A bit of background

- 2010 AICA celebrates 25 years
- Membership of 1200 across Australia with separate executives (declining)
- Made up of States/Territory representatives who form the AICA Executive
- Significant challenges to meet the needs of the membership

COMMITTEE REPRESENTATION

- National HH initiative
- National surveillance committee
  Implementation advisory committee
  - Reducing harm to patients from HAIs: An Australian infection prevention & control model for acute hospitals
  - Education models for the novice ICP
- National Infection Control Guidelines
- Antimicrobial stewardship

EXTERNAL PARTNERSHIPS

AUSTRALIAN
- Standards Australia
- ACHS
- HaAICSIG/ASID
- ASHM
- University linkages

INTERNATIONAL
- IFIC
- HIS
- APIC
- NNZO
- APSIC (Sri Lanka)
- WHO – GOARN
- UAE – IC course

PRIORITY AREAS FOR AICA

- Healthcare Infection Journal
- Credentialing
- Education
- Research & development
- Representation
- Respected voice

WORKING WITH INDUSTRY

MAJOR PARTNERS

3M Marketing for IC
Covidien Annual scholarships
BD Six sigma training
ASHM PCO
CSIRO Publisher

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Timelines

1st Quarter
Jan – Mar
• Establish an independent website (AICA website) which can be regularly updated
• Provide an avenue for AICA members and other stakeholders to submit feedback/questions. To remain in place for the lifespan of the NCSC.
• Review national membership database to ensure it is up to date and ready to engage
• Create template for an e-newsletter
• Consultative Round 1: NCSC with AICA Executive and State/Territory Associations
• Present progress report to AICA Executive Committee
• Identify appropriate process for feedback and evaluation for next consultation round
• Draft potential models for an organisational structure in preparation for consultation round 2.

2nd Quarter
Apr – June
• Consultative Round 2:
  o Call for consultation with membership and key stakeholders
    - E Newsletter
    - Website – Survey
    - Media 5th May
    - AICA Newsletter
    - Present progress report to AICA Executive
    - Vision
    - Consultative Round 3: Submission business case to AICA Executive

3rd Quarter
Jul – Sep
• Revision of business case and model
• Consultative Round 4: Open Community Consultation
• Present model to legal consultants for opinion
• Prepare the final organisational structure, business plan and membership fees proposal to membership

4th Quarter
Oct – Dec
• Launch of new national organisation
• Prepare a critical path for short to long-term marketing
• Incorporating guidelines for a national membership marketing campaign and building the national resource base; establishment strategic alliances; ongoing communication and media plan; sponsorship partnerships; and the strengthening of delivery services
• Develop new logos and produce new membership brochure
• Assistance to members that Steering Committee task has been finalised

Who is interested?

Website
  - White Paper
  - Online Survey (closes Friday 13th May)

Consultation

• Victorian Infection Control Practitioners Association 18th February
• Tasmanian Infection Control Association 24th February
• Australian Capital Territory Infection Control Association 24th
• Infection Control Association of New South Wales 25th February
• Infection Control Association of Western Australia 25th February
• Infection Control Practitioners Association of Queensland 1st March
• Infection Control Association of South Australia 1st March
• AICA Executive 30th March
• State & Territory Association Presidents 31st March

The content of this presentation are intended to be accompanied by explanatory commentary for the "Voices of AICA" Teleclass to be conducted on 9th May 2011 and should not be used outside of this context.
Review

- Royal College of Nursing Australia
- Infection Prevention Society UK
- Association of Professionals in Infection Control
- Community and Hospital Infection Control Association – Canada
- Australian Society for HIV Medicine
- Australian Mathematical Association
- Gastroenterological Nurses College of Australia Inc (GENSA)
- Coalition of National Nursing Organisations
- Australasian College for Emergency Medicine
- Australasian Society of Infectious Diseases
- College of Emergency Nursing Australasia
- Australasian Society for Emergency Medicine

How will the new structure effect me?

- More Education workshops
- More scholarships offered
- Greater opportunity to be involved in research
- Network with colleagues from similar workplaces or interests through Special Interest Groups
- Receive education online
- Annual national conference
- Have a national identity
- More options for membership
- Full Membership fee $145

KEY POINTS OF THE PROPOSED STRUCTURE?

1. A name accurately reflecting the functions of the new national body
2. An Executive Council incorporating State and Territory, consumer and Operational representation
3. Creation of a General Manager, Executive Officer and other paid administrative roles
4. Creation of four sub committees
5. Increased level of educational and resource support through
   i. Creation of 16 Special Interest Groups
   ii. Extensive range of Education workshops
   iii. Annual National Conference
   iv. Increased use of technology for delivery of education
6. Seven levels of membership representing various entitlements and fees
7. Ten year Business Plan

A name

- College
- Society
- Australasian
- Infection Prevention
- Control
- Healthcare

The NCSC will offer several variations of a name, but believe that members should determine the preferred name

Executive Council
- President
- Seven (7) elected State/Territory-based Members
- Three (3) Elected General Members
- One (1) Consumer Representative
- One (1) General Manager

Proposed organisational structure

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Proposed organisational structure

1. EC: Elected by vote of full membership; Specific eligibility criteria including membership and professional standing; Full voting rights.

2. EC: One member elected to represent each State and Territory prior to wind down of associations; Specific eligibility criteria including membership and professional standing; Required to reside in the jurisdiction and voted upon by only members from that same jurisdiction; Offices of Vice-President, Honorary Secretary and Honorary Treasurer to be appointed from this committee.

3. EC: Four elected members; Voted in by all full membership; Specific eligibility criteria including membership and professional standing; Full voting rights;

4. EC: One consumer represented; Voted in by the Executive Council; Specific eligibility criteria; Full voting rights;

5. EO: Appointed by the Executive Council; Non-member of Executive Council; Specific professional skill set in infection prevention and control, business, and education.

Role of the Executive Council

• Provide the overall strategic direction of the national body;
• Determine internal policies governing the operations of the national body;
• Enter into an agreement with the General Manager to manage the national body;
• Approve annually, a corporate plan for the next three years and one year business plan;
• Approve the annual budget and long term budgets;
• Review the annual performance of the national body;
• Act as an interface between the General Manager and stakeholders;

Paid positions

• General Manager
  - responsible for the financial, human resource, service development, quality and performance management of all services for the association

• Executive Officer
  - Devise and implement targeted Education Programs
  - apply for sponsorship and grants to support the Education Programs
  - development of clinical guidelines, policies and position papers

• Secretarial and administrative support services

Committees

• Credentialing and Professional Standards Committee
  - To carry out Credentialing of members
  - To determine, develop, promulgate, and publish the professionals standards relating for infection prevention and control across Australasia
  - To advise and recommend to the AICA National Consultative Steering Committee regarding credentialing and professional standards

• Education and Research Committee
  - To develop, promote and facilitate educational material for national body members
  - To promote and facilitate the education of national body members in local & national infection control policies & procedures
  - To advise and recommend to the national body Executive Council educational opportunities to create awareness of and provide leadership relating to infection control issues
  - To advise and recommend to the Executive Council collaborative opportunities relating to infection control education
  - To advise and recommend to the AICA National Consultative Steering Committee regarding education and research

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Committees

- Policy and Publication Committee
  - Policies
    - To develop evidence-based policies
    - To advise and recommend to the AICA National Consultative Steering Committee regarding policy and publication
  - Official Publication
    - The official publication of the Association shall be Healthcare Infection
    - All members shall receive Healthcare Infection
    - To ensure that appropriate infection control policies and procedures are scholarly, evidence-based, regularly reviewed, and appropriate for implementation

- Special Interest Group Advisory Committee
  - Establish, lead, and oversee functions and activities of special interest groups

Education and resource support

- Special Interest Groups
- Extensive range of Educational workshops
- Annual national conference
- Increased use of technology

Seven levels of membership

<table>
<thead>
<tr>
<th>Full</th>
<th>Institutional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full voting rights</td>
<td>No voting rights</td>
</tr>
<tr>
<td>Access to two special interest groups</td>
<td>Access to two special interest groups</td>
</tr>
<tr>
<td>Healthcare Infection journal</td>
<td>Healthcare Infection journal (one per institution)</td>
</tr>
<tr>
<td>Quarterly newsletter</td>
<td>Quarterly newsletter</td>
</tr>
<tr>
<td>Reduced costs for education and conferences including pre and post-conference workshops</td>
<td>Limited discounts to educational activities as the discretion of the council</td>
</tr>
<tr>
<td>Eligibility to apply for scholarships</td>
<td>Eligibility to apply for scholarships (discretion of council)</td>
</tr>
<tr>
<td>Access to position and policy papers</td>
<td>Access to Infection Control</td>
</tr>
<tr>
<td>Free webinars (limited)</td>
<td>Membership to be transferable from one member to another</td>
</tr>
<tr>
<td>Ability to use the notation (M) followed by new organization's abbreviation e.g. (MACIP)</td>
<td>Nominate members within institution (affiliate members)</td>
</tr>
</tbody>
</table>

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Seven levels of membership

<table>
<thead>
<tr>
<th>Membership Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>$75</td>
</tr>
<tr>
<td>Fellow</td>
<td>$200</td>
</tr>
<tr>
<td>International</td>
<td></td>
</tr>
<tr>
<td>Developing Country</td>
<td>$50</td>
</tr>
<tr>
<td>Developed Country</td>
<td>$160</td>
</tr>
</tbody>
</table>

- Student: Some entitlements to as full member except no voting rights.
- Fellow: Some entitlements to as full member. Ability to use the notation (F) followed by new organisation’s abbreviation e.g. (FAPOF). Can represent the association as the discretion/direction of the council.
- International: Same entitlements to as full member. Different membership costs for developed and developing countries. Developing countries to be determined by the Executive Council.

Finances

- Year 1 & 2 run at a significant loss to establish association.
- Break even by year 5.
- Ten year conservative budget estimate indicates >$400,000 in bank in Year 10 of new association.
- Budget is based on no increase in membership numbers between year 1 to year 5.

Profit and loss

- Four fold increase education investment.
- Three fold increased in scholarship investment (total cost).
- 25 annual scholarships available for all members, in addition to any corporate/industry scholarships.

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Comparison spending

<table>
<thead>
<tr>
<th>Money Spent on Scholarships (excl. corporate/industry)</th>
<th>Combined State Associations (average 2009 &amp; 2010)</th>
<th>New Association 2010 Year 1 of New Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $10,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$10,000 - $20,000</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>$20,000 - $30,000</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>$30,000 - $40,000</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>$40,000 - $50,000</td>
<td>40</td>
<td>40</td>
</tr>
</tbody>
</table>

Summary - New national body

- Name
- Structure
- Employed management
- Executive Council
- Specialist Committees
- Special Interest Groups
- Enhanced education, scholarship and research opportunities
- Strong financial base
- National and international identity
- Attractive membership packages

How can you participate?

Survey Responses...

1. Which State or Territory associations are you a member of?

- Victorian Infection Control Practitioners' Association: 24.4% 25
- Tasmanian Infection Control Association: 6.5% 8
- Australian Capital Territory Infection Control: 0.3% 0
- Infection Control Associations of New South Wales: 31.3% 38
- Infection Control Association of South Australia: 17.7% 20

Survey Responses...

2. The organisational structure of the proposed National body will see the State and Territory Associations replaced by Elected State/Territory-based members. To what extent are you in favour of this element of the proposed structure?

- Strongly Agree: 36.4% 3
- Agree: 55.7% 4
- Neither Agree or Disagree: 6.7% 1
- Disagree: 1.7% 0
- Strongly Disagree: 1.7% 0
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Survey Responses...

11. Do the proposed levels of membership and the associated benefits suit your professional needs?

<table>
<thead>
<tr>
<th>Response</th>
<th>Percent</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>93.9%</td>
<td>79</td>
</tr>
<tr>
<td>No</td>
<td>2.4%</td>
<td>2</td>
</tr>
<tr>
<td>Unsure</td>
<td>4.7%</td>
<td>4</td>
</tr>
</tbody>
</table>

Survey Responses...

14. Would you join, contribute to, and participate in a geographically-based Special Interest Group?

<table>
<thead>
<tr>
<th>Response</th>
<th>Percent</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>72.9%</td>
<td>61</td>
</tr>
<tr>
<td>No</td>
<td>4.7%</td>
<td>4</td>
</tr>
<tr>
<td>Unsure</td>
<td>22.4%</td>
<td>19</td>
</tr>
</tbody>
</table>

Next Steps

- Legal process
- Operating entity
- Constitution
- Transition

QUESTIONS?

National Consultative Steering Committee

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