

MORE THAN A PARTNERSHIP

# NEW BUSINESS MODEL IN HAITI, TOO

An extraordinary scenario is unfolding in the mountains of northern Haiti. It's not your classic medical miracle, but, then again, it's all that and more. In this first-of-its-kind endeavor, Hôpital Sacré-Coeur in Milot, Haiti, has become fully partnered with Holy Name Medical Center of Teaneck, N.J., through a strategic process as remarkable as is the level of commitment it represents. On the verge of closing, the 27-year-old Haitian hospital has fiscally merged into Holy Name Medical Center.



BRUCE  
COMPTON

Hôpital Sacré-Coeur, with 120 permanent beds, serves more than 225,000 people in Milot and the surrounding region. Long-established bonds of camaraderie, affection and commitment between the people of Milot and their New Jersey supporters were the “superglue” that cemented this partnership into permanence.

Remember January 2010, when a 7.0 magnitude earthquake devastated the area in and around Port-au-Prince, 75 miles south of Milot? Within days of the tragedy, Hôpital Sacré-Coeur ballooned from a 71-bed facility to an intensely busy, 400-bed unit. Medical volunteers converged on the area, and all of Milot became a medical facility, a hospital without walls.

One of the physicians who eagerly offered assistance was David Butler, MD, an obstetrician from Holy Name Medical Center who was an experienced hand in Haiti, having made his first trip there as a medical volunteer nearly two decades earlier.

A passionate advocate, Butler had persuaded other members of Holy Name to join him on his

increasingly more frequent trips to Milot over the years. Two of those were Holy Name Medical Center's Timothy Finley, DO, and Alan Gwertzman, MD. After returning from a 2010 trip, they described for Holy Name CEO Michael Maron the frustrating dearth of even rudimentary medical supplies and equipment at Sacré-Coeur. Patients were dying, they said, because the hospital lacked simple supplies that are taken for granted in the U.S. — such as oxygen.

In response, Maron led a community-based fundraising campaign to cover the \$125,000 price tag for an oxygen processor that was appropriate for use in Milot, and he made his first journey to Haiti to ensure the processor was properly installed and operating at Hôpital Sacré-Coeur.

“Once you go to Haiti, you're bitten by the bug,” said Maron, who has logged numerous trips back.

“Despite the incredible amount of malnutrition, corruption and everything else that is required simply to survive in Haiti, most Haitians, amazingly, project a look of hope and a sense of goodness,” he said. “I once talked to a little girl whose leg had been amputated. She said to me, smiling, ‘I am still alive.’”

Along with thousands of others, this young girl had received her medical care through the Center for the Rural Development of Milot (CRUDEM), a multipurpose mission created in 1968 by the Brothers of the Sacred Heart of the Montreal Province to assist impoverished people in and around Milot. CRUDEM became a public charity in 1995 under the aegis of St. Louis surgeon Theodore Dubuque, MD, and St. Louis businessman Carlos Reese.

CRUDEM has spearheaded the fundraising,

**Since the new business model took effect, Hôpital Sacré-Coeur treatment and care plans are more uniform and consistent.**

coordination of volunteers and technical support of Hôpital Sacré-Coeur for more than 25 years, but its resources eventually declined to the degree that, in April 2012, its leadership recommended closing the hospital.

As the adage goes, “timing is everything.” At this critical juncture, Maron’s Haitian trips had become more and more frequent; in 2012, he boarded a plane for Milot a half-dozen times, often accompanied to the village by a small contingent of Holy Name staffers.

And a synchronicity presented itself, one that Maron and the board of trustees of Holy Name found deeply compelling. The Congregation of the Sisters of Saint Joseph of Peace — long-time sponsors of Holy Name Medical Center — had themselves become involved with Hôpital Sacré-Coeur in 2009. The opportunity to fulfill their sponsors’ medical mission represented a compelling rationale for Holy Name to take over management of the struggling hospital, Maron said.

“We have a responsibility and an obligation to achieve all we can to improve conditions in Haiti,” he said. “Our faith plays a key role in our decision-making, and we *don’t* believe in coincidence. Rather, there’s a reason why our emotional and financial investment in Hôpital Sacré-Coeur was increasing, there’s a reason that the Sisters of St. Joseph of Peace, too, had adopted a Haitian ministry. With that in mind, when faced with the reality



Valis Chanlatte, MD, with a patient.

Photos by Kohl Threlkeld

that the hospital could close in 2012 because it was out of funds, we had to act quickly to save it.”

#### NEW BUSINESS MODEL

The cost of running a 120-bed hospital in Haiti runs about \$3 million annually, a fraction of what the tally would come to in the U.S. At first, Holy



Myrtha Timeny, ICU/PACU, a nurse, left, and a nursing student attend to a patient at the clinic.

Name decided it would supplement — or fill in the holes — in the Hôpital Sacré-Coeur operating budget to the tune of \$1 million while helping CRUDEM raise additional monies.

Increasing its financial contribution, as well as its investment of volunteer hours, required major sacrifices at Holy Name, yet it quickly became evident that there still wouldn't be sufficient funding to keep the Haitian hospital open. But if Hôpital Sacré-Coeur closed, not only would its community lose access to health care, its local economy would be stunted because the hospital is a center of local commerce in Milot — the hospital walls are the gathering place for vendors selling chicken, fish, fried and boiled plantains, rice and beans, yams, grits, coffee and sugar cane.

In a display of creative problem-solving, Holy Name took over CRUDEM by becoming the foundation's sole member and decision-maker. This means that the CRUDEM Foundation, while remaining a 501(c)(3), is wholly owned and legally responsible to the Holy Name Medical Center Foundation. Essentially, CRUDEM and Holy Name are one and the same, but all funding is funneled through the foundation.

The transition has required additional personnel at CRUDEM. The foundation's paid staff expanded from one individual to four, at least one of whom is on site at Hôpital Sacré-Coeur at all times. The staff comprises an administrator, a U.S.-trained critical care nurse of Haitian descent; a facilities manager; and a Washington, D.C.-based attorney. Butler, past chairman of the Holy Name Medical Center board of trustees, assumed the role of CRUDEM chairman in 2012, and Maron, who became a board member last year, assumed the role of president.

The new relationship is grounded in mutual respect and joint participation, with counterparts in Haiti and New Jersey staying connected. The

Hôpital Sacré-Coeur CEO, Harold Prével, MD, communicates regularly with Holy Name CEO Maron, and the chiefs of the medical, nursing and facilities staff are in contact regularly. A recent \$80,000 investment in computers provides respectable access to Internet bandwidth, opening the door to significant service improvements — such as allowing Holy Name radiologists to view

X-rays from Haiti in real time. New pharmacy and medical protocols also have been put in place.

Since the new business model took effect, Hôpital Sacré-Coeur treatment and care plans are more uniform and consistent; delivery of supplies and equipment is increasingly predictable; employee morale is on the upswing; and staff is receiving regular, uniform training.

From Maron's perspective, the standout benefit for Holy Name Medical Center is that every time a staff member returns from a stint in Haiti, he or she comes back "a far better person, which is good for that employee as an individual and great for Holy

Name," he said. "The experiences strengthen one's sense of camaraderie and sharpen critical-thinking skills. By having to think out of the box, you become an unbelievably better health care provider."

## THE FUTURE

Fundraising for a 200-bed replacement hospital for Hôpital Sacré-Coeur is just beginning at Holy Name. Maron points out that everything in Haiti is very inexpensive by American standards. For example, if a U.S. hospital wants to engage with Haiti but on a smaller scale, it can sponsor a nurse for \$750 a month or a physician for about \$24,000 a year.

Plus, the Haitian government has pledged to donate land for the new facility. Maron, an adherent to American architect David Burnham's ad-



A Haitian woman prepares a child for weigh-in.



vice to “make no little plans,” is already reviewing preliminary blueprints for the new Hôpital Sacré-Coeur.

He said virtually everyone at Holy Name has, or will have, the opportunity to volunteer at the Haitian hospital, and the volume of requests among both the medical and nonmedical staff is “going through the roof. I couldn’t have replicated a training program that would have been this effective in terms of enhancing positive engagement.”

Holy Name actively seeks other hospitals with which to partner; however, Maron advises any organization considering such an undertaking to begin by conducting an honest self-examination: “Ask yourself, why would we want to undertake this kind of effort? Don’t do it for the wrong reasons — like as a PR stunt. Also, you must be able to accept limitations. Haitian standards of care aren’t the same as U.S. standards; that’s difficult for some clinical people to manage.”

Joni Paterson, M.Div., Ph.D., director of development and administration for CRUDEM, cautions against people trying to “fix” Haiti. On the organization’s website, [www.CRUDEM.org](http://www.CRUDEM.org), Paterson writes, “The best answer isn’t about fixing Haiti but about understanding Haiti, taking the time to let go of presumptions and remain open and teachable. It’s less about fixing Haiti and more about listening to the voices of Haitians, sharing

resources based upon their stated needs and being willing to be transformed by the releasing of agendas.”

“With our new and improved procedures, we are teaching the staff more consistently while

building their trust in us,” Maron said. “Our approach is to rein in some of our medical volunteers without losing them. Some will inevitably fall off if they don’t buy into our objectives.”

Prévil believes Hôpital Sacré-Coeur is beyond fortunate to be in partnership with Holy Name. “They not only bring financial support and expertise,

they offer their hearts and the team spirit that prevails at Holy Name,” he said. “Any health care facility in Haiti would not only dream of such support; they would include it in their daily prayers to be blessed — as we are blessed — with such a gift.”

*For more information about how you or your hospital can partner with Holy Name by making financial or resources donations to this vital Haitian medical mission, go to [www.CRUDEM.org](http://www.CRUDEM.org) or call Joni Paterson at (413) 642-0450.*

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A staff member sterilizes a tiny finger before drawing blood.

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