EXHIBIT 1
PARISH OF ORLEANS
STATE OF LOUISIANA

I, Naomi Faulkin, state the following:

1. My name is Naomi Faulkin and I am a New Orleans resident. I was born at Charity Hospital in 1952, and have lived in New Orleans my entire life.

2. I qualify for free medical care at Charity Hospital and have received such care prior to Charity's closing.

3. I suffer from numerous life threatening conditions that require routine-medical supervision. To treat my conditions, my doctors currently have me on twenty prescriptions.

4. I also require routine visits by medical professionals to monitor my conditions and assist me in my daily activities. I have two personal care assistants, one in the morning and one in the evenings and a registered nurse who comes to assist me once a week. I need this assistance because of my medical conditions and the medications I take. By example, because of my medical conditions and prescriptions my doctors have ordered me not to cook because they are worried I will forget what I am cooking or fall asleep.

5. Prior to the closure of Charity Hospital, I was an inpatient on numerous occasions. Most notably, I had a heart attack in 2003. The heart attack required bypass surgery and a prolonged hospital stay, all of which occurred at Charity Hospital.
6. More recently, I suffered an epileptic seizure in September of 2007. I was immediately taken to a private hospital for treatment. I remain financially responsible for the care I received at the private hospital.

7. Prior to having the seizure I had extreme difficulty finding a physician that was able to monitor my condition.

8. In addition to my other medical conditions, I have been diagnosed with mental health conditions that require psychiatric care and prescription drugs for treatment. As such, I am currently under the care of a psychiatrist and take several prescriptions to treat my conditions.

9. Prior to Katrina, I relied on Charity Hospital to treat my various ailments. A Charity, I was assigned a primary care physician, and was sent to specialty clinics and doctors as needed.

10. Now that Charity is closed, I receive treatment at various clinics, hospitals and doctors’ offices throughout Louisiana.

11. When I am referred to a clinic, hospital or doctor outside of New Orleans. It is difficult and sometimes impossible for me to go to an appointment because I lack transportation and am on a fixed income.

12. Unfortunately, many of my conditions require treatment that is unavailable in New Orleans and therefore I am referred to places outside of the city. Prior to Charity’s closure, I was not refereed to a place for treatment that was outside of New Orleans. For example:

   a. Even when care is available in New Orleans I am sometimes charged a fee even to obtain care. Because of my fixed income I cannot afford to pay for
private care. Currently three of my regular doctors are outside of Algiers, including my psychiatrist, my orthopedic doctor and my pulmonologist.

b. Even when I can find free care within New Orleans I am often unable to secure an appointment within a reasonable period of time.

Signed this 14 day of January, 2008.

Naomi Faulkin

Sworn to and Subscribed before me, Tammy A. Mineo, Notary Public, on this 14 day of January, 2008.

Notary Public, La Bar Roll no. 07626

Tammy A. Mineo
Notary Public
Jefferson Parish
#67626
Commissioned For Life
I, Ronald Newman, state the following:

1. I am fifty-eight years old. I am a life-long resident of New Orleans, Louisiana. I make this affidavit based on my own personal knowledge.

2. Before Hurricane Katrina, I went to Charity Hospital any time I had a problem with my health. I worked at a local restaurant washing dishes. I became homeless because of Hurricane Katrina but continued working at the restaurant until I had a stroke.

3. I had a stroke on or about February 2007. I could not stand up and had bad chest pains. I went to University Hospital and they treated me that day but did not refer me to physical therapy after my stroke. I was discharged the day I came to the hospital for treatment for my stroke.

4. I tried to obtain physical therapy from University to help me recover from my stroke. My case manager at the Ozamen Center also tried to obtain regular physical therapy for my stroke but was not able to get me into a therapy program at University until on or about October 2007. I have been told that this delay decreased my ability to fully recover from my stroke. I had to cease working and moved into the Ozamen Center because of my stroke.

5. Before I had my stroke, I had high blood pressure but I was able to continue working even after I became homeless. Because of the stroke and the time it took for me to get therapy, I still have not fully recovered. I still have trouble speaking and walking. I need a cane to walk and people have trouble hearing and understanding me when I speak.
6. If Charity Hospital were open, I would have been able to get therapy for my stroke immediately and would have had better chances of recovering from my stroke. I also might have been able to work today. Because of Charity Hospital's closure, I cannot get regular care for my stroke or for my high blood pressure. I also will not be able to get regular care if I have another stroke.

Signed this 9th day of January, 2008.

Ronald Newman

Sworn to and subscribed before me, Ellen Barrett Atkinson, Notary Public, on this 9th day of January, 2008.

Ellen Barrett Atkinson
Notary Public, La Bar Roll no. 82236
EXHIBIT 3
PARISH OF ORLEANS
STATE OF LOUISIANA

I, MELVIN LeBlanc, state the following:

1. My name is Melvin LeBlanc, and I am a resident of New Orleans, Louisiana. I make this Affidavit based on my own personal knowledge.

2. I have lived in New Orleans my entire life, except for when I was displaced by Hurricane Katrina.

3. My home is located in the Lower Ninth Ward and is under repair. I currently live in Kenner, Louisiana.

2. I am painfully employed, but my income is such that I qualify for free or low cost care at Charity Hospital ("Charity").

3. I was born at Charity in 1952. For the next 43 years, I primarily relied on Charity for my medical needs.

4. In 2003, for example, I was diagnosed with diabetes at Charity. Following the diagnosis, the Charity doctors gave me a prescription to treat my disease. The treatment was free and the prescription only required a small co-pay. When Charity was open, I returned to Charity for scheduled check-ups to monitor my disease.

5. Since the closure, I have received primary care at various private clinics in the metropolitan area. Unfortunately, the private clinic closest to me refused to treat me unless I paid a $75.00 fee.

6. I paid the fee because I required medical treatment and was unable to obtain comparable, free care at any other location because, among other things, I lack, and continue to lack, adequate transportation and I am on a fixed income.

7. Despite the high fee, the clinical staff did little more than check my blood pressure and renew my prescription.

8. Following the visit to the private clinic, I was told that subsequent visits would only cost $50.00, but when I returned, I was told that the exam would cost approximately $125.00.

9. Fortunately, I was able to secure an appointment at the Lower Ninth Ward Health Clinic (the “Lower Ninth”).

10. I am extremely happy with the care I received at the Lower Ninth. Unfortunately, the Lower Ninth is overburdened and it is sometimes difficult for me to secure an appointment.
11. The Lower Ninth is also unable to provide certain care that I sometimes need. For example, I have gum and teeth issues that require dentistry services that are not available at the Lower Ninth. The Lower Ninth has referred me to a clinic outside of New Orleans, but I am unable to go to that clinic because I lack adequate transportation, have limited financial resources, and it is very difficult to even obtain an appointment at the clinic.

12. Prior to Charity’s closure, I received dental care at Charity.

13. After the closure, I had to go to Ochsner Hospital emergency room, a private institution, when I experienced extreme pain due to gum inflammation. This created a severe financial hardship for me because I was forced to pay for this unexpected hospital visit.

Signed this 14th day of January, 2008.

Melvin LeBlanc

Sworn to and subscribed before me, Steven Jupiter, Notary Public, on this 12th day of January, 2008.

Steven Jupiter
Notary Public, La Bar Roll no.

STEVEN M. JUPITER
NOTARY PUBLIC
State of Louisiana
My Commission is issued For Life
Louisiana Bar Roll No. 24815
PARISH OF ORLEANS  
STATE OF LOUISIANA

I, Lucille Moore, state the following:

1. I am fifty-five years old. I am a life long resident of New Orleans, Louisiana. I make this affidavit based on my own personal knowledge.

2. I have been suffering from several health problems since I turned fifty, and currently have trouble seeing out of one of my eyes because of blood that has built up behind my eyes. I also suffer from thyroidism, high blood pressure and an enlarged heart and take medication for several of these conditions.

3. I went to Charity Hospital for all my health needs before I started working at J.C. Jones. I had health insurance through K.C. Jones, and used some of their doctors until June of 2007, but still used Charity doctors and went to Charity before Hurricane Katrina because I prefer the Charity doctors, the waits aren't as long, there wasn't a copay and you could see all your health care providers in the same place.

4. In April of 2007, I started having trouble seeing out of my left eye and saw lines. I had blurred vision and started to have trouble seeing at night. I had to leave my job at K.C. Jones, because I was a cashier and I kept having trouble seeing the cash register. I have been wearing glasses since I was ten years old, and my right eye, the only eye I can clearly see out of, is my lazy eye.

5. The first doctor I went to see about my eyes told me that the condition would clear up in about six months but it hasn't. Finally I went to see a doctor who told me I had to have an operation because there was blood behind my eye.
6. Because there is no more Charity Hospital, the closest place I can have surgery is in Bogalusa, Louisiana. There is no transportation that goes from my house to the hospital in Bogalusa, LA and I will have to pay someone to take me to the hospital.

7. The hospital in Bogalusa also will not let me stay over night, and I will have to stay in a hotel for at least two days, because the hospital in Bogalusa has told me I will need to be at the hospital during the day for three days. This will cost me at least four hundred dollars, not including the amount of money it will cost me to get to the follow up check ups in Baton Rouge. I also have had trouble scheduling an appointment with Baton Rouge, and they have called me on the same day to schedule an appointment, despite the distance of the commute and the obstacles to me getting to Baton Rouge.

8. Because of the distance and the cost of treatment, I have put off surgery twice although I can’t see out of my left eye. Because I am having such trouble with my vision, I don’t leave my house most days, and have fallen down and injured myself several times because I have trouble seeing. When I cannot find someone to help me go to Church, I have to take a longer route to walk to Church to make sure that I don’t get hurt on my way or get into trouble because I can no longer see at all in the dark.

9. If Charity Hospital were open, I would be able to get my eye surgery and the check-ups all at the same place, and I wouldn’t have to keep putting off the surgery and my life might be able to go back to normal. Since Charity is not
open, I have to put off my surgery until I can find someone to take me, and the money to pay for the surgery and transportation.

Signed this 14 day of January, 2008.

Lucille Moore

Sworn to and subscribed before me, Tammy A. Mingo, Notary Public on this 14 day of January, 2008.

Notary Public, La Bar Roll no. 37626

Tammy A. Mingo
Notary Public
Jefferson Parish
267626
Commissioned For Life
EXHIBIT 5
PARISH OF ORLEANS  
STATE OF LOUISIANA

I, Delilah Hall, state the following:

1. I am 50 years old. I am a life long resident of New Orleans, Louisiana. I was born at Charity Hospital. I make this affidavit based on my own personal knowledge.

2. Although employed continually since graduation from high school, I have never had health insurance, either because my employer did not offer health insurance or, as is true at my current place of employment, University of New Orleans, insurance is offered, but I am unable to afford the cost of the employee premium. I have been deemed eligible to receive free care from Charity Hospital.

3. Prior to Hurricane Katrina, I received all my necessary medical care from Charity Hospital. I suffer from chronic pain from my spinal condition. I was in so much pain that I had to walk with a cane. I went to Charity for prescription medications for my pain, an MRI to diagnose the cause of pain, and a diagnosis of my spinal problems. I was referred to the Charity spine clinic, and a highly-specialized nerve study at the spine clinic, and had two highly-expensive steroid injections in February and April of 2005, which alleviated the pain enough for me to return to work.
4. Although all of these treatments are expensive, I received them free at Charity Hospital because I was uninsured and qualified for free care.

5. I have not been able to receive the same services since Hurricane Katrina, although I was referred to physical therapy for my health problems before Charity closed. I have not been able to find affordable physical therapy. I resumed work in January 2006.

6. In 2006, the pain returned in my neck. I was suffering so much that I sought emergency medical help at the Lord & Taylor temporary facility in September and October 2006. Since that time I have been seen to the reopened Charity neurology clinic and received MRI’s at the reopened University Hospital. Thus far, the tests have not resulted in a clear diagnosis. I have been referred for a further nerve study at a facility in Bogalusa, Louisiana, which is a two hour drive from New Orleans. I participated in this study, but I still do not have a clear diagnosis.

7. I continue to suffer chronic pain, in my neck and in my arms and hands, making both my work and my activities of daily living difficult and painful. I also continue to suffer from general discoordination as a result of my nerve problems and have trouble picking up and holding onto objects, as I did when my problems started in 2005. This makes it even harder for me to continue with my daily life and work.
8. If Charity Hospital were open and the previous care available, I would be able to receive therapy for my nerve problems, and I would not have to travel several hours each way for medical appointments to follow up with or diagnose my condition.

Signed this 11th day of January, 2008.

Delilah A. Hall

Sworn to and Subscribed before me, Steven Jupiter, Notary Public, on this 11th day of January, 2008.

Steven Jupiter
Notary Public, La Bar Roll no. 24815

STEVEN M. JUPITER
NOTARY PUBLIC
State of Louisiana
My Commission is Issued For Life
Louisiana Bar Roll No. 24815
PARISH OF ORLEANS
STATE OF LOUISIANA

I, Marlene Dumas, state the following:

1. My name is Marlene Dumas and I over the age of 18 and a resident of New Orleans, Louisiana. I make this Affidavit based on my own personal knowledge.

2. I was born at Charity Hospital and am a resident of New Orleans, Louisiana. Following Katrina, I was evacuated to a shelter located in Braggs, Oklahoma called Camp Grouper. After Camp Grouper, I returned home to New Orleans.

3. From approximately 1990 until Hurricane Katrina, I relied on Charity for virtually all of my medical needs. Due to my income level, I qualified for free medical care at Charity and believe that I still qualify for free care. I do not have a permanent address and have experienced periods of homelessness since returning from Camp Grouper.

5. If Charity was still open, I would continue to use Charity Hospital. Since Charity is closed, I often have difficulty finding medical care that I need.

6. Prior to Katrina, my son was taken by my husband to another state without my permission. When at Camp Grouper, I witnessed a kidnapping that brought back terrible memories of the incident. As a result, I went to the camp psychiatrist and was diagnosed with depression and was given a prescription to treat my condition.

7. When I returned to New Orleans, I had trouble finding mental health services and was unable to renew my prescription. My depression, however, has gotten worse. If Charity was open, I would seek mental health services at Charity Hospital.

8. In addition to the difficulty in locating mental health services, I also have difficulty finding someone to treat my medical conditions. For example, on December 12, 2007, I went to the St. Anna, Mobile Medical Center to obtain treatment for cysts on my scalp.

9. But instead of receiving care for my cysts, I was evaluated by the staff psychiatrist. She determined that I was a threat to myself and others and ordered that I go to Tulane Medical Center for evaluation. I was evaluated at Tulane Medical Center and released that same day. I was released without my cysts being evaluated and without receiving a prescription for my mental health condition.

10. To compound matters, I was later sent a bill for approximately $1800.00 by the Tulane Medical Center for the evaluation even though I was there involuntarily, qualify for free care, and was released on the same day.

Signed this 11th day of January, 2008.

Marlene Dumas.

Sworn to and Subscribed before me, Margaret A. LeBlanc, Notary Public, on this 11th day of January, 2008.

Margaret A. LeBlanc
Notary Public, La Bar Roll no. 2303
PARISH OF ORLEANS  
STATE OF LOUISIANA  

I, Betty Washington state the following:  

1. My name is Betty Washington, and I am a resident of New Orleans, Louisiana. I make this Affidavit based on my own personal knowledge.  

2. I was born at Charity Hospital and have lived in New Orleans my entire life except for when I was displaced by Hurricane Katrina.  

3. Prior to my retirement in 2004, I was a public school teacher for 25 years. When I was a teacher, I had private health insurance but would often go to Charity because of the high level of care they provided.  

4. After my retirement, I was unable to afford to continue paying the premiums for my private health insurance. I did, however, qualify for free medical care at Charity Hospital and continue to qualify for free care.  

5. As such, I relied on Charity for my medical needs until it was closed in 2005. If Charity was still open, I would continue to use Charity Hospital.  

6. In addition to my general health care needs, I suffer from severe asthma that requires monitoring by medical professionals. My doctors have prescribed several expensive medications to treat my condition.  

7. Since the closure of Charity Hospital, I primarily receive my care at the Lower Ninth Ward Health Clinic ("Lower Ninth").  

8. I am very happy with the care I receive at the Lower Ninth. The Lower Ninth, however, cannot provide the higher level of care that I sometimes need.  

9. For example, I was referred to University Hospital in 2007 for a biopsy by the medical staff at the Lower Ninth. At first, I was not able to obtain an appointment to conduct the biopsy until almost a year later. The Lower Ninth medical staff intervened and secured an appointment in one week. If not for the intervention, I would have waited almost a year to obtain a biopsy.  

10. Unfortunately, there are long waits at every clinic I have been referred to and at times I cannot even obtain care. To compound matters, I lack adequate transportation. My lack of transportation makes it difficult, and sometimes impossible, for me to get to appointments that are not located near my home.  

Signed this 1/09/08 day of January, 2008.  

Betty Washington.  

Sworn to and Subscribed before me, Steven M. Jupiter, Notary Public, on this 10 day of January, 2008.  

Steven Jupiter  
Notary Public, La Bar Roll no. 24815  

STEVEN M. JUPITER  
NOTARY PUBLIC  
State of Louisiana  
My Commission is Issued For Life  
Louisiana Bar Roll No. 24815
EXHIBIT 8
PARISH OF ORLEANS
STATE OF LOUISIANA

I, Alice Craft-Kerney, am over the age of 18 and make the following statements based on my own personal knowledge.

1. I am the executive director of the Lower 9th Ward Health Clinic, and have worked as a nurse in Louisiana, Georgia, and Michigan for twenty-two years. I have a BS in nursing and have worked as an assistant supervisor in the prison unit, and trauma surgery ward of Charity Hospital. The bulk of my nursing experience has been at Charity Hospital.

2. After Hurricane Katrina, I asked Patricia Berryhill, who I met while working as a nurse at Charity Hospital, to help me create a clinic. Patricia Berryhill agreed to convert her house into a clinic, which became the Lower 9th Ward Health Clinic.

3. It is my observation that since the closing of Charity Hospital people have been coping with lower standards of health care. People without insurance had little choice but to go to Charity Hospital before Hurricane Katrina, now their choices are even more limited, and sometimes non-existent.

   a. It is my opinion that the state is responsible for the health of its people. Because this is not happening, people who once had access to personal care physicians through Charity Hospital are now reduced to emergency room care. As such, many patients are unable to adequately treat and track their illnesses, and often encounter complications.

   b. In order to get the healthcare that they require, patients now need advocates to find their care for them on a case by case basis. At the Lower 9th Ward Health Clinic, we advocate for patients by calling doctors and hospitals to assist in navigating patients through prompt and specialized care that they need and are otherwise unable to get on their own.

   c. For example, the clinic had a patient come in without health insurance who was six months pregnant. She had received no prior prenatal care and was hoping we could help. We do not have the necessary Ob/Gyn facilities at the Lower 9th, but when she tried to get an appointment elsewhere, she was told that she would have to wait four months. Accordingly, we were forced to
intervene were able to secure an appointment for the next day. Without
patient advocates, however, patients cannot receive timely care. Ultimately,
healthcare delayed is healthcare denied.

Signed this 16th day of January, 2008.

Alice Craft-Kernegh

Sworn to and Subscribed before me, Steven Jupiter, Notary
Public, on this 16th day of January, 2008.

Noraty Public, Labor Roll no. 24815

STEVEN M. JUPITER
NOTARY PUBLIC
State of Louisiana
My Commission is Issued For Life
Louisiana Bar Roll No. 24815
PARISH OF ORLEANS
STATE OF LOUISIANA

I, Patricia Berryhill, state the following:

1. I am the clinical director of the Lower 9th Ward Health Clinic, and have worked as a nurse in Louisiana for forty years. I have a nursing and master’s degree from Louisiana State University and worked at Charity Hospital for thirty-two years prior to its closure.

2. I have been involved in Charity Hospitals since childhood, when I took my grandmother to her medical appointments at Charity. I came to work at Charity after working in a private hospital for a few months, because I wanted to make sure that uninsured people had access to healthcare as well as the insured.

3. Since Hurricane Katrina, and the closure of Charity Hospital, it has been my observation that the uninsured have limited to no access to complete health care because they have no where to go for health care in New Orleans that is comparable to Charity. The absence of Charity, in spite of the opening of health clinics like the clinic in the Lower 9th Ward, has created several problems for patients with no insurance or limited insurance and for patients with chronic medical or mental illnesses who would like to return to New Orleans:

   a. Without Charity, there is no place in New Orleans for the uninsured to receive care for certain chronic conditions. There is no dialysis or radiology services available. I find that even when I can get a patient referred to a clinic outside of New Orleans, the clinic or service is often too far away or the patient does not have the means to travel to the clinic.

   b. Even when there are specialty services available through the Charity Hospital system, like OBG/GYN or orthopedic services, the referral process is lengthy and our patients may, without intervention on our part, wait months for appointments that they need. I have had patients who have had to wait for chemotherapy, and one patient who was told she would
have to wait for months for a prenatal check up although she was already six months pregnant.

c. The closure of Charity Hospital has also limited the ability of local clinics to offer life and cost-saving preventative care. At Charity Hospital, we could refer patients to have a mammogram, a pap smear, or another screening procedure at no charge. Now to get the same services for my patients, I have to either work to develop a pilot program with another clinic, or use my connections in the community to insure that patients get the services they need.

4. If Charity Hospital were open, I believe we would see better patient outcomes because people would have access to all the services they need in one location. We would see less advanced diseases, like ovarian or breast cancer, because it would be easier for our patients to have access to screening and preventative services. Without Charity Hospital, our uninsured and lower income population has no choices about what kind of health care they receive.

Signed this 16 day of January, 2008.

[Signature]

Patricia Berryhill

Sworn to and Subscribed before me, ANTHONY P. WILMORE, Notary Public, on this 16 day of January, 2008.

[Signature]

Notary Public, La Bar Roll no. 85566

THIS DOCUMENT NOT PREPARED BY THE UNDERSIGNED NOTARY ATTESTING TO SIGNATURES ONLY
PARISH OF ORLEANS  
STATE OF LOUISIANA

I, Sheriff Marlin N. Gusman, state the following:

1. I am the Sheriff of Orleans Parish and have been serving as Sheriff since November 2004. Before I became Sheriff of Orleans Parish I was the City Councilmember for the District and the Chief Administrative Officer of the CNO and have served in the Orleans Parish Criminal Justice System for over ten years.

2. As Sheriff of Orleans Parish, I have been confronted with the incredible burden of dealing with mental health issues in the criminal and prison systems. While the prison in New Orleans has a facility for mentally ill inmates and can treat inmates who are suffering from mental health issues, before the storm police officers could take people whom they suspected were exhibiting criminal behavior as a result of mental health problems to Charity Hospital. Since the closure of Charity’s Crisis Intervention Unit, police officers have limited options as to where they can take people with mental health problems outside of jail.

3. It is my impression that this lack of resources has increased the already great burden on the Sheriff’s department in the wake of Katrina. Police officers who suspect someone of being mentally ill now have to spend hours waiting with them in the emergency room and must accompany them to other facilities if they are admitted to them. This occurs with both mental and medical health problems, as without Charity Hospital, inmates and potential inmates have to be accompanied to care facilities which are sometimes far away or have long waits.
4. While many improvements have been made regarding access to healthcare since Hurricane Katrina, it is my impression that the Sheriff's Office and local police departments and still doing a large amount of mental health and medical health oriented non-police work because there is no central secure location outside of the prison where police officers can bring either prisoners or people exhibiting misdemeanor criminal behavior, but suspect of having a mental illness to receive care.

5. If Charity Hospital were open, the police department would be able to help prisoners receive care, and divert the mentally ill from the criminal justice system because there would be a central location where police officers know they can deliver people so that they can receive care. Without such a facility, my officers have even fewer resources.

Signed this 16th day of January, 2008.

[Signature]
Marlin N. Gusman

Sworn to and Subscribed before me, Joseph A. Rome, Notary Public, on this 16th day of January, 2008.

[Signature]
Notary Public, La Bar Roll no. 17715
Joseph A. Rome
I, Doctor Charles Higgins, state the following:

1. I am the Director of Psychiatric Services at Orleans Parish Criminal Sheriff’s Office. I have been employed as director for the last six years, and before coming to the Sheriff’s Office I worked as a staff psychiatrist on the third floor of Charity Hospital in the psychiatric unit and in the Crisis Intervention Unit.

2. Before Hurricane Katrina, it was my impression that the City of New Orleans had greater resources for the mentally ill. Specifically, Charity Hospital had a Crisis Intervention Unit ("C.I.U.") on the third floor of Charity Hospital. Police officers, if they arrested someone who they believed was mentally ill, could bring them to the Crisis Intervention Unit after the person had been cleared by the Emergency Room. The patient could remain in the CIU for up to twenty-four hours and receive psychiatric care until they were stabilized, admitted to the third floor of Charity, or until beds could be found for them at another care facility or group home.

3. The CIU consisted of several areas—- a central room with a television and a nurse’s station where patients could wait, interview rooms where the patients could have private meetings with medical practitioners, a room with beds where the patients could stay until they were released or another care facility was located, and another room where patients could be restricted if medically necessary.

4. The Crisis Intervention Unit was not restored after Hurricane Katrina, and there is no similar care facility where police officers can bring arrestees whom they suspect are mentally ill or whose criminal behavior may be the result of mental health problems.

5. If a police officer suspects that a potential arrestee is mentally ill, the officer has to take the suspect to an emergency room, where the police officer will have to
wait with the patient for several hours until accepted by the emergency
department.

6. The current psychiatric facilities, while an improvement on what was available
immediately after the storm, have a limited number of beds, have admissions
quotas, and do not all admit patients on a twenty-four hour basis.

7. It is my impression that because of the limited options for police officers who
suspect arrestees of mental health problems, people who exhibit mentally ill
behavior or whose criminal behavior might be a result of mental illness are not as
easily diverted and more ultimately wind up in the criminal justice system.

8. It is my impression that, while people sometimes were arrested for mental health
problems before the storm, more are being put in jail after Hurricane Katrina
because the other options that police officers have for mentally ill suspects have
been significantly curtailed by the closure of Charity Hospital and the CIU.

9. If Charity Hospital were open, the police department would have access to the
CIU and would not have to either use police time to wait at the overwhelmed
Emergency Departments with individuals suspected of mental illness, or put
people in jail for suspected mental health problems because of this lack of
resources.

Signed this 16th day of January, 2008.

Dr. Charles Higgins

Sworn to and Subscribed before me, Joseph A. Rome, Notary
Public, on this 16th day of January, 2008.

Notary Public, La Bar Roll no. 1777

Joseph A. Rome
PARISH OF ORLEANS
STATE OF LOUISIANA

I, Dr. Samuel Gore, am over the age of 18 and make the following statements based on my personal knowledge and belief:

1. I am the Medical Director for Orleans Parish Criminal Sheriff's Office ("OPCSO"). I have been working as the Medical Director for one and a half years. Before this position, I was the Director for OPCSO's Medical Observation Unit & Acute Care Clinic for five and a half years. I have also worked at a private group practice as an Internal Medicine clinician and Hospitalist at the West Jefferson Medical Center.

2. The Sheriff's Department, like many agencies following Hurricane Katrina, faced several obstacles to providing police services. One major obstacle to providing these services has been the drastic reduction in the number of mental health beds available, as well as the closing of the Crisis Intervention Unit ("CIU") at Charity Hospital.

3. Without the beds and CIU, which were previously available at Charity Hospital, officers who suspect someone of being mentally ill or having psychiatric difficulties must wait with the suspect throughout the entire mental health evaluation process. This includes the time spent in the Emergency Room, evaluation room, and the time spent during the referral process. This takes up much of the officers' time and did not happen when officers could bring suspects to the CIU.

4. The only other alternative left to officers who suspect someone's criminal behavior to be the result of mental illness is to arrest them and bring them to the psychiatric ward of the prison. While we provide psychiatric care at the prison, this results in more people being arrested for mental health problems than were arrested before the closure of Charity Hospital.

5. It has also been my impression that the provision of all health services has been severely limited by the closure of healthcare facilities after the storm.

Furthermore, Officers must accompany inmates to referred appointments which,
after the closure of Charity Hospital, are all over the state, and many of the specialty clinics are either closed or have limited quotas.

a. A problem specific to the clinic quotas is that if an inmate has been waiting for an appointment for months, and another inmate has an emergency, the clinic will take the patient on the waiting list before the emergent patient due to the fact that the quota may have been filled, or that the emergent patient is not in the computer system. This means we are unable to ensure that inmates receive care for emergent health issues.

6. Before the closure of Charity Hospital it was easier for the Sheriff’s Department to make sure inmates received routine and regular care. Police officers also had more options as to where to bring a suspect they believed was suffering from mental illness. Without these options, more mentally ill people may be in jail than would have been before the storm and sheriff’s deputies are being forced to spend valuable security time taking inmates to medical appointments all over the state.

Signed this 16th day of January, 2008.

Dr. Samuel Gore

Sworn to and Subscribed before me, Joseph A. Rome, Notary Public, on this 16th day of January, 2008.

Notary Public, La bar Roll no. 17775

Joseph A. Rome