Haiti

1. State of Clinical Engineering (CE) - Health Technology Management (HTM) – Body of Practice (BOP)
Clinical engineering in HAITI is still at the birth/Early stage, the public and private sector technicians mainly repair technology as much as possible. There is a deep need of empowerment of local technicians or engineers through academic program, specialized training. The CE is quite unknown to health institution’s managers. The decision makers will reach out to technicians mainly for repairs.

2. How would you suggest to show the Value of and from having CE-HTM PROGRAM?
For Haiti, I would suggest a national conference on clinical engineering involving various stakeholders like ministry decision makers, universities staff, health institution managers, medical school managers... this conference will showcase the local clinical engineering experience and foreign experts will also present about the Value / How to set up a CE-HTM Program

3. Example of success stories where CE supported patient outcomes
3.1 – Three Community Reference Hospitals in Port au Prince: Arcachon 32, Bon repos, Beudet
In the frame of the tripartite cooperation Brazil – Haiti- Cuba, 3 Community Reference Hospital were built by UNOPS and the financed by Brazil Ministry of Public Health.
In parallel to the hospital construction, 30 biomedical technicians were trained by Cuban experts on the basics of Clinical Engineering.
With the support of UNOPS Clinical Engineers these 30 technicians are the ones providing clinical engineering services in most of the public hospital in Haiti and the 3 Hospital are in the track of become university hospital because of the quality of the healthcare provided with advanced medical technologies.
These 3 small size hospitals (55 beds each) provides care to almost 10,000 patients per month. They are located in area with a huge demographic grow rate.

3.2 – St Boniface Hospital,
This hospital provides quality healthcare because of the great technological and medical set up. The real difference is made by the presence of a clinical engineer who runs a training small scale program for local technicians on clinical engineering.

3.3- Hospital Albert Schweitzer
As for St Boniface Hospital the presence of an expert in clinical engineering makes the difference in the availability of technology for health. The several hospital in Haiti medical technologies have a limited impact on patient care because they are often out of order or the users are not properly trained to use the equipment.

3.4 – MSF Hospital
All MSF hospital in HAITI works with skilled biomedical technicians trained and certified by MSF in Europe. The technologies are well used, maintained and patients can benefit from both medical and

4. CE Education program available (levels and content) – Body of Knowledge (BOK)
There is no adequate CE education program in HAITI. The biomedical technicians working in health institution or suppliers have undergone periodic training provided by some organizations like UNOPS as component of specific projects. These training are provided in order to build up specific
skills related to projects (Maintenance of Medical Laboratory Equipment, OR equipment, Sterilization...). Unfortunately the outcome is always very limited because the trainees usually don’t have the necessary background knowledge.

5. CE Association/Society and Credentialing/Certification program if available:

Since 2015 with the support of UNOPS an association named “ASHAIH” (Association Haïtienne d’Architecture et d’Ingénierie Hospitalière / Haitian Association for Architecture and Hospital Engineering) perform activities related to clinical engineering. The association is still very young and made of clinical engineering technicians, managers, architects.

There is no Certification program existing in HAITI for clinical engineering

The total number of biomedical technicians in HAITI is less than 50

6. CE major challenges (think of 3 subjects)
- Lack of skilled clinical engineers there are less than 5 CE experts in HAITI, all foreigners (Absence of academic program of biomedical engineering)
- The CE is still unknown for most of the decision makers
- Lack of regulation (Importation, Purchase, Donation...)

7. What is the most important action you will support to increase CE recognition.
- Set up of an academic clinical engineering master program with local stakeholders and international partners.