



CIC 2016

Canadian Immunization Conference

**December 6-8, 2016 | Shaw Centre
Ottawa, Ontario, Canada**

Summary Report

COLLABORATORS



CANADIAN ASSOCIATION FOR IMMUNIZATION RESEARCH AND EVALUATION (CAIRE)

CAIRE is a unique professional organization of more than 140 Canadian researchers dedicated to building the scientific foundation for optimal immunization programs. Members are involved in vaccine and program development, program evaluation, social science of vaccine use and training of the next generation of vaccinologists. CAIRE's mission is to encourage and enhance vaccinology research so Canadians have timely access to new and improved vaccines and optimal programs. CAIRE promotes collaboration and networking amongst the vaccinology disciplines to ensure that suitable expertise exists to maintain Canada as a world leader in high quality vaccinology research.



CANADIAN PAEDIATRIC SOCIETY (CPS)

The CPS is the national association of paediatricians, committed to working together to advance the health of children and youth by nurturing excellence in health care, advocacy, education, research and support of its membership. As a voluntary professional association, the CPS represents more than 3,000 paediatricians, paediatric subspecialists, paediatric residents, and other people who work with and care for children and youth.



CANADIAN PUBLIC HEALTH ASSOCIATION (CPHA)

Founded in 1910, CPHA is the independent voice for public health in Canada with links to the international community. As the only Canadian non-governmental organization focused exclusively on public health, CPHA is uniquely positioned to advise decision-makers about public health system reform and to guide initiatives to help safeguard the personal and community health of Canadians and people around the world. CPHA's mission is to enhance the health of people in Canada and to contribute to a healthier and more equitable world.



Public Health
Agency of Canada

Agence de la santé
publique du Canada

PUBLIC HEALTH AGENCY OF CANADA (PHAC)

The Agency is responsible for promoting and protecting the health of Canadians through leadership, partnership, innovation and action in public health. Through our research, programs and services, our goals are to bring about healthier Canadians, reduced health disparities, and a stronger capacity to deliver on and support public health activities.

INTRODUCTION

The Canadian Immunization Conference (CIC) is the biennial gathering of the wide range of individuals working in immunization from across Canada and internationally. Delegates include scientists and academics, front-line health service providers, public health professionals, policy makers, industry representatives, and students. From December 6-8, 2016 over 800 conference delegates discussed current trends in immunization, learned about the latest developments in the field, and established new and renewed existing professional relationships. This report summarizes the conference objectives, registration process, and several other conference components. It relies on delegate feedback to describe the conference experience, what worked well, suggestions for improvement, and lessons learned. Appendices list the conference committees, media report, and sponsors and exhibitors.

CONFERENCE OBJECTIVES

CIC 2016 provided a:

- Dynamic setting to profile new research, successful strategies and best practices, to inspire innovation and to encourage further collaborations
- Venue for new and returning vaccination stakeholders to collaborate, innovate and help shape the future of Canada's vaccination research, policies and programs
- Forum to improve knowledge translation across disciplines to identify, discuss and troubleshoot current vaccine- and immunization-related issues across a range of disciplines and sectors

LEARNING OBJECTIVES

Having attended CIC 2016, delegates are better prepared to:

- Utilize effective evidence-based programs and best clinical practices as well as policy approaches
- Describe vaccine-related research and identify colleagues and partners to develop initiatives
- Identify vaccination-related challenges and solutions, trends, emerging issues and evidence gaps

LEARNING STREAMS

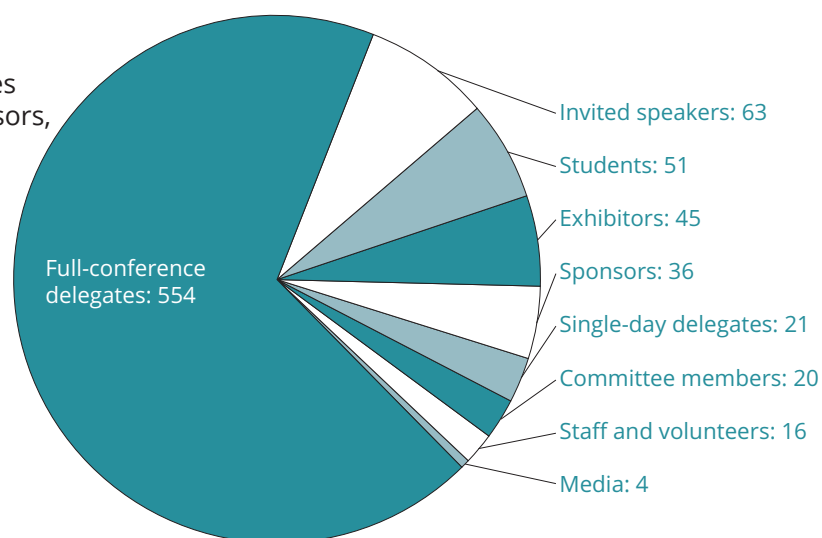
CIC 2016 was organized in a stream-based format, and multiple sessions were offered for each of the learning streams. Conference attendees had the opportunity to attend all sessions in one stream, or to select sessions of professional interest across several of the following streams:

- Immunizations in specific populations
- Making and implementing policy
- New developments in vaccines and their use
- Optimal practice
- Vaccine uptake and acceptance

REGISTRATION

A total of 810 delegates attended CIC2016, representing a variety of registration categories including speakers, students, exhibitors, sponsors, committee members, staff, volunteers, media, full-day and single-day delegates.

Of the registered delegates, 785 indicated their profession. Nurses (233) and Public Health Nurses (56) represented over 35% of registered delegates. Physicians (82) and Public Health Physicians (38) represented 15% of registered delegates. Students (30) composed close to 4% of registered delegates. Several other professionals from the biotechnology/vaccine industry, academia, pharmacy, and policy also registered.



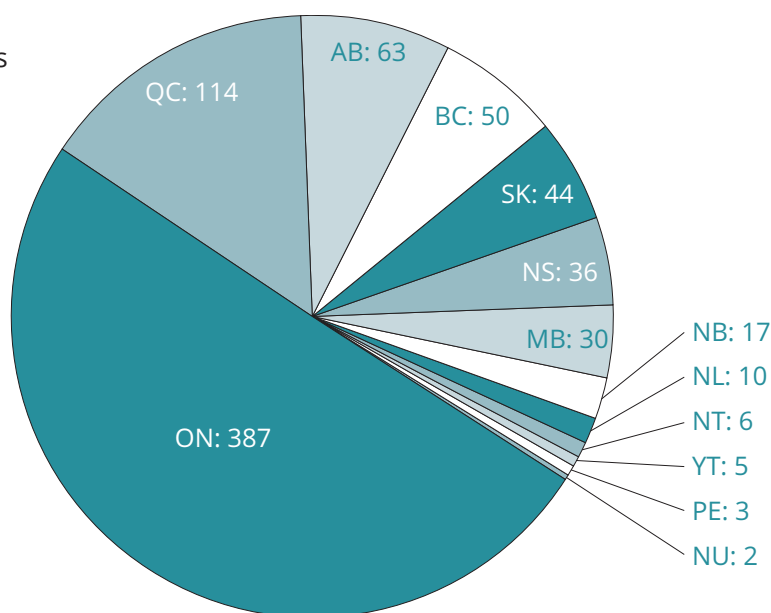
The majority of registered delegates came from Canada (98%). Nearly half the delegates from Canada were from Ontario (49%), and there was representation from all 13 provinces and territories in Canada.

There were 18 registered delegates (2%) from outside Canada, including the United States (16), Denmark (1), and United Arab Emirates (1).

CONFERENCE EXPERIENCE

Evaluation survey methodology

Following the conference, delegates were invited to complete an online evaluation to share their feedback on their overall conference experience and assess specific sessions. The online evaluation opened on December 13, 2016 and closed on January 9, 2017. A total of 295 delegates responded to the survey (response rate=36%), of whom 269 (91%) completed the survey, with a 24-minute completion time.



Overall conference experience

Delegates were asked to rate their overall conference experience, as well as various factors relating to the program structure, registration, location/duration, and accessibility, using a scale from 1 [very dissatisfied] to 5 [very satisfied]. The majority of respondents were either satisfied or very satisfied with the overall conference experience (94.9%) and related factors.

Conference experience	1	2	3	4	5
Overall conference experience:	—	—	5%	57%	38%
The conference as an opportunity to share information, network and engage with colleagues:	—	—	5%	50%	45%
The conference was well organized:	—	1%	3%	39%	57%
Conference registration process and communications:	—	—	5%	42%	53%
Conference location in Ottawa:	1%	1%	6%	31%	61%
Suitability of the conference dates, times and length:	1%	4%	9%	38%	48%
The availability and quality of conference material in English and French:	—	1%	10%	43%	46%

The majority of conference delegates were aware that CIC 2016 was held in collaboration with the Canadian Association for Immunization Research and Evaluation, Canadian Paediatric Society, Canadian Public Health Association, and Public Health Agency of Canada. The vast majority of evaluation respondents, 96% or greater, agreed or strongly agreed that the conference met all three of its learning objectives. Over three quarters (78%) of evaluation respondents met new and useful contacts at the conference and 98% felt their personal learning needs were met.

With respect to the conference program, delegates were asked to rate the quantity of the various sessions. The majority of respondents felt the right number of sessions was offered; however, some respondents felt that there were too few exhibits (21%) and too many poster presentations (12%). Some respondents lamented the high number of overlapping sessions.

CONFERENCE COMPONENTS

The Honourable Jane Philpott, Minister of Health, opened the conference with highlights of the Government of Canada's commitment to immunization as a vital public health measure. Canada's Chief Public Health Officer, Dr. Gregory Taylor, welcomed delegates on the second day of the conference and emphasized the need for collaboration and cooperation across all levels of government to address the challenges of emerging diseases and the resurgence of older, vaccine-preventable diseases.

Plenary sessions

There were four plenary sessions held over the course of CIC 2016. Using a scale from 1 [strongly disagree] to 5 [strongly agree], delegates were asked to evaluate the quality of the session and whether it met the respondents' expectations, the speakers' demonstrated knowledge and expertise, if there was appropriate interaction with the audience, whether the session met the stated learning objectives, and if the session was free from industry bias. Evaluation respondents also had the opportunity to provide open-ended comments.

PLENARY 1

Dr. John Waters Memorial Lecture

What have we accomplished in Canada's immunization programs in the past 25 years?

Monika Naus, Medical Director, Immunization Programs & Vaccine Preventable Diseases Service, BC Centre for Disease Control; Associate Professor, School of Population and Public Health, University of British Columbia

Dr. Naus reviewed changes to the Canadian landscape in immunization programs over the past 25 years and equipped delegates with approaches to strengthen support for, and evaluation of, public health immunization programs. A key message was the need for more federal/provincial/territorial coordination and cohesion around immunization programs and services as well as the need for vaccine registries for improved data collection systems. Her presentation was well received and delegates commented that it was a good choice for the opening plenary because it provided a high-level overview of immunization in Canada. Some evaluation respondents had hoped to hear about cutting-edge research rather than an historical overview.

"This was a particularly effective way to open the conference because [Dr. Naus] reminded us of the many stages required to achieve vaccine uptake and the ongoing issues to maintaining and expanding vaccine coverage in Canada."



PLENARY 2

Popular culture, vaccination and our bunk-filled world

Tim Caulfield, *Professor, Faculty of Law and School of Public Health & Research Director, Health Law Institute, University of Alberta; Canada Research Chair in Health Law and Policy*

Mr. Caulfield's presentation received the highest evaluation ratings of all four plenaries, however, among the 69 respondents who provided open-ended comments it was also clear that he produced polarized views among evaluation respondents. Many found him engaging and entertaining while others found him flashy and uninformative. There is no question that the speaker provoked delegates and sparked new ideas that continued to surface throughout the conference. Delegates appreciated hearing from someone outside of the health sector and were motivated to learn more about his work. In general, delegates hoped to have heard more about solutions to the challenging trends we are facing with respect to immunization myths and misconceptions rather than focusing almost entirely on describing the extent of the problem.

"Very engaging session with a person who has [...] scientific knowledge and understands the new communications landscape."



PLENARY 3

Global health trends in vaccination program failures worldwide

Laurie Garrett, *Senior Fellow for Global Health, Council on Foreign Relations*

Ms. Garrett's plenary was very well-received by delegates and received high evaluation ratings. Delegates appreciated her focus on the global impact of vaccines. Ms. Garrett's gloomy outlook left some delegates feeling deflated and it was not clear how the knowledge could be applied, particularly by front-line health providers. Some delegates commented on the overwhelming amount of information that was presented and that it was difficult to process. Overall, delegates mentioned she was a very engaging and passionate speaker.

"Ms Garrett identified many of the trends which threaten the success of vaccination worldwide and reminded us all of the impact of race, gender and class on the quality of health systems around the world. Her talk was a clarion call to work to create a more just and sustainable world."



PLENARY 4

Preventing cancer by vaccination: the HPV story

John Schiller, *National Institutes of Health
Distinguished Investigator, Center for Cancer
Research, National Cancer Institute*

The closing plenary by Dr. Schiller on the HPV vaccine received mixed reviews. Many respondents enjoyed his presentation, but the majority commented that it was overly technical and did not appeal to a broad audience. Several evaluation respondents mentioned it was perhaps not the best choice for the closing plenary. While he gave much detail about the science of the HPV vaccine, delegates wanted to hear more about the roll out process and major achievements. Delegates commented Dr. Schiller was an excellent speaker and was very enthusiastic about his subject matter.



"I was so impressed that you had a co-inventor of the HPV vaccine giving a lecture about the immunology of the HPV vaccine! It looks like we may be able to move towards one dose which would be incredible for low and middle income countries that suffer the greatest loss of life due to cervical cancer."

SYMPOSIUMS

There were 18 symposiums at CIC 2016 with a relatively even distribution across the five learning streams. Planned by members of the Organizing Committee (see Appendix A), each session included a session chair and between three and six invited panelists, resulting in over 80 invited speakers being included in the program. Learning stream leads were identified to guide the overall planning and development of each session and to ensure a well-rounded and cohesive program. As the program developed and the Organizing Committee approved the general topic ideas in each stream, the session leads were tasked with refining the focus and identifying speakers.

Using a scale from 1 [strongly disagree] to 5 [strongly agree], respondents evaluated each panel session on whether the session met the respondents' expectations, whether the speakers demonstrated relevant knowledge and expertise, whether there was appropriate interaction between presenters and the audience, whether the presentations met the stated learning objectives, and whether the session was free from industry bias. Evaluation respondents also had the opportunity to provide open-ended comments.

The symposiums were very highly rated by evaluation respondents and well-attended. There were several comments about the excellent speakers, range of viewpoints, and high level of expertise among presenters. In general, delegates appreciated a mix of presenters providing different perspectives, e.g. policy, research and practice. There were recurring comments that the sessions lacked practical advice that could be applied by front-line practitioners. In some cases delegates mentioned there were too many speakers, the presentations were rushed and there was insufficient time for audience interaction.

WORKSHOPS

New for CIC 2016 were workshop sessions that aimed to enhance the skills of delegates through a practical learning experience. The call for workshop submissions was launched on May 24, 2016 with a closing date of June 28, 2016. A total of seven workshops were offered at the conference across all five learning streams on diverse topics including motivational interviewing for immunization, pain mitigation at the time of vaccination, mumps vaccine effectiveness, evaluating new vaccine programs, universal influenza immunization program, interoperable immunization records, and maternal immunization against pertussis. Many evaluation respondents commented they enjoyed this interactive session format and would like to see more workshops at the next conference. Several delegates mentioned too much information was presented and there was insufficient time to promote meaningful knowledge exchange. Suggestions for improvement include ensuring a balanced mix of speakers, capping the number of participants to enable effective group work, restricting the time for individual presentations and limiting the number of discussion questions.

"Excellent workshop. I would like to see more of this activity for the next CIC."

ORAL ABSTRACTS AND POSTER PRESENTATIONS

A call for oral and poster submissions was launched on May 24, 2016 with a closing date of July 15, 2016. Two hundred submissions were received and evaluated using pre-defined criteria established by the Scientific Review Committee (see Appendix A). Sixty oral abstract and 125 poster presentations were accepted for presentation. Many of the high-scoring abstracts not selected for an oral presentation were offered the opportunity to present in a poster format.

The oral abstracts were organized into 10 sessions with five presenters each in an effort to combine interrelated and complementary presentations across the five learning streams. Two additional oral abstract sessions were held on the topic of electronic registries and Indigenous peoples' health. Between 2.3% to 11.4% of evaluation respondents attended oral abstract sessions that aligned with a conference learning stream. The two additional abstract sessions on electronic registries and Indigenous peoples' health were the most well attended by evaluation respondents with participation rates of 13.6% and 13.1%, respectively.

Respondents lamented attendance was low in the oral abstract sessions. Suggestions for improvement include grouping talks on similar topics and shortening the length of the session blocks, which would allow delegates to attend more sessions during the time block on specific topics of interest. Many delegates commented the presentations were of high quality, while others expressed concerns about the quality of evidence that was presented.

Close to 60% of respondents indicated that they attended the networking event with poster presenters on Wednesday, December 7. Feedback on the poster session was mixed. While some evaluation respondents felt the dedicated time was too long for the presenters, others did not feel there was enough time to view the posters and interact with presenters. Some respondents suggested keeping the posters on display for the entire conference. Another suggestion for improvement is to modify the poster room setup in such a way that allows for larger audiences to observe and engage with the presenters. Many commented on the impressive selection of posters and wonderful presenters.

Copies of the oral and poster abstract are available on the CIC 2016 website.



POLIO EXHIBIT

The Public Health Agency of Canada commissioned a polio exhibit at CIC 2016 that highlighted the public health success story of polio eradication efforts. The display included memory boards with written and video accounts of life with polio, a timeline of polio events in Canada, the Canadian contribution to the polio vaccine, global eradication efforts and artifacts curated from the Museum of Health Care in Kingston, Ontario. Artifacts included an iron lung, braces and therapeutic appliances used by polio survivors. Following an open call for submissions, approximately 25 personal stories were received and featured in the exhibit. The display highlighted the contribution of key scientists from the Connaught Medical Research Laboratories in the University of Toronto where researchers determined how to make large quantities of the vaccine and how to make the vaccine available for use in humans.



"As a historian, I was delighted to see the History of Polio display and very pleased that so many of the delegates actually took the time to view it. [...] Exhibits such as this provide a salutary reminder of the effort that it took to achieve control of childhood diseases."

NATIONAL IMMUNIZATION POSTER CONTEST

Immunize Canada, with funding from the Public Health Agency of Canada, organized the 2016 National Immunization Poster Contest for Grade 6 students. This contest provided students across Canada with an opportunity to submit works of art reflecting their ideas on immunization for good health. The objectives of the contest were to provide educational resources on immunization to teachers, and to initiate a dialogue between teachers, students and parents about the benefits of immunization. Prizes for the 2016 contest were donated by BIOTECANADA's Vaccine Industry Committee, the Canadian Paediatric Society, and Kaleidoscope Kids' Books (Ottawa). This year's national winner was Isabella Quinn from Bliss Carman Middle School in Fredericton, New Brunswick and the national runner-up was Bethany Antle from A.G. Baillie Memorial School in New Glasgow, Nova Scotia. There were an additional 10 poster winners from Canada's provinces. No entries were received from the Territories.



EXHIBIT HALL

Conference sponsors, exhibitors and collaborators had the opportunity to display an exhibit booth at CIC 2016. The seven conference exhibitors (see Appendix C) were invited to complete a separate online evaluation between December 14, 2016 and January 18, 2017 to rate various components of the exhibiting experience using a scale from 1 [poor] to 5 [excellent] and to share their feedback in open-ended comments. A total of four respondents started the survey (response rate=57%) with a 100% completion rate and a one-minute completion time.

The evaluation responses were generally positive. Respondents rated the registration process, information package, exhibitor kit and material handling services, move-in/move-out process and refreshment breaks as above average or excellent. Responses ranged from average to excellent with respect to the exhibit space and exhibit hours. Responses ranged from below average to excellent with respect to delegate traffic, networking opportunities and the overall exhibitor experience.

Some exhibitors noted that the facility was excellent, while others felt the exhibit area was uninviting for delegates which could explain the low traffic at the booths. Exhibitors noted that staff was friendly and helpful.

Delegates had the opportunity to comment on the exhibitor hall in the regular conference evaluation. They noted there were not enough booths to fill the exhibitor hall or to sustain two-hour lunch breaks. It was unclear why the booths were not on display for the entire conference. Suggestions for improvement include using a smaller room to foster greater interaction and to shorten the lunch break.



CO-DEVELOPED ACCREDITED LEARNING ACTIVITIES

There were four co-developed accredited learning activities at CIC 2016 on the topics of pneumococcal disease, HPV immunization, influenza and meningococcal disease. These sessions required pre-registration and were accredited by the Canadian Paediatric Society or the Association of Medical Microbiology and Infectious Disease Canada and complied with the accreditation guidelines and procedures of these organizations.

Approximately 15-26% of evaluation respondents attended these sessions, and rated them very highly overall with the exception of one session in which some delegates were disappointed by the unbalanced, biased views presented. Evaluation respondents rated the HPV immunization session very highly and commented it was an informative session that should be offered to all delegates. The influenza session was highly rated and delegates commented the information presented was useful and relevant. The session on meningococcal disease was well-received but one delegate mentioned some issues with the MenB vaccine were glossed over.

In general, it was unclear to evaluation respondents why participation in the co-developed sessions was limited and many were frustrated they were unable to access them.

BURSARY PROGRAMS

VACCINOLOGY STUDENT RESEARCH PROGRAM

Established in 2008 by the Canadian Association for Immunization Research and Evaluation (CAIRE), the Vaccinology Student Research Program encourages students to consider careers in vaccinology by exposing them to a wide cross-section of vaccinology-related research. CAIRE, with co-funding from the Canadian Institutes of Health Research and Meningitis Research Foundation of Canada, led the student travel bursary program to provide financial support to individuals who would not otherwise be able to attend CIC. In 2016, 17 students applied for the Vaccinology Student Research Program. All applicants were eligible to participate in the student poster session and the meet the expert networking sessions.

The applications were reviewed and evaluated by the Travel Bursary Committee based on pre-defined criteria. Following the review, funding up to a maximum of \$1200 plus conference registration was provided to 11 individuals to cover participation costs (travel, meals and accommodation).

The following 11 students received a travel bursary:

- Constantina Boikos – *Adverse effects of vaccination with live attenuated intranasal influenza vaccine in a pediatric cohort with Cystic Fibrosis*
- Bryon Brook – *BCG-induced granulopoiesis protects newborns from septic death*
- Sarah Buchan – *Vaccine effectiveness against laboratory-confirmed influenza hospitalizations among young children during the 2010-11 to 2013-14 influenza seasons in Ontario, Canada*
- May Elsherif – *Urinary pneumococcal antigen detection tests: Comparing diagnostic performance in adult community acquired pneumonia (CAP) and invasive pneumococcal disease (IPD)*
- Gabrielle Gaultier – *B-cell responses to 13-valent pneumococcal conjugate vaccine in patients with severe chronic kidney disease*
- Elisabeth McClymont – *Two-year efficacy of the quadrivalent human papillomavirus vaccine in a cohort of HIV-positive females*
- Ashleigh McGirr – *The health and economic burden of pertussis in Canada: A microsimulation study*
- Joanne McNair – *Impact of conjugate vaccines on Haemophilus influenzae type b (Hib) and Streptococcus pneumoniae in children with cancer: A report from the Canadian Immunization Monitoring Program Active (IMPACT)*
- Jennifer Tam – *Review of encephalitis and encephalopathy cases following Immunization Reported to the Canadian Immunization Monitoring Program ACTIVE (IMPACT) from 1992 – 2012*
- Maryline Vivion – *Vaccine hesitancy in the web 2.0 era*
- Joseline Zafack – *Risk of recurrence of adverse events following immunization: Results of 18 years of monitoring in Quebec, Canada*

BERNARD DUVAL FOUNDATION EDUCATION BURSARY

Dr. Bernard Duval was one of Canada's leading vaccinologists and made significant contributions to the immunization field in Canada. Dr. Duval was passionate about training future immunization researchers. His Foundation has been able to provide an educational bursary to a deserving participant in the Student Vaccinology Research Program. A Committee of reviewers rated the students' posters and three-minute oral presentations to select a recipient of this award, which was announced on December 8. Elisabeth McClymont was honoured for her presentation entitled *Two-year efficacy of the quadrivalent human papillomavirus vaccine in a cohort of HIV-positive females*.





ACCREDITATION

CIC 2016 was approved by the Canadian Paediatric Society for a maximum of 17.0 credit hours as an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada. The 17.0 credits included 3.75 hours allotted to the co-developed sessions, 4.5 credit hours allotted for Tuesday, December 6, 4.5 credit hours allotted for Wednesday, December 7 and 4.25 credit hours allotted for Thursday, December 8. To date, 97 physicians have requested Certificates of Completion and an additional 93 delegates have requested Certificates of Participation.

COMMUNICATIONS

The Canadian Public Health Association (CPHA) coordinated a communications group composed of representatives from all conference collaborating organizations (see Appendix A). The group was responsible for developing and implementing a communications plan that included both communications and media relations activities.

CPHA managed social media for the conference, including a Twitter profile and Facebook page. Activity on the Facebook page was minimal and did not include any interaction. The Twitter account received considerable traffic during the conference and has close to 200 followers. There was significant use of the hashtag #CIC16 by many conference delegates. Social media highlights were collated and summarized using Storify.

The communications group issued two news releases in conjunction with the conference. One featured 10 newsworthy oral abstracts that the communications group thought would resonate with journalists. The presenting authors gave their approval to be featured in the release and were available to conduct interviews. The other news release provided an overview of conference highlights and included quotes from the Minister of Health, the Chief Public Health Officer of Canada and all conference collaborators.

Immunize Canada and Merck also issued news releases in conjunction with CIC 2016. The former release profiled the Grade 6 national immunization poster competition winners and the latter highlighted new data from the largest ongoing observational study assessing shingles vaccine effectiveness presented at CIC 2016.

Four media representatives pre-registered for the conference, all of whom attended. Three additional media representatives registered on-site and attended some portion of the conference. Seven other media representatives made contact with CPHA's Communications Manager to request an interview with a conference speaker and/or delegate, but did not attend the conference. Coverage included a combination of print/online articles and radio interviews at the local and national levels. See Appendix B for a full media report.

A mobile app was available that enabled delegates to browse and search the conference program, build their own schedule, access detailed conference session information and share their experiences via social media.

MARKETING AND PROMOTION

CPHA managed a conference website, which served as a repository for conference information, including the collaborators, committees and sponsors; conference programs; a link to download the conference app; registration and travel information; and, an online media kit. Following the conference, the website was updated to include the speaker presentations.

Leading up to the conference, 8 electronic notices were sent out to a distribution list of registered CIC 2016 delegates and individuals who had attended past conferences to promote registration and provide them with relevant conference information as it became available. Social media was also used in advance of and during the conference to generate interest and raise visibility of CIC 2016.

CONFERENCE FACILITY

CIC 2016 took place at the Shaw Centre in Ottawa, Ontario. Some delegates commented the venue was excellent, accessible, well-laid out and easy to navigate while others disagreed and would have liked more signage. Several respondents noted the food was excellent. Some evaluation respondents commented it is time to change the location of the conference to another city in Canada and consider holding the conference at another time of year.

ON-SITE SERVICES

The Conference Secretariat provided a number of services at CIC 2016 to promote accessibility. Simultaneous interpretation (English and French) was available for all sessions with the exception of workshops. Free wireless internet access and a cyber café were available throughout the conference to enable delegates to stay connected. A media room was available for media representatives to conduct interviews.



LESSONS LEARNED

The following lessons learned stem primarily from suggestions made by evaluation respondents and can inform the planning of future conferences.

- Conference accreditation guidelines stipulate that all presenters disclose any industry bias. There is growing recognition that other types of biases abound; disclosures should therefore refer to all disclosures including those related to government and other relationships.
- To promote the greatest benefits for delegates and greatest cost-effectiveness for conference hosts, the Organizing Committee should re-examine the interaction and purposes of the print program, website, and mobile application.
- To enable large audiences and delegate interaction, future conferences should improve the poster setup and explore alternate formats for poster presentations, including electronic posters.
- Oral abstract presentations were grouped according to the conference learning streams, but it might be more helpful to organize them according to more specific topics.
- Lunch was two hours long to accommodate the co-developed accredited learning activities. Some delegates that were not attending the co-developed sessions felt this was long. The scheduling of the co-developed sessions will be reviewed for future conferences.
- While communications were made regarding the need to pre-register for co-developed sessions, due to space constraints and to promote optimal learning, not all delegates were aware and missed the opportunity to attend these sessions.
- Pharmacists are becoming increasingly involved in the provision of immunizations across Canada yet they represented less than 2% of CIC 2016 delegates. Efforts to engage pharmacists should be strengthened.
- Establishing an award for front-line service providers could be an important way to recognize their contributions to immunization efforts in Canada.
- The CIC audience is not homogeneous. It is comprised of delegates with clinical, research, policy and other backgrounds. More effort could be made to indicate the audience and the level of learning that can be expected for each session in the program.
- Future Conference Organizing Committees are encouraged to plan sessions that leave sufficient time for material to be covered and discussed.
- Workshops, that were a new addition to the scientific program in 2016, were very well received and should be continued in future conferences.
- There was a suggestion to include more “forward-looking” sessions to anticipate what might be coming down the pipeline.



APPENDIX A: CONFERENCE COMMITTEES

EXECUTIVE COMMITTEE

Ian Culbert (Chair)
Canadian Public Health Association

Marie Adèle Davis
Canadian Paediatric Society

Gordean Bjornson
Canadian Association for Immunization Research and Evaluation

Rhonda Kropp
Public Health Agency of Canada

ORGANIZING COMMITTEE

Ian Culbert (Co-Chair)
Canadian Public Health Association

Joanne Langley (Scientific Co-Chair)
Dalhousie University
Representing the Canadian Association for Immunization Research and Evaluation

Joan Robinson (Co-Chair)
Canadian Paediatric Society

Marc Brisson (Scientific Co-Chair)
Université Laval
Representing the Canadian Association for Immunization Research and Evaluation

Dianne Alexander
Canadian Immunization Committee

Brenda Bastarache
Canadian Nursing Coalition for Immunization

Gordean Bjornson
Canadian Association for Immunization Research and Evaluation

Andrea Coady (until April 2016)
First Nations and Inuit Health Branch, Health Canada

Marie Adèle Davis
Canadian Paediatric Society

Eve Dubé
Immunize Canada

Phil Emberley
Canadian Pharmacists Association

Christine Halpert
Canadian Nurses Association

Nathalie Labonte
Vaccine Industry Committee [BIOTECanada]

Isabelle Letourneau
Canadian Institutes of Health Research – Institute of Infection and Immunity

Victor Ng
College of Family Physicians of Canada

Marc Ouellette
Canadian Institutes of Health Research – Institute of Infection and Immunity

Nany Grimard Ouellette (from May 2016)
First Nations and Inuit Health Branch, Health Canada

Caroline Quach
Association of Medical Microbiology and Infectious Disease Canada & National Advisory Committee on Immunization

Patricia Salsbury
Public Health Agency of Canada

Jill Skinner
Canadian Medical Association

Marie-Claude Turcotte
Ottawa Public Health

SCIENTIFIC REVIEW COMMITTEE

Joanne Langley (Scientific Co-Chair)
Dalhousie University
Representing the Canadian Association for Immunization Research and Evaluation

Lucie Marisa Bucci
Immunize Canada
Representing the Canadian Public Health Association

Cora Constantinescu
University of Calgary
Representing the Association of Medical Microbiology and Infectious Disease Canada

Marc Brisson (Scientific Co-Chair)
Université Laval
Representing the Canadian Association for Immunization Research and Evaluation

Shelley McNeil
Dalhousie University
Representing the Association of Medical Microbiology and Infectious Disease Canada

Christina Jensen
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Katie Kennedy, Canadian Paediatric Society
Rebecca Gilman, Health Canada and the Public Health
Agency of Canada
Roslyn Nudell, Public Health Agency of Canada

CONFERENCE SECRETARIAT

Sarah Pattenuzzo, Conference Manager, Canadian Public Health Association
Alexie Arseneault, Conference Officer, Canadian Public Health Association

APPENDIX B: MEDIA REPORT

Output: News release: Canadian Immunization Conference features latest immunization research

(10 newsworthy oral presentations)

Coverage:

1. Radio-Canada Toronto interview with Maryline Vivion: http://ici.radio-canada.ca/emissions/ca_parle_au_nord/2016-2017/archives.asp?date=2016/12/06&indTime=425&idmedia=7644983
2. CMAJ News interviews with Kumanan Wilson and Robert Van Exan: <http://cmajnews.com/2016/12/08/new-ways-to-sway-vaccine-hesitant-parents-cmaj-109-5371/>
3. CFX 1070 (Victoria) interview with Julie Betingier and Devon Greyson: <http://www.iheartradio.ca/cfx-1070/shows/adam-stirling-1.1896160>
4. Ottawa Citizen interview with Devon Greyson: <http://www.torontosun.com/2016/12/05/understanding-why-some-parents-are-hesitant-about-vaccines-2>
5. Ottawa Citizen Editorial Board: <http://ottawacitizen.com/opinion/editorials/editorial-get-the-flu-shot-ottawa>
6. Ottawa Citizen interviews with Sherilyn Houle, Shelly McNeil and Danuta Skowronski: <http://www.ottawasun.com/2016/12/06/repeat-flu-shots-are-effective-right-mounting-evidence-questions-that-advice>

Output: News release: 12th annual Canadian Immunization Conference

Coverage:

1. VOXM (St. John's) interview with Cathy O'Keefe and Gillian Butler: <http://vocm.com/news/nl-celebrated-for-high-immunization-rates/>
2. 1310 News interview with Danuta Skowronski: http://pmd.1310NEWS.com/podcast/07-Dec-16_Hour4.mp3
3. Talk Radio AM640 in Toronto interview with Danuta Skowronski: <http://www.640toronto.com/2016/12/08/197529/>

Cancelled/Declined:

1. CBC morning interview request with Elspeth Kirkman: Cancelled
2. Arlene Byron show for SiriusXM interview request with Danuta Skowronski: Declined

Output: News release: Grade 6 students create original art for immunization awareness

Coverage:

1. CBC News Prince Edward Island: <http://www.cbc.ca/news/canada/prince-edward-island/pei-immunization-poster-1.3887334>

APPENDIX C: SPONSORS AND EXHIBITORS

SPONSORS

Platinum



Gold



Silver



Contributor



EXHIBITORS

CANImmunize
CardioMed Supplies
GSK Medical Information
Immunize Canada
Médecins Sans Frontières
Scientific Technologies Corporation
VeriCor