the organization and proactively advocating on behalf of themselves and the profession.

Among the programs and services that stakeholders value most highly and consider most effective are (1) the Annual Conference and other education offerings – webinars, online resources, electronic communications; (2) the efficacy of the Public Policy Program – legislative and regulatory advocacy, public policy efforts and government affairs activities; (3) the

development and dissemination of practice guidelines, best practices and other resources regarding infection prevention and control; and (4) the support for chapters and their engagement in furthering the mission of the organization.

Other opportunities and challenges suggested by stakeholders include:

1. Clarifying the changing skill sets of infection preventionists, and encouraging new professionals in the profession and the organization;
2. Increasing the emphasis on implementation and delivery of prevention practices (e.g., other organizations may be better positioned to determine *what* needs to be done, while APIC focuses on *how* it should be done);
3. Increasing chapter support and involvement; sharing of best practices;
4. Strengthening the organization's voice and stature in addressing regulations and issues ranging from proposed surveillance initiatives, public reporting of healthcare-associated infections, pay for performance and healthcare reform;
5. Increasing the value of educational offerings to members by improving the specificity and technical level of information;
6. Promoting the value and important role of infection preventionists to the public, healthcare executives and to entities outside the traditional hospital setting; and
7. Addressing a possible misperception that APIC has more in common with trade associations than professional organizations because of its emphasis on vendor partnerships.

Chief Executive Officer Position

Responsibilities: The CEO is accountable to both the APIC and ACSI Boards of Directors and reports to the Presidents of both organizations. The CEO is responsible for:

1. Providing leadership in the development and execution of organizational strategy;
2. Promoting the visibility of the association and the profession in the healthcare community and with the general public, government officials, thought leaders and other stakeholder organizations;
3. Engaging and working in collaboration with the Boards of Directors on matters of governance, mission, vision and strategy;

4. Directing the day-to-day operations and business activities of the association, with authority over staff issues;
5. Overseeing all programmatic activities, including education, information services, membership, practice guidance, research, public policy, communications and business development; and
6. Overseeing the development and management of the budget and business plans that reflect the strategic goals.

Education and Experience: The ideal candidate will have a bachelor's degree (an MBA or other master's degree is considered a plus, as is the Certified Association Executive designation); be an executive of stature with a minimum of 10 years of broad-based CEO or senior-level management experience in the association/non-profit sector (experience in both the private and public sectors is an asset); possess knowledge or understanding of or experience with related organizations or professions; be experienced in raising public awareness and with public relations on behalf of an organization; and be familiar with healthcare issues and reform principles. Knowledge of or experience with hospitals, healthcare organizations, medical or nursing professions or infectious disease organizations is considered an asset.

Candidates must demonstrate considerable experience and success in the following areas:

1. Working with legislative processes, advocacy, public policy development, and government/regulatory agencies; and managing government affairs activities;
2. Developing and implementing strategic plans and initiatives, and identifying and prioritizing short- and long-term organizational goals, needs and resources;
3. Building and maintaining strong alliances and relationships with related organizations;
4. Developing, managing and motivating a high-functioning professional staff;
5. Developing and supporting a Board of Directors and relationships with other key volunteers;
6. Developing and delivering association services, programs and resources to advance a profession;

7. Maintaining and managing the financial integrity of an organization, its funds and assets; and aligning an annual operating budget with strategic goals and objectives while maintaining the highest standards of legal and fiscal responsibility;
8. Enhancing the reputation and visibility of an organization through effective public relations;
9. Effectively serving as the public voice of and spokesperson for an organization;
10. Overseeing national and local conference, workshops and other educational programming; and
11. Enhancing member communications, interaction and networks through the use of social media and technology.

Skills and Abilities: The following skills and abilities are important to the candidate's success in the position of CEO:

1. Visionary leadership, in order to capitalize on opportunities and to identify challenges and the resources necessary to meet those challenges;
2. Ability to build consensus among diverse constituencies and organizations in order to further common goals and objectives;
3. Establishment and development of networking and alliances/partnerships with internal and external audiences;
4. Strong written and oral communication skills, with the ability to deliver clear and effective messages to all stakeholders; and
5. Exceptional organizational management skills, including the ability to mobilize and engage volunteers and staff to execute the association's strategies.

Personal Characteristics and Behaviors: The CEO will possess the following personal characteristics and behaviors:

1. Unquestioned honesty, integrity and ethics;
2. Inclusive, collaborative and a team-builder by nature;
3. An articulate, skilled communicator; a strong listener who actively invites input from a variety of areas, but who can act decisively and confidently;

4. Tactful, diplomatic, personable and accessible; open to new ideas; attentive and responsive to membership needs;
5. Supportive of the staff and an internal team culture; able to provide appropriate guidance while empowering staff;
6. Decisive, dynamic and self-confident;
7. Organized and attentive to operational detail;
8. Inspirational and optimistic; able to motivate and engage others in effectively articulating the organization's vision; and
9. Open to working with and learning from others who have skill sets different from his/her own, and respectful of differing viewpoints.

Measures of Success

The CEO's success in the position will be measured by demonstrated progress in the following areas:

1. The quality of relationships and communication with volunteer leaders, chapters, members and related organizations;
2. Stability, morale and professional development of the staff;
3. Advancement of significant legislative, policy and advocacy issues on behalf of the membership;
4. Successful integration into the culture of the association;
5. Membership retention and satisfaction;
6. Quality of communication with and responsiveness and accessibility to the membership;
7. Continued financial stability of the organization;
8. Alignment of the strategic goals with available staff and financial resources;
9. Solid understanding and advancement of the association's strategic plan through maintenance and improvement of member services and programs, consistent with available resources; and
10. Enhanced profile of the organization in the healthcare industry and the public.

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