

VICE PRESIDENT



RECRUITMENT PACK



Would you like to be the next Vice President of the Infection Prevention Society?

About the role

The Infection Prevention Society (IPS) invites applications for the position of Vice President. This is a key role within the Society, working closely with the President and Chief Executive Officer to support strategic priorities and member engagement.

The successful candidate will have the opportunity to develop their leadership experience and contribute to shaping the future direction of IPS.

The appointment will commence on Tuesday 29 September 2026 and will be for a two-year term of office.

Any future transition to the role of President will be subject to IPS governance processes and approval by the Board of Trustees, ensuring appropriate oversight, continuity of leadership, and flexibility as governance arrangements evolve.

Eligibility



Applications are open to Full, Honorary and Institutional Members of IPS.



How to apply

Applications must be submitted via the online application form.

Candidates will be required to complete all sections of the form and provide the following:

- A supporting statement
- A profile photograph

The supporting statement and photograph will be shared with members as part of the voting process.

Voting process

Voting will take place electronically.

Canvassing for votes using IPS Officer roles or IPS communication channels is not permitted.

Dates to note

Applications open: Monday 6 July 2026

Applications close: Monday 27 July 2026, 9am

Voting opens: Wednesday 12 August 2026

Voting closes: Wednesday 2 September 2026, 9am

Role Commitment

The role requires an estimated 3–5 hours per week.

The Vice President is currently expected to attend the following meetings:

- Clinical Leadership & Engagement Committee: four virtual meetings per year
- President & Vice President Drop-in Sessions: monthly informal sessions (30 minutes)

Expenses

Reasonable expenses incurred as a result of fulfilling the requirements of the role will be reimbursed in line with the IPS Expenses Policy.

No financial remuneration is provided for this voluntary role.

Additional Information

The following documents are provided to support your application and offer further context regarding the role and the Society:

Vice President Role Profile, page 5

Clinical Leadership & Engagement Committee Terms of Reference, page 9

[Articles of Association and Regulations](#)

[Strategy 2024-2027](#)

[Equality, Diversity & Inclusion Strategy](#)

[Staff Team information](#)



Role Profile

Vice President

Aim

To support the President, CEO and Board of Trustees in representing the clinical priorities and strategic direction of the Society, ensuring alignment with the Articles of Association.

The Vice President will work closely with the President and CEO to contribute to strategic objectives and organisational leadership, while developing the experience and understanding required for potential future progression.

Any transition to the role of President will be subject to the Society's governance processes and the approval of the Board of Trustees, ensuring appropriate oversight, continuity of leadership, and flexibility as governance arrangements evolve.



Objectives:

1

To support the President and CEO in delivering the strategic objectives of the Society.

2

To deputise for the President, including chairing meetings where required.

3

To actively contribute as a member of the Clinical Leadership and Engagement Committee, providing clinical insight and member-informed perspectives to support the development of recommendations to the Board of Trustees and CEO.

4

To act as a spokesperson for the Society when appropriate.

5

To promote the professional standing of the Society and advocate for the interests of members.

6

To actively promote the professional standing of the Society and support the interests of members.

7

To represent the Society externally and strengthen partnerships across the sector.

8

To work collaboratively with the CEO, officers, trustees and members to support organisational effectiveness.

9

To contribute to the development and strengthening of good governance, including supporting evolving governance arrangements.

In addition to the above statutory duties, the Vice President should use any specific skills, knowledge, or experience they have to help the Board of Trustees reach sound decisions. These may involve:

- Scrutinising meeting papers
- Leading discussions
- Focusing on key issues
- Providing guidance on new initiatives
- Other issues in which the officer has special expertise.

Role criteria:

-  Be a full, honorary or institutional member of the Society, with a strong understanding of its purpose, governance arrangements and strategic direction.
-  Demonstrate a sound knowledge of the Society's history, current priorities and future ambitions, with the ability to contribute meaningfully to its ongoing development.
-  Bring proven leadership experience, with the ability to influence, collaborate and build effective relationships across a diverse membership and stakeholder base.
-  Possess strong strategic awareness, with the ability to interpret complex issues and contribute to informed discussion and recommendation at senior level.
-  Demonstrate well-developed communication skills, both written and verbal, with the confidence to represent the Society appropriately in a range of settings.
-  Have a high level of professional knowledge and credibility in infection prevention and control.
-  Exhibit the ability to inspire confidence and act with integrity, maintaining the trust of members, partners and stakeholders.
-  Be able to commit sufficient time to discharge the responsibilities of the role effectively, with the support of their employer.
-  Demonstrate an understanding of good governance, including accountability, transparency and the distinction between advisory and decision-making responsibilities.

Conflict of Interest

The officer is required to declare any conflicts of interest prior to each meeting.

Where applicable the officer must not participate in a discussion or vote on a matter where a direct or indirect conflict of interest has been identified. Refer to the IPS Conflicts of Interest and Loyalty Policy.

Meetings

Four quarterly IPS Clinical Engagement & Leadership Committee meetings per year and may be expected to participate in additional meetings.

Duration of office

A term of two years.

Appointment to the role of Vice President does not confer an automatic progression to the role of President. Any future appointment to the role of President will be subject to the Society's governance processes and the approval of the Board of Trustees.

If meeting attendance falls below 50%, or where the expectations of the role are not being met, the position will be subject to review by the Board of Trustees, in line with the Society's Articles of Association and IPS Regulations.

Reports to

IPS President

Accountable to

IPS Board of Trustees and Chief Executive Officer

Terms of Reference

1. Clinical Leadership and Engagement Committee

The Clinical Leadership and Engagement Committee (CLEC) serves as an advisory body that provides insights, perspectives, and recommendations on behalf of the IPS membership to the Board of Trustees and CEO.

The group's primary focus is to ensure that the voices of members, including their professional (including clinical, research and educational) expertise in infection prevention and control, inform the strategic direction, delivery, and priorities of the society.

The CLEC plays a critical role in ensuring that the strategic decisions made by IPS are informed by the knowledge and leadership of members working across diverse sectors in infection prevention.

2. Accountability

The CLEC is accountable to the Board of Trustees for ensuring that the voices, professional expertise, and perspectives of members in infection prevention and control, are effectively communicated and considered in IPS's strategic direction.

The CLEC's expert knowledge in IPC is crucial in shaping the society's goals and priorities.



3. Key Functions

Member Representation



Act as a channel for members to voice their opinions, concerns, and suggestions, ensuring that the professional expertise of members in infection prevention and control is represented and valued in decision-making processes. Ensure that the perspectives of different membership categories and professional backgrounds are represented, alongside the diverse membership of the IPS.

Clinical leadership and advisory role

Provide expert advice, recommendations, and co-creation on key strategic initiatives, policies, and programmes developed by the IPS, drawing on members' professional expertise and leadership in infection prevention and control to inform high-quality, evidence-based recommendations. Respond to clinical queries, and inform clinical communications and policy positions.

Review and provide feedback on both the delivery and any proposed changes to the IPS strategy, ensuring alignment with member interests and needs.



Engagement and communication



Facilitate communication between the IPS membership and the leadership, ensuring transparency and fostering a sense of inclusivity.

Assist in developing and delivering strategies to increase member engagement and participation in IPS activities.

Engage with other Societies and stakeholders to promote and engage on the IPS's mission, vision, and strategic delivery, ensuring that the society's expertise in infection prevention and control is communicated effectively to external partners and the broader community.

Feedback on services



Provide expert insights on how IPS services, events, resources, and communications are perceived by members, offering constructive feedback that takes into account the professional needs and expectations of those working in infection prevention and control. Advise and co-create on the development and enhancement of member benefits, including educational resources, networking opportunities, and other support services and support in their delivery

Support for strategic growth

Support the delivery of the current IPS strategy, providing expert feedback to the CEO and Board of Trustees to ensure it aligns with the evolving needs of the membership and strengthens the leadership of the society in infection prevention and control across diverse healthcare settings.

Provide input on membership growth strategies, including recruitment, retention, and engagement initiatives.

Contribute to the development of IPS's outreach efforts to underrepresented groups within the infection prevention community.



4. Membership

The CLEC will consist of:

- IPS President (Chair)
- IPS Vice-President
- IPS Treasurer
- Country Leads
- Branch Leads
- SIG Leads
- Business/Committee Leads
- Early-career representatives

Staff team will attend as required.

5. Chair of the Group

The CLEC will be chaired by the elected President of IPS, with support from a staff liaison, typically the CEO or a designated staff member. The IPS Vice-President will chair the meeting in the absence of the President.

6. Meeting Arrangements

- The CLEC will meet every quarter, with additional meetings scheduled as needed.
- Meetings will be held virtually.
- Agendas and minutes will be prepared and circulated by the staff in advance of each meeting.

7. Reporting

- The President will provide a report on CLEC activity directly to the Board of Trustees and will submit a summary of discussions and recommendations following each meeting.
- Regular updates on the group's activities will be provided to the IPS membership through established communication channels.

8. Confidentiality

- Members of the CLEC are expected to maintain confidentiality regarding sensitive matters discussed during meetings.
- Observers may be invited to attend meetings by prior arrangement, but they will be expected to adhere to the same confidentiality standards.

9. Review and Evaluation

- The effectiveness of the CLEC and its ToR will be reviewed annually by the Board of Trustees, Consultative Committee, and the CLEC members, with specific focus on ensuring that the professional skills and leadership in infection prevention and control are effectively integrated into the decision-making processes.
- Adjustments to the ToR may be made based on feedback and evolving needs of the IPS and its membership.

10. Financial Arrangements

- Reasonable expenses incurred by CLEC members while attending IPS-related meetings will be reimbursed in accordance with the IPS Expenses SOP.
- CLEC members serve on a voluntary basis and are not entitled to financial remuneration.

Our 2024-2027 Strategy

Working **together** to prevent infection



Support

our members to deliver the highest quality and safest care.



Improve

evidence-based IPC practice, surveillance and care in all health and care settings.



Engage

ensure equity of access and support for a diverse and multidisciplinary workforce in all health and care settings.



Impact

influence and shape IPC education and policy.

Include | Progress | Sustain

[See our full strategy.](#)

Working Together, Thriving Together

Inclusive Membership

We will review and reshape our membership structures to be more accessible and inclusive across professions, career stages, and backgrounds – actively reaching out to underrepresented groups and removing barriers to joining and engaging with IPS.

Inclusive Communications and Language

We will review and improve how we communicate – from imagery and language to platforms and tone – to ensure all our messages are accessible, representative, and affirming of the full diversity of our community.

Equitable Events and Education

We will design all events and learning opportunities with inclusion in mind – from speaker line-ups to accessible formats and pricing – ensuring content is relevant, representative, and reflective of the diversity within our field.

Culture of Belonging

We will embed EDI into the everyday culture of IPS by equipping staff, volunteers, and members with the skills and confidence to lead inclusively – and by openly addressing bias, discrimination, and exclusion wherever it occurs.



Diverse Leadership and Governance

We will ensure our leadership and governance reflect the diversity of our members and the public by embedding inclusive recruitment practices, removing barriers to participation, valuing lived experience, and proactively supporting underrepresented voices to step into leadership roles.

Values-Driven Partnerships and Influence

We will align with partners who share our commitment to inclusion – using our platform to influence policy, practice, and public understanding of how inequality impacts infection prevention and health outcomes.

[CLICK TO DOWNLOAD OUR APPLICATION FORM](#)

THANK YOU

FOR YOUR INTEREST



Infection
Prevention
Society