



# Diploma in Hospital Infection Control—important changes to the accreditation of prior experiential learning and update

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## KEYWORDS

Hospital infection;  
Training; Education

**Summary** The Diploma in Hospital Infection Control (DipHIC) was established by the Hospital Infection Society, London School of Hygiene and Tropical Medicine and the Public Health Laboratory Service (now the Health Protection Agency) in 1997. We outline important changes to the assessment of eligibility for the DipHIC by accreditation of prior experiential learning, provide a web link to examples of reflections, and list all those who have been awarded the DipHIC by the various routes.

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## Introduction

The Diploma in Hospital Infection (DipHIC) was established in 1997.<sup>1</sup> Since that time, the regulations have been changed to remove the provision for the Honorary award and to introduce the award by accreditation of prior experiential learning (APL).<sup>2</sup> This route, and in fact the

diploma, were a 'first' for the London School of Hygiene and Tropical Medicine. The award of the DipHIC by APL has proved to be popular and the rigor of the examination process has been remarked upon.

However, it has since become apparent that the criteria used to determine eligibility for entry to the examination by APL favour those involved in academic medicine and national organizations. There are skilled and competent infection control doctors and other infection control professionals of many years standing who have been excluded from consideration on the basis of these criteria. This is contrary to the intention of the Examination Committee, who consider it important that a wide

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spectrum of candidates should have the opportunity to submit themselves for examination.

The Committee has reviewed the system and APL curriculum vitae submissions are thus now invited based on the new criteria outlined below. The main change is that the Examination Committee recommended that the final section of the submission should now include a list of 10 probable titles, covering the breadth of the syllabus,<sup>2</sup> that applicants would wish to work up as reflections to be submitted for examination as their reflective portfolio.

## DipHIC by APL assessment of eligibility

### Purpose

The purpose of this procedure is to enable senior members of the infection control community to demonstrate their eligibility for the DipHIC. Persons having established their eligibility will demonstrate their competence by submission of a reflective portfolio to the Board of Examiners in conformity with the regulations.

### Guidelines for eligibility

These revised guidelines provide general guidance with relevant examples. The Examination Committee may modify these from time to time as is deemed necessary as determined by change in our knowledge of hospital infection and the institutional structures implemented for its control.

The guidelines are based on criteria related to experience, skill and knowledge. Candidates should submit a curriculum vitae that is designed to address the criteria. This should be structured with the following four sections.

#### Knowledge (maximum 10 credit points)

Evidence based on qualifications, peer-reviewed publications and presentations at scientific and clinical meetings mainly devoted to infection control or infection, as follows.

- Degree, diploma or certificate obtained from a substantive course devoted to infection control or infection, e.g. in UK: BSc (Hons) Infection Control, Diploma—120 credits at Level 2.
- Overseas qualifications in infection control.
- Publications in peer-reviewed scientific journals on infection control and related research.
- Teaching and education to professional health-care workers.

- Presentations at national and international level.
- Evidence of an existing relevant qualification obtained by examination, dissertation or similar work, e.g. MPhil, MSc, PhD, MRCPATH relevant to infection control.
- Adviser to a department of health.
- Regional, national or international organizations, government, select committees, e.g. working parties related to infection control such as methicillin-resistant *Staphylococcus aureus*, isolation or representation on committees and working groups (e.g. BSI, CEN, ISO).
- Teacher or mentor on the DipHIC or other infection control courses and modules.
- Examiner in relevant subject, e.g. PhD, MD or equivalent knowledge as judged by the Examination Committee.
- Equivalent knowledge as judged by the Examination Committee, e.g. development of a distance learning programme, self-directed learning modules.

#### Skill (maximum five credit points)

- Professional involvement in hospital infection control in the laboratory and/or on the ward.
- Systematic review experience in infection-control-related subjects.
- Active membership of a society or association whose activities substantially include or are primarily in the field of infection control or infection (e.g. HIS, ICNA, CSC).
- Membership of local working parties devoted to infection control including, for example, a hospital, trust or community infection control committee.
- Responsibility for the formulation and implementation of infection control policies.

#### Posts held and experience (maximum five credit points)

Practical experience in the field of infection control as:

- a full-time or part-time appointment as a control of infection officer for five years at consultant level;
- a full-time or part-time appointment as a control of infection nurse for five years at minimum of diploma level;
- a full-time or part-time appointment as a consultant in communicable disease or consultant nurse equivalent;

- equivalent experience as judged by the Examination Committee, e.g. experience in infectious diseases, genito-urinary medicine, human immunodeficiency virus clinical units, national surveillance scheme activities, major outbreak co-ordinator, communicable disease consultant or nurse; or
- lead involvement in national surveillance scheme activities, e.g. infection control surveillance co-ordinator, major outbreak co-ordinator.

#### Personal factors (maximum five credit points)

- Favourable consideration will be given to those who list 10 reflection subjects that cover the breadth of the syllabus as outlined in *J Hosp Infect* 2001;48:146-151. This article is available electronically at the Hospital Infection Society's website ([www.his.org.uk](http://www.his.org.uk)) with other information about the DipHIC.
- Other contributory factors which the Examination Committee or its assessors decide are relevant.

A minimum of 16 credit points would normally be sufficient for the individual's name to be invited to submit a reflective portfolio. The final decision is left to the Examination Committee who may take account of other relevant activities. Candidates are now allowed to seek advice from a DipHIC mentor when preparing reflections for the APL.

Examples of reflections can be found at: <http://www.lshtm.ac.uk/prospectus/short/shic.html>.

The London School of Hygiene and Tropical Medicine offers an MSc in Infectious Diseases as part of the distance learning programme. A study unit in hospital infection is available as part of this programme and taken separately. Candidates may wish to take this unit before embarking on the DipHIC to ensure that their knowledge base is fully developed. Information on the programme can be found at: <http://www.londonexternal.ac.uk/post-graduate/lshtm/id/syllabus.shtml#id205>.

### Awards of the DipHIC (to May 2005)

#### Award of an Honorary DipHIC

The following made major contributions to the establishment of the DipHIC and had their curriculum vitae evaluated against the above criteria by Professors Graham Ayliffe and David Speller, Dr Mary Cook and Sir Joseph Smith. These evaluators

were subsequently also awarded Honorary DipHICs by the Board of Management of the London School of Hygiene and Tropical Medicine.

Professor Barry Cookson  
 Professor Bohumil Drasar  
 Professor Michael Emmerson  
 Dr Adam Fraise  
 Dr Helen Glenister  
 Mr Peter Hoffman  
 Dr Elizabeth Jenner  
 Dr Geoffrey Ridgway  
 Professor Colin Roberts  
 Professor Tom Rogers  
 Dr Richard Slack  
 Dr Robert Spencer

#### Award of the DipHIC by examination

Dr Susan J. Dawson 2000  
 Dr Fatima El-Bakri 2003  
 Dr Dina M.T. El-Zimaity 2003  
 Dr Andrew Hay 2005  
 Dr Satoshi Hori 2001  
 Dr Silke Schelenz 2003  
 Dr Nandini Shetty 1999

There are currently 43 candidates (March 2005) studying for the examination. Almost all applicants are medical microbiologists or clinical scientists, although some nurses are also applying. We estimate that it will take between two and five years to write the portfolio, the project and pass the examination. Several others have notified the Course Committee that they are not able to take the examination within six years and may be re-applying in the future when they have been able to complete their reflections and project. They will not be charged another entrance fee. Applications for the DipHIC have increased within the last few months of the time of writing (May 2005). Discussions at our annual foundation course would also suggest that the qualification is being looked upon as a necessity to demonstrate competency in infection control.

#### Award of the DipHIC by APL

Dr Michael A. Borg 2004  
 Dr Stephen P. Barrett 2005  
 Dr John E. Coia 2003  
 Dr Richard P.D. Cooke 2002  
 Dr William L. Dibb 2003  
 Dr Kamal Mustafa Elhag 2003  
 Dr Sittana El-Shafie 2005  
 Professor Gary French 2005  
 Dr Alan Gibb 2005

Dr Richard Edward Holliman 2003  
Professor Hilary Humphreys 2003  
Dr Gamini Kumarasinghe 2002  
Dr Ann Lewis 2005  
Mr Craig Alan MacIntosh 2004  
Dr Peter Bo Nielsen 2004  
Dr Marie Gabrielle Anne Phillips 2002  
Dr Judith Richards 2003  
Dr Erica Louise Teare 2002

There are nine others who are at various stages of preparing, submitting or having their portfolios examined.

## Acknowledgements

We would like to thank all who have contributed so much to the establishment of the DipHIC. These include the members of the original advisory committee and the course and examination DipHIC committees, examiners, mentors, course lecturers and others who have continued to make us aware of infection control distance learning developments. We also would like to thank those candidates who gave permission for their anonymized reflections to be made available to others on the Internet.

Applicants for the DipHIC by APL should submit their curriculum vitae to:

Diploma and Short Course Secretary  
ITD Teaching Office  
London School of Hygiene and Tropical Medicine  
Keppel Street  
London WC1E 7HT, UK  
Tel.: +44 20 7636 8636x2175/7927 2175 (direct)  
Fax: +44 20 7636 8739  
E-mail: [margit.wimmer@lshtm.ac.uk](mailto:margit.wimmer@lshtm.ac.uk)

It should be accompanied by a cheque for £50 made payable to the London School of Hygiene and Tropical Medicine.

This article is also available on the Internet at <http://www.his.org.uk>.

## References

1. Emmerson AM, Spencer RC, Cookson BD, *et al.* Diploma in Hospital Infection Control (DipHIC). *J Hosp Infect* 1997;**37**: 175–180.
2. Cookson BD, Jenner EA, Roberts C, *et al.* Diploma in Hospital Infection Control: a progress report. *J Hosp Infect* 2001;**48**: 146–151.