MEMORANDUM OF UNDERSTANDING FOR ORGANIZATIONS ADVOCATING FOR RENOVATION AND REPURPOSING CHARITY HOSPITAL TO PROVIDE MUCH NEEDED COMMUNITY MENTAL HEALTH SERVICES

PURPOSE

The purpose of this Memorandum of Understanding (MOU) is to link organizations in an initiative that readapts the Charity Hospital Building to offer a comprehensive and holistic approach to streamlining mental healthcare facilities and services in our community. This initiative is designed to produce positive outcomes for patients with behavioral mental health and severe brain disorders, as well as substance abuse and neuro-addictions.

This is a voluntary coalition of organizations located in Greater New Orleans and the surrounding areas. This MOU imposes no financial commitment on any participating organization.

SCOPE

The scope of the project involves restoring the Charity Hospital building for the purposes of providing long-term inpatient psychiatric beds, transitional housing for low income residents, spaces for mental health and neurological research and space for a nexus of organizations that deal with systemic challenges of mental illness, homelessness and the lack of work force development and business ownership opportunities for an underserved and under-resourced population.

Organizations that are in close physical proximity to one another allow for communication to create policy that drives a long-term strategic master plan. Louisiana needs a road map in order to combine and streamline mental health services and facilities that function efficiently to produce cost savings and compassionate and humane care for individuals afflicted with behavioral and physical mental illnesses.

The parties to this MOU agree to cooperate as part of a Consortium of relevant organizations and institutions to help explore the restoration of Charity Hospital for the mental health care purposes.

NATIONAL NEED

The withering away of mental health facilities and services over the last few decades has left gaps in the mental health care system resulting in enormous economical and societal costs. One out of every four Americans is afflicted with some sort of mental illness. The epidemic of those left untreated is creating chaos, and families who constantly struggle to find help for their loved ones are emotionally and physically exhausted.
 Approximately one out of five adolescents has a diagnosable mental health disorder, and nearly one third show symptoms of depression. Psychiatric disorders affect 12 percent of children. Children are 3 to 4 times more likely to be abused if they are mentally ill.

“For the past 20 years, studies have consistently estimated that between 40 and 50 percent of all individuals with schizophrenia or bipolar disorder are receiving no treatment for their mental illness at any given time. According to disease prevalence estimates of NIMH, this means that approximately 3.0-3.5 million such individuals are receiving no treatment.” [159]

“A report released by the Treatment Advocacy Center and the National Sheriffs' Association last year, showed that Americans with severe mental illnesses are three times more likely to be in jail or prison than in a psychiatric hospital.” [1371]

“According to the Department of Justice (1996 Source Book: Criminal Justice Statistics), it costs American taxpayers a staggering $15 billion per year to house individuals with psychiatric disorders in jails and prisons ($50,000 per person annually; 300,000 incarcerated individuals with mental illness).” [1371]

NEED IN GREATER NEW ORLEANS AREA

Studies show that outpatient care is not adequate to deal with patients that have long-term mental health needs. New Orleans has an acute need for an inpatient psychiatric care facility - especially for uninsured residents. [126233]

Those who have insurance can find long term treatment care in private facilities such as the Children’s Hospital on State Street. Those without insurance often have no place to have their long-term needs met outside of Orleans Parish Prison. “Dr. Sam Gore, [former] chief psychiatrist for the OPSO [Orleans Parish Sheriffs Office], estimates about 45 percent of inmates at Orleans Parish Prison have mental illness.” [1972425]

The new Veterans Affairs and University Medical Center Hospitals coming online in the near future will provide only 80 long-term inpatient psychiatric beds combined. This is - at least - 78 beds less than pre-Katrina yet there are indications that today, there is an even a greater need for long-term beds. For instance, many people still suffer from post-Katrina mental illness, and the new VA Hospital will be a destination hospital for Veterans with PTSD returning from the wars in Iraq and Afghanistan.

POTENTIAL SOLUTIONS
Inpatient care and outpatient care are not mutually exclusive. What is needed is a middle path.

This Charity Hospital project does not replace already existing services such as supportive independent living communities and primary and outpatient clinics but, rather, it serves to enhance and weave together with these services to provide wrap-around care thereby preventing recidivism to hospitals or prisons and jails. The Charity project will also provide supplementary long-term psychiatric beds to the region when the VA and UMC hospitals are saturated.

In terms of commercial real estate, it makes sense to reuse Big Charity for its originally intended purpose: i.e. medical use. The million square foot buildings location in the medical corridor complements the biomedical industry that focuses on mental health research.

Also, its cultural importance must not be underestimated. The 2005 shutting of Charity Hospital during a time of great trauma in New Orleans left a deep wound on those who were born there and who saw it as their medical home. Reusing the old hospital for a public purpose that meets critical health needs of our community would do much to heal that wound, as well as to restore trust between residents and decision makers thereby helping to inspire community engagement.

The space would be used to incorporate and enhance many components working in conjunction with one another. Here are some of the more outstanding:

- Long-term Inpatient facilities including rehabilitation programs.
- Outpatient facilities such as the 88 primary care clinics that already exist.
- Independent living and supportive communities like Exodus House with doctors and nurses on site.
- Preventative and holistic health healing and treatment programs.
- Aggressive marketing campaigns that - for example – promote programs that are working to alleviate stigma around mental illness and generate positive messages that get people excited about wanting to work in their respective fields.
- Urban Cooperative Development and investment to enable under-resourced people to be members and stakeholders in worker-owned businesses. [Note: Cooperatives allow members with good ideas the same entrepreneurship opportunities as people who are perhaps more endowed.]
- Situating people in jobs that enhance feelings of well-being and relevance to society.
- University research institutions.
- A cooperative sharing environment for organizations to combine resources, products and expertise to implement a strategic regional master plan.
- Affordable/Transitional housing for homeless people and/or people with certain types of mental illnesses.
TERMS OF PARTICIPATION

Any organization which agrees to participate in this Memorandum of Understanding will work in good faith with the others involved. The terms of this MOU can be modified by mutual agreement of the organizations participating in this effort. Any organization may terminate its participation by notifying the other members in writing.

SIGNATURES OF PARTICIPATING ORGANIZATIONS:

Organization name, date, and title of person signing for the organization.