



ACIPC

Australasian College  
for Infection Prevention and Control

# IPC News

February 26

# President's report

Dr Sally Havers

Hi everyone and welcome to the February edition of IPC News.



I hope you're all doing well as we settle into the rhythm of 2026. Last week the ACIPC Board met face to face for our first in-person meeting of the year. These twice-yearly face-to-face meetings are always an important opportunity for us to step back from our normal daily work to review our strategic plan and refocus on the core activities needed to deliver on our priorities for the year ahead. We also spent time discussing the 2026 ACIPC International Conference — including confirming the theme — and I'm pleased to say more details will be shared with you on this in the next few weeks.

It has been a productive start to the year across the College more broadly. First and foremost, thank you to everyone who took part in the ACIPC Workforce Survey. The response from Australia and across the region has been fantastic. If you haven't yet completed the survey, we would still love you to participate. The data provided will help us build a clear picture of our workforce — who we are, the challenges we're facing, and what we need to ensure a strong, sustainable IPC profession into the future. This work will guide our advocacy and strengthen our voice in policy conversations. And we look forward to sharing the results of the study over the rest of the year once the analyses are finalised.

Many of you have also expressed interest in our new course, IPC During Construction, Renovation and Maintenance in Healthcare Facilities. This is an area that's growing more complex every year, and IPC professionals are central to managing risk and ensuring safe environments during major infrastructure projects. It's wonderful to see such strong engagement already. If you haven't registered your interest yet, I encourage you to do so — it promises to be a practical and highly relevant learning opportunity.

Another highlight this month has been the signing of our **Memorandum of Understanding with the Pacific Community (SPC)**. This agreement reflects our commitment to meaningful regional collaboration. Through this partnership, ACIPC and SPC will work together to strengthen IPC capacity across the Pacific, support education initiatives, share expertise, and advocate for safer care for patients, communities and healthcare workers. You can read more about this important milestone on page 18.

We are also closely monitoring the regional increase in infectious illnesses, including measles outbreaks, persistent pertussis activity, and emerging pathogens of concern such as the Nipah virus. With winter approaching, it is a timely reminder of the importance of preparedness and strong public health messaging. ACIPC continues to advocate for vaccination as one of our most effective tools to prevent serious disease and protect vulnerable members of our communities.

As always, I want to acknowledge the exceptional work you are doing every day across acute care, aged care, community services, rural and remote settings, research, education and specialised practice areas. Your expertise and dedication remain fundamental to the safety of our health systems. Please do reach out via the [president@acipc.org.au](mailto:president@acipc.org.au) email if there is anything College related you need to touch base on.

Thank you for your ongoing commitment to excellence in infection prevention and control. I look forward to sharing more updates with you next month.

Warm regards,

*Sally Havers*

President, ACIPC



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## Credentiailling

The ACIPC Board of Directors would like to congratulate the following members who have received credentiailling this month:

**Primary credentiailling:** Sihambile Ncube

**Advanced credentiailling:** Star Okoro

**Advanced re-credentiailling:** Jennifer Lukeis

*For information on how you can become credentiailled, [visit the ACIPC website.](#)*

FOR MORE  
INFORMATION  
**CLICK HERE**

# Clinical Nurse Specialist

## *Infection Prevention & Control*

### About the Role:

We have an exciting opportunity to join the Clinical Nurse Specialist team to lead evidence-based practices in Infection Prevention and Control at Dousta Galla Aged Service. Reporting directly to the Chief Governance Officer you will work across all Dousta Galla Homes responsible for robust infection control and innovative service models, ensuring the delivery of exceptional infection prevention and control in our homes.

**Position Status:** Permanent

**Position type:** Full time

**Location:** Melbourne -Footscray

**Closing date:** 29 March 2026

Please email your resume  
and cover letter to:

[hadmin@dgas.org.au](mailto:hadmin@dgas.org.au)



# Advancing IPC Practice & Standards Committee



We've had a great response to our call for members to support the Advancing IPC Practice and Standards Committee, but there's still room for more! Why not join your fellow ACIPC members and add your expertise to the group?

The Advancing IPC Practice and Standards Committee provides leadership in the development, review and promotion of evidence-based IPC standards, guidelines and resources to support ACIPC members.

**We are seeking input from members who have an interest, experience, or expertise in any of the following fields:**

- Acute hospital settings
- Aged care settings
- Community settings
- Construction and renovation, including refurbishment, air quality and mould
- Endoscopy services
- First Nations communities
- Home care
- New Zealand
- Pacific Islands
- Personal Protective Equipment
- Remote, rural and regional areas
- Renal services
- Reprocessing reusable medical devices
- Veterinary practice
- Other

Working groups will be established for short-term periods to support the review and development of resources, guidelines and tools in a subject area. For example, a working group may review a document from an external organisation or assist in developing a guideline to be published by ACIPC. Once established, the working group will meet via Teams, usually monthly. Participation is as a volunteer.

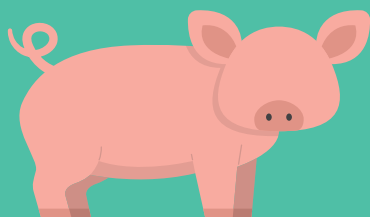
Participating in a working group is a great way to contribute to the College and can lead to representation on ACIPC committees. Membership offers you an opportunity to network with colleagues, support and create resources for your peers, and learn more about ACIPC. The working groups aim to be representative of our diverse membership that reflects the various settings in which our members work.

**Members can register their interest by completing the form here**

**Janine Carrucan**

Chair Advancing IPC Practice and Standards Committee  
**office@acipc.org.au | 03 6281 9239**

# Veterinary Foundations of Infection Prevention and Control



## Next course commences 21 July 2026

We are pleased to announce that in 2026 we will once again be offering – **Veterinary Foundations of Infection Prevention and Control (VFIPC)**.

This groundbreaking course is designed for all veterinary staff worldwide and aims to provide students with a broad understanding and introductory skills to enable them to assess, plan, implement and evaluate infection prevention and control activities within their veterinary workplace.

With 11 self-paced modules running over approximately six months, VFIPC allows participants to apply knowledge to their own practice, and is a key component to achieving the ACIPC Primary Credential (CICP-P).

The program has been designed to accommodate busy work schedules, with a series of self-directed learning units supported by a structured online curriculum.

### Topics include:

- environmental hygiene
- outbreak management
- employee health
- surveillance
- epidemiology and microbiology

This course reflects recent evidence, guidelines and standards.

### Cost

- \$1520 for ACIPC members
- \$1820 for non-members

**BOOK NOW  
FOR COURSE  
COMMENCING  
21 JULY  
2026**

If you have any questions,  
please email [learning@acipc.org.au](mailto:learning@acipc.org.au)  
or go to our website for more  
information [acipc.org.au](http://acipc.org.au)



**APPLY  
HERE**



## ADVOCACY CAMPAIGN WRAP-UP

### IPC IN THE AUSTRALIAN CDC

**Our online advocacy campaign calling for the formal inclusion of infection prevention and control (IPC) within the Australian Centre for Disease Control (CDC) has now concluded – and we would like to sincerely thank everyone who took part.**

We are proud to share that **384 individuals** from across every state and territory used our online platform to send emails directly to their local Members of Parliament. This level of national engagement demonstrates the strength, professionalism and commitment of the IPC community. It sends a clear message: IPC must be embedded at the heart of Australia's public health infrastructure.

The establishment of the Australian CDC marks an important milestone for our country's health security. However, preparedness is not only about surveillance and response – it is about prevention. IPC expertise is critical to reducing transmission risk, protecting healthcare workers and vulnerable populations, and ensuring safe systems of care across acute, aged care, community and non-health settings.

ACIPC will continue to advocate for formal representation of IPC within the CDC's governance and advisory structures. Sustainable pandemic preparedness requires a strong, visible and well-resourced IPC workforce.

Your voice matters. Collective advocacy strengthens our influence and ensures decision-makers understand the value IPC professionals bring to Australia's health system.

Thank you for your efforts in helping to protect our communities and strengthen Australia's response to current and future infectious disease threats.

# Blood Borne Virus

## TESTING COURSE



The course has been designed for healthcare practitioners involved in undertaking testing in all healthcare settings including midwifery, acute care, community health, women's health, correctional health, rural and remote health, refugee health, sexual health, and infection prevention and control practitioners.

### DURING THE COURSE YOU WILL LEARN ABOUT:

- ✓ Epidemiology, transmission, management options and prevention of HIV, hepatitis B and hepatitis C
- ✓ Different tests available to correctly diagnose, testing intervals post exposure and window periods for testing
- ✓ Post incident pre- and post-test discussion for both the recipient and the source following the incident
- ✓ The personal impact and medical consequences of HIV, hepatitis B and hepatitis C
- ✓ Conducting a risk assessment for HIV, hepatitis B and hepatitis C
- ✓ Strategies and resources for effective health promotion and prevention education
- ✓ Basic counselling skills including listening, questioning, reflecting and summarising

**COST: \$350**

Course updated in response to new guidelines, epidemiology data, and emerging evidence.

**BOOK NOW**  
FOR COURSE  
COMMENCING  
17 JULY 2026

*LIMITED SPACES LEFT*

If you have any questions, please email [learning@acipc.org.au](mailto:learning@acipc.org.au) or go to our website for more information [acipc.org.au](http://acipc.org.au)



**MORE INFORMATION**

# Meet the Board

Two new Board Directors were appointed at the ACIPC AGM in November 2025.

This month, we meet Nicole Vause, Board Director, CICIP-E. Nicole is Nursing Clinical Practice Director Infection Prevention & Control, Safety and Quality, Clinical System Support & Improvement, Department for Health and Wellbeing, SA Health.



Nicole Vause, Board Director, CICIP-E

## *Finding My Way to Infection Prevention and Control*

I've been a registered nurse for 30 years, but my journey into Infection Prevention and Control (IPC) wasn't something I planned from the beginning, it found me along the way.

I completed my undergraduate nursing degree in south-western Victoria, with clinical placements across both Victoria and South Australia. Those placements opened doors in both states, and I was fortunate to receive graduate offers in each. As a born-and-bred country girl, I decided it was time to stretch myself and experience "the city," so I packed my bags and headed to Adelaide.

My graduate year was spent at The Queen Elizabeth Hospital, where I was offered the opportunity to continue working in the Renal Unit. At just 20 years old, however, I was feeling study-weary and ready for a simpler routine work hard, go home, repeat. Around the same time, my grandmother became unwell, and Mount Gambier had just opened a brand-new hospital. It felt like the right moment to head home.

Back in Mount Gambier, I worked casually across a wide range of clinical areas including emergency, high dependency, surgical, maternity, paediatrics and day-only services. After 12 months, I secured a permanent part-time position in the co-located 20-bed private hospital, caring for mixed medical, surgical and day-case patients. I stayed there for the next seven years, progressing through the levels and building a strong clinical foundation with a broad base of knowledge and experience, something that later would serve me well.

## *The Unexpected Turn into IPC*

My pathway into IPC came about in the most unexpected way.

I was working a late shift when I received a phone call from my mum, who told me there was a measles outbreak in Adelaide. She was convinced I'd only received one MMR vaccine due to the year I was born. That phone call sent me off in search of the IPC Nurse, and through that process, I received my second vaccination.

A week or two later, that same IPC Nurse approached me and asked if I'd be interested in relieving for two weeks while she took annual leave. I didn't hesitate "Sure, I would love to."

And I really did love it!

Not long after, our CEO resigned, followed by the Manager of Safety and Quality. The IPC nurse stepped into that role, and I was asked to step back into IPC nurse role for three months at 0.7 FTE. Those three months turned into much more. When the position became permanent, I applied with the condition that I undertake postgraduate study in IPC.

I completed my Graduate Certificate in Infection Prevention and Control in 2007, and by then, I knew I had found my passion area in nursing. In 2010, I commenced my Master of Advanced Practice in IPC, completing it in 2011. I undertook this study during my maternity leave and without formal organisational support, but it was worth every late night and early morning.

## *Career Highlights That Stand Out*

There have been many highlights throughout my IPC career.

I loved working with regional and statewide IPC colleagues to standardise audits, strengthen our networks and build one another up professionally. Achieving six "Met with Merit" results in the first iteration of the National Safety and Quality Health Service Standards across criteria's remains something I'm incredibly proud of.

Some of the most meaningful work I've done has involved supporting staff and patients through critical infection control incidents, ensuring people felt safe, informed and supported during very challenging times.

And then, of course, there was the pandemic.

What was meant to be a one-month secondment turned into 14 months when I was urgently deployed overnight back to the city to oversee IPC quality assurance in our Medi-hotels. During that time, I helped standardise guest check-ins, responded to outbreaks across the state, and supported the establishment of multiple alternative accommodation sites, including one that hosted a few international tennis stars.

I now still work in Adelaide within the Department for Health and Wellbeing, Safety and Quality Unit, where IPC has a seat at the table in clinical governance. One of the most rewarding parts of my current role is mentoring emerging infection control professionals, an inspiring group who give me great confidence in the future of our specialty.

#### ***Looking Ahead to 2026 and Beyond***

As we look toward 2026, I see several key challenges for IPC. We need to continue evolving our IPC programs into a digital and sustainable future, ensure IPC governance is embedded across the entire health continuum, and grow our workforce so health services and communities remain vigilant and prepared, whether for the next outbreak, emerging infectious diseases or the ongoing threat of antimicrobial resistance.

#### ***Life Outside of Work***

Outside of IPC, I love playing field hockey. It's the perfect way to burn off frustration, stay active and have fun with a great team, though I do get a little competitive. Winning the premiership last year was a highlight, made even better by the fact that my boys also won theirs. It's not often you can see all your family win a premiership in the same year in different levels.

Most weekends, you'll find me on the sidelines with a coffee in hand, cheering my boys on. I'm also looking forward to travelling again after our family holiday, scheduled for 6 April 2020, didn't quite go to plan. Add a good book, a great movie, and time with family and friends, and I'm well and truly recharged.



MORE  
INFORMATION  
**COMING SOON**

# **2026 ACIPC INTERNATIONAL CONFERENCE**

November 8-11 2026  
*Gold Coast, Queensland*



# INFECTION PREVENTION AND CONTROL IN AGED CARE SETTINGS

## WHAT IS THE COURSE FOR?

This course is designed to provide staff with the fundamental principles and concepts of infection prevention and control practice as they apply to various Aged Care settings in particular Residential and Community Aged Care settings. This course is for all aged care staff, including (but not limited to) RNs and EN/EENs supporting aged care IPC clinical leads, and facility managers needing up-to-date best-practice IPC knowledge and skills.

The modules can be undertaken over a ten week period and a certificate of completion will be issued to students who complete the course.

## MODULES INCLUDE:

- ✓ Principles of Infection Prevention and Control
- ✓ Management of the environment, resident and staff health
- ✓ Management of invasive devices, hygiene and aseptic techniques
- ✓ Management of outbreaks
- ✓ Organisms of significant AMS
- ✓ Governance and leadership

**COST: \$500**

**BOOK NOW**  
FOR THE COURSE  
COMMENCING  
17 APRIL 2026



If you have any questions,  
please email [learning@acipc.org.au](mailto:learning@acipc.org.au)  
or go to our website for more  
information [acipc.org.au](http://acipc.org.au)



**MORE  
INFORMATION**



## NATIONAL IMMUNISATION STRATEGY AND AUSTRALIAN IMMUNISATION HANDBOOK UPDATES

**The Australian Government released the implementation plan for the National Immunisation Strategy for Australia 2025–2030 in December 2025.**

The plan outlines shared responsibilities across the Commonwealth and state and territory governments and identifies key actions to support improved population health through immunisation. Priorities include access to evidence-based information for consumers, strengthening the immunisation workforce through enhanced networks, and ensuring National Aboriginal and Torres Strait Islander cultural governance. The plan also recognises the contributions of healthcare professionals and stakeholders in shaping the strategy and their ongoing role in its successful implementation.

In addition, multiple chapters of the Australian Immunisation Handbook were updated in January 2026. Revisions to the pneumococcal disease chapter clarify the transition to the 20-valent pneumococcal conjugate vaccine for children. The measles, mumps and rubella chapters were updated to specify MMR vaccine recommendations for infant travellers and to align with current guidance. Further updates include harmonisation of language across the Handbook, removal of information on discontinued vaccines, inclusion of advice on Guillain-Barré syndrome risk and ibuprofen for pain relief, and expanded recommendations for vaccination and post-exposure prophylaxis for mpox.

**National Immunisation Strategy (2025-2030) Implementation Plan:**

<https://www.health.gov.au/resources/publications/national-immunisation-strategy-2025-2030-implementation-plan?language=en>

**The Australian Immunisation Handbook:**

<https://immunisationhandbook.health.gov.au/>



## Join us for the launch of the **A-PRECISE model**

An infection prevention strategy for residential aged care homes developed with residents, families and staff.

Explore the model, understand its design, and learn how to access and apply it.

**[Find out more](#)**

**WHEN** | Monday April 20  
10 am - 12 pm, including morning tea

**WHERE** | National Centre for Healthy Ageing, Ngarnga Centre, Frankston Hospital  
2 Hastings Road, Frankston

**HOW** | Register via the [link](#) or QR code



# Foundations of Infection Prevention and Control INTERNATIONAL

## AFTER SUCCESSFULLY COMPLETING THIS COURSE STUDENTS WILL BE ABLE TO:

- ✓ Comprehensively understand the role of the infection prevention and control practitioner and apply this learning in their setting;
- ✓ Understand the application of clinical indicators to IPC practice and apply this knowledge through audit and surveillance activities.
- ✓ Develop and design an infection prevention and control program and a site-specific infection management plan relevant to their setting using a clinical governance framework;
- ✓ Understand the rationale for and apply standard and transmission-based precautions in their setting;
- ✓ Evaluate, review and develop site-specific tools and strategies to aid compliance with evidence-based infection control practice, policies, and guidelines;
- ✓ Critique and apply site-appropriate strategies to support clinician-driven change in organisational behaviour;
- ✓ Initiate and communicate effectively within the interdisciplinary team in the management of infection prevention and control

**BOOK NOW  
FOR THE  
COURSE  
COMMENCING  
10 JULY 2026**

**COST: \$1300 AUD**

***Includes a free ACIPC  
Education Membership!***



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Australasian College  
for Infection Prevention and Control

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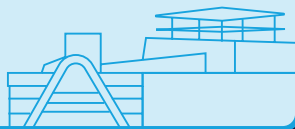
# IPC Tour 2026



Join us for another year of infection prevention insights, networking opportunities and expert speakers to support your IPC knowledge.

**Hobart | 9<sup>th</sup> April**

Hotel Grand  
Chancellor



**Melbourne | 21<sup>st</sup> April**

RACV City Club



**Sydney | 29<sup>th</sup> April**

Novotel Sydney  
Olympic Park



**Perth | 1<sup>st</sup> May**

Bentley Technology  
Park



**Adelaide | 5<sup>th</sup> May**

Adelaide Convention  
Centre



**Brisbane | 8<sup>th</sup> May**

RBWH Education Centre



Scan or click to  
register now!

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[www.gamahealthcare.com.au](http://www.gamahealthcare.com.au)

GHA260048

# GAMAHEALTHCARE AND ACIPC IPC TOUR 2026

We are delighted to announce that ACIPC Board Directors will present at each event on the following topic:

Global trends and the Australian IPC outlook for 2026 and beyond.

## Speakers:

**Hobart 9 April**  
Nicola Isles

**Perth 1 May**  
Nicola Isles

**Melbourne 21 April**  
Dr Sally Havers

**Adelaide 5 May**  
Dr Sally Havers

**Sydney 29 April**  
Kathy Dempsey

**Brisbane 8 May**  
Dr Sally Havers

More details about guest speakers and program coming soon!

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[Tickets are available here](#)

## UPDATE

### ACIPC POSITION STATEMENTS

**Position statement rescinded:**

Measles

Mpox

Seasonal influenza vaccination

# ACIPC signs MOU with SPC

**ACIPC is pleased to announce the signing of a new Memorandum of Understanding (MOU) with the Pacific Community (SPC), strengthening collaboration between the College and partners across the Pacific region.**

Founded by treaty in 1947, SPC is an intergovernmental organisation owned and governed by 27 member countries and territories. It supports the development, scientific and technical needs of the Pacific and plays a vital role in strengthening health systems across diverse and geographically dispersed communities.

As the peak body for infection prevention and control (IPC) in Australasia, ACIPC recognises the importance of building sustainable IPC capability across the region. The challenges faced by Pacific nations – including workforce capacity, geographic isolation, climate vulnerability and emerging infectious disease threats – highlight the need for strong partnerships and shared expertise.

Through this MOU, ACIPC and SPC will work collaboratively to strengthen the capacity of infection prevention and control professionals (ICPs), support education and professional development initiatives, and advocate for programs

that advance the safety and wellbeing of patients, communities and healthcare workers.

This partnership reflects our shared commitment to equity, resilience and preparedness. By fostering regional collaboration and knowledge exchange, we aim to contribute to stronger, safer health systems across the Pacific.



Pacific  
Community  
Communauté  
du Pacifique



ACIPC

**ACIPC looks forward to working closely with SPC and its member countries to support sustainable IPC practice and build a confident, connected IPC workforce for the future.**

A graphic for the 'Aged Care IPC Webinar Series'. It features a green header with the title 'Aged Care IPC Webinar Series'. Below the header, the text reads 'Diagnostic stewardship - from swab to requisition' with a play button icon. The date and time are '18 MARCH 2026 11AM AEDT'. The ACIPC logo is at the bottom left. On the right, there is an illustration of a man assisting a woman with a walker, and a small inset photo of a smiling woman, Carrie Spinks. A dark blue banner at the bottom right says 'with Carrie Spinks & guest speaker Jim Gauthier'.

**Topic:** Diagnostic Stewardship – from Swab to Requisition

**Presenter:** Carrie Spinks

**Guest speaker:** Jim Gauthier

**CLICK  
HERE TO  
REGISTER**

The Microbiology laboratory has minimal control over the specimens received. Improperly collected specimens can provide misleading results which can lead to unneeded antibiotics. This presentation reviews proper specimen collection and possible pathogens that can be present in and on the human body.

Objectives

- Be able to list at least two pieces of information required on a requisition to ensure identification and clinically relevant results
- Understand the proper collection of urine and stool
- Understand issues with swab and fluid specimens
- Recognize how poor specimens can lead to overuse of antibiotics

Our guest speaker will be Jim Gauthier. Jim is a medical laboratory technologist by training. Jim worked in general microbiology, water and food bacteriology, and parasitology. While in the lab, Jim found his love of infection prevention and became board-certified in 1990. Jim has worked in, or consulted to acute care, long term care, medical and dental clinics, optometrists, schools, industry, public health and even funeral homes. Jim has lectured throughout North America and internationally in England, Germany, France, Portugal, Hong Kong and New Zealand.

**Missed an ACIPC Aged Care webinar?**

You can watch recordings of the entire series here.



Graham Pike



Holly Slyne



## ACIPC & IPS webinar

# Sustainability in IPC

21 JANUARY 2026  
8PM AEDT



ACIPC  
Australian College  
for Infection Prevention and Control

## Sustainability in IPC

### *A joint ACIPC and IPS webinar*

**In February, we held a joint webinar with the Infection Prevention Society (IPS) UK. Here is a brief outline of the topics we covered.**

ACIPC IPC Consultant and Sustainability SIG Convenor, Karen McKenna, facilitated the webinar and we were fortunate to be joined by the following guest speakers:

- Graham Pike, Oxford University Hospitals NHS Foundation Trust
- Holly Slyne, University Hospitals Northamptonshire
- Susan Whyte and Carla DeMarco, Royal Melbourne Hospital

#### **Leading on sustainability and IPC: a contradiction?**

*With Graham Pike, lead IPC Nurse and Deputy Director of IPC at Oxford University Hospitals NHS Foundation Trust*

*Graham presented a summary of the challenges and opportunities experienced when leading on both IPC and Sustainability, including examples of sustainability initiatives with an IPC focus.*

Healthcare's carbon footprint was described as accounting for approximately 4.4% of global net emissions—meaning that, if the sector were a country, it would rank as the fifth largest emitter worldwide. The presentation explored how many everyday healthcare practices were driven by infection prevention and control (IPC), whether based on evidence or long-standing assumptions.

Attendees were urged to beware of “yellow washing,” with emphasis placed on the essential role of IPC expertise in distinguishing genuine risk from unnecessary practice. Participants were encouraged to question and challenge routine behaviours and to adopt a hierarchy of sustainable action: reduce consumption, reuse wherever possible, recycle what could not be reused, and refine anything that could not be recycled to minimise climate impact. Practical examples discussed included reconsidering routine use of couch rolls and questioning daily bed sheet changes where no evidence or national guideline supported the practice.

## Going Greener at a small district general hospital in the UK

*With Holly Slyne, Associate Director of Nursing for IPC at University Hospitals Northamptonshire*

*Holly's presentation outlined the Projects and initiatives that the IPC Team have led or supported to implement sustainability into healthcare.*

She presented a range of practical sustainability strategies implemented within her hospital, demonstrating measurable environmental and operational benefits. She outlined the Be PPE Free weekly e-posters and videos, which supported significant reductions in PPE waste alongside notable cost savings.

The Have Confidence with Contenance initiative was also showcased, with reduced catheter use leading to improved infection rates, lower costs, and decreased waste. Holly discussed the Why not Reuse? approach, highlighting safe reuse of items such as sharps bins, theatre hats, isolation gowns, and eye protection. A series of innovations were also presented, including UV-C decontamination of semi-critical patient equipment, washer-disinfectors for bedpans, urinals, and wash bowls, and the introduction of hypochlorous hand sanitiser. Collectively, these initiatives demonstrated how IPC-led innovation could drive sustainable, high-quality care.

## Rethinking Clinical Waste A safe, cost effective and sustainable waste management strategy at Royal Melbourne Hospital.

*With Susan Whyte and Carla DeMarco, Infection Prevention Clinical Nurse Consultants at the Royal Melbourne Hospital*

This presentation described how over-classification of waste as clinical waste at Royal Melbourne Hospital had contributed to unnecessary cost and environmental impact. Susan and Carla outlined how the Infection Prevention Service conducted a comprehensive risk assessment, including observational audits, waste journey analysis, and benchmarking against other Victorian hospitals.

Their findings identified inconsistent staff practices, varied interpretations of guidelines, and no increased infection risk when eligible items were managed through the general waste stream. It was reported that clinical waste cost approximately \$3.50 per kilogram—around twelve times more than general waste—and exceeded \$1 million in FY2023–24. Susan and Carla demonstrated that reclassifying appropriate waste could deliver substantial financial and carbon reduction benefits, supported by clear policy, staff education, audits, and strong stakeholder engagement.

[ACIPC members can view a recording of the webinar here.](#)

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# INAUGURAL VASCULAR ACCESS SIG MEETING

**The inaugural Vascular Access Special Interest Group (VASIG) meeting in December was attended by over 40 enthusiastic IPCs and other professionals keen to brainstorm priorities to meet the SIG's purpose and objectives.**

## **PURPOSE**

To advance infection prevention and best practice for all types of vascular access devices and infusion therapy in Australasia.

## **OBJECTIVES**

1. *To promote evidence-based best practice that improves the experience and outcomes for people requiring vascular access devices and infusion therapy*
2. *To reduce device-related infections and promote vessel health and preservation (VHP)*
3. *To advance equity, diversity, and global inclusion*
4. *Facilitate evidence-based education and professional development*
5. *Foster research and innovation*
6. *Build a community of practice*
7. *Collaborate with patients, families, and consumer advocacy groups*
8. *Engage with manufacturers and suppliers*
9. *Champion environmental sustainability in the infection prevention & use of vascular access devices & IV therapy*
10. *Advocate for policy and system change*

**VA-SIG members will have the opportunity to collaborate on research and education initiatives, contribute to the development of evidence-based policy and guidelines, and support safe and effective vascular access across clinical settings.**

*Planned activities for 2026 include bi-monthly meetings, a Lunch and Learn webinar, and an ACIPC conference workshop.*

*We invite any infection prevention and control professionals, nurses, physicians, epidemiologists, and other professionals involved in vascular access or infusion therapy who are committed to improving infection prevention and best-practice device insertion and care across Australasia to join.*

For more information, please email: [office@acipc.org.au](mailto:office@acipc.org.au)

# WESTERN AUSTRALIAN SIG

## MARCH MEETING

You are warmly invited to attend the WA Special Interest Group (SIG) meeting, presented both in-person and online. This a free event open to Western Australian members and non-members.

Western  
Australia  
**SIG** Special  
Interest  
Group



**Date:** Thursday, 19 March 2026

**Time:** 7:00 AM – 9:00 AM (AWST)

**Venue:** Grace Vaughan House 233 Stubbs Terrace,  
Shenton House WA 6008  
or via Teams

**CLICK HERE  
TO REGISTER  
FOR THE  
MARCH  
MEETING**

### Meeting schedule

#### 07:00

For those able to attend in person, a light breakfast and networking opportunities will be provided, prior to the meeting commencing.

#### 07:30

Welcome – WASIG Chair

#### 07:35

Building Relationships: A tale of theatre construction and safely delivering infrastructure. (20 minutes)

**Speaker:**

*Stacey FitzGerald, Clinical Nurse Consultant, Infection Prevention Control, Perth Children's Hospital*

#### 07:55

Influencing Infection Control in WA's Royal Flying Doctor Service (20 minutes)

**Speaker:**

*Michelle Stirling, Clinical Nurse Quality and Infection Control, Royal Flying Doctor Service (RFDS), Western Operations*

#### 08:15

Infection Prevention and Control Beyond the Hospital Walls: Addressing Community Based Public Health Risks

**Speakers:**

*Claire Tinson, Senior Policy Officer IPPSU  
Lisa Nicolaou, Senior Policy Officer IPPSU*

#### 08:55

Questions

#### 09:00

Close

#### Contact WA SIG Convenor:

*Kristie Popkiss, General Manager, Clinical Governance – St John of God Health Care*  
**Kristie.Popkiss@sjog.org.au.**

# BUG OF THE MONTH

## *Nipah Virus*

*Karen McKenna*  
*ACIPC IPC Consultant*



### **What is it?**

Nipah disease is a viral zoonotic infection caused by the Nipah virus, found in the fruit bat, which is the natural reservoir host.<sup>1</sup> The bat-borne pathogen was first identified in Malaysia in 1998, and has been associated with outbreaks across Southeast Asia, including Bangladesh, India, Malaysia, the Philippines and Singapore.<sup>1,2</sup>

Cases are reported almost yearly in Bangladesh, and periodically in parts of India.<sup>3</sup> India is currently experiencing an outbreak of two confirmed cases in West Bengal, an area that has not seen cases of the virus for nearly 20 years.<sup>4,5</sup> The two cases have been reported in healthcare workers and have been epidemiologically linked.<sup>4,5</sup> The Indian National Joint Outbreak Investigation Response team identified 196 contacts, who have all tested negative.<sup>5</sup>

One case has been reported in Bangladesh in February 2026, and has been linked to the consumption of contaminated sap from date palms.<sup>4</sup> Outbreak investigation and contact tracing identified 35 contacts, who have all tested negative.<sup>6</sup>

Australia is home to the bat species, *Pteropus* spp, which is the reservoir host for Nipah virus, however there is no evidence that Nipah virus is in the Australian bat population, and there have been no Nipah virus cases reported in Australia.<sup>5</sup>

### **Symptoms**

In humans, the virus can cause a broad range of symptoms that range from an asymptomatic, mild flu-like illness to a severe and rapidly progressing illness that affects the respiratory and central nervous system.<sup>1,5</sup>

Symptoms appear 3 – 14 days after exposure, and include a rise in temperature, with drowsiness and headache, followed by confusion and disorientation, and/or respiratory symptom including difficulty breathing and cough. (1, 3) Severe disease can occur in any patient and presents with neurological symptoms, progressing to encephalitis and often death. (3)

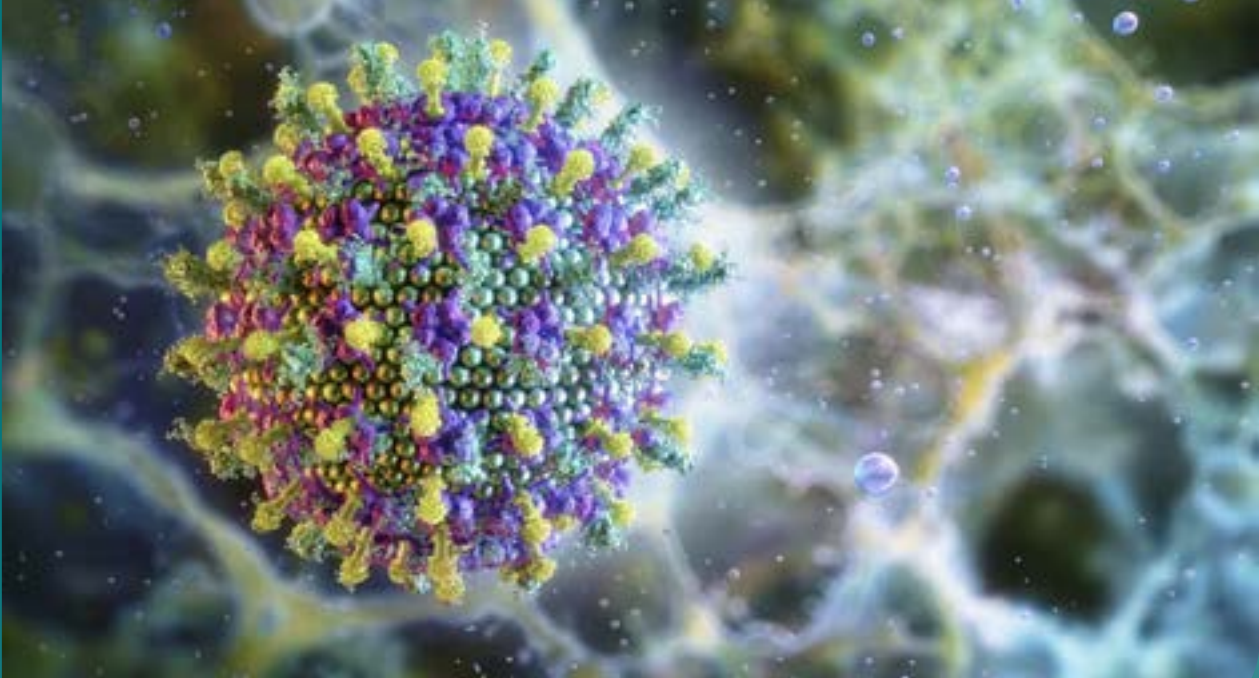
### **How is it transmitted?**

There are several transmission pathways of the Nipah virus, including animal-to-human, person-to-person or via contaminated food.<sup>4</sup> Animal to human contact occurs when people come in contact with infected secretions from fruit bats or infected intermediate hosts, like pigs.<sup>1,4</sup> Contaminated food can also play a role in transmission, particularly via date palm sap that has been partially consumed and contaminated by infected bats.<sup>3,4</sup>

Person-to-person transmission is inefficient and requires very close contact with an infected individual or exposure to their body fluids.<sup>5</sup> Person-to-person transmission does not happen easily and requires close, prolonged contact with an infected person, and inadequate implementation of infection prevention and control measures.<sup>3,4</sup>

### **At risk groups**

People are at an increased risk of exposure if they live in or travel to areas where Nipah virus is active, particularly if they have contact with infected animals, are exposed to contaminated foods, or are healthcare workers providing care to an infected person.<sup>7</sup>



## Prevention

There is currently no vaccine available for Nipah virus, but it has been identified by the WHO as a priority disease for research and development.<sup>3,4</sup> While there are also no specific treatments, early diagnosis with high-quality supportive medical care can prevent death.<sup>3</sup>

Preventative measures include increasing the awareness of risk factors to protect people, animals, and to prevent transmission. These include reducing the risk of transmission from bats and protecting palms and fresh food products from bat contamination.<sup>3</sup> Gloves and protective clothing can reduce the risk of animal-to-human transmission and should be worn when handling sick animals and protecting animals in areas where fruit bats are found.<sup>3</sup> Human-to-human transmission can be reduced through isolation, the implementation of contact and droplet precautions, and airborne precautions during aerosol-generating procedures.<sup>3</sup>

## Key messages

- Cases and outbreaks have only been reported in South and Southeast Asia, there have been no cases in Australia.
- Person-to-person transmission is rare but can occur from close prolonged contact.
- The risk of Nipah virus infection in Australia and New Zealand is very low.<sup>7</sup>

## References

1. Singh RK, Dhama K, Chakraborty S, Tiwari R, Natesan S, Khandia R, et al. Nipah virus: epidemiology, pathology, immunobiology and advances in diagnosis, vaccine designing and control strategies - a comprehensive review. *Vet Q.* 2019;39(1):26-55.
2. Australian centre for Disease Control. Nipah virus infections reported overseas. Australian Centre for Disease Control 2026 29 Jan 2026.
3. World Health Organization. Nipah virus 2026 [Available from: <https://www.who.int/news-room/fact-sheets/detail/nipah-virus>]
4. Keck. E. Nipah virus: What we know and how Australian researchers are responding: CSIRO; 2026 [Available from: <https://www.csiro.au/en/news/all/articles/2026/february/nipah-virus-explainer>].
5. Australian Centre for Disease Control. Nipah virus infection in West Bengal, India: Situation update. Australian Centre for Disease Control 2026 30 January 2026. Report No.: Situation update 1.
6. Australian Centre for Disease Control. Nipah virus infection in West Bengal, India and Rajshahi, Bangladesh. Australian Centre for Disease Control; 2026.
7. Victorian Department of Health. Nipah virus infection Melbourne: Department of Health; 2026 [updated 4 Feb 2026. Available from: <https://www.health.vic.gov.au/infectious-diseases/nipah-virus-infection>]



## Infection Control Matters Podcasts



### Resourcing of hospital infection prevention and control programs

**In this podcast, Phil and Brett speak with Dr Lyn-Li Lim from VICNISS (Victorian Healthcare Associated Infection Surveillance System) in Australia.**

Dr Lim and colleagues recently explored the infection prevention and control resourcing levels in 113 facilities, including FTE per 100 beds. This podcast explores the differences in resourcing for different categories of hospitals.

**A link to the publication is here.**

<https://www.sciencedirect.com/science/article/pii/S019665532500570X>



### Hospital or Crime Scene? What Forensic Science Reveals About “Clean”

**In this episode, Martin Kiernan talks to Dr Sarah Fieldhouse, Associate Professor of Forensic Science and Dr Emmanuel Babafemi, Senior Lecturer in Biomedical Sciences both of the University of Staffordshire, UK. We discuss a recent paper looking at hospital cleanliness.**

Using forensic light, the study uncovered invisible contamination on surfaces that looked clean to the naked eye. We discuss what fluorescence reveals, what ATP misses, and how this approach could reshape environmental monitoring in healthcare.

**The open access paper is available here:**

[\*Fieldhouse S, Bastaki BB, Ledgerton A, Clarke P, Lewis T. Assessing the effectiveness of hospital cleaning using fluorescence: a proof-of-concept study and comparison with ATP testing. J Hosp Infect 2025;166:38-45.\*](#)

**A link to the publication is here.**

<https://www.journalofhospitalinfection.com/action/showPdf?pii=S0195-6701%2825%2900267-1>

**TO LISTEN OR  
DOWNLOAD  
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# IPC DURING CONSTRUCTION, RENOVATION AND MAINTENANCE IN HEALTHCARE FACILITIES

ACIPC is excited to announce a new short course launching in 2026: IPC during construction, renovation and maintenance in healthcare facilities. Expressions of interest are now open.

Construction, renovation and maintenance are essential in modern healthcare, but they also introduce infection risks if not carefully planned and managed. Dust, water system disturbances, altered workflows and contractor activity can all compromise the safety of patients, staff and visitors. This course is designed to strengthen confidence and capability in managing these risks through an IPC lens.

- Participants will explore key IPC principles that underpin effective risk mitigation, including the role of the IPC professional, identification of stakeholders, and embedding IPC into planning, design, commissioning and handover processes.
- A strong practical focus will be delivered through real-world examples, case studies and scenario-based discussions, supporting participants to work through complex situations and problem-solving approaches.
- The course will also examine strategies for effective communication with clinical and non-clinical stakeholders, navigating competing priorities, escalating concerns, and influencing safe decision-making. Content will link closely to relevant regulations, standards and guidelines.

This short course will be valuable for IPC professionals, clinical leaders, quality and safety staff, and facilities and engineering teams.

[Visit the course page to submit your expression of interest here.](#)

**SUBMIT  
YOUR EOI  
HERE!**



# Selected Publications of Interest

> **Resourcing of hospital infection prevention and control programs in Victoria, Australia**

Lim LL, Bull A, Tanamas SK, Bennett N, Worth LJ, Friedman ND.

*Resourcing of hospital infection prevention and control programs in Victoria, Australia. Am J Infect Control. 2025 Sep 24. doi:10.1016/j.ajic.2025.08.033.*

> **Increasing the environmental sustainability of operating rooms in Canada: an evidence-informed guideline for policy**

Goldman J, Pearsall EA, Liu K, De Castro C, Le N, Abbass SA, Philip R, Donahoe LL, Khalid Y, Nadler A, Vincent AD, Van Der Vyver M, Moloo H, McKellar S, Devon K, Miller FA, Ward SE. *Increasing the environmental sustainability of operating rooms in Canada: an evidence-informed guideline for policy. CMAJ. 2026 Feb 9;198(5):E159–E170. doi:10.1503/cmaj.251192.*

> **Assessing the Carbon Footprint of Surgical Site Infections: A Step Towards Sustainable Surgical Practices in Türkiye**

Baydoğan GM, Türe Z, Eren EE, Karagöz N, Dağdelen Güleyyüpoğlu M, Gök M, Ulu Kılıç A. *Assessing the carbon footprint of surgical site infections: a step towards sustainable surgical practices in Türkiye. J Hosp Infect. 2026 Jan 23. [Epub ahead of print]*

> **The rise and fall of contact precautions: how does personal protective equipment fit into sustainable healthcare?**

Doll M, Martin EM, Rittmann B, Ching PR. *The rise and fall of contact precautions: how does personal protective equipment fit into sustainable healthcare? Antimicrob Steward Healthc Epidemiol. 2026;5(1). doi:10.1017/ash.2025.10217.*

> **Enhanced infection prevention and control interventions decreased carbapenem-resistant *Acinetobacter baumannii* colonization and infection in an intensive care unit: a 4-year retrospective study**

Cacciuto MG, Specchia ML, Bonacquisti M, Russo L, Murri R, Fantoni M, et al. *Economic impact of surgical site infection prevention across surgical units at Gemelli University Hospital: insights from a point prevalence survey. J Hosp Infect. 2026 Jan;167:181–186.*

> **The Clean Bite: The Dirty Truth About Stethoscopes...and What Dentistry Can Learn From It**

Busby S.

*The clean bite: the dirty truth about stethoscopes...and what dentistry can learn from it. Infection Control Today [Internet]. 2026 Feb 13 [cited 2026 Feb 16]. Available from: <https://www.infectioncontrolday.com>*

> **Enterococcus spp. ability to form a dry surface biofilm: a route to persistence on environmental surfaces**

Harsent R, Cattoir V, Pascoe M, Pertusat F, Westwell AC, Maillard JY.

*Enterococcus spp. ability to form a dry surface biofilm: a route to persistence on environmental surfaces. J Hosp Infect. 2025;[Epub ahead of print]. doi:10.1016/j.jhin.2025.09.008.*

# Events Calendar

## OneTogether UK Expert Conference 2026

**12 March 2026**

Birmingham, UK

[Register here](#)

## ACIPC Aged Care IPC Webinar Series: Diagnostic Stewardship – from swab to requisition

**Wednesday 18 March 2026 at 11:00am AEDT**

Online

[Register now](#)

## National Centre for Antimicrobial Stewardship Seminar – Paediatrics

**Wednesday 18 March 2026 at 8:30am AEDT**

Online

[Register here](#)

## National Centre for Antimicrobial Stewardship Seminar – Animal Health

**Wednesday 18 February 2026 at 8:30am AEDT**

[Register here](#)

## WA SIG meeting

**Thursday 19 March 2026 at 7:00am (WA time)**

Online and in-person

[Register here](#)

## GAMA & ACIPC IPC Tour

**9 April - 8 May 2026**

[Register here](#)

## ACIPC Aged Care IPC Webinar Series: Scabies in Residential Care: Identification, Management, and Outbreak Control

**Wednesday 15 April 2026 at 2:00am AEST**

[Register here](#)

## A-PRECISE model launch

**Monday 20 April 2026 at 10:00am AEST**

National Centre for Healthy Ageing, Frankston,  
Victoria

[Register here](#)

## ACIPC Aged Care IPC Webinar Series: Clinical Governance and Continuous Improvement -Supporting Infection Prevention and Control in Aged Care

**Wednesday 20 May 2026 at 2:00pm AEST**

[Register here](#)

## IPAC Canada 2026 National Education Conference: A Golden Foundation

**24 – 27 May 2026**

Toronto, ON

[Register here](#)

## ASM 2026

### ASID Annual Scientific Meeting

**27 – 30 May 2026**

Hobart, Tasmania

[More info here](#)

## ESPID 2026

### 44th Annual Meeting of the European Society for Paediatric Infectious Diseases

**1 – 5 June 2026**

Bologna and online

[Register here](#)

## APIC 2026

**15 – 17 June 2026**

Nashville, Tennessee, USA

[Register here](#)

## ACIPC Aged Care IPC Webinar Series: A feel for ventilation in residential care

**Wednesday 17 June 2026 at 2:00pm AEST**

[Register here](#)

## ASID Zoonoses 2026

**3 – 4 July 2026**

Brisbane, Queensland

[Register now](#)

## ACIPC Aged Care IPC Webinar Series: Risk management – aged care hierarchy of controls

**Wednesday 15 July 2026 at 2:00pm AEST**

[Register here](#)

## Festival of Nursing 2026

**30 July – 1 August 2026**

Melbourne, Victoria

[Register now](#)

## APSIC 2026

**30 July – 2 August 2026**

Kuala Lumpur, Malaysia

[Register now](#)

## Clinical Research Network Meeting 2026 (ASID)

**7 – 8 August 2026**

Sydney, NSW

[More information and registration here](#)



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