

# Louisiana State University Health Care Services Division Medical Center of Louisiana at New Orleans: Ambulatory Care Services Bigger and Better

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**KEY INDEXING TERMS:** Spirit of Charity; Charity Hospital; Ambulatory care services. [Am J Med Sci 2008; 336(2):191–196.]

The second-oldest hospital in the United States,<sup>1</sup> Charity Hospital in New Orleans is a public hospital that was founded on May 10, 1736, in a house on the corner of Chartres and Bienville Streets.<sup>2</sup> The legacy of Jean Louis, a French ship-builder and sailor who died in New Orleans in 1735 and bequeathed his estate to build a hospital that would serve the city's indigent population, Charity was originally named the Hospital of Saint John or *L'Hôpital des Pauvres de la Charité* - "Hospital of the Poor." In 1743, a new building was constructed to house Charity Hospital, which was nearly destroyed by a hurricane in 1778. A third Charity Hospital had been built by 1785, only to be razed by fire in 1809. In fact, the concrete behemoth that sprawls on Tulane Avenue today, the iconic symbol of New Orleans' public healthcare system, is the sixth incarnation of Jean Louis' philanthropic bequest. Opened in 1939,<sup>1</sup> the vast and seemingly indestructible building was finally felled in the summer of 2005 by the effects of Hurricane Katrina.

In 1993, when the State of Louisiana acquired Hotel Dieu Hospital, which was subsequently renamed University Hospital and is currently termed the Louisiana State University (LSU) Interim Hospital, Charity and University Hospitals together formed the Medical Center of Louisiana at New Orleans (MCLNO). Although the University campus

of MCLNO reopened in November 2006, the Charity building remains permanently closed. However, as its long and colorful 272-year history shows, Charity Hospital is more than a building or name. It is a tradition of caring for the underserved, for the impoverished and uninsured, despite great adversity—and that spirit cannot be destroyed by fire or flood. It is not housed at any particular address. Ultimately, although a remarkable building—one of many in a city that was 80% flooded—was destroyed in August 2005, the spirit of Charity is unassailable.

Today, that spirit is alive and well at the LSU Interim Hospital, where the hard work of rebuilding MCLNO's ambulatory care services has been assiduously underway for the past 3 years. Those efforts are still being made even now. As the challenges and opportunities involved in the labors of rebuilding are explored, it is important to remember that enduring legacy.

## Before Katrina

In addition to providing comprehensive quality healthcare to over 500,000 patients annually, MCLNO served as a major Louisiana and United States teaching facility. It was the principle educational base for the medicine, nursing, and allied health programs at the LSU Health Sciences Center as well as for the Tulane School of Medicine. Before Hurricane Katrina, 26% of annual patient encounters were Emergency Department (ED) visits, and 55% were ambulatory or outpatient clinic visits, of which 25% were primary care and 75% were specialty care. The MCLNO primary-care clinics were staffed by the LSU and Tulane Health Sciences Centers, with MCLNO's Our Family Physician or W-16 Clinic providing additional adult primary-care access. On average, 64% of the primary-care patient encounters occurred in the W-16 Clinic until its closure in 2003–2004 for budgetary reasons. Obviously, losing the capacity to accommodate 45,000 primary-care visits annually was devastating to the Greater New Orleans underserved community, and

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*Submitted May 15, 2008; accepted in revised form May 21, 2008.*

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this ultimately had a ripple effect on the entire New Orleans healthcare community.

MCLNO's pre-Katrina service area primarily included 445,000 Region I (Orleans, Jefferson, Plaquemines, and St. Bernard Parish) residents. In addition, MCLNO provided specialty care access for adjacent regions and nearby parishes when those services were not available or accessible to residents in those areas. Those areas included Region II (the Baton Rouge area), Region III (St. Charles Parish/Houma area), and Region IX (St. Tammany/Tangipahoa Parish areas).

After the closure of the W-16 Clinic, the wait time for available appointments at MCLNO, both for new and established patients and for Medicine consultations, increased dramatically. In an effort to address that problem, Dr. Dwayne Thomas, Chief Executive Officer of MCLNO, and Dr. Cathi Fontenot, Medical Director of MCLNO, began efforts to expand primary-care services into neighborhoods with limited or no healthcare options. They believed that community resources could and should be leveraged through partnership and collaboration with entities who shared their mission, vision, and/or target population. Other similar organizations providing services to the underserved were experiencing the same deficits; thus, out of a necessity to survive and a desire to meet the population's needs, their idea was to complement, not duplicate, efforts.

Initially, MCLNO leadership began talks with the New Orleans City Health Department, which provided services to the pediatric population. The City's patient population had limited access to primary care. Affiliates of Partnership for Access to Healthcare, a subsidiary of the Louisiana Public Health Institute, provided healthcare services in the Greater New Orleans area, but they could not absorb the additional patient load that resulted from the closure of W-16. Negotiations between MCLNO and the City of New Orleans stalled before other options could be pursued. On August 29, 2005, Hurricane Katrina occurred.

### After Katrina

Immediately after the disaster, large numbers of first responders, recovery effort workers, and volunteers dominated the City's population. Therefore, the immediate need in the Greater New Orleans community was disaster support and post-traumatic stress intervention for workers, staff, and residents.

Disaster support is similar to emergency support, and by virtue of MCLNO's designation as a Level I trauma center before Katrina, MCLNO had extensive experience in emergency response. However, the principle challenge after the storm was how to respond without any local facilities and with a damaged healthcare infrastructure. The emergency room, clinics, and hospitals were under water. There

was no electricity, clean water, or plumbing. Land/cell phones, internet, and other routine communication options were not available. Once the flooding subsided, major debris removal and cleaning had to be done. Basic sanitation requirements needed to be restored before staff could safely return.

MCLNO staff was scattered throughout the United States or practicing in collaboration with the medical center's sister hospitals. Once providers and support staff were located, there was insufficient housing for those willing to return and for their families, no public transportation, no schools, and little in the way of healthcare, except for emergency services. This required many to return without their families until basic services within the City were restored. Nevertheless, less than 2 months after the storm and its resultant levee breaks, beginning on October 10, 2005, MCLNO began providing emergency services from the Emergency Medicine (E-Med) tents at the South Johnson Street parking lot located across the street from University Hospital. The E-Med tents were referred to as the "Spirit of Charity."

E-Med was the first service established by MCLNO after Hurricane Katrina. On October 12, 2005, the Centers of Medicare and Medicaid Services and the Department of Health and Hospitals (DHH) toured the South Johnson E-Med Unit, and the Louisiana State Fire Marshal and the Office of Public Health (OPH) inspected the site on October 26 and 27. In the first month of operation, 1165 patient encounters were reported; by the second month, 4129 encounters were recorded.

By early November, the military surgical combat hospital left the City of New Orleans and the New Orleans Convention Center. MCLNO leadership seized the opportunity to move emergency services inside a brick and mortar building, negotiating terms with the Convention Center Board. On November 12, 2005, MCLNO relocated the South Johnson E-Med tents to the New Orleans Convention Center at 900 Convention Center Boulevard, Hall J. The Louisiana State Fire Marshal, the Louisiana State Board of Pharmacy, and the OPH conducted site visits on November 21, 22, and 30, with an additional site visit by OPH on December 9. The approval of DHH, OPH, and the fire marshal was mandatory before the new site could open. Centers of Medicare and Medicaid Services and the Louisiana Health Care Review toured the unit on December 15, and the Joint Commission on Accreditation of Healthcare Organizations conducted a site visit on December 20, 2005. Ms. Mary Kelly, RN, MSN, MHA, Assistant Nurse Administrator for the Compliance Division, coordinated and prepared MCLNO for these and other governmental site visits.

The E-Med units provided round-the-clock general emergency, pharmacy, radiology, and nutrition services, and Sexual Assault Nurse Examiner ex-

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