Australian Commission on **Safety and Quality** in Health Care

Australian Guidelines for the Prevention and Control of Infection in Healthcare

3rd edition

Dissemination Plan

31 August 2026

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The Australian Commission on Safety and Quality in Health Care pays respect to the Gadigal people as the Traditional Custodians of Country where the Commission's office is located. We extend that respect to all Aboriginal and Torres Strait Islander peoples, and their deep time connections to land, water and sky.

We recognise that knowledge about healthy Country, community and culture has been developed by Aboriginal and Torres Strait Islander peoples over tens of thousands of years and has been shared for generations. We are committed to partnering with and learning from Aboriginal and Torres Strait Islander peoples through the work that we do.

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Purpose

The Australian Guidelines for the Prevention and Control of Infection in Healthcare (AICGs) support healthcare workers and health service organisations to develop local protocols and processes for infection prevention and control (IPC). The AICGs support health service organisations meet the preventing and controlling infections actions of the National Safety and Quality Health Service Standards, and National Safety and Quality Primary and Community Healthcare Standards.

The Australian Commission on Safety and Quality in Health Care (the Commission) is undertaking an update of the AICGs to develop the third edition of the guideline. This work aims to ensure the guideline remains evidence-based, nationally consistent and aligned with contemporary clinical governance and risk management requirements. The Commission is developing the third edition in accordance with National Health and Medical Research Council (NHMRC) requirements for guideline development and will seek NHMRC third-party endorsement of the revised AICGs.

The purpose of this Dissemination Plan is to outline how the Commission will communicate, promote and support uptake of the third edition of the AICGs. The plan describes the dissemination objectives, target audiences, key messages, dissemination activities, stakeholder partnerships, evaluation measures and governance arrangements that will support dissemination of the guideline.

This Dissemination Plan includes two phases; Phase 1 - Public consultation activities for the third edition of the AICGs in 2026, Phase 2 - Publication and promotion of the third edition of the AICGs in 2027. Post publication, the ongoing maintenance of the third edition of the AICGs will become business as usual for the Commission.

The dissemination activities outlined in this plan support implementation of the AICGs by:

- raising awareness of the third edition of the AICGs among healthcare workers, health service organisations, consumers and other stakeholders
- promoting understanding of revised clinical practice recommendations and new good practice statements
- supporting adoption of evidence-based infection prevention and control practices across acute and non-acute healthcare settings
- encouraging health service organisations to incorporate guideline recommendations into local policies, procedures, education programs and clinical governance systems
- supporting future updates and ongoing maintenance of the guideline through established stakeholder networks and communication channels.

Dissemination objectives

Phase 1 – Public consultation

The objectives of dissemination in this phase are to:

- Introduce the proposed revisions and new good practice statements for transmission-based precautions including:
    - Revision to conditional recommendation 21 – contact precautions
    - New good practice statement for respiratory precautions
    - Revision to conditional recommendation 24 – droplet precautions
    - Downgrading recommended action 26 – airborne precautions to a good practice statement for airborne precautions
    - Removal of conditional recommendation 27 - use of P2 respirators for airborne precautions
    - Removal of conditional recommendation 32 – contact precautions for multi-resistant organisms.
- Provide evidence supporting the key changes to the recommendations for transmission-based precautions including:
    - Revised advice regarding glove and gown use for contact precautions
    - Inclusion of protective eyewear for droplet and airborne precautions
    - A stronger focus on a risk-based approach to infection prevention and control which considers the clinical context, patient factors, changes in disease epidemiology and the emergence of novel infections.
- Introduce the proposed new good practice statements for the appropriate use of waterless models of care in healthcare:
    - New good practice statement for the appropriate use of alcohol-based hand scrub for pre-operative and pre-procedure hand hygiene
    - New good practice statement for the appropriate placement f handwashing basins in clinical settings).
- Provide evidence supporting the development of the good practice statements including:
    - Consideration of operational and patient factors when determining whether alcohol-based hand scrub is appropriate for a particular setting or procedure
    - Taking a risk-based approach to facility design and the location of handwashing basins in clinical settings.
- Introducing environmental and economic sustainability considerations associated with infection prevention and control recommendations
- Provide the public an opportunity to provide feedback on the proposed revisions and new good practice statements for transmission-based precautions and waterless models of care
- Provide the public an opportunity to provide general feedback on the current edition of the guidelines

- Raise awareness that the proposed updates may require health service organisations to review local infection prevention and control policies, staff education materials and clinical procedures
- Raise awareness that the guideline will transition from the NHMRC's MagicApp platform to the Commission's website.

Phase 2 – Publication and promotion

The objectives of dissemination in this phase are to:

- Promote the publication of the third edition of the guidelines
- Communicate the key changes between the second edition and third edition of the guidelines including:
    - The broaden the scope of the guideline to include community and primary care settings
    - Stronger focus on a risk-based approach to infection prevention and control
    - Inclusion of environmental and economical sustainability factors associated with infection prevention and control
    - Revisions to the clinical practice recommendations, new good practice statements and new and revised narrative text in the guidelines (include governance and risk management, environmental cleaning, outbreak management, reprocessing of reusable medical equipment, storage of sterile stock and sustainability, and infection prevention and control practices in non-acute healthcare settings.)
- Raise awareness of updates in the guideline which may change clinical practice
- Promote the revised and new companion resources that support the implementation of the guidelines
- Raise awareness that the Commission is now responsible for the ongoing maintenance of the guidelines, the guidelines will only be available on the Commission web site (no longer on the NHMRC's MagicApp)
- Promote that the Guidelines are endorsed by the NHMRC
- Communicate that the Commission will continue to maintain and update the guidelines
- Support health service organisations and healthcare workers to incorporate the guideline into local infection prevention and control policies, procedures, education programs and clinical governance systems
- Promote nationally consistent infection prevention and control practices across acute and non-acute healthcare settings
- Establish mechanisms to monitor dissemination activities, evaluate reach and engagement, and inform future dissemination and communication activities.

Phase 1- Public consultation for third edition of the AICGs

Public consultation for the revised clinical practice recommendations and new good practice statements for the third edition of the AICGs will run from 31 August to 29 September 2026.

The Commission will use dissemination activities to communicate, promote and support the public consultation of the third edition of the AICGs. **Table 1** includes the public consultation and dissemination activities.

The Commission will clearly communicate that the public consultation focuses on draft, revised recommendations and new good practice statements. Feedback from the public consultation will inform the final version of these recommendations and good practice statements. Feedback on other sections of the guideline will inform future revisions of the third edition of the AICGs and the Infection Prevention and Control program's workplan. The full dissemination work plan is included at **Appendix A.**

Table 1 Phase 1 - Public consultation dissemination strategies and timeline

Strategy	Description	Responsibility	Timing
Public consultation webpage	Publish consultation materials, evidence summaries, supporting resources and online survey links and supporting factsheet on the Commission website.	Commission IPC team and web team	31 August to 29 September 2026
Electronic direct mail (EDM)	Promote public consultation through Commission mailing lists and stakeholder distribution lists including professional organisations, consumer organisations, health service organisations and relevant clinical networks.	Commission IPC team and Communications team	1 week before and during public consultation,
Social media promotion	Promote consultation through Commission social media channels including LinkedIn and X posts one week before consultation opens, when consultation opens and before consultation closes.	Communications team	1 week before and during public consultation
Commission newsletters	Promote consultation through Commission newsletters, including *On the Radar*.	Communications team	During public consultation
Direct stakeholder communication	Distribute information about the public consultation to professional organisations, consumer organisations, health	IPC team	1 week before public consultation

	service organisations, Aboriginal Community Controlled Health Services and other stakeholder groups via mailing lists.		
Governance and advisory committee networks	Disseminate information through the AICGs Guideline Development Group, Infection Prevention and Control Advisory Committee and other Commission committees and networks.	IPC team	1 week before public consultation

Target audiences for public consultation

The target audiences for the public consultation phase focuses on healthcare workers, health service organisations, consumers, healthcare education providers and students and other stakeholders who use, promote or support implementation of the AICGs. The Commission identified these audiences through project planning, public consultation planning, stakeholder analysis and communication scoping for the third edition of the guideline.

The primary audiences for survey dissemination are:

- infection prevention and control practitioners and healthcare workers who use the AICGs to inform clinical practice, local protocols and infection prevention and control procedures
- health service governance representatives who oversee clinical governance, risk management, policy development and implementation of infection prevention and control systems
- jurisdictional infection prevention and control programs that provide advice, leadership and coordination across states and territories
- patients, carers and healthcare consumers who have an interest in safe care and infection prevention and control practices across healthcare settings.

The secondary audiences for survey dissemination are:

- consumer advocates and wider community groups with an interest in healthcare safety and quality
- professional colleges, associations and peak bodies that support healthcare workers, health service organisations and education sectors
- health students and education providers who may use the AICGs as part of professional education and training
- health service executives in public and private health service organisations who influence policy, workforce education and local implementation
- primary and community care health service organisations, aged care services, allied health peak bodies and Aboriginal Community Controlled Health Services that may use the AICGs to support infection prevention and control practices in non-acute settings.

The Commission will reach these audiences through established stakeholder networks, electronic direct mail, newsletters, social media and website content. These channels will

help promote awareness of the public consultation for third edition of the AICGs. A list of stakeholders in included in **Appendix B.**

Key messages for public consultation

The Commission will use clear, consistent and audience-specific messages to support dissemination of the third edition of the AICGs. Messages will explain the purpose of the guideline update, the scope of the revision and the practical value of the updated recommendations and good practice statements for healthcare workers, health service organisations and consumers.

Overarching messages

- The Commission is seeking feedback on the revised clinical practice recommendations and new good practice statements for the third edition of the AICGs.
- The public consultation will primarily focus on revised clinical practice recommendations on transmission-based precautions and new good practice statements for respiratory precautions, the appropriate use of alcohol-based hand scrub and the appropriate placement of handwashing basins.
- The revision of the third edition of the guideline is not a full revision of the entire guideline. Information from this round of public consultation will help inform future development of the third edition of the AICGs.
- The Commission also is seeking general feedback on the second edition of the AICGs to help inform the ongoing maintenance and future revisions of the guideline.

Healthcare workers messages

- The AICGs help clinicians deliver safer care, protect themselves and their patients, and apply consistent, evidence-based infection prevention practices in everyday clinical work.
- Draft updates to the AICGs are available on the Commission's consultation page. Healthcare workers can tell the Commission whether the proposed recommendations and good practice statements are clear, practical and help them feel safe to deliver care in their setting.

Consumer messages

- The purpose of the AICGs is to help keep people safe when receiving care by supporting consistent, evidence-based infection prevention practices wherever they access health services.
- Infection control risk varies between settings and between people. Clinicians and health services will use guidance from the AICGs to assess the risk of infection to patients and to themselves. This will help protect patients and the people caring for them.
- Consumers can provide feedback during public consultation on whether the revised recommendations and new good practice statements are practical and reflect the needs of the Australian health system.
- Consumers can also identify other topics from the current edition of the guideline that should be updated as part of future revisions.

Stakeholder and partner messages

- Professional colleges, associations, health education services, consumer groups, health service organisations and jurisdictional infection prevention and control programs are invited to provide feedback during public consultation and share the consultation resources with their networks.
- The Commission will use feedback from public consultation to inform the revised clinical practice recommendations and new good practice statements. Feedback on other sections of the guideline will inform future priority topics for revision for the third edition of the AICGs.

Risks and sensitivities

The Commission has identified several risks and sensitivities that may affect the public consultation of the third edition of the AICGs. These risks relate to the scope of the guideline update, public interest in transmission-based precautions, the transition of guideline ownership to the Commission, and possible media or stakeholder interpretation of the consultation process. The Commission will provide an information sheet about the AICGs, and public consultation process which includes frequently asked questions, and a glossary of key terminology. The information sheet will use plain language to explain the development of recommendations. The draft recommendations and evidence to decision frameworks will present transparent evidence summaries.

The risks and sensitivities specific to the public consultation are discussed below.

COVID-19 related sensitivities

The Commission may receive negative or emotion-driven feedback on transmission-based precautions and respiratory precautions because of community and health sector experiences during the COVID-19 pandemic.

The Commission will manage this risk by following NHMRC processes, conducting public consultation with a focus on the intended audience, seeking informed and constructive feedback on the draft good practice statement, and submitting the guideline for independent expert review through NHMRC.

Respiratory protection and PPE debates

Recent international campaigns have urged regulators to make respirators, such as P2, N95, FFP2 or FFP3 respirators, the default in all health care. These campaigns may create expectations that Australia should take the same approach, even where scientific evidence remains uncertain or context dependent.

If not handled carefully, this issue may lead to criticism that the draft AICGs sit below global best practice.

The Commission will manage this risk by using clear and consistent messages, explaining the evidence base for revised recommendations.

Incremental revision approach

Some individuals or groups may not support the Commission's incremental approach to guideline revision or may perceive that some sections of the guideline have been prioritised over others. The Commission will provide the opportunity during public consultation for the

public to identify other areas of the guideline that could need revision in the future. The Commission will use this feedback to inform our workplan for the ongoing maintenance of the guidelines.

Out-of-scope feedback

Stakeholders may provide feedback on content that sits outside the scope of the public consultation.

The Commission will manage this risk by clearly explaining that the primary focus of the public consultation is the revised clinical practice recommendations and new good practice statements.

Additional questions for general feedback on the whole guideline will be included as part of the public consultation process.

As part of normal operational processes, feedback about the guideline can be sent separately to HAI@safetyandquality.gov.au at any time and will be addressed separately through ongoing maintenance of the AICGs.

Enquiry management

The public consultation may increase traffic through the IPC program's two main mailboxes (handhygiene@nhhi.safetyandquality.gov.au and HAI@safetyandquality.gov.au)

The Commission will manage this risk by preparing a standard response for misdirected submissions through the ticket and mailbox systems.

Media and stakeholder management

Media reporting on the public consultation for the AICGs may misinterpret the scope, intent or changes, or present the update in a sensational way.

The Communications team will use clear and consistent messages across all channels, identify a spokesperson, if required, to provide plain language talking points and prepare a holding statement for incorrect media claims.

The Commission will monitor media and social channels during consultation and release.

The Communications team will respond to formal media and ministerial enquiries or redirect them to the Program Manager, as required.

Confusion between public consultation and final publication

Stakeholders may confuse the public consultation draft recommendations and new good practice statements with the final version of the third edition of the AICGs. This may lead to premature adoption of draft recommendations before the Commission considers consultation feedback and NHMRC completes its review process.

The Commission will use clear wording on all consultation materials, webpages, emails and social media posts to state that the draft content is for public consultation only and does not represent the final approved guideline.

Limited engagement from non-acute healthcare settings

The project aims to make the AICGs applicable to acute and non-acute health settings. However, some dissemination channels may reach acute sector audiences more effectively

than primary care, community health, aged care, allied health or Aboriginal Community Controlled Health Services.

The Commission will use targeted distribution lists and tailored messaging for primary care, aged care, allied health, consumer organisations and Aboriginal Community Controlled Health Services.

Dissemination activities and materials

The AICGs webpage on the Commission's website will serve as the main access point for information about the update. The Commission will launch a dedicated public consultation webpage on 31 August 2026 which will provide access to consultation materials, the online survey, the factsheet and information about the scope of the revision of the third edition of the AICGs.

Information sheet about the third edition of the AICGs and public consultation process

The factsheet will support public consultation by providing background information about the AICGs, explaining why the guideline needs updating and describing the purpose of the consultation. It will also provide information about the revised recommendations, new good practice statements and evidence-to-decision frameworks. The factsheet will explain the approach used to update the guideline and how stakeholders can suggest other topics for future revision.

Communication processes

The Commission will use electronic direct mail (EDM) to promote the consultation at key points. The EDM content includes three planned emails: an announcement before public consultation opens, an announcement when consultation opens, and a reminder before consultation closes. These emails will direct recipients to the Commission's consultation webpage, encourage feedback through the online survey and ask recipients to share consultation resources with relevant networks.

Social media content will also support the public consultation campaign. The Social Media Content Plan includes LinkedIn and X posts before consultation opens, when consultation opens and before consultation closes. These posts will raise awareness of the consultation, explain the scope of the update and direct people to the Commission's consultation webpage.

During the consultation period, the Commission will use targeted emails and stakeholder networks to share consultation materials with professional organisations, consumer groups, health service organisations, Aboriginal Community Controlled Health Services, primary and community care organisations, public and private health service executives, allied health peak bodies, and professional medical and nursing colleges.

Stakeholders reach and partnership

Stakeholder networks will extend the reach of consultation materials for the third edition of the AICGs, with targeted communication to professional organisations, consumer groups, public and private health service executives, allied health peak bodies, primary and community care organisations, Aboriginal Community Controlled Health Services, and

professional medical and nursing colleges. The Commission will also engage key infection prevention and control networks, including the Australasian College of Infection Prevention and Control (ACIPC), the Australasian Society for Infectious Diseases (ASID) and jurisdictional infection prevention and control programs.

These organisations will be encouraged to share consultation resources through their own communication channels, including newsletters, member updates, meetings, networks and events. This approach will help the Commission reach audiences across acute and non-acute healthcare settings and support awareness of the revised recommendations and new good practice statements.

Consumers have also helped shape how the guideline is disseminated. Consumer representatives were invited to identify consumer stakeholders for public consultation reach, and to share the consultation within their own organisations and professional networks. The consumer groups listed in **Appendix B** will be invited to circulate consultation materials among their members and communities, so that people with lived experience of receiving care can provide feedback on whether the revised recommendations and new good practice statements are practical and reflect their needs.

Phase 2 - Publication and promotion of the third edition of the AICGs

The Commission will use dissemination activities to communicate, promote and support publication of the third edition of the AICGs, planned for August 2027. **Table 2** includes the publication and dissemination activities.

Table 2 Publication dissemination strategies and timeline

Strategy	Description	Responsibility	Timing
Guideline publication	Publish the final guideline and supporting resources on the Commission website following NHMRC consideration and approval. Promotion will include: • Communicating the revised clinical practice recommendations and new good practice statements relating to transmission-based precautions and appropriate use of alcohol-based hand scrub and the appropriate placement of handwashing basins.	IPC team, Communications team and web team	August 2027

	• Promoting understanding of the evidence and guideline development process underpinning revised recommendations and new good practice statements • Communicating the key changes between the second and third edition of the guidelines.		
Redirect website traffic from the NHMRC web site to the Commission's AICG web page	The Commission and NHMRC to develop messaging for the NHMRC web site to redirect the guideline's target audience to the Commission's website.	IPC team & NHMRC team	Messaging to run from July 2027 to Dec 2027
Electronic direct mail (EDM)	Promote the guideline publication through Commission mailing lists and stakeholder distribution lists.	Commission IPC team and Communications team	July and August 2027 (prior to publication and during the launch of the guideline)
Social media promotion	Promote publication of the third edition of the guideline through Commission social media channels.	Communications team	July and August 2027 (prior to publication and during the launch of the guideline)
Commission newsletters	Promote publication through Commission newsletters, including *On the Radar*.	IPC team Communications team	August 2027
Direct stakeholder communication	Distribute publication materials to professional organisations, consumer organisations, health service organisations, Aboriginal Community Controlled Health Services and other stakeholder groups. The Commission to establish a dedicated mailbox to manage enquiries relating to the AICGs.	IPC team	From July 2027 onwards
Governance and advisory committee networks	Disseminate information through the AICGs Guideline Development Group, Infection Prevention and Control Advisory Committee and other Commission committees and networks.	IPC team	From July 2027 onwards

Target audience for the publication of the third edition of the AICGs

Details about the primary and secondary audiences for dissemination are included in Phase 1 - public consultation of this document. The Commission will reach these audiences through established stakeholder networks, electronic direct mail, newsletters, social media and website content. These channels will help promote awareness of the third edition of the AICGs and support its use across acute and non-acute healthcare settings. A list of stakeholders is included in **Appendix B.**

Key messages for publication

The Commission will use clear, consistent and audience-specific messages to support dissemination of the third edition of the AICGs. Messages will explain the key changes between the second and third edition of the guideline, the transition of the guideline from the NHMRC website and MagicApp platform to the Commission's website, the scope of the revisions and the practical value of the updated recommendations and good practice statements for healthcare workers, health service organisations and consumers.

Publication and promotion plan for 2027

Following NHMRC consideration and approval, the complete third edition of the AICGs will be published on the Commission's website. The website will provide access to the final guideline and related companion resources, and the Commission will support ongoing maintenance and dissemination of future updates.

During the publication phase, the Commission will use presentation and event materials to support awareness of the third edition of the AICGs. These materials may include presentations delivered by Commission staff, booth and exhibition materials, conference handouts, posters, flyers, and QR code links to a downloadable PDF copy of the AICGs and companion resources.

Key messages for the publication and promotion of the third edition of the AICGs will include:

- Guideline is now fully owned and maintained by the Commission, and will only be available on the Commission's web site (no longer available on the NHMRC website or MagicApp platform)
- Information about the key changes between the second and third edition
- Promotion of the revised and new recommendations and how these changes may influence clinical practice
- The broadened scope of the guidelines to include primary and community care.

The Commission will promote the publication of the third edition of the AICGs during IPC week in October 2027 and at the Australasian College of Infection Prevention and Control national conference in November 2027.

Further details about the key messages for the publication and promotion of the third edition of the AICGs will be added to the dissemination plan when the final draft of the guidelines are submitted for endorsement and approval for publication in 2027.

Risks and sensitivities

The Commission identified several risks and sensitivities that may affect the publication and promotion of the third edition of the AICGs. These risks relate to the scope of the guideline update, public interest in transmission-based precautions, the transition of guideline ownership to the Commission, and possible media or stakeholder interpretation of the consultation process. These risks and sensitivities are covered in detail in Phase 1-public consultation. Risks and sensitivities specific to the publication of the guidelines are described below.

Content specific risks

COVID-19, respiratory protection and PPE use may remain as sensitive topics. Potential risks associated with these topics will be identified and addressed during the public consultation phase. Information on risks associated with these topics will be updated prior to publication.

The Commission will use plain language to explain the development of all recommendations and good practice statements and will present transparent evidence summaries.

The rationale for risk-based decision-making and related consultation materials will be provided in the guideline. Relevant systematic reviews will be published along with the third edition of the AICGs.

Guideline ownership and governance

Some individuals or groups may not support the Commission becoming the sole owner of the AICGs.

The Commission will manage this risk by explaining that Commission ownership does not change the integrity of the guideline. The Commission will provide details regarding the process for used NHMRC third-party endorsement to maintain guideline integrity.

The Commission will document these matters in the preface of the updated AICGs and on the Commission's AICGs landing page.

Incremental revision approach

Some individuals or groups may not support the Commission's incremental approach to guideline revision or may perceive that some sections of the guideline have been prioritised over others. A version control table detailing the changes between the second and third edition of the guideline will be included in the guideline.

The Commission will manage this risk by publishing a list of revision priorities on the AICGs landing page and acknowledging that several sections require review.

The Commission will use the Infection Prevention and Control Advisory Committee to determine the basis for prioritising sections for revision.

The Commission will also document in the preface of the updated AICGs that revision will occur progressively.

Media and stakeholder management

Media reporting on the final publication of the AICGs may misinterpret the scope, intent or changes, or present the update in a sensational way.

The Communications team will use clear and consistent messages across all channels, identify a spokesperson, if required, to provide plain language talking points and prepare a holding statement for incorrect media claims.

The Commission will monitor media and social channels during consultation and release.

The Communications team will respond to formal media and ministerial enquiries or redirect them to the Program Manager, as required.

Media spoke people will be identified and a draft media holding statement will be prepared.

Dissemination activities and materials

Guideline publication activities

The Commission will promote the publication of the third edition of the AICGs after NHMRC consideration and approval. The Project Plan identifies final publication of the third edition on the Commission's website in August 2027.

Publication activities will include:

- publishing the third edition of the AICGs on the Commission's website
- promoting that the AICGs are solely owned by the Commission and accessible from the Commission's website
- publishing information about the scope of the update, including the progressive approach to revision and topics identified for future review
- sharing links to the final guideline and supporting resources through stakeholder networks and Commission communication channels
- Messaging on the NHMRC's web site about the publication of third edition of the AICGs and transition of the guideline from the NHMRC's website and MagicApp platform the Commission's website.

Digital dissemination

The Commission will use digital channels as the main method for dissemination including:

- the AICGs and consultation webpage on the Commission's website
- online survey platform for consultation
- electronic direct mail through Commission's distribution lists and custom stakeholder lists
- Commission e-newsletters, including On the Radar and corporate electronic newsletter
- social media posts on LinkedIn and X
- direct email to key stakeholders, including professional colleges, peak bodies, consumer groups, health service organisations and Aboriginal Community Controlled Health Services.

Professional and stakeholder engagement

The Commission will use professional and stakeholder networks to promote awareness of the guideline and encourage feedback from stakeholders who use or support implementation of the AICGs.

Stakeholder engagement will include:

- targeted emails to key stakeholders, refer to **Appendix B**
- communication with public and private health service executives, allied health peak bodies, professional medical and nursing colleges, consumer groups and primary and community care health service organisations
- engagement with Aboriginal Community Controlled Health Services and distribution lists relevant to First Nations health and cultural safety
- communication with jurisdictional infection prevention and control programs
- engagement through the AICGs Guideline Development Group, the Commission's Infection Prevention and Control Advisory Committee and the Commission's sub committees and Board.

The Commission will also use internal networks to support promotion of the guideline. These include the Infection Prevention and Control Advisory Committee, the AICGs Guideline Development Group, the Inter-Jurisdictional Committee, the Primary Care Committee and the Private Hospital Sector Committee.

Conferences, forums and events

The Commission has identified future opportunities to promote the third edition of the AICGs through professional forums and events. These activities will support awareness and uptake after public consultation and final publication. Planned opportunities include:

- Infection Prevention and Control Week in October 2027
- 2027 Australasian College of Infection Prevention and Control.

Accessibility and equity considerations

The Commission will consider accessibility and equity when developing and sharing consultation, publication and dissemination materials for the third edition of the AICGs. Materials will aim to be useful, clear and appropriate for the intended audience, including healthcare workers, health service organisations, consumers, carers and other stakeholders across acute and non-acute healthcare settings.

The Commission will use plain language to explain the scope of the update, the purpose of public consultation and the process for providing feedback. Materials will avoid unnecessary technical language where possible and will direct users to more detailed information, including the factsheet, evidence-to-decision frameworks and consultation resources, where further context is needed.

The Commission will consider whether dissemination materials are appropriate for Aboriginal and Torres Strait Islander people, culturally and linguistically diverse audiences and people with accessibility needs, including people with hearing or vision impairment. This will include consideration of language, format, access points and distribution channels.

The Commission uses Web content accessibility guidelines for publication on the Commission's website. A third-party copy editor will include an accessibility check as part of the overall editor update of the guideline.

Evaluation

The Commission will use available communication metrics to assess how effectively dissemination activities reached intended audiences. Measures may include engagement with electronic direct mail, newsletter items, social media posts, consultation communications and stakeholder distribution activities. The Commission will also consider the number and type of public consultation responses received through the online survey.

The Commission will track analytics for the dedicated AICGs webpage, with particular attention to the number of downloads of the guideline and related resources. Where available, website analytics may include page views, document downloads, referral sources and user engagement with consultation and publication materials.

The Commission will use these measures to identify which channels supported the greatest reach and where further promotion may be needed. This will help guide future dissemination activities for the AICGs and other guideline updates.

The Commission will review feedback received through consultation channels, stakeholder emails and enquiries directed to the Infection Prevention and Control team at HAI@safetyandquality.gov.au. Feedback about resources will help identify whether materials are clear, useful and appropriate for the audiences using them.

Stakeholder feedback may also identify preferred dissemination methods, gaps in communication materials, or further opportunities to promote the AICGs through professional, consumer and health service networks.

The evaluation framework, including measures, data sources and responsibilities, is at **Appendix C**.

Governance, Updating and Ongoing Dissemination

Governance arrangements

The Commission is responsible for leading, coordinating and managing the revision, public consultation and publication of the third edition of the AICGs. The Commission provides project management, secretariat support, governance oversight and funding for the guideline development process.

The Commission's Infection Prevention and Control Advisory Committee (IPC AC) provides strategic oversight of the guideline revision process and advises the Commission on national infection prevention and control priorities, including identification of priority topic areas for revision. The Committee oversees the progressive update of the AICGs.

Clinical practice recommendations for transmission-based precautions and the appropriate use of alcohol-based hand scrub and the appropriate placement of handwashing basins are being developed for the third edition of the AICGs in accordance with the NHMRC requirements for clinical practice guidelines and will be submitted to NHMRC for third-party endorsement. To support compliance with the NHMRC's requirements, the Commission established the AICGs Guideline Development Group (GDG) as a time-limited committee responsible for reviewing evidence, considering Evidence to Decision (EtD) frameworks, formulating recommendations and good practice statements, and advising the Commission on responses to public consultation and independent expert review.

NHMRC is independent of the guideline development process and will assess the revised and new clinical practice recommendations for the guideline against the NHMRC Standards for Clinical Practice Guidelines as part of its third-party approval process.

Guideline maintenance and updating

The Commission will maintain the AICGs using a progressive, incremental revision approach rather than completing a full revision of the guideline at one time. The current edition was published in 2019, and best practice suggests that guidelines should be reviewed every 3 to 5 years. NHMRC approval of clinical practice guideline recommendations is generally valid for a maximum of 5 years and applies only to the version of the recommendations approved by NHMRC. Updates or changes to recommendations must be resubmitted for NHMRC approval.

The Commission will maintain the guidelines following their publication in August 2027. The Commission will set up a dedicated mailbox for enquiries about the AICGs and will use the following processes to update context.

The Commission will maintain a log of AICGs enquiries in its record management system. Where clinical content in the guidelines may need to be changed, the following will be considered:

1. If the change is a minor edit or clarification that does not require a review of the evidence, the Commission will amend the wording in an upcoming edit cycle (currently February, June and October). Edits will be listed on the Commission's web page and Table of Amendments in the AICGs
2. If the change is more substantial, the Commission will seek further advice from experts such as the Commission's Infection Prevention and Control Advisory Committee on:

   a. whether a change needs to be made immediately, or
   b. should be deferred until a scheduled review of the guidelines takes place.

New or emerging evidence, a significant change to the body of evidence underpinning the guidelines, and/or implications for the guidelines' recommendation(s), will be considered as part of a scheduled revision of the guidelines.

All edits and changes made to the guidelines will be recorded in the version history log.

The Commission will publish and maintain a list of priority topics for future revision on the AICGs landing page so stakeholders can see what is planned and provide feedback on the work program.

Version control

Once approved by NHMRC, the published third edition of the AICGs will be the single authoritative version, hosted on the Commission's website rather than the MagicApp platform previously used by NHMRC. The website will clearly display the edition, version number and date of the most recent update, and earlier editions will be withdrawn or clearly marked as superseded once the third edition is published. As individual sections are revised under the progressive update approach, the Commission will update the version history on the AICGs landing page so stakeholders can identify which sections have changed and when.

Future dissemination of updates

Dissemination will continue after the third edition is published. The Commission will use the same established channels used for this consultation and launch, the AICGs webpage, electronic direct mail, Commission e-newsletters, social media and stakeholder networks, to notify stakeholders of future updates as priority topics are revised under the progressive update approach, consistent with NHMRC's expectation that guideline developers keep users informed of changes and version history, including when sections are rescinded.

Appendix A. Dissemination work plan

Domain	Activity	Audience	Channel or material	Timeframe	Responsibility	Evaluation measure
Planning and strategy	Confirm dissemination objectives and key messages	Internal project team and Communications team	Dissemination Plan, Communications Scope	Before public consultation	IPC team and Communications team	Approved dissemination materials
Public consultation promotion	Announce public consultation opening soon	Healthcare workers, health services, consumers and stakeholders	EDM, LinkedIn, X, website	Two weeks before consultation opens	IPC team and Communications team	EDM engagement, social media engagement, website visits
Public consultation launch	Promote opening of consultation	All target audiences	EDM, website, social media, stakeholder emails	Monday 31 August 2026	IPC team and Communications team	Survey responses, website traffic, enquiries
Public consultation reminder	Remind stakeholders that consultation is closing	All target audiences	EDM, social media, stakeholder networks	One to two weeks before consultation closes	IPC team and Communications team	Survey responses, website traffic
Publication preparation	Prepare publication and promotion materials	Healthcare workers, health services, consumers and stakeholders	Website content, factsheet, downloadable resources, presentation materials	Before final publication	IPC team and Communications team	Materials approved and published
Final publication	Publish final third edition of the AICGs	All target audiences	Commission website	After NHMRC consideration and approval	IPC team, Communications team and web team	Website analytics, downloads

Post-publication promotion	Promote final guideline through networks and events	Healthcare workers, professional bodies, health services and consumers	Newsletters, stakeholder emails, presentations, conference materials	After publication	IPC team and Communications team	Downloads, event engagement, stakeholder feedback
Events and presentations	Promote updated AICGs at relevant events	IPC practitioners, health services and professional groups	Presentations, booth materials, posters, flyers, handouts	World Hand Hygiene Day, IPC Week, ACIPC Conference 2027	IPC team and Commission staff	Event participation, resource downloads, enquiries
Ongoing maintenance	Use feedback to inform future dissemination and updates	Internal project team and stakeholders	Feedback received through survey, inbox and stakeholder engagement	Ongoing	IPC team	Issues logged, future priorities identified

Appendix B. Stakeholder and distribution groups

ACSQHS - email subscriber lists

- ACSQHC eNews and updates
- NSQHS Standards
- Primary and community health services Standards ACSQHC staff
- Aged Care
- Antimicrobial Resistance/Infection Prevention and Control
- First Nations Health and Cultural Safety
- Mental Health
- Pathology
- Primary Care and Sustainable Healthcare distribution list
- Public and private health service executives
- Allied health peak bodies
- Primary and community care health service organisations
- Aboriginal Community Controlled Health Services
- Health education providers

ACSQHS - committees

- The Commission's Infection Prevention and Control Advisory Committee
- The Commission's Inter-Jurisdictional Committee
- The Commission's Primary Care Committee
- The Commission's Private Hospital Sector Committee
- The Commission's Board

Professional associations

- Australasian College for Infection Prevention and Control
- Australasian Society for Infectious Diseases
- Australian & New Zealand Society of Cardiac & Thoracic Surgeons
- Australian and New Zealand Intensive Care Society
- Australian and New Zealand Neonatal Network
- Australian and New Zealand Society of Nephrology
- Australasian Epidemiology Association
- Australian Group on Antimicrobial Resistance
- Australian Institute of Health and Welfare
- Australian Orthopaedic Association
- Australian Paediatric Society

- Australian Vascular Access Society
- Public Health Association of Australia
- Royal Australasian College of Physicians
- Royal Australasian College of Surgeons
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- National Rural Health Alliance
- Sepsis Australia

Consumer groups

- Cancer Voices Australia
- Consumers Health Forum Australia
- Health Care Consumers Association ACT
- Health Consumer Advocacy Network (SA Interim)
- Health Voices Victoria
- Health Consumers Council of WA
- Health Consumers NSW
- Health Consumers Queensland

Other agencies

- Independent Health and Aged Care Pricing Authority – Classification Clinical Advisory Group
- Australian Centre for Disease Control

Appendix C. Evaluation framework

Evaluation area	Measure	Data source	Timing	Responsibility	How the information will be used
Website reach	Number of visits to the AICGs webpage and consultation webpage	Website analytics	During consultation, at publication and after publication	IPC team, Communications team and web team	To assess whether stakeholders are accessing the main source of information about the AICGs.
Resource use	Number of downloads of the guideline, factsheet, consultation materials and related resources	Website analytics and download data	During consultation and after publication	IPC team, Communications team and web team	To identify which resources stakeholders, use most and whether further promotion is needed.
Consultation engagement	Number and type of responses received through the online survey	Online survey data	During public consultation	IPC team	To assess stakeholder engagement with the revised recommendations and new good practice statements.
Stakeholder feedback	Feedback received through HAI@safetyandquality.gov.au and stakeholder emails	IPC inbox and stakeholder correspondence	During consultation and after publication	IPC team	To identify common questions, concerns, preferred communication methods and opportunities to improve resources.
Electronic direct mail engagement	Open rates, click-through rates and engagement with consultation emails, where available	EDM reporting	After each EDM	Communications team	To assess whether EDMs reached and engaged intended audiences.
Newsletter engagement	Engagement with Commission newsletter items, where available	Newsletter analytics	After newsletter publication	Communications team	To assess whether newsletter channels supported awareness of consultation or publication.

Social media engagement	Post views, clicks, shares, reactions and comments, where available	LinkedIn and X analytics	After each social media post	Communications team	To assess reach and engagement through social media channels.
Stakeholder distribution	Number and type of stakeholder groups contacted	Stakeholder email records and distribution lists	During consultation and publication promotion	IPC team and Communications team	To confirm that key stakeholder groups received consultation and publication materials.
Event engagement	Attendance, enquiries and resource use linked to presentations, conferences, posters, flyers or handouts	Event records, QR code or link data, enquiries and download data	During post-publication promotion	IPC team and Commission staff	To assess whether events support awareness and access to AICGs resources.
Usefulness of materials	Feedback on whether materials are clear, useful and appropriate for intended audiences	Consultation feedback, inbox feedback and stakeholder comments	During consultation and after publication	IPC team	To improve future AICGs resources and dissemination activities.
Ongoing dissemination	Number of enquiries, web traffic, downloads and stakeholder feedback after publication	Website analytics, inbox data and stakeholder feedback	Ongoing after publication	IPC team and Communications team	To inform future communication activities and ongoing maintenance of the AICGs.

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