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October 10, 1991

Stephen P. Tenore, Chairman
Committee on County Officers & Departments
Westchester County Board of Legislators
800 Michaelian Office Building
148 Martine Avenue
White Plains, New York 10601

Dear Mr. Tenore:

I have received your letter, dated October 2, 1991, requesting any "material" that could assist your committee as it proceeds through the confirmation process of Mr. Mack Carter, Jr. as Commissioner of Hospitals. I would like to answer your request on two levels: as Chair of the Hospital Advisory Board and as its representative on the Selection Committee. This letter will present some of the facts which have led Mr. O'Rourke's Selection Committee, the Hospital Advisory Board, and virtually the entire medical and hospital staff of the Westchester County Medical Center to oppose this appointment.

1) Mr. Carter has, for the last 18 years, been employed by the Health & Hospitals Corporation. In only the last 2 years did he assume a third level hospital administrative position. He did, for a brief time, report to the CEO, while the Chief of Operation's Chair was vacant. However, he was never, in any of his official positions, a Chief Executive Officer, never a Chief Operating Officer, and never reported to the CEO.

2) Having spent 18 years within the Corporation, which one could presume was a long enough period to be known and evaluated by the Health & Hospitals administrative body, they turned to others to fill vacant positions. He was passed over for promotion to the second level position of Chief Operating Officer at Lincoln Hospital, the hospital in which he was currently employed. He was also denied the CEO position at Harlem Hospital. Anyone familiar with the bureaucracy at Harlem Hospital is aware that most qualified people won't even apply and when solicited decline the invitation!

This is a particularly important point as both these hospitals have fewer beds and are single hospitals as compared to the complex of hospitals at Westchester County Medical Center. If Health & Hospitals Corporation, from their vantage point of long term association, was not prepared to promote Mr. Carter to these less demanding positions can the taxpayers of this County afford to do otherwise?

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3) From 1973 to 1980 Mr. Carter was a Physician's Assistant and "coordinated the services of 12 RPA's." From 1981 through 1983 he "directed a staff of almost 200 through five different Directors." From 1983 through 1985 he directed a total of "700 employees through a Director, Associate and Assistant Director." From 1985 through 1986 he directed a "staff of 3, including an Assistant and an Associate Director and a Senior Consultant." From 1986 through 1988 he directed a "staff of four professionals, including a Senior Consultant, two Associate Directors and a Senior Systems Analyst." From 1988 through 1989 he directed a "staff of three, including two Senior Consultants and one Senior Systems Analyst." From 1989 to the present he has "approximately 700 employees reporting to him." Mr. Carter has never had more than 700 employees reporting to him, and this for only 2 years; he has never had more than 700 employees directed by him, through other hospital directors, and this, again, for only 2 years.

More than 4000 employees report to the Commissioner of Hospitals in Westchester County. Again, the question must be posed as to whether the taxpayers of this County can afford to escalate directive responsibility in such a profound manner within a hospital environment? (see attachments)

4) Mr. Carter's reports of his own accomplishments are smaller in scale than WCMC's requirements and would not have met our needs during our formative years, when the hospital was smaller and we had fewer departments. As an R.N., with a Master's Degree in Public Health from Columbia University, emphasis on hospital administration and the cost and care of patients with terminal stage illness, "organizing and planning the opening of a 28 bed AIDS unit" is not adequate preparation for the Medical Center. Doing the same for a "7 bed cardiac care unit" bears no relevance to the scale of our cardiac care services, burn unit, etc. So too, "monitoring compliance to the 405 hospital code" and "assisting in the coordination to correct standards found deficient by JCOHO" are well beneath the qualifications necessary to be CEO of WCMC during our infancy, development, present and future.

5) No where in Mr. Carter's resume, as given to the Selection Committee, and no where during the interviewing process were we able to establish Mr. Carter's experience in developing and implementing a capital budget of any relative size in comparison to the Medical Center's. "Participating in capital budget expenditures" is not the same thing. In fact, Mr. Carter's experience, or lack thereof, in the arena of finance left the Selection Committee feeling quite uneasy.

Because the Medical Center uses taxpayer's money, is in a 'business' that is fraught with financial constraints, problems and disaster, and is at a fragile financial point in its own development, the need for the Commissioner to have a strong background with a depth of hands-on financial experience is

paramount. Certainly one would hope that the person holding this position would surround him/herself with people who would add to the strengths necessary, but the bottom line is that the Commissioner cannot abrogate this role to someone else.

It is the Commissioner who decides who will occupy certain administrative seats within the hospital, what new programs to support, which programs to emphasize, to increase or decrease, which technologies to purchase, how to allocate funds between clinical and support services and, in each case, what the financial consequences of each decision will be to the Medical Center in terms of projected income and expense. A simple 1% increase in expenses, without a concomitant increase in revenues can cost the taxpayers millions of dollars. Mr. O'Rourke appears prepared to take this giant leap of faith with the financial future of the Medical Center and the County. The Hospital Advisory Board is not and we would ask the Legislators, who are the elected representatives of the taxpayers of this County, to give special attention to the limited financial experience of Mr. Carter and the financial responsibilities of the Commissioner vis-a-vis the Medical Center.

6) The Selection Committee could find no evidence that Mr. Carter has had experience in negotiating reimbursement rates with New York State, conducting collective bargaining negotiations, directing and negotiating affiliation contracts, in making major clinical and administrative decisions for hospitals, capital facilities planning and the building of affiliation agreements with various community hospitals.

Within the Health and Hospitals Corporation, these responsibilities are discharged at central headquarters, not at the various hospitals, such as Lincoln Hospital. During the four years that Mr. Carter was at central headquarters his responsibilities did not include these areas. At WCMC, on the other hand, these areas fall under the direct responsibility of the Commissioner of Hospitals and are obviously of major importance clinically and financially.

7) Most of the candidates interviewed by the Selection Committee had taken the time to inform themselves about the Medical Center, its organization, its relationship with the Board of Legislators, its budget and finances and its various departments. Mr. Carter was not one of those individuals.

8) All the candidates were asked the same questions by members of the Selection Committee. One of those questions pertained to short and long term plans for the Medical Center. We asked the candidates to consider the financial allocation to the Medical Center as the only constraint and then to allow their imaginations to roam. We wanted to know what they would do with the Center if they had sole control. Within the hospital or business community one hears the plea from administration about how, if given control,

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the administrator could do so much better. Mr. Carter had not one single creative dream or plan for the future of the Center, even with prompting. When one applies for any position it is expected that the applicant will have some plan as to what they would do with that position if they were to be offered it. The Selection Committee considered Mr. Carter's difficulty with this question to be a serious negative.

9) During the first meeting of the Selection Committee, we were told that not all the candidates presented to us would be appropriate candidates for the Commissionership. But, it was felt, by reviewing these candidates we would get a "good picture" of what was available. Therefore, we did not disqualify from the interviewing process those whose CV's were found wanting. Discussions about the individual candidates, and the rating of them as to their ability to meet the qualifications expressed by Mr. O'Rourke and the Hospital Advisory Board, took place after we had interviewed each and every one of the applicants. The first vote was to separate those who merited further discussion from those whom no one on the Selection Committee felt warranted further consideration. Mr. Carter received one vote, and that was from me. It was not a vote to continue him in the discussion of Commissioner. It was simply to have the opportunity to look at him further for presentation to the appointed Commissioner if a lower level position was available at the Medical Center. The thought was that given five or so years in a large complex such as ours he might gain the experience necessary to command a more responsible role. After the second interview the Committee unanimously agreed that Mr. Carter was not the appropriate candidate for the top two positions within the hospital structure.

10) Section 146.01 of the Westchester County Charter provides that the Commissioner of Hospitals

"shall be appointed on the basis of his training and experience in hospital administration and his qualifications for the duties of the office with particular attention to the fields of medical education and medical administration."

Mr. Carter does not have the background or experience in medical education, a necessary requirement since the County pays New York Medical College millions of dollars every year.

It should be noticed that the salary for the position of Commissioner is higher than that for the County Executive. The Selection Committee presented three names to Mr. O'Rourke, all of whom held Chief Executive Officer positions and would not require on-the-job training at the taxpayers expense. Mr. O'Rourke did not have to appoint one of these three. He could have reempowered the Committee to continue the search or he could have chosen a new committee. But to appoint Mr. Carter, who had been deleted by a unanimous decision of six Committee members, five of whom had been

chosen by Mr. O'Rourke, (two from his own staff, two of his own appointees to County government & Dr. Kasoff), was to flaunt and disregard the process that he himself had initiated.

There are highly qualified public servants who would relish the Commissioner position. Whomever is confirmed for this appointment will be our guide for a long time. We should concentrate on experience, not experiment; on substance, not suspense.

In summary, despite Mr. Carter's personal qualities, which are many and positive, there is nothing in his record which qualifies him for the difficult, demanding and complex post of Commissioner of Hospitals. To appoint him because Mr. O'Rourke can "work with him" and, in the hope, that despite his lack of knowledge and experience he will be able to avoid inadvertently causing great harm to the quality of care at the Medical Center and great expense to the taxpayers of the County is too hazardous a gamble.

Ultimately, it is the Legislators' responsibility to decide how this County will be governed and under whose leadership WCMC will prepare for and move into the future. Since Mr. Carter will be in the position of Commissioner until the Legislators' decide to deny or to confirm, with the opportunity to hire and fire staff and conduct all business of the Commissioner as he so desires, as well as recognizing Mr. Carter's personal concerns, we respectfully request an early hearing and decision regarding this appointment.

With my deep appreciation for this opportunity to express the Hospital Advisory Board's and my thoughts to you, I remain,

Sincerely,

Carl Farber

attachments: 2

cc/Members of the Board of Legislators
Members of the Hospital Advisory Board