Re-Credentialling Guide



ACIPC

Australasian College for Infection Prevention and Control



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Foreword



There is a growing body of evidence demonstrating a direct correlation between patient outcomes and the extent to which infection prevention and control programs led and staffed by Infection Control Professionals who hold professional certification or credentialling and have a combination of comprehensive experience and formal training. Put simply, patient outcomes are better in health services where infection control programs are led by Infection Control Professionals who hold specialist certification or credentialling.

The Australasian College of Infection Prevention and Control (ACIPC) recognises this evidence and has moved it into practice. Our existing single-tier re-credentialling framework for expert infection

control professionals has been revised in light of the growing evidence and expanded to all infection control professionals across three new tiers.

The new three-tiered re-credentialing framework combines the requirements for experience and education and training together with peer review. This approach builds on the College's longstanding and successful credentialing and re-credentialling framework and provides a clear career pathway for health professionals seeking a career in our discipline.

The new ACIPC Re-credentialling Framework is for everyone, whether you are new to the profession or have been practising for some time. There is something for everyone in the College's new credentialling framework.

On behalf of the ACIPC Board of Directors and the Credentialling and Professional Standards Committee, I commend the new ACIPC Re-credentialling Framework to you.

Phillip Russo CECP-E President Australasian College for Infection Prevention and Control Ltd

The credentialling process provides me with the opportunity to reflect on my practice as a rural and sole ICP. By being credentialed this gives me confidence in the service provisionI provide to my consumers in a variety of settings.

Nicole Vause CICP, South Australia The ACIPC credentialling process is a remarkable opportunity for any specialist nurse who works in an Infection Control role. It is also a self audit tool and once achieved, I believe you can truly say "I am an Infection Control Professional (ICP)".

Kellie Kenway CICP, Queensland I chose to apply for ACIPC credentialling to validate my expertise as an infection control technical expert. I firmly believethat as an expert you should have a balance of tertiary qualificationsand relevant work experience. It is definitely worth investing in andjoining the elite group of recognized infection control experts.

Sharon Salmon CICP, Singapore



Re-Credentialling Matters



The College's new approach to re-credentialling will bring considerable benefits to society as a whole with consumers, employers and professionals all gaining as a result of the change.

For infection control professionals, re-credentialling provides a clear industry-recognised pathway whereby you can continue to demonstrate the necessary knowledge, skills and attributes to be recognised by your peers as a Primary, Advanced or Expert Credentialled Infection Control Professional. All applications are reviewed by a panel of infection control professionals who have a wealth of knowledge and experience in a range of practice contexts. As a credentialled ICP, you are professionally committed to excellence in practice as evidenced by your willingness to undergo

peer review. When awarded, the credential carries the imprimatur of the College as the peak professional body for infection prevention and control in Australasia.

For employers, credentialling helps you to meet with current health regulations and health consumers' demand that the care provided by health professionals in your organisation is safe, effective and efficient. Inherent in establishing this culture of patient safety is the requirement to minimise the risk of healthcare-associated infection. The primary tenet underpinning all healthcare provision is that health professionals "first do no harm". The discipline of infection prevention and control comprises health professionals who are able to assess each practice context and healthcare interaction for potential infection risks and apply evidence-based principles to recommend strategies to mitigate these risks. Furthermore, these professionals undertake a range of activities to evaluate the outcomes of these strategies and refine them as required.

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

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

On behalf of the ACIPC Credentialling and Professional Standards Committee, I commend the new ACIPC Re-credentialling Framework to you.

Kathy Dempsey CIPC-E Credentialling and Professional Standards Committee



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

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 would defer to the expertise of an Advanced or Expert ICP and/or fulfil some infection control responsibility inaccordance with specific legislation and standardsof 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 Re-Credentialled Infection Control Professional (CICP – A)

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

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

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.



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Which level is right for me?

	RELEVANT VOCATIONS	REQUIREMENTS	COST
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.
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 financialmembership 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.
Expert Re-Credentialled Infection Control Professional (CICP – E)	Registered Nurses, Doctors, Midwives, Ambulance Paramedics, others on a case-by-case.	 Current financialmembership 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

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;
- 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.

MENTORING AND NETWORKING

GIVING BACK

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 credentialling application.

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 credentialling application. 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 credentialling application. 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.

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