

The Closure of the Charity Hospital Building August 8, 2007

Pre-Katrina

Before Hurricane Katrina hit, the Charity Hospital building failed accreditation reviews because it could not meet the demands of modern health care. The technology and practice of medicine in 2007 are dramatically different than they were in the 1930s when the hospital was built.

Therefore, before Hurricane Katrina, the Legislature had included a capital outlay appropriation to build a new Charity Hospital, which is part of the Medical Center of Louisiana at New Orleans (MCLNO).

Post-Katrina

The damage from Hurricane Katrina was severe and extensive, compounding the pre-existing MCLNO deficiencies.

FEMA, the State of Louisiana Office of Facility Planning and Control (FPC), and LSU decided that it would be more cost-effective to renovate University Hospital, also part of MCLNO and now known as LSU Interim Hospital, as an interim hospital facility, than it would be to renovate Charity Hospital for the same purpose.

Charity Hospital would require hundreds of millions of dollars in repairs before it could re-open for health care services.

FEMA would have forced LSU and the state to renovate and open Charity as an interim facility if FEMA had determined that such action would have been more cost-effective.

Assessments

The GAO, FEMA, and the State of Louisiana assessed the condition of the hospital.

These three independent assessments of the Charity Hospital building all reached the same conclusion: spending hundreds of millions of dollars to restore Charity is senseless.

Constructed at the same time as Charity Hospital and sharing a common basement with the hospital, the adjacent medical school building, which LSU has been trying to return to operation for the past two years, is still not functioning because of the need for ongoing extensive repairs of hurricane damage. This building would only be for faculty office space, with none of the modern health-care demands that Charity Hospital would face.

Another assessment would be expensive and time-consuming, but LSU does not object to another assessment if it is a comprehensive assessment by a firm that has expertise in health care and that has funding to do so, and by a firm unaligned with special-interest groups. The firm should also sign hold harmless clauses before the assessment begins.

Though the Charity Hospital building may have architectural or historic significance, neither is the issue—the provision of the best health care and medical education possible is the issue.