

COMMITTEE NAME:
REGIONAL INFECTION PREVENTION AND CONTROL COMMITTEE (RIPCC)

PURPOSE	To provide organizational level of operations and leadership and to identify, support and monitor implementation of strategic recommendations in infection prevention and control across the Interior Health (IH) care continuum. To support an accountable and collaborative approach with partners and to monitor implementation of best practices to improve patient, staff and visitor safety through prevention of healthcare associated infections.
SPONSOR	VP, Quality, Research & Academic Affairs (VP, QRAA) Chief Medical Health Officer (TBD)
ACCOUNTABILITIES	The Regional Infection Prevention and Control Committee (RIPCC) is an interdisciplinary committee to provide guidance about the infection prevention and control program (IPAC). RIPCC activities will include review of IPC policies, surveillance results and evaluation activities.
AUTHORITY	The following report through their respective member to the RIPCC: Central Okanagan Infection Prevention and Control Committee; Royal Inland Hospital Infection Prevention and Control Committee.
APPOINTMENTS	Members are appointed by the VP Quality and Safety following recommendation from Executive Directors for Quality and Safety and Committee Chairs.



TERMS OF REFERENCE

MEMBERSHIP	• Director, IPAC (Co-chair) • Medical Director, IPAC (Co-chair) • Executive Director, Quality & Patient Safety (Member) • Executive Medical Director, Quality & Patient Safety (Member) • Manager IH Central, IPAC (Member, co-chair of Central Okanagan IPCC) • Co-chair Central Okanagan IPCC • Manager IH West, IPAC (Member, co-chair of RIH IPCC) • Co-chair RIH IPCC • Manager IH North/South, IPAC (Member) • Manager IH East Kootenay/Kootenay Boundary, IPAC (Member) • Epidemiologist, ESU(Member) • IH Deputy Chief Medical Officer (Member) • Manager, CDU (Member) • Corporate Director, Workplace Health and Safety (Member) • Pharmacy Lead, Antimicrobial Stewardship (member) • Director, Medical Microbiology Laboratory (member) • Director, Quality (Member) • Director, Patient Safety (Member) • Corporate Director, Support Services (Member) • Executive Directors, Clinical Operations (Member) • Director, Capital Planning and Procurement (Member) • Director, Long-term Care (LTC) Services (Member) • Director, Primary Care Planning (IH South) (Member) • Manager, Environmental Sustainability (Member) Ad-Hoc members • Manager, Epidemiologic Surveillance Unit (ESU) • Manager, Accreditation and Patient Experience • Medical Device Reprocessing Department representative (Member) • Medical Health Officer lead, Communicable Disease Unit (CDU) • Medical Director, Antimicrobial Stewardship • Regional Knowledge Coordinator, IPAC • Leadership from clinical networks and corporate services
QUORUM & VOTING	Most items will be approved by consensus. If the committee determines an item requires a vote, all members and dedicated alternates present at the meeting will be voting members.
MEETINGS	Regularly scheduled one-hour meetings with a minimum of 4 meetings per year or at the call of the Chairs. Proposed: February, June, October, December



MEMBERS' ROLES AND RESPONSIBILITIES	Co-chairs • Develop agenda: continuous improvement discussions will be embedded into the meeting agendas to ensure administrative efficiencies and overall working group effectiveness. • Facilitate the meetings. • Follow-up with responsible members regarding initiatives, actions, and timelines of the RIPCC activities. • Prepare Briefing Notes for action items that need to be taken to the Quality Management Committee. Members • Attend meetings and fully participate in discussions. • Have opportunity to suggest additions to the agenda. Whenever possible, adequate notice should be given to the Co-chairs so that there is an opportunity to review the issue and provide background information to the working group members prior to the meeting. • Communicate meeting business to their colleagues. IPAC Administrative Assistant • Schedule meetings as instructed by Co-chairs. • Circulates agenda to membership. Under normal circumstances, the agenda and related material will be distributed to the members not less than one week before the meeting. • Draft of minutes will be sent to the members of the working group within 1 week following the meeting date. • Distributes approved minutes to RIPCC members within 2 weeks of approval.
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COMMITTEE PRIORITIES	Alignment RIPCC supports the Interior Health mission to continuously improve health and wellness of population and provide health services in a timely, caring and efficient manner with emphasis on safe and high-quality care. Process and Priorities Surveillance: data to actions • Reviewing infection prevention & control surveillance trends and supporting appropriate actions to reduce healthcare associated infections and antimicrobial resistant organisms. • Recommending activities that prevent and control infections within facilities, programs, and populations within IH. • Defining strategic activities and objectives in the area of infection prevention and control and establishing expectations, support and accountability of stakeholders. • Approving infection prevention and control-related policies and support their implementation IH wide. • Approving new surveillance initiatives, protocols. Education and Evaluation • Promoting and facilitating the education and compliance of all staff in best practices in infection prevention and control across the Interior Health • Considering evaluation results for compliance with regulatory requirements and provincial infection prevention benchmarks. Quality Improvement • Oversight for IPAC elements of accreditation preparation including tracers, standards, and assessment. • Encourage quality improvement in infection prevention and control within facilities. • Collaborate with Public Health to ensure that prevention strategies are consistent with the strategies used in the community. • Oversight and coordination of defined infection prevention and control actions between the IPAC and other Services involved in the Working group. Research and Innovative Practices • Supports applied research in infection prevention and control within facilities.
DATE APPROVED	June 2025
REVIEW DATE	Spring 2026