ACIPC
Australasian College
for Infection Prevention and Control

ACIPC Re-Credentialling Package

Credentialled Infection Control Professional (Primary, Advanced, Expert)

THE AUSTRALASIAN COLLEGE FOR INFECTION PREVENTION AND CONTROL LTD

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Disclaimer: Australasian College for Infection Prevention and Control Ltd (ACIPC) Professional (ICP) Credentialling Process.

The ACIPC Credential is awarded through assessment of self-reported information provided by ACIPC members. Although ACIPC undertakes reasonable efforts to verify the accuracy of all the information that has been provided through the ACIPC Credentialling and Professional Standards (CAPS) Committee process, ACIPC does not certify the accuracy or the completeness of the material that has been submitted. ACIPC does not in any way endorse the individuals who have been credentialled, nor does ACIPC verify qualifications, licenses, practice areas or suitability of the listed Infection Control Professional (ICP).

CONTENTS

PART 1: ACIPC RE-CREDENTIALLING GUIDELINES 4

PREAMBLE 4

LEVELS OF CREDENTIALLING 4

ELIGIBILITY 4

INSTRUCTIONS FOR APPLICANTS 5

PRIMARY APPLICATION 5

- PART A: REFLECTIVE NARRATIVES
- PART B: CURRICULUM VITAE
- PART C: PEER REVIEWS

ADVANCED APPLICATION 6

- PART A: REFLECTIVE NARRATIVES
- PART B: CURRICULUM VITAE
- PART C: PEER REVIEWS

EXPERT APPLICATION 7

- PART A: REFLECTIVE NARRATIVES
- PART B: CURRICULUM VITAE
- PART C: PEER REVIEWS

SUBMISSION REQUIREMENTS 8

COSTS 9

OUTCOME 9

- SUCCESSFUL APPLICANTS
- INCOMPLETE APPLICATIONS
- LAPSED APPLICANTS
- UNSUCCESSFUL APPLICANTS

APPEAL PROCESS 9

REFERENCES 10

WHICH LEVEL IS RIGHT FOR ME? 11

PART 2: APPLICATION FORMS 14

FORM 1: APPLICATION FORM AND DECLARATION 15

FORM 2: CICP-PRIMARY RE-CREDENTIALLING PEER REVIEW FORM 16

FORM 3: CICP-PRIMARY RE-CREDENTIALLING MARKING GUIDE 18

FORM 4: CICP-ADVANCED RE-CREDENTIALLING PEER REVIEW FORM 20

FORM 5: CICP-ADVANCED RE-CREDENTIALLING MARKING GUIDE 22

FORM 6: CICP-EXPERT RE-CREDENTIALLING PEER REVIEW FORM 24

FORM 7: CICP-EXPERT RE-CREDENTIALLING MARKING GUIDE 26

PART 1

ACIPC Re-Credentialling Guidelines

PREAMBLE

Congratulations on choosing to re-credential as an ACIPC Credentialled Infection Control Professional – CICP. This action demonstrates your commitment to your own professional development and the professionalisation of the specialist practice of infection control.

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 CICPs
- Contribute to qualifications for independent practice
- Enhance the quality of care provided
- Assist employers to manage risk.

LEVELS OF CREDENTIALLING

Re-credentialling is a process whereby a CICP applies to extend their credential at their current level. To apply for credentialling at a higher level than last credential awarded, a new credentialling application is required, not a re-credentialling application.

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 CICP 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 CICP for guidance and oversight in co-ordinating an entire program. It is expected that they will act as role models to Primary CICPs 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

To be eligible for re-credentialling, you must meet the following criteria:

1. Hold and maintain financial membership of the Australasian College for Infection Prevention and Control Limited.
2. Hold current endorsement as a CICP at the same level as re-credentialling application.
3. Demonstrate to the satisfaction of the ACIPC Credentialling and Professional Standards (CAPS) Committee that you have actively participated in professional development activities congruent with the specialised practice of infection control in the period since you were credentialled or re-credentialled.
4. Be currently employed (full or part-time) or in the case of CICP-Primary have participatory responsibility for infection control in your setting.
5. Hold an unrestricted licence to practise as a registered nurse or registered medical practitioner within Australia or New Zealand. Where registration is a requirement for your role.

INSTRUCTIONS FOR APPLICANTS

For an application to be successful, CICPs must demonstrate active engagement in the specialty practice of infection prevention and control and continuing professional development since their last credentialling. Applicants are required to provide a variety of evidence to demonstrate these requirements, which the ACIPC CAPS Committee will verify and assess.

PRIMARY APPLICATION

PART A: REFLECTIVE NARRATIVES

As an applicant, you are required to submit a set of reflective narratives that detail your professional journey since the last credential was awarded. The purpose of the reflective narratives is to encourage you to observe your own experiences, analyse what happened and think about ways to use these experiences to improve and develop professionally.

Please note this is not an assessment of your writing ability, but of your professional development and learning progress because of your role within the event(s) you described.

You must submit two (2) reflective narratives.
Each reflective narrative must:

- Be between 500 and 1,000 words long
- Be written in the first person

Narrative 1: Role and Practice

Describe how your practice and role since the last credential was awarded, demonstrates that you have maintained an active scope of practice as Primary CICP in one of the following areas:

- Specific outbreak situation;
- Infection control quality improvement activity;
- Infection control policy/procedure development/ implementation/review;
- Education project and activities;
- One or more elements of the infection control program.

In this narrative, please address the following:

- Describe the challenges of the practice and role in this time
- Describe the lessons learned as a result
- Identify what you did well
- Identify what you would do differently in future

Narrative 2: Mentoring and Networking

Demonstrate how your networking with Primary CICP peers and mentoring from Advanced and Expert CICP and other colleagues has supported your growth as an CICP since your last credential was awarded.

- Reflect on the role of an advanced colleague/supervisor and the skills/knowledge demonstrated during networking and mentoring
- Based on a comparison of your own role and that of a colleague, describe specific examples of how the networking and mentoring has contributed to your own development since your last credentialing application.

PART B: CURRICULUM VITAE

- Provide a current *curriculum vitae*.
- Include certified copies of any **new** qualifications gained since last credentialled and a downloaded copy of your current practising certificate from AHPRA.
- Certified copies are to be provided as a photocopy of the original documents sighted and signed by a Justice of the Peace, or Commissioner of Declarations. Please note that the certification must be placed on the printed side of the documents, not the reverse side. Any new certified documents need to have copies posted to the ACIPC office, *Level 6, 152 Macquarie Street, Hobart, 7000.*
- Statement of Service or similar statement via statutory declaration if self-employed.

PART C: PEER REVIEWS

The purpose of the two peer reviews is to provide support for your application for re-credentialling. The peer reviewers must provide feedback in writing regarding your professional management practices and interpersonal skills, and they may be contacted by the committee should clarification around their submission be required. Specifically, the peer reviewer should provide information regarding your professional management practices (knowledge) and interpersonal skills (professionalism). *You should consider providing your peer reviewers with a copy of your application so their review can be written in support of the application.*

To be eligible to provide a peer review, individuals must:

- Be a professional colleague at a higher level or the same level.
- Have known the applicant in a professional capacity for a minimum period of six (6) months.
- Have worked closely with the applicant, in the case of the self-employed infection control professional, the reviewer may be a client who has contracted the services of the infection control professional.
- Handle all information associated with this application in confidence.
- Be willing to be contacted by a member of the ACIPC CAPS Committee to answer questions regarding the applicant's professional management practices (knowledge) and interpersonal skills (professionalism), should clarification of the written peer review be required.

Your peer reviewers will be asked to comment on the following areas:

Role and Practice

Describe how the applicant's practice and role demonstrates they have maintained an active scope of practice as Primary CICP in one of the following areas:

- Specific outbreak situation;
- Infection control quality improvement activity;
- Infection control policy/procedure development/ implementation/review;
- Education project and activities;
- One or more elements of the infection control program.

Mentoring and Networking

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from other colleagues including other credentialed ICPs, and how these activities have resulted in their professional growth and development.

ADVANCED APPLICATION

PART A: REFLECTIVE NARRATIVES

As an applicant, you are required to submit a set of reflective narratives that detail your professional journey since the last credential was awarded. The purpose of the reflective narratives is to encourage you to observe your own experiences, analyse what happened and think about ways to use these experiences to improve and develop professionally.

Please note this is not an assessment of your writing ability, but of your professional development and learning progress because of your role within the event(s) you described.

You must submit three (3) reflective narratives.
Each reflective narrative must:

- Be between 500 and 1,000 words long:
- Be written in the first person

The narratives must address each of the following topics:

Narrative 1: Role and Practice

Describe how your practice and role since your last credential was awarded, demonstrates how you have maintained an active scope of practice as an Advanced CICP and led one element of the infection control program in one of the following areas:

- Outbreak management;
- Quality improvement activity;
- Policy and procedure development/implementation/ review;
- Education project and activities;
- Governance;
- Other program element.

In this narrative, please address the following:

- Describe the challenges of the practice and role in this time
- Describe the lessons learned as a result
- Identify what you did well
- Identify what you would do differently in future

Narrative 2: Mentoring and Networking

Demonstrate how your networking with other Advanced CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth as an CICP since your last credential was awarded.

- Reflect on your role and practice relative to peers and expert colleague/supervisor and how this reflection has actively informed your professional growth.
- Based on a comparison of your own role with that of colleagues, identify specific developmental needs and strategies to facilitate development including the support of colleagues.

Narrative 3: Giving Back

Describe how you actively contribute to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation and demonstrate your improved/ enhanced professional standing as an Advanced CICP.
In doing so identify and reflect on your area/s of expertise as an Advanced CICP.

Reflect on your activities and how they have contributed to:

- The profession of infection prevention and control;
- The College; and
- Enhancing the professional standing, and enabling declarative recognition of your own expertise in infection prevention and control.

PART B: CURRICULUM VITAE

- Provide a current *curriculum vitae*.
- Include certified copies of any **new** qualifications gained since last credentialled and a downloaded copy of your current practising certificate from AHPRA.
- Certified copies are to be provided as a photocopy of the original documents sighted and signed by a Justice of the Peace, or Commissioner of Declarations. Please note that the certification must be placed on the printed side of the documents, not the reverse side. Any new certified documents need to have copies posted to the ACIPC office, *Level 6, Macquarie Street, Hobart, 7000*.
- Statement of Service or similar statement via statutory declaration if self-employed.

PART C: PEER REVIEWS

The purpose of the two peer reviews is to provide support for your application to be re-credentialled. The peer reviewers must provide feedback in writing regarding your professional management practices and interpersonal skills, and they may be contacted by the committee should clarification around their submission be required. Specifically, the peer reviewer should provide information regarding your professional management practices (knowledge) and interpersonal skills (professionalism). *You should consider providing your peer reviewers with a copy of your application so their review can be written in support of the application.*

To be eligible to provide a peer review, individuals must:

- Be a professional colleague at a higher level or the same level.
- Have known the applicant in a professional capacity for a minimum period of six (6) months.
- Have worked closely with the applicant, preferably on the same committee such as the infection control committee, or in the case of the self-employed infection control professional, the reviewer may be a client who has contracted the services of the infection control professional.
- Handle all information associated with this application in confidence.
- Be willing to be contacted by a member of the ACIPC CAPS Committee to answer questions regarding the applicant's professional management practices (knowledge) and interpersonal skills (professionalism), should clarification of the written peer review be required.

Your peer reviewers will be asked to comment on the following areas:

Role and Practice

Describe how the applicant's practice and role demonstrates they have maintained an active scope of practice as an Advanced CICP and led one element of the infection control program in one of the following areas:

- Outbreak management; or
- Quality improvement activity; or
- Policy and procedure development implementation/ review; or
- Education project and activities; or
- Governance; or
- Other program element.

Mentoring and Networking

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from colleagues, including other Advanced and/or Expert credentialed ICPs, that has resulted in their professional growth and development.

Giving Back

Describe how the applicant has actively contributed to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation.

Please comment on the extent to which these have enhanced the applicant's professional standing and enabled them to identify their areas of expertise as an Advanced CICP.

EXPERT APPLICATION

PART A: REFLECTIVE NARRATIVES

As an applicant, you are required to submit a set of reflective narratives that detail your professional journey since the last credential was awarded. The purpose of the reflective narratives is to encourage you to observe your own experiences, analyse what happened and think about ways to use these experiences to improve and develop professionally.

Please note this is not an assessment of your writing ability, but of your professional development and learning progress because of your role within the event(s) you described.

You must submit three (3) reflective narratives.
Each reflective narrative must:

- Be between 500 and 1,000 words long
- Be written in the first person

Narrative 1: Role and Practice

Demonstrate your leadership of an infection control program, and how your leadership of the program has facilitated:

- Development of the role of the ICP;
- Generation and promulgation of new knowledge;
- Enhancement of the professional standing and practise of infection control.

Narrative 2: Mentoring and Networking

Demonstrate how your networking with other Expert CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth since your last credentialling application.

- Reflect on your role and practice relative to your peers and expert colleagues/supervisor and how this reflection has actively informed your professional growth.
- Based on a comparison of your own role with that of colleagues, identify specific developmental needs and strategies to facilitate development including the support of colleagues.

Narrative 3: Giving Back

Describe your sustained contribution to the profession and the College through a range of professional activities that include, but are not limited to, committee leadership, research leadership, publications, establishing mentoring networks and demonstrate your improved/enhanced professional standing as an Expert CICP. In doing so identify and reflect on your area/s of expertise as an Expert CICP.

Reflect on your activities and how they have contributed to:

- The profession of infection prevention and control;
- The College; and
- Enhancing the professional standing; and enabling declarative recognition of your own expertise in infection prevention and control.

PART B: CURRICULUM VITAE

- Provide a current *curriculum vitae*.
- Include certified copies of any **new** qualifications gained since last credentialled and a downloaded copy of your current practising certificate from AHPRA.
- Certified copies are to be provided as a photocopy of the original documents sighted and signed by a Justice of the Peace, or Commissioner of Declarations. Please note that the certification must be placed on the printed side of the documents, not the reverse side. Any new certified documents need to have copies posted to the ACIPC office, *Level 6, Macquarie Street, Hobart, TAS 7000.*
- Statement of Service or similar statement via statutory declaration if self-employed.

PART C: PEER REVIEWS

The purpose of the two peer reviews is to provide support for your application to be re-credentialled. The peer reviewers must provide feedback in writing regarding your professional management practices and interpersonal skills, and they may be contacted by the committee should clarification around their submission be required. Specifically, the peer reviewer should provide information regarding your professional management practices (knowledge) and interpersonal skills (professionalism). *You should consider providing your peer reviewers with a copy of your application so their review can be written in support of the application.*

To be eligible to provide a peer review, individuals must:

- Be a professional colleague at a higher level or the same level.
- Have known the applicant in a professional capacity for a minimum period of six (6) months.
- Have worked closely with the applicant, preferably on the same committee such as the infection control committee, or in the case of the self-employed infection control professional, the reviewer may be a client who has contracted the services of the infection control professional.
- Handle all information associated with this application in confidence.
- Be willing to be contacted by a member of the ACIPC CAPS Committee to answer questions regarding the applicant's professional management practices (knowledge) and interpersonal skills (professionalism), should clarification of the written peer review be required.

Your peer reviewers will be asked to comment on the following areas:

Role and Practice

Describe how the applicant's leadership of an infection control program has facilitated:

- Development of the role of the ICP; and
- Generated and promulgated new knowledge; and
- Enhanced the professional standing and practice of infection control.

Mentoring and Networking

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from colleagues, including with Expert Credentialed ICPs, that has resulted in their professional growth and development.

Giving Back

Describe how the applicant has made a sustained contribution to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation.

Please comment on the extent to which these have enhanced the applicant's professional standing and enabled them to identify their areas of expertise as an Expert ICP.

SUBMISSION REQUIREMENTS

- Applicants must complete and submit the following Forms based on their level of credential:
  Primary: Forms 1,2 & 3
  Advanced: Forms 1, 4 & 5
  Expert: Forms 1, 6 & 7.

- You must submit a hard copy of all new certified documents by mail to:

  ACIPC
  Level 6, 152 Macquarie Street,
  Hobart TAS 7000

  AND email an electronic copy, including all forms and documents to, admin@acipc.org.au

COSTS

- Please email ACIPC for current costs or visit acipc.org.au/credentialling
- The fee is payable to ACIPC on submission of your application and will not be refunded if your application is unsuccessful.
- The costs associated with re-credentialling pay for administration of the ACIPC CAPS Committee, including copying, postage, secretarial costs, and communication costs. Please note that members of the ACIPC CAPS Committee are not paid, and give their time generously as a contribution to the profession. Fees are kept to a minimum and are essential to maintaining the function of the Committee.

OUTCOME

Successful Applicants

- Based on CAPS Committee members assessment of applications, applicants assessed as meeting all requirements for credentialling will be recommended for recredentialling to the ACIPC Board. Successful applicants will be notified in writing that the credential has been awarded.
- A certificate will be mailed to you.
- You will be entitled to use the post-nominals of CICP (+level) for three (3) years.
- A public database of Credentialled Infection Control Professionals (CICP) is maintained by ACIPC on its website.
- CICPs will also be profiled in various ACIPC communications.
- Like the original credential, the period of validity of this credential is three (3) years. ACIPC will notify you two (2) months before the end of your three (3) year period. You will have twelve months after that notification to be recredentialled.

Incomplete Applications

- In the event that the recredentialling application is deemed incomplete or one or more elements of the application require additional work, the applicant will be contacted, usually by telephone in the first instance, by the Chair of the CAPS Committee or delegate as appropriate and the application deficits will be explained and deadlines for resubmission of the required elements specified. This discussion will be formalised in writing via email stating the resubmission requirements and deadline.

Lapsed Applicants

- Should you exceed the submission deadline you will forfeit the right to use the post-nominals of CICP and will need to apply for credentialling as though for the first time.
- At the end of the three (3) year period of the credential, plus the additional 12 month period, CICPs are considered lapsed and removed from the database, unless the recredentialling process has been successfully completed.

Unsuccessful Applicants

- In the event that an application is deemed **not to meet** the requirements for recredentialling following resubmission, where the applicant has been provided with advice on the deficits and invited to resubmit, or, the applicant, following such advice, has not resubmitted the required elements as advised or within the stated deadline, the applicant will be considered unsuccessful and notified in writing.
- Unsuccessful applicants are encouraged to review their application and reflect on the comments provided by the CAPS committee.
- Further clarification and/or additional information may be sought regarding the decision, by contacting the Chair of the CAPS Committee in the first instance.
- Following completion of this process the applicant can consider whether he/she has grounds to appeal the decision as described in the appeal process.

APPEAL PROCESS

In the event that an unsuccessful applicant disagrees with ACIPC's decision not to re-credential, the applicant may have ground for appealing the decision if he/she can demonstrate either of the following:

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 supplied that was in-line with the application guidelines was considered in the marking process.

The following process must be followed:

1. An appeal must be lodged with supporting evidence to the ACIPC President via the ACIPC Secretariat. The appeal must be lodged within fourteen (14) working days of receiving written feedback from ACIPC outlining why the credential was not awarded. The Chair will provide all communication to the applicant in writing.

2. The ACIPC President shall acknowledge receipt of the appeal in writing and request relevant documentation from the Chair 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 members of tthe ACIPC Board of Directors and the members of the ACIPC 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 of DirectorsI 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, his/her application for credential will not be awarded and the applicant will be excluded from reapplication for twelve (12) months before submitting a new application.

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Which level is right for me?

P **Primary**
Re-Credentialled Infection Control Professional
(CICP – P)

A **Advanced**
Re-Credentialled Infection Control Professional
(CICP – A)

E **Expert**
Re-Credentialled Infection Control Professional
(CICP – E)

Which level is right for me?

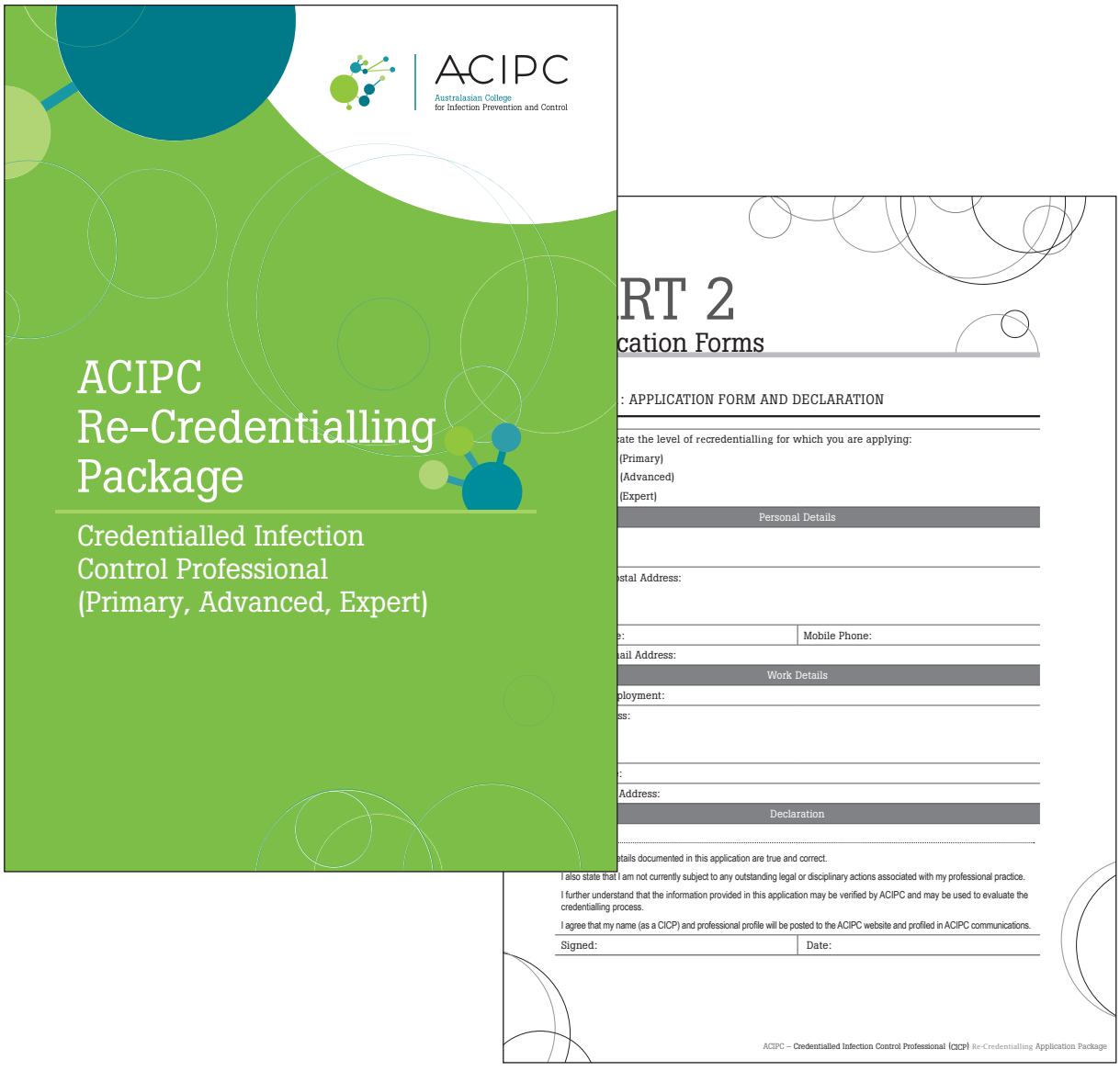
	RELEVANT VOCATIONS	REQUIREMENTS	COST
P **Primary Re-Credentialled Infection Control Professional (CICP – P)**	Nurses, Doctors, Scientists, Dentists, Epidemiologists, Veterinarians, Allied Health Professionals, Public Health and Environmental Health Professionals, Child Care Workers, Pharmacists, Occupational Health Industry Representatives, Midwives, Ambulance Paramedics, Defence Health Workers, Personal Care Professionals (tattooists, hairdressers, piercers etc.), Funeral Attendants, others on a case-by-case.	• 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.	Cost on application.
A **Advanced Re-Credentialled Infection Control Professional (CICP – A)**	Registered Nurses, Doctors, Scientists, Epidemiologists, Dentists, Veterinarians, Pharmacists, Midwives, Ambulance Paramedics, others on a case-by-case.	• 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.	Cost on application.
E **Expert Re-Credentialled Infection Control Professional (CICP – E)**	Registered Nurses, Doctors, Midwives, Ambulance Paramedics, others on a case-by-case.	• Current financial membership of ACIPC • Working >5 years in infection prevention and control where infection control was the primary purpose of your role.	Cost on application.

ROLE AND PRACTICE	MENTORING AND NETWORKING	GIVING BACK
Describe how your practice and role since the last credential was awarded, demonstrates that you have maintained an active scope of practice as Primary CICP in <u>one</u> of the following areas: a) Specific outbreak situation; b) Infection control quality improvement activity; c) Infection control policy/procedure development/ implementation/review; d) Education project and activities; e) One or more elements of the infection control program.	Demonstrate how your networking with Primary CICP peers and mentoring from Advanced and Expert CICP and other colleagues has supported your growth as ICP since the last credential was awarded.	
Describe how your practice and role since the last credential was last awarded, demonstrates how you have maintained an active scope of practice as an Advanced CICP and led <u>one</u> element of the infection control program in <u>one</u> of the following areas: a) Outbreak management; b) Quality improvement activity; c) Policy and procedure development/ implementation/review d) Education project and activities e) Governace; f) Other program element.	Demonstrate how your networking with other Advanced CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth as an ICP since the last credential was awarded.	Describe how you actively contribute to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation and demonstrate your improved/enhanced professional standing as an Advanced CICP. In doing so identify and reflect on your area/s of expertise as Advanced CICP.
Describe your leadership of an infection control program, and how your leadership of the program has facilitated: a) Development of the role of ICP; b) Generation and promulgation of new knowledge; c) Enhancement of the professional standing and practice of infection control.	Demonstrate how your networking with other Expert CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth since the last credential was awarded.	Describe your sustained contribution to the profession and the College through a range of professional activities that include, but are not limited to, committee leadership, research leadership, publications, establishing mentoring networks and demonstrate your improved/enhanced professional standing as an Expert CICP. In doing so identify and reflect on your area/s of expertise as an Expert CICP.

PART 2

Applicant 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: https://www.acipc.org.au/apply-for-recredentialling/



ILLUSTRATIVE PURPOSES ONLY

PART 2
Application Forms

FORM 1: APPLICATION FORM AND DECLARATION

Please indicate the level of recredentialling 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 credentialling 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:

ILLUSTRATIVE PURPOSES ONLY

FORM 2 – CICP-PRIMARY RE-CREDENTIALLING PEER REVIEW FORM

The reviewer must send this form directly to ACIPC, Level 6, 152 Macquarie St, Hobart, TAS, 7000 OR email to admin@acipc.org.au

Peer Reviewer's Name:

Peer Reviewer's Position and Organisation:

Credentialling Applicant's Name:

Date of Review:

REVIEWER STATEMENTS

For CAPS Assessment only

What is your professional relationship to the applicant?

◯ Applicant's supervisor ◯ Applicant's client ◯ Met ◯ Not Met

◯ Applicant's professional colleague ◯ Other (Specify)

How long have you known the applicant in a professional capacity? _____ (years) ◯ Met ◯ Not Met

In what capacity have you worked closely with the applicant? ◯ Met ◯ Not Met

Please acknowledge your willingness to handle all information associated with this application in confidence in accordance with College policy. ◯ Met ◯ Not Met

◯ Yes ◯ No

ELEMENT – Role and Practice

For CAPS Assessment only

Describe how the applicant's practice and role demonstrates they have maintained an active scope of practice as a Primary CICP in one of the following areas: ◯ Met ◯ Not Met

a) Specific outbreak situation; or
b) Infection control quality improvement activity; or
c) Infection control policy/procedure development/ implementation/review, or
d) Education project and activities, or
e) One or more elements of the infection control program.

Peer Reviewer Comments:

ILLUSTRATIVE PURPOSES ONLY

ELEMENT – Mentoring and Networking

For CAPS Assessment only

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from other colleagues including other credentialed ICPs that have resulted in their professional growth and development.

◯ Met ◯ Not Met

Peer Reviewer Comments:

OTHER PEER REVIEWERS COMMENTS

ILLUSTRATIVE PURPOSES ONLY

FORM 3 – CICP-PRIMARY RE-CREDENTIALLING MARKING GUIDE

Date of Assessment:

Applicant Name:

Assessor Name:

Declarations of Conflict of Interest:

SUPPORTING DOCUMENTATION

ACIPC Financial Membership	◯ Met	◯ Not Met
Current Curriculum Vitae	◯ Met	◯ Not Met
Employment in IPC Role (Statement of Service)	◯ Met	◯ Not Met

Examiners comments:

PEER REVIEW

Peer Review 1 Role and Practice Mentoring and Networking	◯ Met	◯ Not Met
Peer Review 2 Role and Practice Mentoring and Networking	◯ Met	◯ Not Met

Examiners comments:

CRITICAL REFLECTIVE NARRATIVE – Role and Practice

Describe how your practice and role since the last credential was awarded demonstrates that you have maintained an active scope of practice as Primary CICP in one of the following areas:

a) Specific outbreak situation; or
b) Infection control quality improvement activity; or
c) Infection control policy/procedure development/ implementation/review; or
d) Education project and activities; or
e) One or more elements of the infection control program.

ILLUSTRATIVE PURPOSES ONLY

Applicant describes the challenges of the practice and 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

MENTORING AND NETWORKING

Demonstrate how your networking with Primary CICP peers and mentoring from Advanced and Expert CICP and other colleagues has supported your growth as ICP since your last credentialing application:

Applicant reflects on the role of an advanced colleague/supervisor and the skills/ knowledge demonstrated during networking and mentoring.

◯ Met ◯ Not Met

Based on a comparison of their own role with that of the colleague, the applicant describes specific examples of how the networking and mentoring has contributed to their own development since the last credentialling application.

◯ Met ◯ Not Met

Examiners Comments:

Primary CICP Re-Credentialling Recommended

◯ YES ◯ NO

ILLUSTRATIVE PURPOSES ONLY

FORM 4 – CICP-ADVANCED RE-CREDENTIALLING PEER REVIEW FORM

The reviewer must send this form directly to ACIPC, Level 6, 152 Macquarie St, Hobart, TAS, 7000 OR email to admin@acipc.org.au

Peer Reviewer's Name:

Peer Reviewer's Position and Organisation:

Credentialling Applicant's Name:

Date of Review:

REVIEWER STATEMENTS

For CAPS Assessment only

What is your professional relationship to the applicant?

◯ Applicant's supervisor ◯ Applicant's client ◯ Met ◯ Not Met

◯ Applicant's professional colleague ◯ Other (Specify)

How long have you known the applicant in a professional capacity? _____ (years) ◯ Met ◯ Not Met

In what capacity have you worked closely with the applicant? ◯ Met ◯ Not Met

Please acknowledge your willingness to handle all information associated with this application in confidence in accordance with College policy. ◯ Met ◯ Not Met

◯ Yes ◯ No

ELEMENT – Role and Practice

For CAPS Assessment only

Describe how the applicant's practice and role demonstrates they have maintained an active scope of practice as a Advanced CICP and led one element of the infection control program in one of the following areas: ◯ Met ◯ Not Met

a) Outbreak management; or
b) Quality improvement activity; or
c) Policy and procedure development implementation/review; or
d) Education project and activities; or
e) Governance; or
e) Other program element.

Peer Reviewer Comments:

ILLUSTRATIVE PURPOSES ONLY

ELEMENT – Mentoring and Networking

For CAPS Assessment only

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from colleagues, including other Advanced and/or Expert credentialed ICPs, that has resulted in their professional growth and development.

◯ Met ◯ Not Met

Peer Reviewer Comments:

ELEMENT – Giving Back

For CAPS Assessment only

Describe how the applicant has actively contributed to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation.

Please comment on the extent to which these have enhanced the applicant's professional standing and enabled them to identify their areas of expertise as an Advanced ICP.

◯ Met ◯ Not Met

Peer Reviewer Comments:

OTHER PEER REVIEWERS COMMENTS

ILLUSTRATIVE PURPOSES ONLY

FORM 5 – CICP-ADVANCED RE-CREDENTIALLING MARKING GUIDE

Date of Assessment:

Applicant Name:

Assessor Name:

Declarations of Conflict of Interest:

SUPPORTING DOCUMENTATION

ACIPC Financial Membership	◯ Met	◯ Not Met
Current Curriculum Vitae	◯ Met	◯ Not Met
Employment in IPC Role (Statement of Service)	◯ Met	◯ Not Met

Examiners comments:

PEER REVIEW

Peer Review 1 Role and Practice Mentoring and Networking Giving Back	◯ Met	◯ Not Met
Peer Review 2 Role and Practice Mentoring and Networking Giving Back	◯ Met	◯ Not Met

Examiners comments:

CRITICAL REFLECTIVE NARRATIVE – Role and Practice

Describe how your practice and role since the last credential was awarded demonstrates that you have maintained an active scope of practice as Primary an Advanced CICP in one of the following areas:

a) Outbreak management; OR
b) Quality improvement activity; OR
c) Policy and procedure development implementation/review; OR
d) Education project and activities; OR
e) Governance; OR
f) Other program element.

ILLUSTRATIVE PURPOSES ONLY

Applicant describes their leadership role and practice during this time.	◯ Met	◯ Not Met
Applicant describes the challenges and 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

MENTORING AND NETWORKING

Demonstrate how your networking with other Advanced CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth as an ICP since your last credentialing application.

Applicant reflects on their role and practice relative to their peers and advanced colleagues/supervisor and how this reflection has actively informed their professional growth.

◯ Met ◯ Not Met

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

◯ Met ◯ Not Met

Examiners Comments:

GIVING BACK

Describe how you actively contribute to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation and demonstrate your improved/enhanced professional standing as an Advanced CICP. In doing so identify and reflect on your area/s of expertise as an Advanced CICP.

Applicants reflect on their activities and how they have contributed to:

- the profession of infection prevention and control,
- and the College; and
- enhancing their professional standing; and enabling declarative recognition of their own expertise in infection prevention and control.

◯ Met ◯ Not Met

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

◯ Met ◯ Not Met

Examiners Comments:

Advanced CICP Re-Credentialling Recommended

◯ YES ◯ NO

ILLUSTRATIVE PURPOSES ONLY

FORM 6 – CICP-EXPERT RE-CREDENTIALLING PEER REVIEW FORM

The reviewer must send this form directly to ACIPC, Level 6, 152 Macquarie St, Hobart, TAS, 7000 OR email to admin@acipc.org.au

Peer Reviewer's Name:

Peer Reviewer's Position and Organisation:

Credentialling Applicant's Name:

Date of Review:

REVIEWER STATEMENTS

For CAPS Assessment only

What is your professional relationship to the applicant?

◯ Applicant's supervisor ◯ Applicant's client ◯ Met ◯ Not Met

◯ Applicant's professional colleague ◯ Other (Specify)

How long have you known the applicant in a professional capacity? _____ (years) ◯ Met ◯ Not Met

In what capacity have you worked closely with the applicant? ◯ Met ◯ Not Met

Please acknowledge your willingness to handle all information associated with this application in confidence in accordance with College policy. ◯ Met ◯ Not Met

◯ Yes ◯ No

ELEMENT – Role and Practice

For CAPS Assessment only

Describe how the applicant's leadership of an infection control program has facilitated: ◯ Met ◯ Not Met

a) Development of the role of the ICP; and

b) Generated and promulgated new knowledge; and

c) Enhanced the professional standing and practice of infection control.

Peer Reviewer Comments:

ILLUSTRATIVE PURPOSES ONLY

ELEMENT – Mentoring and Networking

For CAPS Assessment only

Describe how the applicant has actively engaged in networking with peers and undertaken mentoring from colleagues, including with Expert Credentialed ICPs, that has resulted in their professional growth and development.

◯ Met ◯ Not Met

Peer Reviewer Comments:

ELEMENT – Giving Back

For CAPS Assessment only

Describe how the applicant has made a sustained contribution to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation. Please comment on the extent to which these have enhanced the applicant's professional standing and enabled them to identify their areas of expertise as an Expert ICP.

◯ Met ◯ Not Met

Peer Reviewer Comments:

OTHER PEER REVIEWERS COMMENTS

ILLUSTRATIVE PURPOSES ONLY

FORM 7 – CICP-EXPERT RE-CREDENTIALLING MARKING GUIDE

Date of Assessment:

Applicant Name:

Assessor Name:

Declarations of Conflict of Interest:

SUPPORTING DOCUMENTATION

ACIPC Financial Membership	◯ Met	◯ Not Met
Current Curriculum Vitae	◯ Met	◯ Not Met
Employment in IPC Role (Statement of Service)	◯ Met	◯ Not Met

Examiners comments:

PEER REVIEW

Peer Review 1 Role and Practice Mentoring and Networking Giving Back	◯ Met	◯ Not Met
Peer Review 2 Role and Practice Mentoring and Networking Giving Back	◯ Met	◯ Not Met

Examiners comments:

CRITICAL REFLECTIVE NARRATIVE – Role and Practice

Demonstrate your leadership of an infection control program, and how your leadership of the program has facilitated:

a) Development of the role of the ICP; and
b) Generation and promulgation of new knowledge; and
c) Enhancement of the professional standing and practise of infection control.

ILLUSTRATIVE PURPOSES ONLY

Applicant describes their leadership role and practice during this time.	◯ Met	◯ Not Met
Applicant describes their role and practice through the leadership of an infection control program.	◯ Met	◯ Not Met
Applicant describes the challenges and 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

MENTORING AND NETWORKING

Demonstrate how your networking with other Expert CICP peers and mentoring from Expert CICP and other colleagues has influenced your growth since your last credentialing application.

Applicant reflects on their role and practice relative to their peers and expert colleagues/supervisor and how this reflection has actively informed their professional growth.

◯ Met ◯ Not Met

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

◯ Met ◯ Not Met

GIVING BACK

Describe how you actively contribute to the profession and the College through a range of professional activities that include, but are not limited to, active committee membership, research, conference presentation and demonstrate your improved/enhanced professional standing as an Expert CICP. In doing so identify and reflect on your area/s of expertise as an Expert ICP.

Applicant reflects on their sustained activities and how they have contributed to:

- the profession of infection prevention and control,
- and the College; and
- enhancing their professional standing; and enabling declarative recognition of their own expertise in infection prevention and control.

◯ Met ◯ Not Met

Examiners Comments:

Expert CICP Re-Credentialling Recommended

◯ YES ◯ NO

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