

## The Beginning

Written by Jeremy Dann  
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### **A brief History of our Beginning - 2006 to 2008** □ **Background** □

The Moncton Clinical Engineering group, lead by Paul Auffrey and M'Hamed Ratmi, invited interested individuals to a meeting to discuss the formation of an Atlantic Clinical Engineering Organization. The facilitated meeting was held on November 2nd 2006. It was attended by representatives of several Clinical Engineering services across the region. Present were Michel Arsenault (NB), Hubert Arseneau (NB) , Paul Auffrey (NB), Michael Barton (NS), Daniel Burrill (NB), Stephane Couture (NB), Jeremy Dann (NS), Ron Johnson (NFLD), Stafford Macswain (PEI), Bert MacDonald (NB), Dave Melnick (NB), Mary price (NB), M'Hamed Ratmi (NB), Daniel Theriault (NB), and Jean-Guy Vienneau (NB).

A key outcome of the Moncton meeting was the development of a questionnaire which was broadly distributed electronically in late November of 2006. More than 300 people were polled for input on issues surrounding the formation of an organization. 158 responded to the survey. The survey captured information in a number of areas. The data was reviewed and compiled in late December of 2006, by Jeremy Dann and Dave Melnick, and distributed to the original group for comment. The survey outcomes were consolidated into a presentation made at the Moncton Twelfth Annual Atlantic Clinical Engineering Seminar in March of 2007.

### **Direction** □ **Key Survey Findings** □

1. The Survey coverage was extensive and the critical positive momentum was achieved to launch a new organization.
2. There is sufficient support for a dues structure. Annually in the range of \$50-100.
3. Focus of the Organization (top 5 in order of priority)
  1. Continuing Education
  2. Professional Recognition
  3. Standards of Practice
  4. Represent the profession to government
  5. Serve as a forum for networking with my peers
6. Form a Foundation Team which will investigate an affiliation with the Canadian Medical and Biological Engineering Society (CMBES) at the national level.
7. A Foundation team (to be formed) will complete a detailed analysis of the survey feedback and incorporate it in planning and development of the new organization.

The 2007 Clinical Engineering Conference included a facilitated session on the formation of a new organization. Participants in this session provided additional information and feedback on key issues surrounding organizational development and focus.

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### Clinical Engineering Conference Outcomes

1. The top five elements of focus, identified during the survey, were confirmed.
2. Communication is critical to the success of the new organization
3. The initial work of the organization should be;
  1. Establish a board/executive
  2. Define its structure and regional representation
  3. Develop a terms of reference focused on Atlantic Canada
  4. Name the organization
  5. Confirm its potential membership
  6. Establish criteria for membership
  7. Establish a dues structure
  8. Define sources of non-dues related revenue
9. The ongoing work of the organization should be;
  1. Elect a board/executive
  2. Define its relationship with other organizations
  3. Review issues around certification of its members
  4. Formalize the annual conference as a function of the organization
  5. Poll members regarding development of the organization
  6. Develop a mission and vision statement
  7. Develop a constitution
  8. Establish an internet presence with discussion forum
  9. Define relationship with industry
  10. Establish support for those seeking certification
  11. Define relationship with educational institution.

### CMBES Chapter

Immediately following the 2007 Clinical Engineering Conference discussions were held, as part of an ongoing initiative of a subcommittee of CMBES, with the national organization regarding forming an Atlantic Canadian chapter. We were advised in the middle of May of 2007 that CMBES had decided, as part of their long term strategic planning, not to pursue the establishment of a chapters system. In discussion with Bill Gentles, President of CMBES, it was determined that CMBES would be open to discussion around an affiliation with the new Atlantic Canadian Clinical Engineering Organization.

### Halifax Meeting November 2007

The guidance document “How to Establish and Maintain a Local Biomedical Organization” was a useful blueprint for developing a clinical Engineering organization. It provided significant

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detail surrounding the many “next steps” in building on the early momentum we have established.

In November of 2007 the foundation team held its first meeting in Halifax. Approximately 40 Clinical Engineering professionals attended. The day’s events included a facilitated session on the development of a Mission and Values Statement for the new organization. The Halifax session also included an educational component that was intended to establish a precedent for all such future gatherings.



Foundation Team members (left to right) Paul Auffrey, Jason Symmonds, Jeremy Dann (team lead), Ron Johnson, Steven Lockyer, Dave Melnick, Stafford MacSwain, Jackie Shannahan

### **Winter 2007 - 2008**

Elections were held to establish the first executive of the new organization. A name that Organization contest was one of the first orders of business. Sponsored by Olympus medical the name Atlantic Canada Clinical Engineering Society was the winner, submitted by Christina McLaughlin from New Brunswick, of 7 submissions voted on by the clinical engineering community.

The first Executive of the Society Jeremy Dann, President Ron Johnson, Vice President Steven Lockyer, Publications Dave Hancock, Professional Affairs Kieth Keough, Education Dave Melnick, finance Paul Auffrey, Secretary Jason Symmonds, Education

### **Spring 2008**

The Newfoundland conference in the spring of 2008 marked the first time the event, championed for a dozen years by Paul Auffrey in Moncton, left New Brunswick and came under the wing of ACCES.

### **Summer/Fall 2008**

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The society incorporated in the summer of 2008, becoming a legal entity and allowing it to establish bank accounts, and conduct not-for-profit business activity.

### Spring 2009 □□□ □□□□□□□□□□

The ACCES logo contents wrapped up and the award for the best submission, and our new logo, was presented to Rick Stewart of the IWK Hospital in Halifax. The presentation was made at the May 2009 Atlantic Canada Clinical Engineering conference held in Halifax. The conference marked our first time in a conference hotel.