



ACIPC

Australasian College
for Infection Prevention and Control

ACIPC Credentialling Package

Credentialed Infection
Control Professional
(Primary, Advanced, Expert)

ACIPC CREDENTIALLING APPLICATION PACKAGE

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Part 1:

Instructions to Applicants

INTRODUCTION TO CREDENTIALLING

Congratulations on applying to become an ACIPC Credentialed Infection Control Professional – CICP. This action demonstrates your commitment and dedication to your professional development.

Credentialling is the establishment of a self-regulatory process instituted by the appropriate professional body to determine and acknowledge that an individual has demonstrated the prescribed competence for specialist practice. Credentialling will:

- Designate specialist or advanced expertise
- Inform consumers
- Establish a national standard
- Promote career advancement
- Identify a community of experts
- Contribute to qualifications for independent practice
- Enhance the quality of care provided
- Assist employers to manage risk.

For infection control professionals, credentialling provides a clear industry-recognised pathway whereby you can demonstrate the necessary knowledge, skills and attributes to be recognised by your peers as a Primary, Advanced or Expert Credentialed Infection Control Professional. All applications are reviewed by a panel of infection control professionals who have a wealth of knowledge and experience in a range of practice contexts. As a credentialed ICP, you are professionally committed to excellence in practice as evidenced by your willingness to undergo peer review. When awarded, the credential carries the imprimatur of the College as the peak professional body for infection prevention and control in Australasia.

For employers, credentialling helps you to meet current health regulations and health consumers' demand that the care provided by health professionals in your organisation is safe, effective and efficient. Inherent in establishing this culture of patient safety is the requirement to minimise the risk of healthcare-associated infection. The primary tenet underpinning all healthcare provision is that health professionals "first do no harm". The discipline of infection prevention

and control comprises health professionals who are able to assess each practice context and healthcare interaction for potential infection risks, and apply evidence-based principles to recommend strategies to mitigate these risks. Furthermore, these professionals undertake a range of activities to evaluate the outcomes of these strategies and refine them as required.

As employers, you can and should expect that individuals seeking employment in infection prevention and control programs, or in roles that have a significant infection control component, have been credentialed by the peak professional body in infection prevention and control. Inclusion of an ACIPC credential as a requirement for employment will provide you with the confidence that your infection control professionals have a commitment to maintaining the necessary knowledge, experience and attributes to meet the challenges of contemporary healthcare. The requirement for re-credentialling every three years will ensure that staff maintain currency through ongoing professional development and peer review.

For health consumers, you have the right to expect and receive high quality and safe health care. You also have the right to be advised on the foreseeable risks of healthcare-associated infection and to be informed of, and consent to, strategies to mitigate these risks. As a consumer, you can have confidence that this is the case when receiving care from a facility or service where the infection control program is led and staffed by ICP who are credentialed by the Australasian College for Infection Prevention and Control.

LEVELS OF CREDENTIALLING

There are 3 levels of ACIPC Credentialling available to infection control professionals:

| PRIMARY CICP

The Primary CICP demonstrates the knowledge, attributes and behaviours in infection control at a basic level. They have participatory responsibility for infection control in their setting. They defer to the expertise of an Advanced or Expert ICP and/or fulfil some infection control responsibility in accordance with specific legislation and standards of practice. This may include hand hygiene auditing, acting as a link nurse, or a person who is involved in reprocessing reusable equipment. It is expected that they will routinely practice in accordance with relevant guidelines and the

best available evidence, and actively seek the advice of Advanced and Expert CICPs in applying core principles to new, unfamiliar or challenging circumstances.

| ADVANCED CICP

The Advanced CICP demonstrates the knowledge, attributes and behaviours in infection control at an advanced level. They have leadership responsibility for one or more elements of an infection control program in their setting. They would defer to an Expert ICP for guidance and oversight in co-ordinating an entire program. It is expected that they will act as role models to Primary ICPs and practise in accordance with relevant guidelines and the best available evidence, and actively seek the advice of Expert CICPs in applying core principles to new, unfamiliar or challenging circumstances.

| EXPERT CICP

The Expert CICP demonstrates the knowledge, attributes and behaviours at an expert level. They plan, implement, review and evaluate comprehensive infection control programs. They take a leadership role in terms of research and knowledge generation and contribute to the evolution of the discipline of infection control. They act as role model and mentor to Primary and Advanced ICPs and in accordance with relevant guidelines and the best available evidence, and work collaboratively with other Expert CICPs in applying core principles to challenging circumstances and generating new evidence for practice.

ELIGIBILITY

Applicants should consider the various requirements for each level in order to determine the level of credential that is most applicable to their individual situation.

To **apply** for and **maintain** ACIPC credentialing you will need to meet relevant criteria across 5 prescribed domains. These are detailed in Table 1:

- 1. Relevant Vocation:** Applicants must identify as belonging to an eligible vocation for the particular level of credentialing. Based on the specific level of credentialing for which you are applying and if you practice as a registered clinician you may be required to hold an unrestricted licence as Registered Nurse or Registered Medical Practitioner with the Australian Health Practitioner Regulatory Authority, the Medical Council of New Zealand or the Nursing Council of New Zealand or the relevant agency in the country in which you practice.
- 2. Prerequisites:** Applicants must be a current financial member of ACIPC and be working within their Relevant Vocation based on the level of credentialing. Applicants must meet the experience requirements

of the relevant level of credential for which you are applying by being currently employed (full or part-time) or self-employed in a role that is designated as an infection prevention and control role or includes a specific element of infection control such as hand hygiene auditing, infection control link nurse or reprocessing reusable equipment part-time. This should be demonstrated in your curriculum vitae.

- 3. Knowledge Requirements:** There are specific formal educational requirements for all levels of credentialing. Primary CICPs must complete the ACIPC Foundations of Infection Prevention and Control Course or equivalent as approved by ACIPC, and the Advanced CICP and Expert CICP credentials include requirements for formal specialist tertiary qualifications in infection control. Tertiary qualifications achieved at international institutions will be considered to meet these requirements if they are named and are consistent with the relevant Australian Qualification Framework (AQF) level.
- 4. Attitudinal Requirements:** Applicants are required to undergo Peer Review and tender a Critical Reflective Narrative Submission in accordance with requirements of the level of credentialing.
- 5. Practice Requirements.** Applicants are required to submit a curriculum vitae that provides a comprehensive summary of specific information as set out in this guide and submit a Professional Portfolio Submission in accordance with requirements of the level of credentialing. In doing so applicants must demonstrate to the satisfaction of the ACIPC Credentialing and Professional Standards (CAPS) Committee that you have achieved competency in prescribed areas of practice, engage in reflective practice and demonstrate commitment to ongoing professional development. This will be demonstrated in the reflective narrative(s) you provide.

If the application is successful the credential is awarded for three years after which the individual must either apply for recredentialing at the same level, or apply to be credentialed at a higher level assuming that they have completed the necessary education and experience to meet the requirements of the next credentialing level.

RELEVANT VOCATIONS

PREREQUISITES

P

Primary Credentialled Infection Control Professional (CICP – P)

Nurses, Doctors, Scientists, Dentists, Epidemiologists, Veterinarians, Allied Health Professionals, Public Health and Environmental Health Professionals, Child Care Workers, Pharmacists, Occupational Health Industry Representatives, Midwives, Ambulance Paramedics, Defence Health Workers, Personal Care Professionals (tattooists, hairdressers, piercers etc.), Funeral Attendants, others on a case-by-case basis.

- Current financial membership of ACIPC
- Working >12 months part time in infection prevention and control where an aspect of infection control was an explicit focus of your role.

A

Advanced Credentialled Infection Control Professional (CICP – A)

Registered Nurses, Doctors, Scientists, Epidemiologists, Dentists, Veterinarians, Pharmacists, Midwives, Ambulance Paramedics, others on a case-by-case basis.

- Current financial membership of ACIPC
- Working >3 years part time in infection prevention and control where infection control was a major focus of your role.

E

Expert Credentialled Infection Control Professional (CICP – E)

Registered Nurses, Doctors, Midwives, Ambulance Paramedics, others on a case-by-case basis.

- Current financial membership of ACIPC
- Working >5 years in infection prevention and control where infection control was the primary purpose of your role.

KNOWLEDGE REQUIREMENTS

- Complete ACIPC Foundations of Infection Prevention and Control Course, or equivalent as approved by ACIPC
- Complete ACSQHC Infection Control modules
- Complete one of the Hand Hygiene Australia modules.

ATTITUDINAL REQUIREMENTS

- Peer review
- Critical Reflective Narrative submission on your role over the last twelve (12) months of your work and your professional development plan for the next three (3) years.

PRACTICE REQUIREMENTS

- Curriculum vitae
- Portfolio submission describing one of the following:
 - a) A specific outbreak situation, or
 - b) Infection control quality improvement activity, or
 - c) Infection control policy/procedure development/implementation/review, or
 - d) Based on your role in infection prevention and control including a critical reflective narrative on your perceptions of the skills and knowledge a person at an advanced level would demonstrate in the situation and what you would need to do to develop the same level of knowledge and skills.

Complete AQF 8 Graduate Certificate in Infection Prevention and Control as approved by the ACIPC.

- Peer review
- Critical Reflective Narrative submission comprising three (3) narratives: one on your role including how it relates to, or supports, your local infection control program; and two from the following:
 - A specific outbreak situation, or
 - Infection control quality improvement activity, or
 - Infection control policy/procedure development/implementation/review, or
 - Education project.

- Curriculum vitae
- Giving Back Portfolio – Describe how you contribute to the profession (eg sitting on a committee, research, presenting at conferences), including a reflection identifying where your expertise lies.

Complete AQF 9 Master of Infection Prevention and Control (or higher doctoral qualification) as approved by the ACIPC.

- Peer review
- Critical Reflective Narrative Submission comprising three (3) narratives:
 - Role,
 - Knowledge generation,
 - Infection control evolution.

- Curriculum vitae
- Giving Back Portfolio – Describe how you contribute to the profession (eg sitting on a committee, research, presenting at conferences), including a reflection on maintaining yourself as an expert.

ASSESSMENT PROCEDURES

- The ACIPC Credentiaiting and Professional Standards Committee (CAPS) will be responsible for assessing applications. The applicant will be identified to the Committee during the credentiaiting process.
- The ACIPC CAPS Committee formally assesses all applications in accordance with the criteria outlined in this document and makes a recommendation to the ACIPC Board of Directors as to whether the applicant meets the requirements for credentiaiting. The credential can only be awarded on the basis of the evidence supplied by the applicant. Should any CAPS Committee members require clarification of a point from the applicant's peer reviewer they will notify the Committee Chair so that all points requiring clarification are addressed during one contact with the peer reviewer.
- The final decision to award the credential will be made by the ACIPC Board of Directors based on the recommendations from the Chair of the CAPS Committee.
- The credential is awarded for a period of three years after which the individual must either apply for recredentiaiting or apply to be credentiaited at a higher level.

APPLICATION ADVICE

- When compiling your submission please refer to the information given in Part 2 – Application Forms to ensure all criteria are met for each section.
- A checklist is provided in Part 2 – Form 6 to ensure you have included all the required information, including the signed declaration form.
- Ensure that you observe the maximum word counts for relevant sections.
- All applications must be submitted electronically to the ACIPC secretariat via email to: admin@acipc.org.au
- Certified copies of qualifications and current practising certificate (as relevant) must be mailed to *ACIPC, 228 Liverpool Street, Hobart, TAS 7000*. Certified copies can be provided as a photocopy of the original documents sighted and signed by a Justice of the Peace, Commissioner of Declarations, Notary Public or other authorised official. Please note that the certification must be placed on the printed side of the documents, not the reverse side.

APPLICATION FEES AND PAYMENTS

The ACIPC Board of Directors sets the costs associated with applications for credentiaiting.

For information regarding the current application fees and payment schedule please refer to the Credentiaiting Section of the ACIPC website: www.acipc.org.au

SUCCESSFUL APPLICATIONS

- A certificate will be mailed to you and you will be entitled to use the post-nominal associated with the credential awarded: CICP-P, CICP-A, or CICP-E for three (3) years.
- A public database of Credentiaited Infection Control professionals (CICP) is maintained by ACIPC on the website. Credentiaited Infection Control professionals will be profiled in various ACIPC communications. Names are removed from the database at the end of the three year period of the credential unless the individual has been recredentiaited or credentiaited at a higher level.

UNSUCCESSFUL APPLICATIONS

An initial application for credentiaiting may be unsuccessful for two reasons:

- (a) The application requires clarification and resubmission or the revised application is not submitted within a specified time frame. The ACIPC CAPS Committee may seek clarification from you regarding one or more aspects of your application. The CAPS Committee Chair will notify you in writing if components of your application require clarification. The correspondence will provide feedback detailing the areas of deficit and suggestions for how the application can be improved. You will be required to submit a response and/or revisions within a stated timeframe. If a revised application is not submitted within this timeframe the application will formally lapse and be deemed unsuccessful.
- (b) The application is deemed unsuccessful. If the CAPS Committee has assessed that the application has not met the requirements for credentiaiting, the Chair will notify the applicant in writing. The correspondence will provide constructive feedback detailing the areas of deficit. If you wish to resubmit a full application within twelve (12) months there will be a resubmission cost. If you wish to appeal the decision, follow the appeal process outlined below.

PROCEDURES FOR APPEAL

Unsuccessful applicants are encouraged to review and reflect on the comments provided by the ACIPC CAPS Committee along with their application before commencing an appeal.

Applicants may initiate discussion with the CAPS Committee Chair, or their delegate, to seek clarification which may aid in understanding why the application was unsuccessful. Such discussions usually provide answers to any questions and resolution to any concerns an applicant may have.

Applicants have grounds for appealing the decision of ACIPC to not award a credential if he/she can demonstrate that:

- (a) the process for reviewing the application (as outlined in the marking guidelines) was not correctly followed, or
- (b) the applicant is able to provide information indicating that not all the evidence was in line with the application guidelines was considered in the marking process.

In the event that an unsuccessful applicant disagrees with ACIPC's decision not to credential, the following process must be followed:

1. An appeal must be lodged with supporting evidence to the ACIPC President via the ACIPC Secretariat within fourteen (14) working days of receiving written feedback from ACIPC outlining why the credential was not awarded provided by the ACIPC CAPS Committee Chairperson.
2. The ACIPC President shall acknowledge receipt of the appeal in writing, and request relevant documentation from the Chairperson of the ACIPC CAPS Committee including the original (unmarked) copy of the application, and any other documents or correspondence with the applicant.
3. The ACIPC President shall convene an Appeal Tribunal comprising four (4) members of the ACIPC Board and the members of the CAPS Committee to hear the appeal. This meeting (by teleconference) shall be convened as soon as possible.
4. If the tribunal finds that the appeal does not meet the grounds for appeal the applicant's objection will be denied and the earlier decision will be upheld.
5. If the tribunal finds that the applicant's appeal is in accordance with the grounds for appeal the objection will be upheld and the applicant will be invited to resubmit his/her application to ACIPC at no additional cost.
6. If the applicant is again unsuccessful the applicant and the ACIPC Board will be notified of the decision in writing.
7. The decision of the Appeals Tribunal is final.
8. The applicant will have only one opportunity for appeal.

If the applicant is unsuccessful following appeal, the credential will not be awarded and the applicant will be excluded from submitting a new application for a period of twelve (12) months.

RECREDENTIALLING

The credential is valid for three (3) years. Towards the end of the third year of your credential you will be sent an invitation to apply for recredentiailling. A recredentiailling application package will be provided and the fees associated with the process available on the College website. Credentials that lapse more than six (6) months past the due date and the holder will be required to undertake a new credentiailling application process. Please refer to the ACIPC Recredentiailling Application Package.

CICPs originally credentiailled at Primary or Advanced level may choose to apply for a higher level of credential when the terms of their original credential expires. These CICPs should use the ACIPC Credentiailling Application Package to apply for the higher level credential.

SUBMISSION GUIDELINES

The following information provides advice regarding evidence that is required for the various prescribed domains of the credentiailling standard.

| RELEVANT VOCATION

Applicants must provide documentary evidence of their professional standing within an eligible Relevant Vocation for the particular level of credentiailling. Based on the specific level of credentiailling for which you are applying and if you practice as a registered clinician you may be required to hold an unrestricted licence as Registered Nurse or Registered Medical Practitioner with the Australian Health Practitioner Regulatory Authority, the Medical Council of New Zealand or the Nursing Council of New Zealand or the relevant agency in the country in which you practice. For more information, please contact the CAPS Committee.

| PREREQUISITES

- Applicants must be currently financial members of ACIPC to be eligible to apply. The College Secretariat will provide evidence on this to the CAP Committee on receipt of your application.
- Applicants must provide documentary evidence of their employment and experience requirements of the relevant level of credential for which they are applying by being currently employed (full or part-time) or self-employed in a role that is designated as an infection

and prevention role or includes a specific element of infection control such as hand hygiene auditing, infection control link nurse or reprocessing reusable equipment part-time. Suitable documentation includes statements of service, official letters from supervisors or employers and other similar documentation attesting to this requirement. This information should be consistent with the curriculum vitae.

| KNOWLEDGE REQUIREMENTS

Applicants must provide evidence of completion of the prescribed education relevant to the specific credentialing level for which they are applying as outlined in Table 1. Certified copies of certificates and qualifications must be submitted.

| ATTITUDINAL REQUIREMENTS – PEER REVIEW

The purpose of this peer review is to provide support for your application to be credentialed. Specifically the peer reviewer will be asked to provide comment on your professional and ethical practice and interpersonal skills by addressing a number of points relevant to the credential for which you are applying.

The applicant must identify a suitable peer reviewer as per the essential criteria described below, and request a confidential peer review be provided directly to the ACIPC CAPS Committee via the ACIPC Secretariat.

- The peer reviewer is a professional colleague who meets the following criteria:
- Has known the applicant in a professional capacity for a minimum period of six (6) months;
- Has worked closely with the applicant as a peer or as a supervisor, or in the case of the self-employed ICP, the reviewer may be a client who has contracted the services of the ICP;
- Agrees to handle all information associated with this application in confidence; and,
- Is willing to be contacted by the ACIPC CAPS Committee should clarification be necessary in relation to any information provided in the application.

| ATTITUDINAL REQUIREMENTS – CRITICAL REFLECTIVE NARRATIVE SUBMISSION

Reflective practice allows the individual to process their professional experiences and explore their understanding of what they are doing, why they are doing it and the impact it has on themselves and others. It is a crucial professional activity intrinsic to learning¹, will stimulate self-awareness and personal growth² and is a critical skill for effective functioning in complex practice situations³. For these reasons the ACIPC credentialing process places significant

emphasis on reflection as part of the assessment criteria.

How to write a critical reflective narrative

As a general guide each reflective narrative must:

- Be between 500-1500 words long
- Be written in the first person

In your narrative, answer the following key questions:

- What was the situation?
- What happened in the situation?
- How did you go about it?
- Why did you go about it that way?
- What was the outcome?
- What did you do well?
- What could you have done better?
- What would you do differently next time?
- What other steps would you take as a result of this reflection?

Describe your actions, thoughts, feelings and observations experienced during the episode. The narrative should include a description of what went well during the episode and why you thought so; a description of what did not go well (i.e. the challenges and barriers you encountered), and why you thought the strategies you had put into place were not successful. Review behaviours, interactions, feelings and thoughts that you identified throughout the event/activity and consider strategies that may have altered the outcomes. Identify your strengths and limitations. Outline learning objectives from your limitations that identify a skill to be practiced or knowledge to be gained and how you plan to achieve this. Support your narrative with evidence relevant to the chosen activity (copies of peer reviewed publications, conference presentations, education activities, committee activity, other activities).

There are specific reflective submission requirements for each level of credential and they are described below.

CICP-Primary

The applicant must provide a reflective review of their infection control role over the past twelve (12) months and address the following:

1. Describe the greatest challenge(s) you have faced in your role in this time.
2. What did you learn about yourself while responding to the challenge(s)?
3. In terms of your response what do you think you did well?
4. What would you do differently in similar circumstances?
5. Outline your professional development plan for the next

three years and identify how your experience over the last twelve (12) months has influenced your plan.

CICP-Advanced

1. The applicant must provide three (3) reflective submissions in total. Each should contain a maximum of 1500 words. The first critical reflection is prescribed as follows:
2. A description of your infection control role and how it relates to and/or supports the rest of the program. Include in this reflection your perception about the way you interact with other members of the IP&C team and other members of the organisation outside the team. Identify the skills, knowledge and attributes critical to success in your role and your strengths and weaknesses in relation to them. What professional development activities have you planned to address your weaknesses?
3. The remaining two (2) must be chosen from the following options:
4. A detailed description of a specific outbreak situation you have managed or been involved in managing including: a critical review of the scientific literature; the process used for data collection; measures taken to contain the outbreak; actual or potential legal and/or ethical issues associated with the outbreak; a reflective commentary on your professional development and learning progress as a result of your role in this event.
5. A detailed report on a quality improvement activity you have implemented in your infection prevention and control capacity. The report should include: the aim of the quality improvement activity; how the activity was identified as necessary; the methods used to develop and implement the activity; the results/outcome of the project; an evaluation of the activity including any feedback received, and a reflective commentary on the lessons you learned through conducting this activity.
6. A detailed description of an IC policy/procedure you have developed and implemented within your workplace including: the scope and intent of the policy/procedure; the literature review/evidence base underpinning the policy/procedure; how you set about implementing the policy/procedure; how you evaluated the success/compliance with the policy/procedure; and a commentary on the lessons you learned through the process.
7. A detailed account of an educational program/project (e.g. health promotion or staff/patient teaching) you have implemented including: the background to the program/project; the objectives; the design of the program including intended audience, relevance of topic, learning principles; implementation and teaching methods; how the program was evaluated and the results of the evaluation. Include any examples

of education materials/teaching aids developed in conjunction with the project; and a commentary on the lessons you learned through the process.

CICP-Expert

1. The applicant must provide three (3) reflective submissions as prescribed below. Each should contain a maximum of 1500 words.
2. A critical review of your role in infection prevention and control over the past three (3) years, the major challenges you have faced in the role in that time, the professional strengths and weaknesses identified as you responded to the challenges, the steps you have taken to address your weaknesses, and the lessons you would take from this experience and use when mentoring ICP with less experience.
3. A critical narrative review of your activities over the past three (3) years in relation to infection prevention and control knowledge generation. Include the reason you identified this specific area of need, what you hoped to achieve by undertaking the activities and how you evaluated your success. In retrospect what would you do differently and why?
4. A detailed account of how your infection prevention and control program has evolved over the past three (3) years including the role of political, economic and cultural imperatives on this evolution. To what extent do you feel you planned and directed the evolution? Identify your perception of the next major challenge for IP&C programs and what action you have taken or are taking to prepare.

| PRACTICE REQUIREMENTS – CURRICULUM VITAE

The prescribed format for your curriculum vitae is provided below. Please ensure any documents pertaining to qualifications and/or professional registration are certified as true copies by a Justice of the Peace, Commissioner of Declarations, Notary Public or other authorised official. Please note that the certification must be placed on the printed side of the documents, not the reverse side.

Professional Qualifications:

List in reverse chronological order (most recent first) all relevant qualifications, including tertiary courses and certificates. Include current studies and planned year of completion. Use the marking guide in Part 2 of this package to assist in identifying the information required.

Awards:

List any awards or grants you have received and include certified copies of the awards/grants.

Employment History:

List in reverse chronological order, all relevant professional

experience commencing with your current employer and referees to enable verification by ACIPC. Use the marking guide in Part 2 of this package to identify the amount of experience required for the specific credential level and ensure this is demonstrated in this section of your CV.

Continuing Education:

List all relevant continuing education programs you have attended over the past three (3) years e.g. short courses, workshops, seminars and conferences.

Professional Activities:

Provide a description of all professional activities in which you have been involved over the past three (3) years. Your description should include your level of involvement and the duration of your involvement at this level. The ACIPC Infection Control Practice will assist you in ensuring you include relevant professional activities.

Education and Research:

List and provide a brief description of your participation in any significant/ relevant education and/or research endeavours over the past three (3) years. List all publications using a standard referencing format.

Quality Improvement Activities:

Provide a brief description of any quality improvement activities you have implemented in your infection prevention and control role in the past three (3) years.

Other Activities:

List any other activities or achievements over the past three (3) years that you believe will support your application.

I PRACTICE REQUIREMENTS – PORTFOLIO

There are specific practice requirements for each level of credential and they are described below.

CICP-Primary

Prepare a reflective narrative on one of the topics listed and provide a detailed description of the event including your role and reflect on a colleague/supervisor working at a more advanced level and identify the skills and/or knowledge they demonstrated when managing the issue. Compare and contrast these attributes with your own and identify what specific skill or knowledge you would most like to develop and what strategies you can implement to develop the skill/knowledge. Identify whether and to what extent the colleague you identified previously would be able and/or willing to assist/support you in this endeavour. Topic options include:

- (a) A specific outbreak situation, or
- (b) Infection control quality improvement activity, or
- (c) Infection control policy/procedure development/ implementation/review, or

- (d) Based on your role in infection prevention and control including a critical reflective narrative on your perceptions of the skills and knowledge a person at an advanced level would demonstrate in the situation and what you would need to do to develop the same level of knowledge and skills.

CICP-Advanced

Giving Back Portfolio – The portfolio submission required for this level of credential relates to contributing to the profession of infection prevention and control. Describe how you contribute to the profession (e.g committee membership, research, presenting at conferences), including a reflection identifying where your expertise lies. The account should include reflection that specifically identifies your emerging areas(s) of expertise.

CICP – Expert

Giving Back Portfolio – The portfolio submission for the expert CICP also relates to contributing to the profession of infection prevention and control. Describe how you contribute to the profession (eg sitting on a committee, research, presenting at conferences), including a reflection on maintaining yourself as an expert.

¹ Levett-Jones, T.L. (2007). Facilitating reflective practice and self-assessment of competence through the use of narratives. *Nurse Education in Practice*, 7(2): 112-119

² Canniford, L.J., Fox-Young, S. (2015). Learning and assessing competence in reflective practice: Student evaluation of the relative value of aspects of an integrated, interactive reflective practice syllabus. *Collegian*, 22(3): 291-297

³ Freshwater, D., Stickley, T. (2004). The heart of the art: emotional intelligence in nurse education. *Nursing Inquiry*, 11(2): 91-98.

Part 2:

Applicants Forms

The forms that follow are for illustrative purposes only. When making an application please download the relevant respective PDF writable forms from the College website at: www.acipc.org.au





ACIPC
Australasian College
for Infection Prevention and Control

APPLICATION FORMS

ACIPC Credentialing Package

ILLUSTRATIVE PURPOSES ONLY

Credentialed Infection
Control Professional
(Primary, Advanced, Expert)

PART 2

Application Forms

FORM 1: APPLICATION FORM AND DECLARATION

Please indicate the level of credential for which you are applying:

- CICP-P (Primary)
- CICP-A (Advanced)
- CICP-E (Expert)

Personal Details

Name:

Preferred Postal Address:

Home Phone:

Mobile Phone:

Personal Email Address:

Work Details

Place of Employment:

Work Address:

Work Phone:

Work Email Address:

Declaration

I,

state that the details documented in this application are true and correct.

I also state that I am not currently subject to any outstanding legal or disciplinary actions associated with my professional practice.

I further understand that the information provided in this application may be verified by ACIPC and may be used to evaluate the credentialing process.

I agree that my name (as a CICP) and professional profile will be posted to the ACIPC website and profiled in ACIPC communications.

Signed:

Date:

FORM 2: CICP-PRIMARY PEER REVIEW SUBMISSION FORM

The reviewer must send this form directly to ACIPC, GPO Box 3254, Brisbane Qld 4001, OR by fax to 07 3211 4900 OR email to admin@acipc.org.au

Peer Reviewer's Name:

Position and Organisation:

Credentiaing Applicant's Name:

What is your professional relationship to the applicant?

- Applicant's supervisor Applicant's client
 Professional colleague Other (Specify):

How long have you known the applicant in a professional capacity? _____ (years)

In what capacity have you worked closely with the applicant?

Please acknowledge your willingness to handle all information associated with this application in confidence.

- Yes
 No

1. Role Performance

Please describe the applicant's performance in relation to their infection prevention and control role.

2. Ethical Behaviour

Please describe how the applicant has demonstrated ethical practice in this role. (e.g. works within scope of practice; is respectful to others; maintains confidentiality).

3. Commitment to Ongoing Professional Development

Please outline how the applicant has demonstrated commitment to his/her own ongoing professional development in this role.

4. Interpersonal Skills

Please describe the interpersonal skills the applicant has demonstrated while performing this role.

ILLUSTRATIVE PURPOSES ONLY

FORM 3: CICP-PRIMARY MARKING GUIDE

CICP-Primary

Curriculum Vitae

Demonstrates current employment in a position where infection prevention and control is an explicit focus of at least one aspect of the role for a minimum of 12 months part-time.

Met Not Met

Demonstrates completion of the following education (certified copies provided):

ACIPC Foundations in IP&C Course Met Not Met

ACSQHC IP&C modules Met Not Met

HHA learning package Met Not Met

Peer Review

Peer review confirms:

Appropriate role performance. Met Not Met

Ethical behaviour. Met Not Met

Commitment to ongoing professional development. Met Not Met

Appropriate interpersonal skills. Met Not Met

Reflective Submission(s)

Infection control role over past 12 months

Applicant describes the challenges of the role in this time. Met Not Met

Applicant describes lessons learned as a result. Met Not Met

Applicant identifies what he/she did well. Met Not Met

Applicant identifies what he/she would do differently in future.

Met Not Met

Applicant outlines PD plan for next 12 months and identifies how the past 12 months has influenced the plan.

Met Not Met

Portfolio Submission

Applicant provides a reflective narrative on ONE of the topics listed (outbreak situation, quality improvement activity, IC policy/procedure development and implementation or an education program or project implementation) addressing the following elements:

Applicant provides a detailed description of the event including his/her role.

Met Not Met

Applicant reflects on the role of an advanced colleague/supervisor involved in the event and the skills/knowledge demonstrated when managing the issue.

Met Not Met

Based on a comparison of their own role with that of the colleague, the applicant identifies specific developmental needs and strategies to facilitate development including the support of the colleague.

Met Not Met

2. Staff Health

- i. How has the applicant demonstrated his/her knowledge of staff health issues?

- ii. Describe the applicant's level of involvement in the management of staff health issues.

3. Outbreak or Critical Incident Management

- i. How has the applicant demonstrated his/her knowledge within the context of the incident?

- ii. Describe the applicant's level of involvement in the management of the outbreak/critical incident.

- iii. Describe the interpersonal skills and ethical practice demonstrated by the applicant in the management of issues that arose from the incident.

4. Project Management/Education Program

- i. Describe the applicant's experience and demonstrated skills in managing a specific infection prevention and control project.

- ii. Describe how the applicant demonstrated knowledge of, and a commitment to ethical practice during the project management.

FORM 5: CICP-ADVANCED MARKING GUIDE

CICP-Advanced

Curriculum Vitae

Demonstrates current employment in an infection prevention and control position for a minimum of three or more years part-time.

Met Not Met

Demonstrates completion of a Graduate Certificate Infection Control or AQF level 8 equivalent as approved by ACIPC (certified copies provided):

Met Not Met

Peer Review

Peer review confirms:

Applicant demonstrates effective committee participation and ethical practice.

Met Not Met

Applicant demonstrates appropriate knowledge of public health issues and ethical practice.

Met Not Met

Applicant demonstrates appropriate knowledge, interpersonal skills and ethical behaviour in the management of an outbreak or critical incident.

Met Not Met

Applicant demonstrates appropriate knowledge and management of an infection control project.

Met Not Met

Reflective Submission(s)

The applicant has provided three reflective narratives – one prescribed and the other two from the options provided - addressing each element identified.

Prescribed: Applicant's infection control role.

Applicant describes his/her infection control role and how it relates to and/or supports the rest of the program.

Met Not Met

Applicant reflects on his/her interaction with other members of the infection control team and other members of the organisation beyond the infection control team.

Met Not Met

Applicant identifies the skills, knowledge and attributes critical to success in his/her role and his/her strengths and weaknesses in relation to them.

Met Not Met

Applicant identifies the professional development activities planned to address identified weaknesses.

Met Not Met

Option 1: Specific Outbreak Situation

Applicant provides a detailed description of a specific outbreak situation in which he/she has been involved.

Met Not Met

Applicant provides a critical review of the scientific literature around the topic.

Met Not Met

Applicant describes the processes used for data collection.

Met Not Met

Applicant describes the measures taken to contain the outbreak.

Met Not Met

Applicant describes actual/potential legal and/or ethical considerations associated with the issue.

Met Not Met

Applicant provides a reflective commentary on his/her professional development and learning progress as a result of his/her role in the event.

Met Not Met

Option 2: Quality Improvement Activity

Applicant provides a detailed report on a quality improvement activity he/she has implemented including:

The aim of the activity Met Not Met

How the activity was identified as necessary Met Not Met

Methods used to develop and implement the activity

Met Not Met

Results/outcomes of the project Met Not Met

Evaluation of the activity including any feedback

Met Not Met

A reflective commentary on lessons learned through conducting the activity

Met Not Met

Option 3: Infection Control Policy/Procedure Development and Implementation

Applicant provides a detailed description of an infection control policy/procedure he/she has developed and implemented including:

Scope and intent of the policy/procedure Met Not Met

Literature review or evidence based underpinning the policy/procedure

Met Not Met

How the policy/procedure was implemented Met Not Met

How success/compliance with the policy/procedure was evaluated

Met Not Met

A reflective commentary on lessons learned through the process

Met Not Met

Option 4: Education Program/Project

Applicant provides a detailed account of an educational program/project he/she has implemented including:

Background to the program/project Met Not Met

Program objectives Met Not Met

Program design including target audience, topic relevance and learning principles

Met Not Met

Implementation and teaching methods Met Not Met

Program evaluation means and results Met Not Met

Examples of teaching materials provided Met Not Met

A reflective commentary on lessons learned through the process

Met Not Met

Portfolio Submission

Applicant provides a reflective narrative describing how he/she has contributed to the profession of infection prevention and control in the past three (3) years.

Applicant describes a range of appropriate activities demonstrating contribution to the profession

Met Not Met

Applicant uses these activities to demonstrate his/her specific areas of infection prevention and control expertise.

Met Not Met

ILLUSTRATIVE PURPOSES ONLY

FORM 6: CIPC-EXPERT PEER REVIEW SUBMISSION FORM

The reviewer must send this form directly to ACIPC, GPO Box 3254, Brisbane Qld 4001, OR by fax to 07 3211 4900 OR email to admin@acipc.org.au

Peer Reviewer's Name:

Position and Organisation:

Credentiaing Applicant's Name:

What is your professional relationship to the applicant?

- Applicant's supervisor Applicant's client
 Professional colleague Other (Specify):

How long have you known the applicant in a professional capacity? (years)

In what capacity have you worked closely with the applicant?

Please acknowledge your willingness to handle all information associated with this application in confidence.

- Yes
 No

Committee Participation

i. How has the applicant contributed to the functioning and outcomes of the committee?

ii. Describe the interpersonal skills demonstrated by the applicant towards other members of the committee.

iii. How has the applicant demonstrated an understanding of, and personal commitment to, ethical practice during his/her committee participation?

2. Staff Health

i. How has the applicant demonstrated his/her knowledge of staff health issues?

ii. Describe the applicant's level of involvement in the management of staff health issues.

3. Outbreak or Critical Incident Management

i. How has the applicant demonstrated his/her knowledge within the context of the incident?

ii. Describe the applicant's level of involvement in the management of the outbreak/critical incident.

iii. Describe the interpersonal skills and ethical practice demonstrated by the applicant in the management of issues that arose from the incident.

4. Project Management/Education Program

i. Describe the applicant's experience and demonstrated skills in managing a specific infection prevention and control project.

ii. Describe how the applicant demonstrated knowledge of, and a commitment to ethical practice during the project management.

FORM 7: CICP-EXPERT MARKING GUIDE

CICP-Expert

Curriculum Vitae

Demonstrates current employment in an infection prevention and control position for a minimum of five or more years full-time equivalent.

Met Not Met

Demonstrates completion of a Masters Infection Control or AQF level 9 equivalent or PhD as approved by ACIPC (certified copies provided):

Met Not Met

Peer Review

Peer review confirms:

Applicant demonstrates effective committee participation and ethical practice.

Met Not Met

Applicant demonstrates appropriate knowledge of staff health issues and clinical practice.

Met Not Met

Applicant demonstrates appropriate knowledge, interpersonal skills and ethical behaviour in the management of an outbreak or critical incident.

Met Not Met

Applicant demonstrates appropriate knowledge and management of an infection control project.

Met Not Met

Reflective Submission(s)

Applicant has provided three reflective narratives as prescribed and addressed each of the elements as detailed below.

Narrative 1: A Critical Review of your Role

Applicant has provided a critical review of his/her role in infection prevention and control over the past three (3) years

Met Not Met

Applicant describes the major challenge(s) of the role

Met Not Met

Applicant identifies his/her professional strengths and weaknesses identified through the challenge(s)

Met Not Met

Applicant identifies the lessons from this experience that could be used as instructive when mentoring less experienced ICP

Met Not Met

Narrative 2: Description of Activities Relating to Knowledge Generation

Applicant provides a detailed description of activities relating to infection prevention and control knowledge generation in past three (3) years.

Met Not Met

Applicant identifies how the specific area of need was identified

Met Not Met

Applicant identifies what he/she hoped to achieved as a result of the activities.

Met Not Met

Applicant identifies how the success was evaluated.

Met Not Met

Applicant identifies what he/she would do differently and why.

Met Not Met

Narrative 3: Evolution of the Infection Prevention and Control Program

Applicant provides a detailed account of how the infection prevention and control program has evolved over the past three (3) years including the role of political, economic and cultural imperatives.

Met Not Met

Applicant describes the extent to which he/she directed the evolution.

Met Not Met

Applicant identifies his/her perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge.

Met Not Met

Portfolio Submission

Applicant provides a reflective narrative describing how he/she has contributed to the profession of infection prevention and control in the past three (3) years.

Applicant describes a range of appropriate activities demonstrating contribution to the profession

Met Not Met

Applicant discusses how these activities have assisted him/her to maintain their skills at expert level.

Met Not Met

CICP-PRIMARY APPLICATION CHECKLIST

Complete the following checklist before submitting your application to ensure it is complete.

CICP – PRIMARY

1. Current *curriculum vitae*(CV) including certified copies of qualifications and registration (where applicable) have been provided.
2. CV reflects that you have practised in infection control for the prescribed period associated with the level of credential.
 - a) CV reflects you have completed the educational requirements associated with the level of credential.
 - b) Peer Reviewer has been:
 - supplied with the peer review submission form relevant to the credential
 - advised of the due date for submission.
 - advised that he/she may be contacted by the Chair of the CAPS Committee for additional information if required?
3. Declaration form has been completed, signed and dated.
4. Your application includes the prescribed reflective submission on your infection control role over the past twelve (12) months.
5. Your application includes your portfolio submission on one of the reflective narrative topics listed.
6. You have paid the application fee.

If all the elements of your application are complete and you have paid the application fee, email your application including all the documents listed above to:

The ACIPC Secretariat: admin@acipc.org.au

CICP-ADVANCED APPLICATION CHECKLIST

Complete the following checklist before submitting your application to ensure it is complete.

CICP – ADVANCED

1. Current *curriculum vitae*(CV) including certified copies of qualifications and registration (where applicable) have been provided.
2. CV reflects that you have practised in infection control for the prescribed period associated with the level of credential.
 - a) CV reflects you have completed the educational requirements associated with the level of credential.
 - b) Peer Reviewer has been:
 - supplied with the peer review submission form relevant to the credential
 - advised of the due date for submission.
 - advised that he/she may be contacted by the Chair of the CAPS Committee for additional information if required?
3. Declaration form has been completed, signed and dated.
4. Your application includes three (3) reflective submissions on (1) prescribed on your infection control role and how it relates to/supports the rest of the program; AND, two (2) chosen from the options provided.
5. Your application includes your portfolio submission on how you contribute to the profession of infection prevention and control.
6. You have paid the application fee.

If all the elements of your application are complete and you have paid the application fee, email your application including all the documents listed above to:

The ACIPC Secretariat: admin@acipc.org.au

CICP-EXPERT APPLICATION CHECKLIST

Complete the following checklist before submitting your application to ensure it is complete.

CICP – EXPERT

1. Current *curriculum vitae*(CV) including certified copies of qualifications and registration (where applicable) have been provided.
2. CV reflects that you have practised in infection control for the prescribed period associated with the level of credential.
 - a) CV reflects you have completed the educational requirements associated with the level of credential.
 - b) Peer Reviewer has been:
 - supplied with the peer review submission form relevant to the credential
 - advised of the due date for submission.
 - advised that he/she may be contacted by the Chair of the CAPS Committee for additional information if required?
3. Declaration form has been completed, signed and dated.
4. Your application includes three (3) reflective submissions as prescribed.
5. Your application includes your portfolio submission on how you contribute to the profession of infection prevention and control and maintain your skills at the expert level.
6. You have paid the application fee.

If all the elements of your application are complete and you have paid the application fee, email your application including all the documents listed above to:

The ACIPC Secretariat: admin@acipc.org.au

ACIPC, 228 Liverpool St Hobart 7000

Tasmania

Telephone: +61 362819239

Email: admin@acipc.org.au

Web: www.acipc.org.au

