## Mexico City, Panamerican Conference, October 2006

## Buenas dias!

First and foremost I would like to thank the Asociacion Mexicana de Profesionales en Esterilizacion and her president Mtra. Enfra. Maria de Lourdes Melendez Sotelo for their invitation to me to attend this conference. Not only me, but to my surprise, so many did the same. This is excellent because it is a proof of the wide common interest in our working field.

But allow me to introduce myself.

I am Wim Renders and I work as a pharmacist in the general hospital St John (St Jan) in Bruges, Belgium. Amongst others I am responsible for the central sterilization department. I am also the president of the Flemish Sterilization society and of the World Forum for hospital sterile supply. I would like to give you some information about the World Forum.

In antiquity the forum was in the centre of town; it was the place where the citizens gather to talk, to exchange news and to engage in, sometimes political, discussions. In short, it was the place for social contacts. The WF actually wants, for sterilization, to be a place like those forums. It wants to be the meeting place of all those who are interested in the reprocessing of medical devices. These are of course in the first place the members of staff working in the central - or sometimes not central - sterilization departments.

Because the Forum does not want to compete with national or regional sterilization societies, but on the contrary it wants to support and to provide a surplus value to them, it works together with these societies. Moreover, if a national society does not exist, the forum tries to stimulate the setting up of such a body. A national association is the best way of making progress in a particular country because a local society provides the ideal channel for the transfer of knowledge thus creating a higher level of awareness and expertise. And an association can also function as a partner with whom the authorities can discuss relevant matters. Consequently the drawing up of guidelines and codes of conduct becomes possible and even more importantly: the application of these can be made compulsory.

At the moment we have 37 members.

The European Forum was founded in 1999 and celebrated its seventh anniversary on the 17<sup>th</sup> of June this year.

Initially our focus was exclusively on Europe, as the name clearly reflected. We were of the opinion that the European norms had to be the basis for cooperation. It did not make sense to us, at that time, to start a discussion about global norms when they were not directly applicable in Europe. But soon it became apparent that sterilization does not stop at the borders of the old continent. One look at our questions and answers pages makes this abundantly clear.

In other continents too serious efforts are undertaken to improve the quality of the sterilization departments. And in the meantime also the Comite Europeen de Normalisation (CEN) and the International Standards Organisation (ISO) started collaborating very closely with the aim of arriving at a worldwide harmonisation of guidelines.

So globalization has become an irrepressible force in sterilization as well. The EFHSS board recognised this and it adopted the name of the forum, at the occasion of the board meeting in Lillehammer (last May), accordingly to: WFHSS or World Forum for Hospital Sterile Supply.

WFHSS functions is an "unincorporated association" which means that it has a loose, informal structure but with a judicial basis.

Important to mention is also that none of our collaborators from the sterilization area, is paid.

It is our mission to disseminate knowledge about sterilization.

To achieve this aim we make mainly use of two channels. In the first place there is our website: <u>www.wfhss.com</u>. Via the website it became possible to reach all interested persons in a straightforward, simple and obvious manner.

The information we provide can be summed up with the movie title 'Back to the Future'.

We do not only want to follow the most recent developments and to comment upon them critically but we also try to provide basic information.

In this way we want to contribute to the development and progress of all departments.

Important items on our website are:

- The education pages,
- The questions and answers pages,
- The congress information,
- And the information about our industrial partners.

Our annual congress is the second channel of communication. The organisation of this congress is always entrusted to one of our member societies.

Most of the time our congresses focus on innovation and research; the newest trends are discussed and an insight is given into the future of sterilization. Of course networking is an essential part of our congresses. You can personally meet the gurus of the sterilization world and talk to your colleagues. The importance of these contacts cannot be underestimated. Investigation indicates that the drive in an organization to learn and to innovate is amongst others influenced by the intensity of its contacts with domestic and foreign organizations. The World Congress offers this opportunity.

Our eight congress will be held in Baden, Austria from the 3th to the  $5^{th}$  of May 2007. I trust I will meet you there.

However, as the financial threshold for participating in these conferences is often too high to allow everybody to attend, despite our strenuous efforts to keep the costs as low as possible, and as we want to reach the numerous anonymous collaborators, we organise regional workshops as well.

Apart from these initiatives the workgroup "education" worked out a training proposal which consists of 3 modules: technician, teamleader and manager. We trust the training model can be a source of inspiration for those societies who have not yet set up their own training programmes.

The purpose of all these activities is the provision of information. Why is this so important? The answer is simple: knowledge is the best medical device. Knowledge makes it possible to form your own judgement and to take informed decisions. Moreover, knowledge provides the necessary self confidence which allows the CSSD to be recognized and treated as an equal partner in the hospital.

Knowledge furthermore creates self respect which makes the provision of a quality sterile medical device a simple matter of fact procedure. In summary: knowledge is almost synonym to progress.

It is definitely not the ambition of the WF to become the biggest Sterilization Society in the world. In actual fact the WF itself is not that important. As I mentioned earlier the national societies are far more important as they have to play a key role in the transfer of information. They are in close touch with what is happening in their areas.

But the departments themselves are of the utmost importance. They are in the frontline. They are putting theory into practice. This is essential because if we do not succeed in bringing about changes and progress in the hospital sterilization departments, our organisation has no reason for being. The extent to which the departments succeed in providing a high quality end product will determine to a large degree the success of the sterilization department, the national society and ultimately also of the World Forum.

And I am convinced that solidarity is the one of the keys to success. For us this solidarity has to take the form of the dissemination of knowledge, in other words the willingness to put the expertise and knowledge we have acquired at the disposal of others. This can be done at a local, regional, national, international, European and even global level. Especially at a local and bilateral level many more opportunities should be created to work together than has been the case up to now. Within the same region it cannot be too difficult for example to stimulate the participation in each other's congresses. Situating one's own department within a broader reference framework could provide a strong stimulus for a critical analysis of one's own practices. Learning from each other provides a shortcut to quality improvements. We have experienced this ourselves in Flanders. The steep learning curve, the substantial quality improvements we have managed to achieve only came about after we started comparing our practices with those in our neighbouring countries and to learn from them. As a result new initiatives were taken and new approaches and processes introduced. The quality changes brought about as a result of this process of sharing expertise and knowledge were astounding.

This form of solidarity empowers everyone, does away with paternalism and avoids the pitfall of the knowledge economy. In the latter everyone guards his or her own comfort zone, with the result that the fault lines between the poor and the rich, the east and the west, the north and the south become even more sharply etched. By sharing knowledge and expertise, through permanent co-operation and the building of partnerships the gap between the haves and the have-nots can be bridged. Fortunately a lot is happening in this respect. But things can and should get even better. There still is too much reluctance to share knowledge, probably out of fear that others could profit from your work of simply through lack of interest or time. If we just could shelve our fears and become more open, sterilization worldwide could get a big boost.

In this way solidarity could increase mutual coherence, have a big impact on quality and contribute to a gradual worldwide harmonization of the sterilization departments. With this I envisage that each department, wherever it is located, meets for itself maximal quality criteria. Of course the available means always have to be taken into account because one can only work with the means put at one's disposal. But one should get the maximum out of the available means. For some of you obtaining an ISO 9001 certificate, the introduction of a quality management system or even a central CSSD department might seem like a far off dream. And a lot of steps, often very small ones will be needed to get closer to the ultimate goal. But you should never forget that by believing in your dreams you can turn them into reality. I am also convinced that harmonization of the departments is not a pipedream but a statement of fact through which we indicate that we want to continue building the road to the future in the interest of the collaborator, the care provider and the patient.

One for all and all for one is the way in which we should build the future of the CSSD in order to be in a position which allows us to successfully meet the big challenges we are facing. I trust that we can join forces and together walk the road to a better future.

Good luck.

Wim Renders

Mexico City, 04/10/2006