



## The CIC® Perspective

### **Brandi Ford, CIC®**

I have only held my CIC® certificate for a short while, but just in merely studying for the exam, I learned so much about my day-to-day work in my current position! I now have more confidence in providing and submitting information to Physicians and to Administrative levels. I am more confident in performing my daily tasks and educating staff! I plan to continue to grow in my profession and obtaining the CIC® provided me with the sense of accomplishment and the boost I needed to keep going!

### **Hwang Ching Chan, CIC®**

Administrative matters aside, the number of CICs in Singapore are few, and I am not sure at this point that this certification is as renowned, or would be as well-received in the local setting, when compared to CICs in other countries. I see this as an opportunity to encourage others in my position to get certified, and take heart that this certification counts towards a personal achievement that will follow the individual, no matter the work setting or employment status. I also found that although legislation and regulations might differ from countries to countries, the base principles of healthcare epidemiology, and infection prevention and control apply generally, and where I thought that preparing for this certification might throw into stark contrast differences between healthcare settings, I saw instead that solutions can always be adapted to fit into the context of each setting.

### **Rodgers Rodriguez Ayebare, CIC®**

Being the first CIC® in my country and in the region means that I am pioneering the era of benchmarked IPC competency and a leader in the field. It means I have made a commitment to best practices in infection control and to support generating evidence applicable to the low-resource setting.

### **Alexander Sundermann, CIC®**

The CIC® degree affirms how hard IPs have worked towards their career. It shows the IPs are dedicated to their job and our patients and have worked towards improving patient safety within the hospital. Further, it displays the knowledge of the IPs that they can impact care and create change. As a young IP, it was important for me to become certified to show others that I am knowledgeable on the standards of infection prevention.



## **Barbara Walker: A Retired CIC®**

### **The initial exam was the scariest...**

...and there weren't many other CICs to go through it with in 1986. I studied the CDC Guidelines and APIC study guides, taking and re-taking the practice questions. For recertification I did it all over again but networking helped tremendously; it was never easy, which is one reason why it was so rewarding. The process of preparing for the test also taught me much, including how to collect and present data, which is an invaluable skill in selling oneself and one's initiatives. I've taken the exam 6 times, thankfully passing every time. I had to drop it in the mid-90's when I changed jobs but picked it up again later.

### **My first certification gave me confidence and a voice...**

I felt that I belonged at the table because, darn it, I knew my stuff. That feeling never left me. When I started putting CIC® after my name, I got many questions: one of the CRNAs said it meant "Chick in Charge" and little by little I earned that nickname. Being a CIC® meant that I could with confidence go anywhere in the hospital, clinics, and offices and watch, ask, inspect, instruct, correct, make better. Being a CIC® meant that I had a bargaining chip in the game, that I had the right to ask for books, classes, travel; that surveyors would accept my credentials and me; that I was very "employable" which is a powerful feeling and led to several consulting jobs. Looking back on a long career, I know that my being CIC® meant lives saved, shorter hospital stays, safer facilities, and many healthcare workers becoming more knowledgeable therefore better caregivers.

### **Get your certification if...**

...you want a challenging creative career in which there is something new every day, in which you are always learning and teaching, in which you work with the best and brightest, in which you have unlimited job opportunities, and in which you can know you make a difference on a broad scale.

### **The burden to stay informed and current is on the IP.**

No one is going to give it to him or her. My way is and has been to join APIC and go to meetings for networking and classes. While working I also kept in close touch with the Public Health Dept. and did on-line research for topics and diseases. I found it necessary to keep several books handy, particularly the APIC Text, Public Health's Manual of Communicable Diseases in Man, and Ready Reference to Microbes. Soon after I became CIC®, I re-wrote my Job Description to add a requirement to obtain 12 CE's per year on infection control and prevention topics and would point this out to Administration as reason for allowing me to go to meetings and conferences. One of the best ways to keep informed is to teach, which I still do to local groups, plus I write articles on infectious diseases and do peer review for nursing journals.