



IFHE NEWSletter Issue 2015/3 Aug 2015

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Presidents Column Summer 2015



- 1) Can you tell us something about your own organization?
AADAIH is a National Organization, 28 years old, which includes mostly architects, engineers, clinical engineers and companies related to the healthcare business. Yearly we organize a Conference addressed to the Latin American region, and this had arisen the interest from Uruguay and Brazil in a first stage, followed afterward by Chile, Cuba and Costa Rica, which have been recently accepted as new IFHE "A" Members. The configuration of this stronger regional group allows us now to appoint the enrollment of other Latin American countries, like Colombia, Mexico and Peru.
- 2) Looking back at the IFHE Congress 2014, was it worthwhile for you and your colleagues?
All of us are very satisfied with Congress 2014.
- 3) What stands out in particular for you?
The particular experience of putting together our Latin American colleagues with experts from the rest of the world, mainly from Europe, giving the chance to exchange expertise and information from the fields of architecture, engineering and management.
- 4) What does the IFHE mean for you and for your organization?
Up to this moment IFHE was a reference, an international institution with common objectives and purposes. Now I believe that a change is going on and for all of us it will be possible to enhance the opportunities of exchanging knowledge and expertise.
- 5) How do you see international global exchange of knowledge?
I think that health is a basic human right, human healthcare is a global issue, and consequently related global exchange of knowledge supported by new communications and information technologies is almost unavoidable.
- 6) What role does the IFHE for your members?
IFHE must be an updated, dynamic institution working to fix the goals of National Associations, enabling the mutual exchange between them. The IFHE 2014 Congress held at Buenos Aires, the promises of the future 2016 Congress at the Netherlands and 2018 Congress in Australia broaden the expectations of exchanging interdisciplinary knowledge worldwide.
- 7) How IFHE can contribute to further development of healthcare engineering in general?
We are just beginning to work on different matters, and especially on sustainability. The environmental and cultural aspects are different from region to region but some aims, methodologies and experiences may be of common interest. I think that evaluation and benchmarking of different designs and technological solutions should be installed and practiced as a permanent procedure between member Associations.
- 8) What, in your vision, is the role of IFHE in relation to the less wealthy countries?



I think that IFHE could support developing areas by means of research and education.

- 9) You organize the IFHE Congress in 2014. What is your motivation to organize the Conference?

I have attended more than ten IFHE Congresses in the past, and in all of them I have profited from some important new technical proposal or gained contact with interesting people from abroad that resulted in several everlasting relationships. I believe the prospect of such benefits should encourage the motivation of all Conference organizer. As an example of international exchange and contribution, I could mention the three awarded presentations at the Buenos Aires Congress: a) Guatemalan architect Sindy Melissa Godinez de León, and her paper on the design and construction of an Oncological Hadrontherapy Center in Pavia, Italy; b) Argentine architect Ernesto Gonzalez Nagel representing Mozambique, and his paper on the Paradox of a Clinic designed and built in the Heart of a Coal Mine; and c) engineer John Thatcher from the UK and his presentation on Succession Planning & Workforce Development in Healthcare Engineering and Estate Management, delivered at his educational and training center open to applicants from different countries.

- 10) What do you expect from the Conference in 2016 in the Netherlands?

I expect to be informed on the last new technologies supporting excellent design in an appropriate urban context.

- 11) Do you think members of your organization to participate in the NVTG International Building Award which will be presented during the Conference?

According to the interest aroused by your presentation in our 2014 Congress, I consider that a strong participation of our Latin American colleagues should be expected in the said contest.

- 12) Is there a special reason why you are looking forward to the Conference in Netherlands?

Seeing how to solve the challenges of public health, aging population and environmental issues through good examples of healthcare facilities.

Juha Rantasalos welcome speech in the congress of European Congress of hospital engineering in Turku on 3rd of June 2015



Ladies and Gentlemen!

I have a great pleasure to welcome you all to Turku and to the congress of International Federation of Hospital Engineering Europe.



My name is Juha Rantasalo and I'm the president of Association of Finnish Hospital Engineering and the president of the association of European hospital engineering.

On these six days, we have here in Turku European congress and Finnish national congress of hospital engineering, but besides of congresses we have had since last Sunday European and world organization's IFHE board and council meetings. Those meetings bring many delegates outside of Europe too. We have delegates from Argentina, Australia, Austria, Belgium, Brazil, Canada, Denmark, Estonia, France, Germany, Indonesia, Ireland, Italy, Japan, Malaysia, Norway, Poland, Saudi-Arabia, Scotland, South-Africa, Spain, Sweden, Switzerland, the Netherlands United Kingdom, United Arab Emirates, USA and of course delegates from Finland, totally from 28 different countries. Together 665 persons are taking part in this congress as speakers, delegates, exhibitors and organizers.

Some words about IFHE and IFHE-EU. These organizations are the non-profit and non-governmental bodies. IFHE was established in 1970 and IFHE-EU established in 2005 to enable national professional organizations of hospital engineering to join in world-wide federation and European federation.

The purpose of international organizations is to encourage and to make easy hospital engineering professionals to exchange information and experience in the broad field of hospital engineering like facility design, construction, medical engineering, maintenance and estate management.

In this European congress in Turku we have the theme: Better productivity in healthcare with technology. As we know according the economic science an average productivity is computed dividing yield by investments. But before I go deeper to this term productivity let's take a look at what are the factors which must be taken into account and what kind of productivity we are talking about concerning healthcare services.

Let's take a look at the finance and demand of the services: In Nordic countries, UK and in Holland healthcare services are mainly financed by several public resources. Therefore public hospitals and other public producers play the main role in those countries. In the Middle Europe insurance based finance is dominant and variation about producers is more versatile.

All healthcare systems have the same problem, how to focus the resources to the effective performances. This same problem occurs in all systems where the patients don't pay themselves for the services. Demand for services is always bigger than the possibilities to give them. If patients had to pay more themselves for healthcare that would restrict the demand of healthcare services and healthcare producers could manage to keep supply and demand in balance. The inefficiency of the system changes to the problem of service quality and equality of the patients to get healthcare services.

The citizens' equal possibility to get same quality of healthcare services, which is independent of wealth, is the most valuable goal in all welfare countries. Therefore we have to solve the problem; how to keep patients own part of healthcare payment as low as possible and at the same time produce high quality services for all at the costs that the society can afford.

The modern special healthcare tends to take more money year after year. The ability and foremost desire of citizens to pay more taxes is rejected and there are a lot of competitive needs of tax money. Especially during the worldwide economic depression is very challenging to find more money to finance constantly increasing costs of healthcare. In parallel more expensive medical treatments are taking in use in hospitals, and more taxes are needed because of the ageing of population. All the money has to be taken from the same sources – from the taxpayers.

The only way to increase the standard of living and have higher quality of services is to have better productivity in the long term. We must produce more or at least same amount of services with less investments.

When we think about productivity in healthcare and especially in public healthcare we can find how difficult it is to define or compute. In spite of difficulties to compute the productivity we can find that the components which affects to the productivity in healthcare are more unclear than in industry. Let's think about following example: Actual goal for healthcare is to give more healthy years for citizens, cure people from their diseases or to relieve their symptoms if the disease cannot be cured. Healthcare has achieved better results to cure more people and more serious diseases like cancer - better than ever before- but however it's unclear if productivity has improved. That question arises because we have invested a lot of money to a new and modern technology, developed new expensive drugs and have put lot of money to research work to achieve these good results in cancer treatments, but we don't know if productivity has increased in economic sense. I'm sure we all are satisfied to this development in a human sense.



Usually we have to consider productivity of the work instead of general productivity in healthcare. The most important idea is to find better way of working or develop new processes to do more with the same or less resources. The main idea is not to “walk” faster.

If we need more and more resources to produce constant amount of healthcare services, the more we have to pay taxes. Because we live nowadays longer, we need therefore more healthcare services than before which take even bigger part of our general national product and increase our taxation. In many countries taxation is on the level that it cannot be increased without losing employees desire to work or to lose competitiveness of companies. We have to put efforts to increase productivity to avoid over taxation.

European congress for hospital engineering in Turku has a goal to help each other to find means and deliver experiences to make better productivity- in hospital and medical engineering, in ICT, in energy saving, in environment, in hygiene, in leadership, in quality and in management issues. Last but not least to make better hospitals by good architecture. All speakers, delegates and exhibitors will put into practice those aspirations. Parallel for the lectures we have a very versatile exhibition over 100 different companies which are introducing their services or new innovative products to hospital engineering professionals. I hope you will familiarize yourselves with the exhibition during the breaks.

This year 2015 the Association of Finnish Hospital Engineering is celebrating its 20 years anniversary. Twenty years ago the technical directors from Oulu, Kuopio, Tampere, Turku, Helsinki university hospitals and representative from the Association of Finnish Local and Regional Authorities founded the Finnish association year 1995. The main idea was that Finnish hospital engineers and architects should be organized as a group to represent Finland in the world organization of hospital engineering - IFHE. For me personally it has been a great pleasure as a president since 1995 to co-operate with many active men and women during these years in Finnish board and with many national and international colleagues

The Association of Finnish hospital engineering has grown up from the organization of seven members to the organization over 400 members. That has been possible because many active hospital engineering professionals has been ready to put their efforts to arrange education and share their experiences to all others. Especially I have to mention our seven divisions which make valuable work : estate management, hospital security, medical engineering, hospital design coordinators, HVAC and ventilation, electricity and environment divisions which have formed active networks among professionals, arranging education and technical visits to members.

I wish you all have a good time here in Turku and a useful congress. You are warmly welcome !

Suggested document to be decided in Holland 2016:

IFHE STRATEGIC PLAN

2015 - 2020

INTERNATIONAL FEDERATION OF HOSPITAL ENGINEERING

To promote, develop and disseminate hospital engineering technology.

To compare international experience.

To promote the principle of integrated planning, design and evaluation by improved collaboration between the professions.

To promote more efficient management of operation, maintenance and safety of hospitals, their engineering, installations, equipment and buildings.

To offer collaboration with other international organizations.



Our Vision

The International Federation of Hospital Engineering (IFHE) is a non-profit, non-governmental body established in 1970 to enable national engineering professional organizations to join in a world-wide federation. The purpose of IFHE is to encourage and facilitate exchange of information and experience in the broad field of hospital and healthcare facility design, construction, engineering, commissioning, maintenance and estate management.

Our Mission

To promote, encourage and improve the science, practice and professionalism of hospital engineering.

Our Values

Inclusivity, Professionalism, Value, Learning, Responsibility, Independence and Openness.

ABOUT THE IFHE

The Institution of International Federation of Hospital Engineering is a truly global organization connecting hospital engineering professionals and sharing expertise since 1970.

Members of the IFHE share a commitment to envisioning, preparing, mentoring and building for the future, ensuring that the hospital engineering relevant and valued.

IFHE provides a source for international communication of healthcare engineering matters by maintaining and making available a database of members, who may be contacted for information and to arrange for technical visits.

IFHE publishes a Newsletter. This contains summaries of IFHE activities, describes member national organizations, draws attention to publications of interest and to further education opportunities, and diaries healthcare related events.

IFHE maintains a website www.ifhe.info which provides information about the organization and its activities.

IFHE distributes to its members, a free copy of international issues of «Health Estate», Journal of the Institute of Healthcare Engineering and Estate Management, U.K. These include IFHE announcements and selected congress papers.

IFHE collaborating with a publisher produces an annual IFHE DIGEST for distribution direct to listed individual members.

IFHE consults and cooperates with WHO through a designated technical officer, in the development and implementation of a plan of collaborative activities.

IFHE is neither a political organization nor a trade union, it remains neutral from this areas, focusing on what Science in all its disciplines can provide and do for hospital engineering. It is a member led organization.

IFHE offers:

- *Enhanced professional status for its member*



- *Free subscription to the IFHE Health Estate Journal*
- *A voice in national and international debate on hospital engineering issues*
- *Unparalleled opportunities to network with fellow professionals worldwide*
- *Opportunities for higher education and research grants*
- *Impartial, friendly advice on how to become an Engineering Technical, Incorporated Engineer, Architect or Chartered Engineer in Hospital Engineering.*

IFHE Strategic Priorities:

The IFHE established six priorities to ensure that the Institution provides the best possible outcomes for its members.

These priorities are to:

- **Facilitate Awareness** of hospital engineering and developments through the communication of ideas, knowledge, information and the contribution of members, through an international network of branches and special interest groups.
- **Foster Professionalism** by establishing and maintaining pathways and recognized standard of hospital engineering and competency.
- **Increase Knowledge** in the science, practice and professionalism of hospital engineering.
- **Provide Independent Leadership** and confidently promote the value and services provided by the IFHE.
- **Promote the IFHE** by increasing the standing of the Institution and the significance of membership.
- **Organizational Development** – ensure the IFHE continuously improves and provides value to our members.

FACILITATE AWARENESS

The Institution will facilitate awareness through the communication of ideas, knowledge, information and contribution of members.

International stakeholders turn to the IFHE for hospital engineering views and trusted and valued opinion. The IFHE's extensive membership network is unparalleled and readily accessible through modern communication technologies.

The IFHE will continue to provide opportunities to contribute to and access the world's most comprehensive hospital engineering knowledge base including the International Health Journal.

We will

- *Employ clear and modern communication strategies.*
- *Provide advice and positions on contemporary issues.*
- *Provide opportunities for professional engagement, collaboration and decision making.*
- *Provide opportunities to publish and share information.*

FOSTER PROFESSIONALISM

Establish and maintain pathways and recognized standards of hospital engineering and competency.

The IFHE upholds professional standards. The Federation provides continuing professional development opportunities including lectures, workshops and the biannual IFHE Conference.

We will



- *Set and maintain standards and levels of professional competency.*
- *Work with the sector, employers and individuals to assess professional competence and support effective learning.*
- *Facilitate a global learning network*
- *Establish codes of professional conduct and capability.*

INCREASE KNOWLEDGE

Contribute to an increased body of knowledge in the science, practice and professionalism of hospital engineering.

The IFHE aims to encourage links between geographical and professional groupings. The Institution also provides open and transparent mechanisms for independent professional views on hospital engineering industry issues.

We Will

- *Encourage, support and disseminate scientific research and the application of research findings.*
- *Provide advice and influence on standards committees.*
- *Identify key targets for professional knowledge.*
- *Increase the involvement of IFHE members as subject matter experts within the industry*

PROVIDE LEADERSHIP

Provide independent leadership and confidently promote the value and services provided by the IFHE. The IFHE holds a unique position in the global hospital engineering. It is recognized as an independent, credible and non-aligned body capable of providing expert advice. Members are regularly involved in developing the engineering advice necessary for the safe construction of major urban developments and projects. The IFHE membership includes many leading hospital engineers and architects, scientists and Chief Officers both past and present of some of the world's most prominent Hospital engineers.

We Will

- *Provide clear position statements and advice.*
- *Support the development of leadership and fire risk management skills.*
- *Support and encourage research and consultation to identify priorities and effective risk management strategies.*

PROMOTE THE FEDERATION

Increase Federation standing and membership and awareness of the services provided.

IFHE membership confers numerous benefits including professional status that may enhance career prospects. Members form part of a global network with opportunities for networking and ongoing professional development.

We aim to make the benefits of IFHE membership more visible and accessible to fire professionals of all nationalities.

We Will

- *Strengthen our influence and positioning in the hospital engineering.*
- *Promote the value of membership in terms of professional standing and career progression*
- *Promote the benefits of the international forum, network and standards provided by the IFHE.*
- *Identify and foster strategic alliances with high-profile bodies.*



- *Increase the recognition of the IFHE as an independent respected voice for the profession.*

ORGANISATIONAL DEVELOPMENT

Ensure the IFHE continuously improves the delivery of its objectives and provides value to our members. Although IFHE membership confers numerous benefits we believe that even more can be done to ensure all members can be assured of high quality and value. The IFHE will place renewed emphasis on ensuring effective planning and reporting, engaging with its members to determine priorities and future direction.



We Will

- *Improve our Business Planning Processes.*
- *Ensure value and professional standards of service for our members.*
- *Ensure effective management of all required business support services.*
- *Ensure we measure, evaluate and clearly report our performance.*
- *Ensure we market, expand and continuously improve the services we provide.*

THE IFHE VALUES

INCLUSIVITY

The IFHE welcomes the contributions of all hospitals engineering

PROFESSIONALISM

The IFHE sets and maintains professional standards that enhance competency and safety.

VALUE

The IFHE seeks to provide demonstrable value to members and broader society.

LEARNING

The IFHE fosters and supports life-long learning through a global learning network and professional development opportunities.

RESPONSIBILITY

IFHE members are committed to improving the industry and ensuring that positions of responsibility are held by qualified experts.

INDEPENDENCE

The IFHE provides an independent voice for the fire profession without favors or prejudice.

OPENNESS

The IFHE is committed to a policy of openness.

FUTURE DIRECTIONS

We want to ensure the IFHE remains meaningful and that the obvious benefits of membership lead to increased membership and improved community outcomes.

We will seek to ensure the IFHE adapts to changing circumstances and provides value to its members and broader society well into the future. We will aim to support special interest groups and our worldwide branches and foster enhanced communication and engagement between our members.

We Will

- Seek to increase member numbers, diversity within the membership and the involvement of these members.
- Continue our program of supporting hospital engineering within developing nations.
- Seek effective partnerships with key stakeholders, the broader hospital engineering communities.
- Help support our worldwide organization.



SHARING KNOWLEDGE FOR BETTER HEALTHCARE WORLD WIDE

Dear Colleagues,

From April 18th to 20th the Congress of the International Federation of Hospital Engineering (IFHE) will be held in The Hague, The Netherlands, Europe. National and international professionals and researchers will have the opportunity to present their vision and share their experience on specific topics within the main theme of the congress '**Sharing knowledge for better healthcare worldwide**'. The conference will attract many hundreds of visitors from healthcare organizations all over the world.

The organizing committee would appreciate it when potential candidates for speakers would like to email us an abstract including additional information (see format) for a 30 minutes presentation. From July 1 2015 there is the possibility to submit an abstract-paper, the **deadline for the submission is 30 September 2015**. After this deadline the NVTG congressional committee and the IFHE Scientific Committee will evaluate all submissions and make a selection. On 18 December 2015 the organization will announce which candidates are selected for the presentations.

Submit your abstract-paper and make a chance to showcase your expertise and vision to an international audience of professionals and researchers in the cure and care sector.

Please read carefully the instructions in the requirements document before preparing your abstract. Abstracts not adhering to these guidelines will not be considered for its review. The guidelines can be found in the [requirements document](#).

Using this [application form](#) you can submit your abstract-paper.

The 2016 IFHE Congress is an experience you will share with colleagues from dozens of different countries.

For more information regarding the global programme, hotels please visit www.ifhe2016.info. Registration for the congress opens 15/1/2016.

Looking forward seeing you in April 2016!!



Please join IFHE on Facebook www.facebook.com/groups/The IFHE

EVENTS CALENDAR

Please look IFHE webpage for updated information www.ifhe.info

EVENTS CALENDAR

IFHE members are invited to submit information regarding forthcoming events for publication on www.ifhe.info

2016

16 April IFHE Executive Committee meeting 41, Rijksmuseum, Amsterdam, Netherlands
 17 April IFHE Council meeting 49 Rijksmuseum, Amsterdam, Netherlands
 18-20 April IFHE 24th Congress organised by NVTG at the World Forum, The Hague, Netherlands.

IFHE AND 'A' NATIONAL MEMBERS' WEBSITES

Members are requested to keep IFHE informed about changes in contact details and website addresses.

A001 IHEEM UK www.iheem.org.uk

A003 IHF France www.ihf.fr

A009 IHEA Australia www.ihea.org.au

A012 VTDV Belgium www.VTDV.be

A014 IHS Switzerland www.ihs.ch

A017 WGKT Germany www.wgkt.de

A020 HEAJ Japan www.heaj.org

A025 AADAIH Argentina www.aadaih.com.ar

A032 SUAIH Uruguay www.suaih.com.uy

A035 ABDEH Brasil www.abdeh.org.br

A038 AFHE Finland www.ssty.fi

A040 OVKT Austria www.ovkt.at

A042 KIHA Korea www.ikiha.org

A044 SIAIS Italy www.siais.it

A002 FENATO Italy www.usppi.info

A006 NVTG Netherlands www.nvtg.nl

A008 NZIHE New Zealand www.nzihe.org.nz

A010 SAFHE South Africa www.safhe.co.za

A013 AEIH Spain www.aeih.org

A015 FSTA Denmark www.fsta.dk

A018 CHES Canada www.ches.org

A024 FKT Germany www.fkt.de

A028 FSTL Norway www.fstl.org

A033 UNAMHE Uganda www.unamhe.org

A041 IHE India www.iheindia.org

A043 BEAM Malaysia www.beam.org.my

A049 HCI USA www.aol.com

IFHE www.ifhe.info

"Healthcare Engineering creating effective and efficient care world-wide".

Your sincerely

Gunnar Baekken

IFHE General Secretary

