

**Challenges in a Catastrophe:
Evacuating New Orleans in Advance of Hurricane Katrina**
Senator Joseph Lieberman
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Thanks, Madame Chairman. Today's hearing on the evacuation of New Orleans *before* Hurricane Katrina made landfall last August is a story of the tragic, maddening, and ultimately fatal consequences of unmet responsibilities by all levels of government – city, state, and federal.

In the days leading up to Katrina's landfall, 85 percent of the city evacuated successfully – the 85 percent that were ambulatory and had, found, or could afford transportation, and had a place to stay. That is the one bright spot in this tale. But many of the city's most vulnerable populations – the poor, the sick, and the aged – were left behind.

The city opened the Superdome as a refuge of last resort, but the Dome was ill equipped to accommodate the tens of thousands who would flock there in desperation to escape the rising flood waters. Hospitals and nursing homes – filled with the sick and the frail - were left to fend for themselves. The fleet of 600 buses that emergency planners thought were needed to evacuate those who had no transportation of their own came too late to avoid unnecessary suffering. And shelter for those who were evacuated was woefully inadequate.

The warnings of the fictional Hurricane Pam exercise that 100,000 people in New Orleans had no means to evacuate – and that thousands more would be immobilized by infirmity or age – appear to have been received at all levels of government. But just about nothing was done about them.

No one acted to ensure that the pre-landfall evacuation of New Orleans would be aggressive, let alone complete – not the city, whose citizens were at risk, not the state, which was responsible for arranging transportation for evacuees under the plan, and not the federal government which had the authority to assist in the event of a catastrophic event but instead stood on the sidelines as the hurricane approached. Our first panel today will describe the efforts that were made -- and those that were not -- at the local and state levels to get the citizens of New Orleans and the surrounding areas out of harm's way as Katrina approached.

At the city level, in 2001, officials appealed unsuccessfully to the state for assistance with its evacuation. In 2004 and 2005, a group of enterprising city officials began to contract with a variety of transportation companies. But they never signed those contracts before Katrina struck.

At the state level, the Department of Transportation and Development had been designated as the lead agency responsible for securing transportation for the 100,000 without it. But, as state Transportation Secretary Johnny Bradberry told our investigators, the department objected to that designation, and the task was simply and starkly left undone.

As for the federal government, a U.S. Department of Transportation official who attended a Pam workshop worried before all the participants at a Hurricane Pam workshop that DOT had completed less than 10 percent of its planning to fully evacuate New Orleans. And on the day before Katrina's landfall, a FEMA report was circulated that noted the 100,000 people with no way out. Still, no meaningful actions to facilitate evacuation were taken by FEMA before the storm.

FEMA officials have denied the agency has any responsibility for pre-storm evacuation and, in fact, played no role in evacuating New Orleans prior to landfall. But the Stafford Act, the Department of Homeland Security's National Response Plan, and the Homeland Security Act all assign FEMA a broad support and coordinating role in catastrophic events. If FEMA has no role, why did it lead the evacuation of southeast Texas a few weeks later before Hurricane Rita struck?

Government's attempts to evacuate special needs patients in hospitals and nursing homes were equally ineffective. All levels of government assumed that medical staff would take responsibility for the care and evacuation of their patients in the event of a catastrophe. That led to scores of deaths – upwards of 100, according to press reports – and left thousands of others without adequate medical care for several days after Katrina landed, despite the best efforts of some of their care givers.

Our second panel today will look at the role of state and city health officials in preparing for and responding to the unique threats faced by the sick and infirm. Unfortunately, we have no witness to describe the federal role [because the Department of Health and Human Services, the federal agency responsible for health care under the National Response Plan, has been frustratingly slow to respond to our requests for information and witnesses.] But I want to make it very clear that under the National Response Plan, HHS is given explicit responsibility for patient evacuation and for obtaining assistance from the Departments of Defense and Transportation for that purpose. Furthermore, it was FEMA's responsibility to ensure that federal resources were made available to the state.

The state emergency plan had for years given the Louisiana State University Hospital Sciences Center the lead role in caring for hospital and nursing home patients and had designated the Health Science Center as the lead coordinator for private hospitals and other facilities. But the LSU Health Science Center never fulfilled these functions.

To compound the situation, there was no state program to deal with health care facilities other than hospitals. Our investigators found, for example, that nursing homes, which had had severe difficulties evacuating their patients in previous hurricanes, had never been briefed by the state on changes made to evacuation procedures for the 2005 hurricane season.

Although nursing homes are required by the state to have emergency preparedness plans, the state of Louisiana apparently neither reviews nor enforces these plans. For years, doubts about the effectiveness of these plans have been raised, as they were during the Pam exercise. One of the recommendations of Pam was to establish a task force to assess nursing home emergency plans. It will surprise no one to hear that this was never done.

Why wasn't there a comprehensive plan for all patient populations? Why did the city, state, and federal emergency managers simply assume hospitals and nursing homes could cope with a catastrophic hurricane on their own, with no need of assistance? These are the questions that need answering before the next catastrophe occurs.

The searing pictures of those who were left behind in New Orleans – at the Super Dome, the Convention Center, on the I-10 overpass, and in flooded medical facilities -- are images that remain with us. Emergency planning that does not make provisions for society's most vulnerable – the aged, the sick, the poor – is not just operationally

unacceptable. It is morally unacceptable. These questions form the backdrop for all of our Katrina hearings, but particularly for our hearing today. Thank you, Madame Chairman. I look forward to the testimony.