



After the Haiti Earthquake: A Healthcare Missionary's Personal Journal



By Russell Maroni

*A publication to benefit ongoing
post-Earthquake relief efforts in Haiti*

www.LeanForHaiti.org



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We are freely giving away this journal in PDF form and making it available in eBook formats. Where we must charge for it, 100% of proceeds are going to **Nuestros Pequeños Hermanos**, a non-profit that runs orphanages in Central and Latin America. If you found this journal to be moving or interesting, we'd kindly ask you to donate directly to the orphanage, see page 5 for details or visit www.LeanForHaiti.org.

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I had the distinct pleasure of meeting the author of this journal, Russell Maroni, in March 2010 as part of a visit to Akron Children's Hospital in Ohio with the Healthcare Value Leaders Network.

I first heard of him over a dinner where the hospital's Chief Operating Officer was positively glowing about Russell – about both the selfless volunteer work that he performed in Haiti and his use of his training in the “lean” methodology and the “A3 report” that he wrote about the trip. For more about lean, see pages 7 and 8.

The next day, at the hospital, I was able to meet Russell in the radiology department. We chatted and I was impressed with him as an earnest, humble man.

I asked Russell if he would be willing to share his journal and his A3 as part of an effort to raise much-needed funds for Haiti's ongoing recovery. Russell graciously shared his very personal journal and we brainstormed about how to share this in a

way that would best help Haiti. I am ashamed that I dragged out this process so long, but Russell couldn't have been more patient or kind about my delays in getting this published.

As you read Russell's journey, it's not at all a textbook about the use of “lean” management methods and philosophies – it's a very personal journal and one that really transports you to the middle of a global catastrophe. You will read about Russell's leadership during this desperate situation and you will be uplifted by his efforts to both teach the Haitians he ended up working with in a medical capacity.

We have published Russell's journal as he wrote it, with very minimal editing. All photos were taken by Russell or his fellow volunteers and you can find his A3 summary at the end of this document.

Thank you for taking time to read this and thank you for your donations to **Nuestros Pequeños Hermanos** (see page 5).

[Mark Graban](#) is a Senior Fellow with the [Lean Enterprise Institute](#) and the [Healthcare Value Leaders Network](#).

How You Can Donate to Help in Haiti

Russell Maroni has identified a charitable organization that comes well recommended from a doctor/friend at work who also does work in Haiti (the field hospital where he worked has since been closed).

At the suggestion of Dr. Jeff Kempf, Russell has chosen to support an orphanage called **Nuestros Pequeños Hermanos** (NPH) -- it runs a free children's hospital in Port-Au-Prince.

The web page for the organization is <http://www.nphhaiti.org/>

To Donate:

Visit the NPH website to donate via the web - [LINK](#)

U.S. readers can donate via "Friends of the Orphans," a 501(c)3 non-profit organization:

- **Web donation** [LINK](#)
- **Mail a check:** [LINK](#)



You can specify that your donation support Haiti specifically, or you can allow NPH to choose where to use donations.

History of Nuestros Pequeños Hermanos *(reprinted from their website)*

In 1954, a boy was arrested for stealing from the poor box of a small church in Cuernavaca, Morelos, Mexico. The young priest in charge, Father William Wasson of the United States, was unwilling to press charges against this "thief." Instead, he asked for custody of the boy. One week later, the judge sent him eight more homeless boys. By year's end, 32 boys were in residence **and Nuestros Pequeños Hermanos** (NPH), Spanish for "Our Little Brothers and Sisters," was born.

Over 16,400 children have grown up in the NPH family, which now operates homes in

eight additional countries: Honduras, Haiti, Nicaragua, Guatemala, El Salvador, the Dominican Republic, Peru and Bolivia.

Today, over 3,300 children are being cared for in a loving, secure environment.

For a detailed history of NPH, see the [Chronology of Nuestros Pequeños Hermanos](#).

Currently, there are over 3300 children (Jan-2009). Mexico: 795 Honduras: 547 Haiti: 597 Nicaragua: 320 Guatemala: 319 El Salvador: 459 Dominican Republic: 172 Peru: 43 and Bolivia: 61. The number of children constantly fluctuates as new children arrive and older children leave as they reach adulthood. For more detailed numbers, please see [our census and statistics page](#).



Russell Maroni Bio

Russell Maroni was born November 3rd, 1982 and was raised in Jewett, Ohio. He attended Harrison Central High School and later graduated from The Ohio State University with a Bachelors degree in Allied Health and Radiography. After graduating in 2006 he moved to Akron, Ohio and began his career as an X-ray Technologist at Akron Children's Hospital. He continued this role while earning his graduate degree and graduated with a Master's of Business Administration and Healthcare Administration from The University of Phoenix in 2009.

Russell has attended Grandview United Methodist Church since 2006, where he serves as the Chairman of the Board of Trustees. In 2008 he married Jennifer Foster of Carrollton, Ohio and moved to Canal Fulton, Ohio. Their first child, Marie Maroni, was born in the spring of 2010 and they are expecting their second child in June of 2011. Russell now works at Akron Children's Hospital as the Clerical Supervisor in the Radiology Department.



Healthcare costs are rising too quickly and too many preventable errors occur in most hospitals around the world. Today, a number of leading organizations are demonstrating they can provide better value through proven and tested process improvement methods called "lean."

Healthcare professionals often ask how lean, a methodology associated primarily with Toyota and manufacturing industries, can apply in healthcare. Lean is not just a set of tools for improving quality in a factory - it is a set of methods, principles, and philosophies that form a complete management system. Lean can be applied in any setting where work is done, employees face problems, and people lead or manage others, and this includes healthcare. Lean supports the purpose of any healthcare organization - providing the best patient care using the minimum number of resources.

Lean, in any setting, is a customer-focused management philosophy. In healthcare, lean means focusing on the patient as the

primary customer. A heightened patient focus means implementing new lean methods for ensuring patient safety and quality of care, such as checklists and error proofing methods. Patient focus also means designing processes and physical spaces with the patient in mind, minimizing wait times and travel distances. Simply put, many lean hospitals describe their goals as follows: "No waste, no waiting, zero harm."

Lean also places a premium on supporting healthcare professionals and staff to maximize their patient care time and activity. Before lean, healthcare workers often spend hours a day dealing with "waste" or problems in the workplace. "Waste" is any activity that does not directly help move forward the patient's diagnosis or treatment. Healthcare quality experts estimate that between 30 and 50% of all healthcare work activity can be categorized as "waste." The opportunity with lean is to reduce costs by eliminating waste, not through traditional cost cutting, which often includes providing

fewer services or reducing headcount. Lean focuses on doing more with less. Before lean, healthcare organizations typically believe their problems can only be solved with "more" - more space, more people, and more money. More space costs money, money hospitals are increasingly pressured to avoid spending. More people is often not even an option, cost aside, because of extreme shortages of professionals such as nurses, medical technologists, and pharmacists. Through lean, hospitals learn methods that allow them to increase capacity without adding people - true productivity. And many hospitals have been able to cancel multi-million dollar capital expansion projects as they learn how to use their existing space more effectively with lean principles put in place.

It may seem like wishful thinking, but the application of lean methods in healthcare will bring benefits for all stakeholders -- patients, employees, providers, and hospital.

<http://www.healthcarevalueleaders.org>

[The Center for Operations Excellence](#)

(COE) at Akron Children's utilizes lean six sigma strategies to help departments and offices within the hospital find simple, cost-effective solutions for improving inefficient processes.

The COE currently consists of five Lean Six Sigma Project Leaders, a Process Improvement Analyst and a coordinator. The mission of the Center for Operations Excellence is to develop and use in-house talent to improve the healthcare experience of our patients and families, while improving the working experience for our staff.

We use Lean Six Sigma at Akron Children's Hospital to enhance the voice of patients and families. Furthermore, the strategy supports growth initiatives identified through the strategic plan and improves the operating margin by streamlining services, producing cost savings and creating capacity through better resource utilization.

Akron Children's
Hospital believes in
Process Improvement
Through People
Development™.

I first entered the lean training program at Akron Children's Hospital in January of 2010. I was only partially through my training when I decided to go to Haiti. We had learned a great deal in the beginning weeks of the class, so much so that I was able to recall the lessons while in Haiti despite the lack of my manual and notes.

The COE was very supportive in allowing me to take time off from class, and arranged for me to complete the missed lessons upon my return.

“And I say unto you, Ask and it shall be given you; seek and ye shall find; knock, and it shall be opened.” -Luke 11:29 (KJV)

My mission to Haiti began with a trip to the ICU at the Akron Children’s Hospital where I work as an x-ray tech. I entered into a patient’s room to do a portable chest x-ray. The patient wasn’t quite ready for the film, and while I waited I chatted with the patient’s nurse, a guy named Ryan.

He asked me about my job and I told him how I liked it although I had recently finished a Master’s degree in business and hospital administration from the University of Phoenix also told him that I was looking for another career.

As we positioned the patient, he asked which career I was aiming for and I told

him that I didn’t have a direction planned, that I was waiting on God to lead me somewhere. With that, he instantly looked up and asked me if I wanted to go to Haiti.

I chuckled and said “Yea right, my wife will go for that. She’s 7 ½ months pregnant.” Ryan didn’t smile, and instead shrugged and said “sometimes you just have to make it happen.” It was a radiant idea.

I laughed it off and continued on with the exam, but as the day continued the thought orbited around my conscience, continuing to fascinate me. I couldn’t stop thinking about it and I stopped by Ryan’s room two or three times to ask him more details about the trip.

He didn’t know much. He couldn’t tell me exactly where we would be going or what we would be doing. There were many uncertainties. He wasn’t sure when, but knew he would be making contact with a person from a mission that was currently working at an orphanage down there.

There were two others who were going to be traveling with us, both nurses like Ryan.

Though it was the same road on which I always drive, it was much longer that night. My heart was bent on this questioning. It was something I had longed for...I wanted this, I needed it; a point from God in any direction. I was famished for it. I thought, felt, believed and knew that all the events in my life had lead up to this. Surely this is not the climax of my existence, but perhaps another trial that would shape me and mold me for something greater and lead me on to another calling. Perhaps another point in another direction in need of what I can provide.

It consumed me, and I felt as though God was truly calling me to take a leap of faith. I prayed and told God that if He was speaking, then I was willing to listen, but it was obvious that I wasn’t going to get a burning bush. I recalled Luke quoting Jesus, “knock, and it shall be opened.”

I told Him that for me to go, three major doors would have to be opened:

- first, getting my wife’s approval,
- second, getting the time off of work and
- finally, the financial hurdle.

I told God that if he could open those three doors, that I would take it as a sign that He wanted me to go. With a hopeful sigh, I steered the truck into my driveway, it was slightly slippery from my sweating palms.

My wife, Jennifer, was home when I arrived. We sat at the kitchen table talking about the day and I laughingly remarked about Ryan’s suggestion.

Looking back, I shouldn't have been so surprised when she was in favor of it. She’s always supported me and my aspirations. It had been only seven months since she had told me to go on a 345 mile bicycle trip from Pittsburgh to Washington DC with my best friend Wes Cox.

Now she was sitting with me, telling me that if I felt called to go, that I should go. She said that she had always wanted to do something like that, and she didn’t feel that it was her place to refuse to let me do something that she would want to do herself if she weren’t pregnant.

We joked that if God was calling me and I didn’t listen, I would be swallowed by a whale, which is far worse than going to Haiti. I reclined back and lied in bed that night, staring at the ceiling. It was a lot to consider. I drifted to sleep thinking about the other two doors.

The next day was a Friday. I went into my boss’s office to make a ridiculous request. At first I didn’t know what to say; at my wits end with unparalleled bravery... against cowardly assumptions, I asked:

“Could you let me take two weeks of vacation without prior notice when you’re already short staffed?”

The look on her face was incriminating. It was a lot to dump on her without warning. She sincerely wanted to help me, but it was going to be hard. She flipped through her scheduling calendar, calculating possibilities, and in the end told me that if I could find coverage for my weekend, I could have the time off.

I made a couple quick phone calls to some friends and had the weekend covered without any problems. I told her that all of this was contingent upon my being able to attain the necessary funds, another uncertainty. After all, I only had one week's worth of paid vacation, so the other had to be un-paid. This meant that I had to come up with the funds for the trip and funds to replace my lost wages in order to pay the bills at home.

I went to church that Sunday with what was becoming a recurring theme: a ridiculous request with a hint of hope. My church, Grandview United Methodist Church in Cuyahoga Falls, Ohio is great. It's more like an extended family than

anything else. Everyone knows everyone else, we have extra events like movie night and game night, and everyone is kind and supportive. It is not, however, an overly wealthy church.

Between the plane ticket, the provisions for the trip, the vaccinations and the lost wages, I felt I could manage the trip on \$1,500.00. I met with my pastor after church and I felt like I was asking a lot, but instead of focusing on the amount I requested, he was simply ecstatic at the idea of me going. He agreed to help me get the money, and anything else I needed. He even gave me a book to read on first time mission trips.

God had opened three seemingly impossible doors in less than four days. He had spoken, and it was time to listen.

I went into work later that day and left a note for Ryan to call me because I was going to go with him. He called and was ecstatic. He said he would fill me in on whatever details he could, but said I needed to focus on getting my passport, plane ticket and vaccines, as we had less than two weeks until our departure. I lied in bed that night and let out a long sigh. This was actually going to happen.

I already had a passport, so that wasn't an issue. The plane ticket was easy to buy, but the vaccines were another story.

The hospital where I worked didn't stock vaccines for tropical diseases, and the health department was difficult to deal with. My friends from work took up a collection which amounted to about three hundred dollars, enough to pay for my malaria, typhus, hepatitis and tetanus vaccines. I left the health department feeling like a pin cushion, but glad that I was able to get the vaccines before I left.

I called my parents and told them of my plans, which didn't go well. They were irate, but it was an anger bred of fear. My parents said I was being an irresponsible father, but I disagreed. I felt bound by chains, knowing my parents' disapproval.

I called Wes and discussed it with him. Without hesitation he told me to go because this opportunity may never come again.

A few weeks prior I asked if he could come, unfortunately it was during his girlfriend's birthday. Apparently girls care about their birthdays. He was crushed he couldn't come.

I called my grandfathers on both sides. One told me not to go, but also told me not to listen to him, and the other told me to go and have fun. I was really bothered by my parent's reaction, so I called another old friend, a preacher named Rod Bowers who had pastored the small country church that I had grown up in. He told me that my parents were angry because they didn't want anything to happen to me, and that they would come around after my safe return.

Meanwhile, details began to trickle in through Ryan. We were going to an orphanage outside of Port-Au-Prince, where we would provide medical care to the children.

The orphanage had 50 children, and was expecting 200 more any day. The forwarded e-mail described a group of children in dire straits who were in desperate need of the arriving medical team, who would provide care not only to this group, but who would also help provide relief at a field hospital down the road.

That medical team consisted of me and two nurses, as one of the three original nurses had been rushed to surgery for an emergency appendectomy and would no longer be coming along.

It was extremely intimidating to think that we would be faced with such an overwhelming task. This was especially true for me, as my education in radiography had consisted of large portions of physics and other areas that would be of no apparent value in such a setting where an x-ray machine was not available.

The e-mail also warned us that it was a dangerous place to be, and not to be fooled by reports that said otherwise. I wondered if we would have enough food or drink or if it would get stolen. So much could unfold around us, but I could not be paralyzed by fear. God has always provided for me, sometimes in simple, sometimes in miraculous situations, I suppose His will is superior to any hunger

or thirst I could experience. I simply trusted in Him.

I had originally wanted to take Wes along, but had changed my mind when I heard of the dangerous conditions. I felt that if I got myself into trouble, I could deal with it, but I didn't want to deal with the guilt of knowing I had talked him into going as well.

A friend from work, Dr. Jeff Kempf, informed me that he too was going to Haiti at the same time as my group. He was going with Dr. Pope, a fellow doctor from Akron Children's Hospital. Apparently they would be at St. Benedict's Hospital across from the U.S. Embassy in Port-Au-Prince and wanted me to contact them in case we needed each other's services. I was glad that we would have friends so close.

Another friend from work, Rose Groh, had let me borrow her iPhone so I could make calls while I was there. This ended up being a priceless tool, as all of our plans

were loosely thrown together and relied on last minute confirmations and adjustments.

My pastor called me to let me know that the special offering that they had collected for me at Church had provided \$2,500.00, enough for me to split the money with Ryan and pay for both of us. We were thrilled. Mosquito nets and freeze dried food in hand, we headed to the air port for day one.

It's amazing to witness God's ability to consolidate a scrambled plan with no architect, built on a lack of communication that would take a month of careful planning yielding unprosperous fruits of impatience and frustration somewhere in the mystery of uncertainty. However, the embodiment of God's will was evident when I met up with those who would join me in Haiti.



“Into your hands I place my life.” I never knew what that meant until I followed God to a place where my life was so obviously out of my own control; to a place so far removed from my understanding that my own will was non-existent, and all that was left was the will of God.

Day 1

Today started out as a struggle. Our 6:25 am flight was cancelled at 4 am when we arrived at the airport. After 5 hours of phone calls, we found a flight out of Pittsburgh (we were originally flying out of Akron/Canton airport) and drove down there. My friend Wes dropped us off.

We had to fill our checked bags with medical supplies and our carry-on bags with other gear, so there was no room for my clothes. I had to layer four outfits and wear all my clothes on the plane.

This made me seem suspicious, so security was a challenge. They made me go into a small room and do a strip search to my pants, but I went to my underwear.

I figured that if I was going to feel awkward, then I was going to make the security guy feel awkward, too. There were 4 guards in the room, and the one with the latex gloves told me "I'm going to search your body, but when I get to your butt and your groin, I'm going to use the backs of my hands." To say the least, it was awkward.

They grilled me with questions about where I was going and why I had so many clothes on, what my profession was, what I was going to do in Haiti, etc. When they had finished the search and the questions, they checked my ID and RT cards and let me go.

We flew into Miami and then to Santo Domingo (in the Dominican Republic), where we are supposed to find a hotel and

rendezvous with a nurse named Mary. We're in flight to Santo Domingo now.

I met some cool people on the plane. A Canadian named Ryan is also in route to Haiti, as is a Belgian guy named Raf. I shared my Pepto Bismuth tablets with him to prove that not all Americans are jerks.

When we land, we have to find the hotel and then get some sleep. We head to the orphanage at 8:15 am DR time tomorrow morning and I only got an hour of sleep last night. Our plane will arrive at midnight and I hope we find the hotel easily.



Day 2

We found our way to the hotel last night and met Mary. She is a nurse from Virginia who coordinated with the same mission we were coordinating our trip with. She seems nice.

It was a long cab ride and we drilled the cab driver with questions. He filled us in on the situation in Haiti and gave us various tips for safe travel. Cab fares are ridiculous in the Dominican. This ride cost \$40.

The hotel looked as if it had been nice at one point, but was slightly run down. It was resort style, but wasn't worth the resort price. I passed out as soon as my head hit the pillow.

In the morning we ate breakfast and headed to the bus station at 8 am. It was a hugely crowded place with people pushing shoulder to shoulder in every direction. The ticket line was so long that we barely got our tickets on time. We had to put our luggage in a pile on a busy sidewalk and I

watched over it while Ryan and Mary got the tickets.

I ran into Ryan, my Canadian friend from the plane, but he was catching another bus. We talked for a little while, and it was nice to see another familiar face.

We caught the 11 am bus and arrived in downtown Port Au Prince at 7 pm. We drove past the orphanage and tried to get the bus driver to stop, but he wasn't allowed because the area wasn't determined to be safe.

Our bus broke down half way there and I had to help the driver refill the radiator to get us going again. It was in the middle of nowhere, on a large hill that looked like a desert. The driver seemed annoyed that I was trying to help, but it was obvious that he didn't know what he was doing.

A person who spoke English and Spanish translated for me. I think that he would have eventually figured it out, but I wanted to make sure that he didn't use cold water and crack the radiator.

Everyone gave their bottles of water to help fill it, so we were back on the road in half an hour. It was dark by the time we reached Port Au Prince.

The bus dropped us off in a crowded alley and we fought our way through a crowd of over 75 people to get our luggage.

We got picked up by a team in a pick up truck led by a guy named Alex. He had a few Haitians with him who wanted to help us with our luggage, but it was difficult to tell who was on his team in the middle of the crowd. The poor guys had to fight our luggage from us and we didn't give it to them until Alex pointed out exactly who was there to help us.

We rode in the back of the truck about 1 ½ hours to the orphanage. We let Mary ride up front. On the way, Alex filled us in on

what had been going on and what he had accomplished. The night sky was absolutely astounding. The general lack of artificial light lit up the stars like I had never seen, and I stared in awe as the warm breeze blew at my back.

When we arrived, the kids were all so happy to see us that they all started singing and wanted to shake our hands. We are strange to them. They like to hold our hands and examine them, to look us over inquisitively while smiling.

We had a meeting and hit the sack. I found a tent with a cot that had been left by the previous team. The orphanage has a roped off area for us to sleep where the kids aren't allowed to go. This is so that our gear doesn't turn up missing. Alex says that the kids are great, and that they have only had trouble with one teenage boy who tried to poison him.

He says the boy had been threatening him and giving him dirty looks, and then they caught him in Alex's tent. Alex thought the boy was trying to steal something, but couldn't find anything missing. He later took a drink from his canteen and says it tasted funny. An hour later he was extremely sick and stayed that way for the rest of the day.

Afterwards the boy came up to him and told him that he was very strong. Alex put two and two together and had the boy removed from the orphanage. I asked where they sent him but Alex avoided the question.

We asked him about mosquitoes, and he said they haven't had any trouble with them, but that we need to watch for tarantulas. My first night in the tent was better than I expected. The breeze blew against my tent and I could swear it sounded like hands running against the fabric. After a few glances out the door to make sure there wasn't someone out there, I smiled at my own inexperienced nervousness and drifted to sleep.



Day 3

We got up at dawn and had breakfast, which included some yellow stuff, some mangoes, sardines and French fries. It was an odd combination, but not half bad.

The group went to a meeting with the Red Cross, but I stayed behind to lay concrete blocks for the new latrine at the orphanage. Its hot here (over 105 degrees in the day) and their concrete blocks are brittle and weak. If you tap them with a hammer, they shatter. They don't have a concrete mixer here, so we have to mix the concrete on the ground with shovels. It's nearly impossible to use the correct ratios of sand, cement and water this way, so the resulting concrete is weak.

We laid block all morning and when the group returned from their meeting, we started on the task of assessing the children.

We cleaned out a small room and made a clinic. I built a shelf to hold the medicine out of some scrap crates that UNICEF had left behind. We saw sick children for a few

hours, with Ryan and Mary doing most of the assessing. My medical training isn't as sufficient for this type of work as a nursing degree would have been, so I concentrated on the organization aspect of the inspections.

When we were done, we spent some time planning the days ahead. The goat here is cool and the kids are very upbeat and playful. Yes, they had a goat for the kids to play with and it was very friendly. If you held your fist out to it, it would lightly butt its head to your fist like it was giving you "props."

We went and explored an abandoned church that was never completed and an abandoned chicken farm. Both are across the street from the orphanage. The abandoned church looks like the skeleton of a parking garage, with large concrete beams holding up two heavy concrete layers.

I climbed a rickety home-made ladder about 25 feet to the second story, but there were no good materials up there. The Chicken farm had some useable tin roof, but we decided not to tear it off in case anyone still wanted to use the barns.

Finding building materials here is hard. You can't just go to Lowe's.

There was a guard and his family living in the construction site. We gave them some clothes we found. The kids were dressed in rags that didn't even cover their groins.



By looking at them, you would never guess that most of them had lived through situations that were horrible beyond imagination. Most of the children at the orphanage are restevék kids, which I'm told means that they were rescued from child prostitution or slavery.



We gave them some food and will return tomorrow to provide medical care for them. The little girls here love to dance and sing, and get really excited if you do funny dance moves. It's very odd to see kids in such a horrible situation who are so happy. They laugh and play like normal children, as though nothing was wrong.

The cabs here are painted with Christian verses because the people are afraid of voodoo. The most popular is Exodus 14:14, "The Lord shall fight for you, and you shall hold your peace."



Day 4

Today started with a spaghetti and hot dog breakfast. It was surprisingly good.

After breakfast, we decided that three of the children needed to see an actual doctor, but we didn't have any extra money. We decided to go to the field hospital and try to barter for their care.

When he learned that I was an X-ray tech, he was ecstatic. He said that they needed an X-ray tech more than they needed a doctor, and that I was sent by God. Based on the situation, I believed him.

When we showed up, we had a lot of trouble getting through the gate, but once we got through, we were able to talk to the medical director.

We got him to agree to see the children and send a crew of carpenters to the orphanage to finish the outhouse I was working on in exchange for my services. I went to the X-ray tent and found that they had a tech who was leaving after one more day. She had just begun training a Haitian to do X-rays in case no replacement tech showed up.

They had a cheap Phillips portable x-ray machine (the type that has to be plugged in), no sponges, no sand bags, a table that was too tall and a broken CR processor. They were using a small dental processor in a clinic about 200 yards away that the clinic was using as well. The clinic had a small X-ray producing pistol that looked like a prop from a Martian movie.

I cut some packing styrofoam for positioning sponges, filled some tent stake

bags with gravel for sand bags, cut four inches off the table legs and removed part of the processor (which could originally only process 8x10 films) to allow it to process 10x12 films as well.

We treated patients all afternoon and I stayed late to attend a staff meeting. I felt like the guest of honor in a group of about 20 doctors.

They want me to move my gear to the hospital and live there, but it's only four miles or so from the orphanage, so for now I'm staying there so I can keep in contact with my original team.

I will continue to train Carlyle (the Haitian) to do X-rays in case no tech shows up to replace me. He speaks fluent English, and was chosen for this training because he was the best English translator at the hospital.

I'm continuing to network with the people I meet at the field hospital to get whatever I can for the orphanage. The kids there don't have anywhere to even wash their

hands, which is the root cause of a lot of their health problems.

I was told that the original medical effort in Port Au Prince consisted of two teams of 12 surgeons. The plan was to go to the hospital and do as many amputations as possible in 12 hours, then switch with the other team and rotate back and forth. Each team would take enough supplies for 12 hours of surgery.

The first team arrived and did amputations for 12 hours, but the relief team never showed up. Patients continued to flood the doors and they did amputations for 48 hours.

Eventually, they ran out of supplies and antibiotics. Patients turned septic and died.

They couldn't keep the dead patients with the living because of the risk of infection, so they had to dump the bodies out the front door.

When the crowd saw the bloated, mutilated bodies being dumped, they thought the doctors were purposely killing people.

They started to beat down the door, and the staff had to flee through the back alley. They ran into some UN trucks, which refused to give them a ride until they saw the giant mob chasing them.

They later found that the reason the second team never showed up was because the UN had blocked them for some unknown reason.



Day 5

Today I got up at 5:30 so I could be at the hospital by 6:30. Things move slowly here. My transport team wasn't ready till almost 8 am. They all looked at me like I was crazy for going to get patients who could walk so we could start an hour early.

I work hard and I expect my transport team to work hard, too. I can tell they're not used to it. I think it's good for them, so I get after them if they start to slack off. I don't want to be mean, but there are a lot of patients that need x-rays and we all have to do our best.

The processor jammed today (my fault) and I had to disassemble it to remove the film without damaging it. Thank God it didn't break. We would have lost all x-ray capabilities.

Carlyle was very nervous when I began disassembling the machine. He asked me if I was going to be able to fix it and I told him that I could. He asked how I knew this, and I told him that in America we have a saying that "failure is not an option." I told

him we will fix the machine because we don't have a choice. He seemed encouraged and amused.

They are using our films to determine who to fly to the U.S. Comfort hospital ship and who to operate on in the field hospital. It's nice to know that we're making a difference in the big picture.

Half way through the day, a truck backed over a pipe, causing it to burst and spray water into the air. This was a big problem because water is so scarce here. People were trying to catch the water in buckets. I helped them fix it because they were trying to use PVC glue without primer.

In the process, I was shown a large tool room at a facility close to the hospital. I took a quick inventory in case I needed something later.

During lunch, my friend who I'm training to be an x-ray tech, Carlyle, kept insisting that I learn to ride his motorcycle. I told him I'd do it tomorrow. I also told him I'd probably wreck it, but he seems confident that I won't.

The stars are spectacular here. They still amaze me. There are few lights, and during the occasional power outage, there are no lights. This makes the stars so bright that they could take your breath away. Orion is directly over my tent. It's nice because the same constellation was above my house back home the last time I looked.



Day 6

Today began with my first freeze-dried meal. I had "bacon and eggs" and "granola with milk and blueberries." It was actually really good.

I had a 6:30 am meeting with a guy named Geoff who runs a refugee camp down the road. The camp doesn't have any electricity and I found a newer looking generator about the size of a large van at the abandoned chicken farm. Geoff wants to use it for the camp, so we are currently double-checking with the guy who owns it.

I'm supposed to go down to the camp tomorrow to see if I can fix a solar panel system they have.

We had fewer patients who needed x-rays at the hospital today. In our down time, Carlyle and I began work on a database that would make the x-rays available on every computer in the hospital. Its tedious work, as all the patient studies have to be exported manually one-by-one to the database.

Carlyle and I work as a team though and have our pattern down, so it shouldn't take us that long.

I accidentally broke a patient's wheel chair today, and while I was fixing it, two more patients brought their broken wheel chairs to me. I took the three chairs to a small shaded area and fixed them. I then decided to open a wheelchair and crutch repair shop next to my x-ray tent. Everyone was thrilled because the chairs were not designed for the rough gravel of the camp, so they are falling apart.

I spent about an hour making a detailed technique chart for Carlyle. The kVp settings on the x-ray machine are off, so the technique chart is modified to compensate.

I also filled a notebook with x-ray information that I hope to teach him tomorrow. He learns fast and is eager to listen. They couldn't have picked a better student.

When the day was over, I caught a ride home with a group of Brazilians who were heading west. They were excited that I was from Ohio because they like Cedar Point. The ride went quickly and when they dropped me off I thanked them and walked into the main gate.

Once inside, my group gave me raw sugar cane to eat as a treat. It's sweet and tastes similar to apples, but you don't eat it like an apple. You have to break it off with your teeth, and then it releases a sugary juice as you chew it. When the juice is gone, you spit out what's left, which is a rough, flexible, wood-like pulp. The Haitians go nuts over the stuff.

The rest of my team visited the remains of the original orphanage in Port Au Prince today. Clean up has been slow and there are still human bones sticking out of the rubble, picked clean by animals.

The orphanage was for little girls, and the whole building collapsed, killing some staff along with all but three of the girls.

I'm learning a lot about how things work here. Small non-government organizations (NGO's) are doing most of the work, while UNICEF and the UN aren't doing much at all.



It's a shame, because these two organizations have the most money, but a lot of it goes to high-paid staff. They drive around and do inspections, but don't offer ideas or help.



I avoided Carlyle's motorcycle for another day.

I really love working at the field hospital. It's what a hospital should be. Everyone works hard and no one complains. Everyone there wants to be there, and has come for love of the patient rather than for a paycheck.

The Haitians are extremely grateful, very patient and never complain. Everyone is flexible and open to new ideas and change. If something has a problem, someone volunteers to fix it and no one criticizes anyone else. It's a true vision of Christian love. I miss my wife very much and can't wait to see her again, but part of me is really going to miss this place.



Day 7

I got to work early today (6 am) to work on the film software. I had to manually export all the x-rays (about 1,000) to a file that could be downloaded in jpeg format to a flash drive and then uploaded into the hospital's central database.

I finished that and did x-rays for a while, but then the work flow slowed down. I went to the warehouse where Pete, the logistics coordinator told me he had a pile of broken crutches. My team of Haitians and I took a couple of hours to fix them and then returned them to the warehouse.

It's funny because Carlyle is learning so well and will do well once I'm gone, providing an invaluable service to the hospital; but if we were in the U.S., we would both go to jail for what we're doing.

There are no rules here. No HIPAA. I don't even need a script to do a film. I can x-ray anyone I want and I can train anyone I want. It's a different world and it fits me like a glove.

The people here are completely decimated. Many of them have been crushed by thick concrete ceilings.

Some of the medical staff are having trouble coping mentally. They ended up getting a psychologist for the staff. I can honestly say, though, that my work in the ED has completely numbed me. It doesn't faze me at all. I don't know if that's a good thing, but it definitely helps here.

They had church this morning at the hospital. I didn't attend because I had x-rays to do. I didn't feel bad. After all, Jesus healed on the Sabbath, so I will, too.

I was getting a patient (my transport team had the day off) and heard a woman preaching. She held up a dollar and asked what it was worth. The Haitians replied that it was worth a dollar. Then she threw it in the dirt and trampled it. Holding it up, she asked again what it was worth. Again they replied "a dollar." Then she ripped it in half and asked what it was worth now. They once again replied "a dollar." She said to them "Just like this dollar, you have been trampled and torn. And just like this dollar, you are still worth everything you were ever worth." It was a powerful message.

A woman stood and said that she had to have her leg cut off. She said her parents cried when she showed them. She told them "don't cry. I have lost only a leg. I thank God for saving my life."

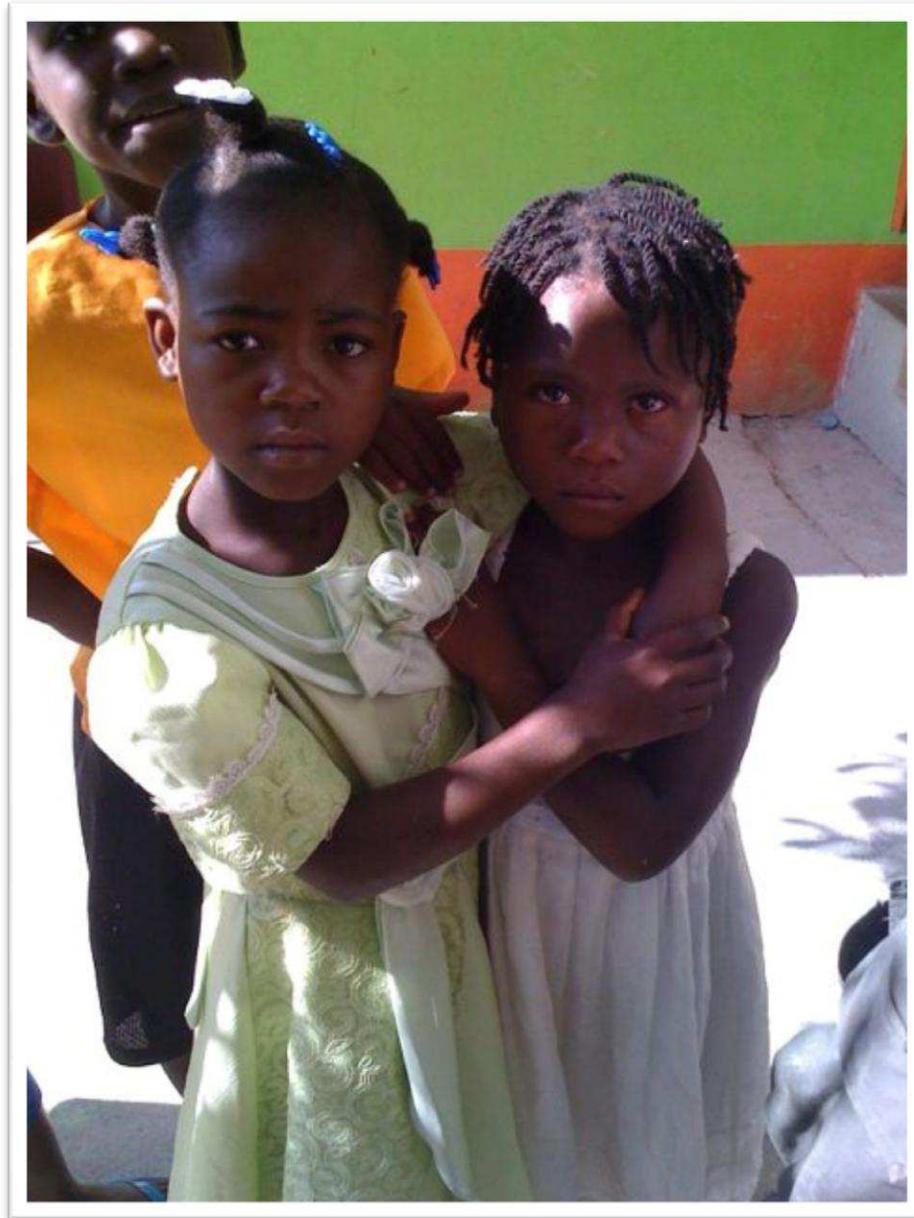
When talking with Carlyle, I found that we have similar religious beliefs. With all the rumors of voodoo in Haiti that I heard in the U.S., I was surprised to find that everyone I've met was a Christian. They all paint Christian emblems on their cars and the hospital's Sunday morning service was packed.

I went back to my x-ray tent and overheard on my walkie talkie that they needed help unloading some trucks at the warehouse. I went to help and found two semi-trucks, one full of 140 lb bags of rice and the other full of similar bags of beans, corn meal and boxes of soy oil. It all said "Aid from the U.S.A." I was proud to be an American.

It took 40 of us an hour to unload the trucks. All of those days bailing hay on the farm really paid off. While we were unloading, I asked the hospital director if I could take some of the food to the orphanage. She said I could fill the bed of our pickup, which doubles our food supply there. God is awesome.

At 5:30 I met with Geoff to look at his solar panel. His base camp is set up in a deserted house. It's strange how they build entire houses out of concrete here. The floor, walls and ceiling are all concrete. I was able to show him how to put the solar panel together, and then I showed him what they were doing wrong with their generator.

He runs a refugee camp down the road and while I was there I fixed the house's wiring problem. He thought I was a genius and traded me two crank flashlights for an old pair of walkie-talkies I had.



Day 8

I was up late last night after working on a few projects, so I was really dragging when 5:30 rolled around this morning.

We took the truck and loaded it with food for the orphanage. Everyone was thrilled. I ran into my new friend Geoff, who was packing to leave. He gave me a pair of socks, and I was thrilled. I paid a local girl to do my laundry while I was at work. I'm anxious to see how that goes.

This morning's list of x-rays was about 30 patients long. It might have been achievable, but there was a power outage at the clinic where our processor is. Power outages are common here. I brought a generator to the clinic, but it wouldn't start. Someone had run the fuel line to the wrong hole. Carlyle suggested an extra extension cord we had in the x-ray tent and it was long enough to reach the clinic.

Carlyle did his first solo x-rays while I hooked everything up. They turned out well. We got rolling again and the girl who runs our films messed up a few patients in a row. She doesn't take her job seriously and I decided to replace her with Carlyle's cousin. She was furious, but she was compromising patient care.

In the midst of this,
a truck full (front
and back) of
Haitians ran over a
Haitian woman and
flipped.

They brought me some of the passengers and the woman. The doctor ordered cervical spine, chest, pelvis, femur and knee films.

I told her that this isn't America and gave her the knee and half the chest (the side hit by the truck). It would have taken all afternoon to do the films she requested.

We fell hopelessly behind and they kept bringing in more triages. It became overwhelming and I had to take a deep breath, close my eyes and say a silent prayer.

I went to the clinic and begged the administrator to let me move the processor to my tent for the day. She reluctantly agreed. This allowed us to catch up and we actually set a 26-patient record for the day.

I hope to finish the list in the morning, but we will see what happens. They're cutting half the transport staff tomorrow, so it might be rough.

After the staff meeting, a doctor/IT guy named Larry who I have become friends with (we worked together to get the radiographs to the central database) gave me \$120 U.S. to give to the orphanage. I can't wait to tell the guys. I've felt like I somewhat abandoned the team there by going to the hospital every day, but the food and the money help me to feel like I'm still part of the team.



It's odd, but I'm sitting here in the most unfamiliar environment I've ever experienced and yet I'm more successful here than I've ever been in my life. I feel like a fish that has just hit water for the first time. This place seems to be made for me.



Day 9

Today started out slow and frustrating. The guys insisted on having breakfast before driving me to the hospital. Ryan and I both had stomachaches this morning, so the cook picked leaves off a strange tree and made us tea out of it. It was yellow and they added salt to it. It tasted like the broth from chicken noodle soup. Ryan still threw up later, but I was good to go.

My laundry came back great. It was a little stiff, but much better than wearing dirty clothes that had already been worn multiple times. They wash clothes by hand here and hang them on the line to dry.

I got to work at 9:30 am (we usually start seeing patients at 8) to find Carlyle and his cousin Dionet competently going through the patient list. They are really absorbing their training and had already seen 4 or 5 patients when I arrived.

Carlyle is about 90% competent now, so I let him run the room today and I assisted him when I wasn't working on other

projects. He needed help with some sacral films that he had never done, but other than that, he was good to go. His organization skills are also very impressive. He is better at keeping track of the patient list than I am, so he took over that area of the job.

There was another earthquake last night at 1:27 am. I slept right through it, but Carlyle and Dionet had stories of jumping from bed and running outside. The Haitians are truly terrified of earthquakes.

The leadership team from the clinic grows increasingly frustrating. They're so concerned with their equipment that they won't let us use it the way we need to. Patients are suffering because of it. It just feels like they don't realize that we're on the same team.

They don't know anything about their equipment. I had to teach them how to use it and how to clean it. For some reason, though, they still don't trust me to keep it in my tent.

They had a TV crew come today to make a film about the clinic and all the things they can do there. No one there could take an x-ray, so I had to come and pretend to be part of the staff. They would have looked like idiots if I had not bailed them out, but they still won't let me borrow the processor. I would pull my hair out if I hadn't buzzed it off before I came.

It's funny to see how materialism is still present in people who don't have anything. A Haitian with a wired hands-free set for his phone (the cheap kind) will wear it all day long like he's really something. I wonder if that's how we look to God, clinging to our pathetic earthly possessions like we're really something.



The mosquitoes here are different from the ones back home. They don't make any noise when they fly. It makes them difficult to notice. Perhaps this is part of the reason why malaria is so prevalent here.

Last night, when I got home, a crowd was gathered around a girl who was unconscious and hyperventilating. Her blood pressure was ok and so was her pulse. Her pupils were dilated, and she had no breath sounds. We couldn't figure out what was wrong with her.

She was the second girl that day who presented these symptoms. The first girl was found screaming while the other kids held her up by her arms and legs. They said they were praying, but we're skeptical. The 2 girls were from the same tent and both were dug from the rubble of the girl's orphanage in Port Au Prince. Both girls were restevék girls who had been saved from child prostitution or slavery.

We looked in some medical books and we suspect either a panic attack or drugs. We carried her to Mary's tent with a plan to observe her and take her to the hospital if she got worse (we took the first girl to the hospital but they couldn't do anything for her).

This girl had been in this state for at least 45 minutes when we brought her to the tent. Some of the kids here have been taught voodoo, so Mary and I prayed over her for 10 minutes exorcism style and she came out of it and fell asleep. She wet herself that night but woke up normal. Life here is crazy.

I saw a giant tarantula next to Alex's tent. It had dug a den about six inches deep and we could see him in the hole. I crushed it with a 12 lb. sledge hammer. We don't need poisonous spiders around the kids.

Alex said he saw two teenage boys here last night that he didn't recognize. We thought they may have jumped the wall and brought in drugs. We questioned the

boy who was with them, and he definitely knew something, but wouldn't talk. You could tell he was afraid. Whoever these boys were, they had the others afraid to turn them in. We are going to continue to keep an eye out, but a late night tent search turned up nothing.

I've been getting picked up at 8pm to go back to the orphanage from the hospital, which is before the hospital serves dinner and after the orphanage's dinner.

I've resorted to eating peanut butter and deer jerky for dinner in my tent. My ramen noodles were destroyed, one pack being infested with ants and the other soaked by a leak in my previous tent. The jerky and peanut butter isn't gourmet, but it's just as good as what's served for dinner anywhere else here.



Day 10

I was up way too late last night to get up at 5:30 am. I felt comfortable leaving the x-rays to Carlyle and his cousin, so I slept till 8. They will be alone when I'm gone, and he's more than competent, so I think my work there is done.

Alex, Ryan and Mary were gone when I came over for breakfast. This gave me a chance to catch up on my journal and stuff. Once they showed up, we all piled into the old Toyota Land Cruiser to go deliver food in Port Au Prince.

I had arranged another pick-up load of food from the hospital, so we loaded up and headed out. It was a long, hot, uncomfortable drive. There wasn't a lot of room in the truck, so I laid down on the food in the back.

We stopped by and dropped off bags of corn soy, rice, beans and soy oil in the neighborhood where the girl's orphanage was.

I went to the pile of rubble and saw the hole where they had dug the three surviving girls out. Human bones were still laying there. I couldn't imagine being trapped in a small pocket under 10 feet of broken concrete next to the rotting corpse of my friend. It's no wonder the girls are having trouble.

The girl from last night had another attack today. I asked at the hospital to see if they were seeing anything like this and they were. This helped us rule out the possibility of drugs. We're supposed to have a counselor come to the camp and talk to the girls. After we dropped off half the food in that neighborhood, we dropped off the rest in a shanty town.

A large crowd gathered around the truck, but everyone was friendly. The leader was in his 20s. He told us he's been praying for God to provide for them. We told him that he needs to get his people off the ground before the rain comes or they will get sick and die. We also told him he is very brave to step up and lead these people in a time like this.

I gave him my cross necklace. He deserved it more than I did.

We were also trying to find a way to fill our water cistern at the orphanage. It was almost out of water and a local farm had offered to give us as much free water as we wanted.

We haven't found a truck yet, but we had a company deliver water for a fee. We went to the UN base and tried to get a truck, but they weren't helpful.



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The UN seems to share a lot of characteristics with the U.S. auto industry. They have a large, expensive overhead that makes them slow and less effective. The only difference is that when GM becomes ineffective, they lose market share, but when the UN becomes ineffective, people die.

Port Au Prince is a complete wasteland. The streets are filled with rubble and garbage.

The people are homeless and sell whatever they can on the street. The buildings that are left standing are damaged and need torn down. Those that are already down are crumbled into piles of rubble.

Traffic is the worst I've ever seen. There are no traffic signals; everyone just drives as they please. Streets are filled bumper to bumper with motorcycles and people on foot filling the gaps between cars. There's literally no room to breath.

Large walls of concrete surround most of the lots, but even these have crumbled. The people appear so poor and desperate, but they keep fighting. I think it's because "poor and desperate" is all they've ever known.

If this type of thing happened in the U.S., we wouldn't know how to make it.

We drove to a few different areas of the city, but it's difficult to keep track of where you are when every block looks like the same disaster.

The capital building is destroyed. It was odd to see such an extravagant building toppled over like it was. We saw the president's motorcade go by us on the street. It was a line of SUV's with a police motorcycle at the front.

We got a few more orphans along the way today. I rode in the back with them. I played card tricks for them and we played hot hands and thumb wrestled. It was nice to see them calm down and stop worrying.

All in all, I feel like I wasted my day. I wasn't necessary for the trip, so I could have been building at the orphanage or working at the hospital.

We drove out to the hospital in the evening to check on one of the kids who had a hernia operation. I drove the truck for the first time. It shifts well.

They said Carlyle was looking for me all day, but still got 18 patients done. The AC apparently broke in the x-ray tent. It had to have been over 100 degrees in there. I feel bad leaving him alone, but he has a handle on things and I am needed elsewhere tomorrow.

The girls came running out of their tent tonight, all of them screaming like they had seen a ghost. It turns out that they had really seen a cockroach. It amazed us that even in a country as rough as this one, the girls were still afraid of bugs. We killed it and they went back to bed.



Day 11

I started today by getting picked up by Leah, the new leader for the ARC camp (Camp Hope). She replaced Geoff when he went home. She gave me a truck and a translator.

We drove around and gathered cement, gravel, rope, a barrel and a large wrench. I got the wrench from the tool room I had seen a few days prior. Then we loaded up the new solar street light. The pole was about 25 ft. long and stuck out of our bed about 21 ft. I sat on the end that was in the bed along with my work crew of 3 Haitians while my translator drove. We also tied it down to keep it steady.

When we got to the camp, I explained how I needed them to dig a hole big enough to sink the barrel in. We put the barrel (a 55 gallon drum) into the hole and filled in around it. We then tied ropes to the street light and raised it vertically. Then we positioned it in the center of the drum and filled the drum with cement. We tied off the light with ropes to ensure that it

would stay still while the concrete dried. I learned this method from my Dad.

My work crew was really dragging towards the end and I asked one of them why. He said they were tired because they hadn't eaten that day. I felt bad and told them they could go back to their tents, but I kept working. They watched me for a minute, and then resumed working.

They said "We started together, and we will finish together."

I went home and took a shower. Then one of the girls had another attack. The three girls who are having emotional problems are the three that were pulled from the rubble of the girl's orphanage. I can understand why they have issues now. They freak out when they see the hole in the cistern (it's got a small crack/hole in the side about the size of a fist) so we're going to fix it tomorrow. It's the least we could do.

I honestly can't imagine what it must have been like for them. Just driving through that city and smelling the death is horrible. The buildings that haven't been excavated have a horrid stench and it's eerie to think of the countless bodies inside. The body count takes on a whole new meaning when you see and smell it.



I'm told that before we got here they were hauling out truck after truck of bodies. They would fill a dump truck with bodies and then cover them with rubble so the trucks wouldn't look so horrific leaving town.



I'm told there were hundreds of trucks, and that the bodies were either burned, buried in mass graves, or hauled out to sea on a barge and dumped. There are a lot of rumors here and it's hard to tell what is true.

Day 12

Today I got up and used some concrete to fix the hole in the cistern. Hopefully it will help the three girls to stop freaking out.

Then I cleaned out my tent and packed my gear. I took some food to the guard across the road. He was thrilled.

We went and picked up some child psychologists for the girls. They worked with them most of the afternoon. One of the girls was having trouble because she thought she had a voodoo curse on her. Ryan read to her from the Bible and taught her for some time about why a Christian shouldn't fear voodoo.

We went to a giant farm owned by an American family called "Double Harvest." It's been in operation for 35 years and farms a couple hundred acres, all irrigated.

They have a fully functional hospital with better GE equipment than we have at my hospital. We were looking for ideas for our orphanage, but the farm/hospital is so expensive that it requires massive amounts of charity to keep it going. It was

impressive, but ultimately not a realistic model for replication.

After we left, we drove back to Camp Hope and I climbed a makeshift ladder to untie the ropes from the light post we installed yesterday. It was rickety, but Haitians gathered in a crowd to watch like I was on the trapeze. It was hilarious.





Day 13

We decided to head back today because Mary's flight was the day before ours and we didn't want her to travel alone. We rode to the bus station in the back of a pickup. It took over an hour and we watched the sun come up in the east as the truck drove west.

We passed cemeteries full of mausoleums that had been damaged in the earthquake. Our translator, Pascal, said that body snatching is big problem because people use the bodies for voodoo stuff. Ryan asked him if they have deer in Haiti. Pascal said they have all kinds of deer, from

tractors to backhoes. We laughed and said we meant the animal, not John Deere. Then we explained to him what a deer was.

The bus ride was nine hours long. At the Haitian/Dominican border, they called my name on the bus and took me to a building full of government people. Once inside, I was led to a room where they told me that I owed two hundred and something. I got really mad and yelled that their numbers were meaningless unless they spoke in U.S. dollars. The exchange rate is about 35 to one, so it came to 8 dollars. That wasn't worth a fight, so I paid with a \$20 bill and we had to go to three different offices to find change.

It's incredible how corrupt the government is here. You come to help and they milk you for every dime they can.

I went back to the bus and we crossed the border, but we got stopped on the other side and customs wanted to check everyone and their luggage. Two guys got

in a fight over luggage. Everyone just stood and watched. I guess we were all so tired that we figured if they wanted to fight, then we would let them. When we hauled our bags into customs, they changed their minds and we re-loaded the bus.

Mary and Ryan were sick with a stomach bug and were going down hill fast. I had to sit Mary down and dump water over her head because she was stumbling on the way back from customs and looked like she was about to pass out.

I found a group of Americans on the back of the bus and they gave me antibiotics and Motrin to give to them. I also had some pepto bismuth in my bag that helped.

After talking to two other groups of Americans, I found that everyone's buses had broken down on the ride in. One group even ran into trouble at the border and had to stay the night in the bus. Their trip totaled 18 hours.

Mary left at noon today and we just hung out at the hotel. I can't wait to go home and see my wife.

I had a strange dream last night. Since Ohio State, I've had an infrequently recurring nightmare that it's the first day of the quarter and I'm late for class. I run around and search the buildings, but I can't find my classroom.

I had the dream last night, only this time, when I looked around and realized I was at OSU and was late for class, I breathed a sigh of relief and collapsed into a chair.

I was just so relieved to be out of Haiti. I caught my breath, then went out of the building, got on my bike and just rode off.

Day 14

I guess that once you've seen a real life nightmare, the fake ones in your dreams just aren't as big a deal anymore.

Day 15

My trip to Haiti was difficult to sum up into a single conclusion. I can't say if it was or wasn't what I expected, because I honestly had no idea what I was getting myself into.

Our flight was delayed an hour this morning, so we couldn't take it or we would have missed our connecting flight. The best we could do was fly to Puerto Rico, then to Philadelphia and then to Pittsburgh. It put us into town about five hours late, but it wasn't too bad.

Everyone I met was a Christian except Geoff, who was Jewish, so I didn't do much preaching. Carlyle and I had some lengthy discussions about our faith and I think we learned a lot from each other.

This trip opened me up to a whole new world of confusion.

Haiti is bipolar. It's made up of faithful, grateful, tough people who are more admirable than most of the people I know.

It's also made up of corrupt, evil, heartless people who are willing to steal from the poor to line their own pockets.

I feel that my greatest achievement was training Carlyle. He will be a lasting

blessing on the hospital and on his people, who need his services desperately.

I keep thinking of Christ's teaching "If you give a man a fish, you will feed him for a day, but if you teach a man to fish, you will feed him for a lifetime." God led me to Carlyle to teach him to fish. Now he will fish for his people for a lifetime.

Most vacations I've taken have been relaxing and fun. It's great, but when it's over you end up depressed about your life. This vacation was the hardest two weeks I've ever done, but in the end, I'm going home joyful and grateful for my life and what I have. It makes me question the purpose of my relaxing vacations.

Not everything we did in Haiti was perfect. We made mistakes and learned from them. We did the best we could. In the end, we were imperfect people led by the perfect will of God.



While I was in Haiti, I scribbled this journal late at night in my tent with a flash light and a notebook. It was my hope that my daughter might want to read it someday. I thought that perhaps my wife and some close friends would be interested, but I never expected much beyond that.

The response that I received upon my return was overwhelming. Everyone I knew wanted to hear about the trip and read the journal. People I had never met would tell me how much they enjoyed reading it because they had borrowed a copy from a friend. Everyone at work knew about the trip and I received a mountain of undue credit.

What I did in Haiti was a great thing, but after being there and seeing the work that others have done and continue to do, I realize that my contribution is a drop in the bucket compared to the real heroes. I was there for two weeks. I sacrificed a little of my paid time off from work and some time away from my family, but my

trip was funded by my church and friends from work paid for my vaccinations.

Overall, my personal sacrifice was very small. Some of the people I worked with in Haiti have moved there and do volunteer work full time, accepting only food and water. These unseen heroes are completely unknown outside of Haiti, and I feel ashamed when someone tells me what a great person I am. I wish that I had recorded the names of these people in my journal, but I'm not good with names, especially in the middle of the night in my tent.

My goal for this journal is that it might raise awareness of the need for and the adventure of mission work, hopefully inspiring good people to take the leap and do great things.



I was most of the way through an eight-week course on the “A3” lean method at Akron Children’s Hospital when I left for Haiti. The material from this course was fresh in my head when I arrived at the field hospital, which helped me use the process without having any lean instructional materials at my disposal. When I first arrived at the Radiology tent, the process was a disaster. They were struggling to accomplish even a minimum patient flow and were working themselves into the ground with waste.

One of the great things about the A3 system is that it possesses the flexibility that it teaches. I was able to assess and address several “just do its” before writing up my initial diagrams. This is contrary to the way the process is taught, but the situation warranted the change and it all worked beautifully.

I was able to immediately design tools, customize equipment, build the patient ramp and other necessary tasks that had large impacts without a large amount of

thought. This immediately gave the process enough breathing room to allow us to attack more complex issues, such as the patient flow process and the film development and archival process. These complicated processes required me to create detailed charts and notes for analysis.

It was during this that the A3 system showed the full force of its usefulness. In this midst of the hospital’s chaos, having an organized system to analyze and solve complex problems was invaluable. I felt like David, staring up at Goliath with a fishbone diagram loaded into my sling. As intimidating as it was, it all worked out beautifully, and I’m thankful that I could be a part of the relief effort.

More resources about the A3 method:

[Managing to Learn](#), John Shook (Lean Enterprise Institute).

[Understanding A3 Thinking](#), Durward Sobek and Art Smalley (Productivity Press).

[A3 Problem Solving for Healthcare](#), Cindy Jimmerson (Productivity Press).

You can also view the A3 at www.LeanForHaiti.org

Russell's Haiti A3

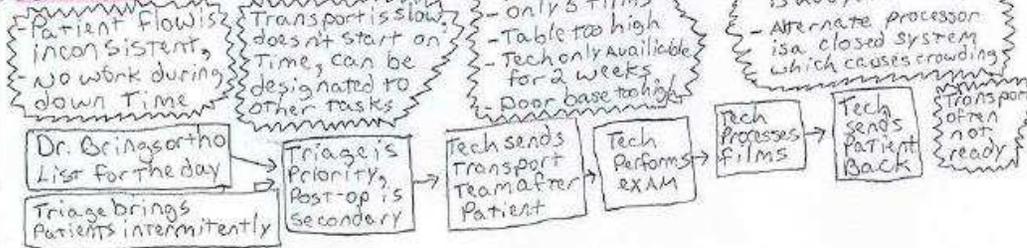
Title: Increasing patient turnover and film quality in a Haitian field hospital
Background: The field hospital had an inefficient Radiology department that was producing suboptimal films. The mass of patients requiring quality x-rays was more than the current process could accommodate. An increase in both efficiency and quality was an absolute necessity.

Smart Goal: Increase patient turnover to accommodate all patients who need x-rays on any given day by the end of day two with an increase in film quality that ensures all films are of diagnostic quality.

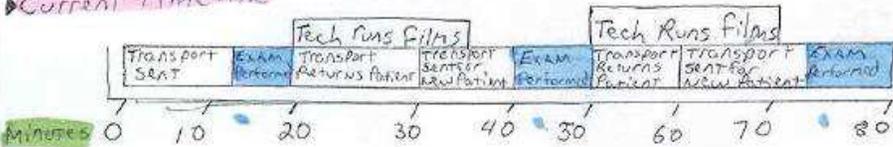
Problem Statement: Need to increase patient turnover and film quality

Current State

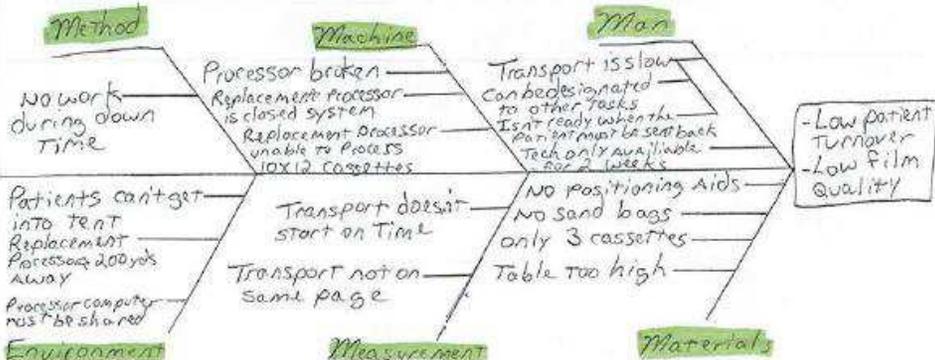
Current Value Stream Map



Current Timeline



Analyze

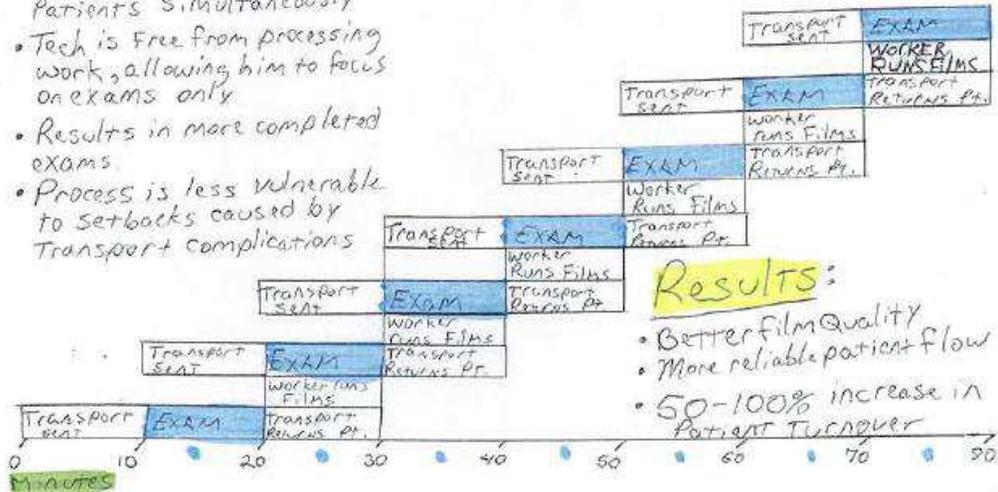


Implementation Plan

Description	Responsible	Time Line
1. Creation of waiting area	Russell	1st 2 hours
2. Advancement of transport Assignments	Carlyle	ongoing
3. Early completion of walkable Post-ops	Russell + Carlyle	ongoing
4. completion of backup Transportation tasks	Russell + Carlyle	ongoing
5. Creation of positioning Aids	Russell	1st 2 hours
6. Creation of sand bags	Russell	1st 2 hours
7. Case-by-case view limitation decisions	Russell + Carlyle	ongoing
8. Shortening of table legs	Russell + Carlyle	1st 2 hours
9. Training of replacement Tech	Russell	1st week
10. Processor mechanical modification	Russell	day 2
11. Processing of films during exam	Marie	ongoing
12. Exportation of films to hospital central database	Russell + Larry	1st week
13. Construction of Tent Access ramp	Russell	1st 2 hours
14. Wheelchair and crutch repair	Russell + Carlyle	Ongoing

New Timeline

- Transport team does multiple patients simultaneously
- Tech is free from processing work, allowing him to focus on exams only
- Results in more completed exams
- Process is less vulnerable to setbacks caused by transport complications



Results:

- Better film quality
- More reliable patient flow
- 50-100% increase in Patient Turnover

Russell Maroni has identified a charitable organization that comes well recommended from a doctor/friend at work who also does work in Haiti (the field hospital where he worked has since been closed).

At the suggestion of Dr. Jeff Kempf, Russell has chosen to support an orphanage called **Nuestros Pequeños Hermanos** (NPH) -- it runs a free children's hospital in Port-Au-Prince.

The web page for the organization is <http://www.nphhaiti.org/>

To Donate:

Visit the NPH website to donate via the web - [LINK](#)

U.S. readers can donate via "Friends of the Orphans," a 501(c)3 non-profit organization:

- **Web donation** [LINK](#)
- **Mail a check:** [LINK](#)



You can specify that your donation support Haiti specifically, or you can allow NPH to choose where to use donations.

History of Nuestros Pequeños Hermanos *(reprinted from their website)*

In 1954, a boy was arrested for stealing from the poor box of a small church in Cuernavaca, Morelos, Mexico. The young priest in charge, Father William Wasson of the United States, was unwilling to press charges against this "thief." Instead, he asked for custody of the boy. One week later, the judge sent him eight more homeless boys. By year's end, 32 boys were in residence **and Nuestros Pequeños Hermanos** (NPH), Spanish for "Our Little Brothers and Sisters," was born.

Over 16,400 children have grown up in the NPH family, which now operates homes in

eight additional countries: Honduras, Haiti, Nicaragua, Guatemala, El Salvador, the Dominican Republic, Peru and Bolivia.

Today, over 3,300 children are being cared for in a loving, secure environment.

For a detailed history of NPH, see the [Chronology of Nuestros Pequeños Hermanos](#).

Currently, there are over 3300 children (Jan-2009). Mexico: 795 Honduras: 547 Haiti: 597 Nicaragua: 320 Guatemala: 319 El Salvador: 459 Dominican Republic: 172 Peru: 43 and Bolivia: 61. The number of children constantly fluctuates as new children arrive and older children leave as they reach adulthood. For more detailed numbers, please see [our census and statistics page](#).