

by
Steve Drinkrow

International Federation of Hospital Engineering President



Steve Drinkrow is the current President of the International Federation of Hospital Engineering (IFHE). His exposure to hospital engineering began in 1985 when he was appointed by Med-Clinic Ltd, in South Africa, as a hospital engineer. He joined the South African Federation of Hospital Engineering (SAFHE) in 1992 as part of the organising committee which hosted the 13th IFHE Congress, in Cape Town during 1994. His involvement with IFHE began at this congress and he has served both IFHE and SAFHE in various capacities since then. SAFHE once again hosted an IFHE Congress, the 19th, during May 2006 at which time he was appointed IFHE President. He has been a director of Medi-Clinic Ltd since 2001 and is responsible for the facilities engineering management of the group's 50 hospitals situated in South Africa and Namibia.

It is once again my pleasure to write the foreword to a joint publication by the International Federation of Hospital Engineering (IFHE) and Touch Briefings. This is the sixth issue of *Hospital Engineering & Facilities Management* since 2001, when the working partnership was inaugurated. Both the publication and IFHE have flourished and continue to add value for the worldwide healthcare engineering fraternity.

The IFHE was established in Rome during May 1970, when several national engineering professional organisations and individuals participating in the 1st International Congress of Hospital Engineering, decided to form a worldwide federation. The primary purpose was to encourage and facilitate the exchange of information and experience in the broad field of healthcare facility design and engineering. The founding statute of IFHE lists the following objectives:

- To promote, develop and disseminate hospital engineering technology.
- To compare international experiences.
- To promote the principles of integrated planning, design and evaluation by improving collaboration between professions.
- To promote more efficient management of the operation, maintenance and safety of hospitals, their engineering installations, equipment and buildings.
- To offer collaboration with other international organisations.

Fulfilment of the founders' objectives is confirmed by IFHE's continued growth and stature as the only organisation worldwide which provides an umbrella covering the multiplicity of persons, institutions and professions involved in healthcare engineering. National organisation membership has spread to thirty countries; embracing some eleven thousand individual. Last year a regional group – IFHE Europe – under the auspices of IFHE, was formed to address particular challenges arising in the EU. In Latin America, the seeds have been sown for the formation of a second IFHE regional group in the not too distant future; and in East Africa there is the prospect of further regional collaboration.

During my term of office as President of IFHE, it is one of my aims not only to promote our objectives and attract new members, but also to strengthen the already healthy bonds we have with our member countries and with kindred organisations. With the specific aim of strengthening relations with Latin American countries, IFHE Vice President, Mr Francisco Costello, attended the 17th Congress of Hospital Architecture and Engineering on the occasion of the 20th anniversary of the Asociacion Argentina de Arquitectura e Ingenieria Hospitalaria in Buenos Aires, where delegates from Uruguay, Colombia, Peru, Brazil, Panama, Paraguay and Mexico were present. All indications are that considerable representation from the above mentioned countries can be expected at the 20th Congress of IFHE to be held in Barcelona, Spain, in October 2008.

I attended a World Health Organization workshop in Nairobi during August this year with representatives from Kenya, Uganda and Tanzania, in preparation for arranging a regional workshop in East Africa during 2007, under the IFHE banner. IFHE General Secretary, Mr Barney Shapiro, attended the 26th Annual Seminar of the Public Health Group of the International Union of Architects in August this year, in Pretoria. This opportunity was used to strengthen co-operation with that organisation and to acknowledge Professor Yasushi Nagasawa's election as IFHE Second Vice President and representative of the Healthcare Engineering Association of Japan, which is to host the 21st IFHE Congress in Tokyo in 2010.

This publication – produced as a result of the collaboration between several parties – is an example of the manner in which a major purpose of IFHE continues to be fulfilled. The initiative and impetus provided by Touch Briefings is acknowledged. The role played by individuals in the IFHE family on the editorial advisory committee and through the articles included in this publication, contributes to its success. It is trusted that the distribution of this report will reach all individual members of IFHE as well the wider world of persons involved in the field of healthcare facility design, engineering and estate management. ■