



HEALTH PERSPECTIVES

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PROFILE OF GOVERNING BODIES OF NEW YORK CITY VOLUNTARY HOSPITALS

There are about 140 state, federal, voluntary, municipal and proprietary hospitals in New York City serving eight million people. These hospitals form the largest pool of hospital beds in the world. The impact of these hospitals goes beyond the daily saving and losing of individual life because hospitals have the power and resources to affect jobs, housing and other aspects of community activity. Hospitals have become an important part of community planning. This great impact on so many facets of community life has caused increasing interest by the public in hospital operations. This interest in recent years has been concerned not only with hospital services, but with the people who make the decisions that affect hospital activity and community well-being.

Voluntary hospitals, the largest group of general care hospitals, are non-profit, tax-exempt community institutions which provide short-term in-patient care and out-patient and emergency services. Voluntary hospitals have 60% of the almost 41,000 general care beds in New York City and account for 67% of the approximately 11,645,000 non-federal general care patient days in New York City. The New York voluntary hospitals also provide about 5.5 million out-patient visits each year.

Last April, the Consumer Commission published the names of the owners of New York City based proprietary hospitals. This issue lists the governing bodies (i.e. Boards of Trustees, Directors, Managers) of New York City voluntary hospitals.

For generations, patients entering hospitals for acute care generally asked two basic questions: Will I live? Will I die? Discharged patients were happy to leave the hospital, and soon forgot any questions that were raised about the treatment received or the way it was delivered.

Today, health consumers are openly questioning the delivery of services in their community, their rights as patients, and the cost and quality of hospital care. People all over the nation are questioning the self-

perpetuating autonomy of voluntary hospital boards. Everyone is concerned with the role and function of hospital boards:

- Who are the people serving on voluntary boards?
- How do they get on the Board?
- Who do they represent?
- Do they live in the community served by the hospital?
- What do they do?
- What are their responsibilities?
- Whose interests are being served?

These questions have increasingly been asked by consumers and professionals over the past decade. Hospitals, as centers of prestige and power, can no longer afford to remain isolated and aloof from their communities or patients.

All hospitals receive their authority to operate from the State. The Boards of voluntary hospitals have the legal responsibility to set hospital policy, run the entire hospital and make all major decisions. This does not mean that Boards actually carry on the day-to-day operation of the hospital; this responsibility is delegated to administrative and other professional personnel who manage the hospital.

Board responsibilities and duties as spelled out in New York State Hospital Code and the Accreditation Manual for Hospitals, Updated 1973, are reproduced in Table I.

TABLE I

SECTIONS ON GOVERNING BODIES FOUND IN THE NEW YORK STATE HOSPITAL CODE AND JOINT COMMISSION ON ACCREDITATION OF HOSPITALS ACCREDITATION MANUAL.

New York State Hospital Code, Chapter V, Subchapter C, Hospital Operation, Part 720-Organization and Administration (Statutory authority: Public Health Law, § 2803)

Section 720.1 Governing authority.

- (a) The governing authority shall be responsible for the establishment of policies and the management and operation of the hospital; it shall not enter into any agreement limiting such responsibility.
- (b) The governing authority shall provide a safe physical plant equipped and staffed to maintain fit and adequate facilities and services for hospital patients.
- (c) The governing authority shall adopt and amend by-laws which shall require that body to:
 - (1) appoint members of the medical staff;
 - (2) approve the by-laws and regulations of the medical staff;
 - (3) define the committees of the governing authority and the functions and responsibilities thereof;
 - (4) develop and maintain a suitable formal liason with the medical staff by means of a joint conference committee or other equivalent method;
 - (5) appoint a full-time qualified hospital administrator and delegate to him executive authority and responsibility;
 - (6) provide for the proper control of all assets and funds, including annual audits thereof. All nongovernmental hospitals must engage certified or registered public accountants to conduct an audit of their accounts and records at least once a year; and
 - (7) enter into contracts for the provision of medical services only when such services are to be provided by a member or members of the medical staff of the hospital and providing that the responsibilities of the governing authority set forth in subdivision (a) above are not limited by such contracts.
- (d) Minutes of all meetings of the governing authority and its committees, including a record of attendance, shall be recorded, signed and retained in the hospital as a permanent record.

Joint Commission on Accreditation of Hospitals Accreditation Manual-Governing Body and Management.

Principle

There shall be an organized governing body, or designated person(s) so functioning, that has overall responsibility for the conduct of the hospital in a manner consonant with the hospital's objective of making available high quality patient care.

STANDARD I

The governing body shall adopt bylaws in accordance with legal requirements and with its community responsibility, identifying the purposes of the hospital and the means of fulfilling them.

Interpretation

The adoption of bylaws by the governing body is essential for the government of the hospital. These bylaws should include a definition of the powers and duties of the governing body officers and committees, and of the chief executive officer. They also should state the qualifications for governing body membership, and the method of selecting numbers as well as the terms of appointment or election of members, officers and chairmen of committees. The governing body or advisory board should include a broad representation of the community served by the hospital and its members should be selected for their ability to participate effectively in fulfilling the governing body's responsibilities. Where legally permissible, physicians who are members of the medical staff shall be eligible for, and should be included in, full membership on hospital governing bodies and their action committees in the same manner as are other knowledgeable and effective individuals. Other physicians also should be considered eligible for membership on the governing body *

STANDARD II

There shall be full disclosure of hospital ownership and control.

Interpretation

Because ownership and control can affect the quality of patient care within the hospital, it is necessary that there be full disclosure of the names and addresses of all owners, or controlling persons, through an annual report. This full disclosure of owners and controllers is required, whether they be individuals; partnerships, corporate bodies, or subdivisions of other bodies, such as public agencies or religious, fraternal, or other philanthropic organizations. In the case of corporations, the names and addresses of officers, directors and persons who are the principal stockholders, either beneficial or of record, shall be disclosed *

STANDARD III

The governing body shall provide for the election of its officers and for the appointment of committees as necessary to effect the discharge of its responsibilities. In addition, it shall adopt a schedule of meetings, attendance requirements and methods of recording minutes of governing body proceedings.

*Each standard is followed by an Interpretation section. These sections detail requirements that must or should be met by the hospital to meet each standard. For complete interpretations see Accreditation Manual for Hospitals, 1970, Updated 1973-Joint Commission on Accreditation of Hospitals.

Interpretation

General meetings of the governing body should be held frequently enough to ensure that its members are actively participating in the affairs of the hospital. The potential effectiveness of the governing body is indicated by:

- The active participation of experienced trustees:
- The periodic selection of new members:
- A program for the orientation and continuing education of governing body members; and
- Attendance of members at governing body committee meetings

STANDARD IV

The governing body shall appoint a chief executive officer whose qualifications, authority and duties shall be defined in a written statement adopted by the governing body.

STANDARD V

The governing body, through the chief executive officer, shall provide appropriate physical resources and personnel required to meet the needs of the patients, and shall participate in planning to meet the health needs of the community.

STANDARD VI

The governing body, through its chief executive officer, shall take all reasonable steps to conform to all applicable federal, state and local laws and regulations, including those relating to licensure, fire inspection and other safety measures.

STANDARD VII

The governing body, through its chief executive officer, shall provide for the control and use of the physical and financial resources of the hospital.

STANDARD VIII

The governing body shall delegate to the medical staff the authority to evaluate the professional competence of staff members and applicants for staff privileges; it shall hold the medical staff responsible for making recommendations to the governing body concerning initial staff appointments, reappointments and the assignment or curtailment of privileges.

STANDARD IX

The medical staff bylaws, rules and regulations shall be subject to governing body approval, which shall not be unreasonably withheld. These shall include an effective formal means for the medical staff to participate in the development of hospital policy relative to both hospital management and patient care.

STANDARD X

The governing body shall require that the medical staff establish controls that are designed to ensure the achievement and maintenance of high standards of professional ethical practices.

Although New York State grants the legal power to establish hospitals and outlines board responsibilities, the State does not require full disclosure of Board membership or identification of potential conflicts of interest.

Hospital and medical spokesmen had predicted growing consumer representation in the 1970s on hospital boards. But today, hospital boards do not have 'broad' community or consumer representation. Women, community and consumer advocates and minorities are still under-represented on voluntary health boards. Hospital boards generally include persons who have achieved economic and social distinction. The business and professional man traditionally has had the greatest representation on hospital boards. This is a historical fact and is still true for New York City's biggest hospitals (See Tables IIa and IIb).

TABLE II (a)

BREAKDOWN OF THE MEMBERS OF THE BOARD OF TRUSTEES FOR DETROIT HOSPITALS BY MAIN BUSINESS OR PROFESSIONAL CONNECTION AND TYPE OF HOSPITAL, 1971

Main Business or Professional Category	Percent of Total Board Members in Category, By Type of Hospital			
	All Hospitals	Religious	Osteopathic	All Other Voluntary
Business and Non-Health Professionals ¹	63.4	28.6	57.5	73.2
Health Professionals ²	13.0	7.1	28.1	11.7
Other ³	21.1	62.0	13.8	12.2
Not Known	2.5	2.3	.6	2.9
Totals	100.0	100.0	100.0	100.0
(Union and Labor Representatives)	(1.5)	n.a.	n.a.	n.a.

1 Banking, commerce, industry, accounting, legal, brokerage, insurance, etc.

2 Doctors, administrators, etc.

3 Community service agency, religious, foundation and educational institution representatives, etc.

4 Judges, attorney generals, etc.

Table II (b) shows that of the Manhattan voluntary hospitals with 300 or more beds where a breakdown of board members is available:

-70% represent business and non-health professionals

-11% represent community service agencies, religious, foundation, and education institutions, etc.; and,

-12% are women

Information on the Boards of Beth Israel, Columbus, Hospital for Joint Diseases and Mt. Sinai Hospitals is not complete. There is no indication or reason to believe that the above findings do not actually describe the board membership for all voluntary hospitals

TABLE II (b)

SEX AND MAIN BUSINESS OR PROFESSIONAL CONNECTION OF BOARD MEMBERS OF VOLUNTARY HOSPITALS IN MANHATTAN WITH 300 OR MORE BEDS.*

NAME OF HOSPITAL (No. of Beds)	NUMBER OF BOARD MEMBERS BY:						
	SEX		MAIN BUSINESS OR PROFESSIONAL CONNECTION				
	Male	Female	Business & Non-Health Professional 1	Health Professional 2	Other 3	Govt. 4	Not Known
Beekman-Downtown (306)	29	0	26	1	2	0	0
Flower & Fifth (405)	22	3	20	2	2	1	0
French & Polyclinic (574)	26	0	19	0	3	0	4
Lenox Hill (629)	24	4	19	0	0	1	8
Memorial (449)	29	4	23	4	1	0	5
New York Hospital (1098)	21	4	21	0	0	0	4
Presbyterian (1494)	41	4	29	1	6	0	9
Roosevelt (595)	22	3	17	0	2	0	6
St. Clare's (564)	4	7	0	0	8	1	2
St. Luke's (781)	29	5	20	0	2	1	11
St. Vincent's (802)	14	4	10	1	5	0	2
University (782)	25	3	16	1	3	0	8
Total (8749)	286	41	220	10	34	4	59

*Other voluntary hospitals with 300 or more beds in Manhattan are Beth Israel, Columbus, Joint Diseases and Mt. Sinai. Information on these hospital boards is not complete. (See page 3 for foot notes 1,2,3 and 4.)

in Manhattan with 300 or more beds. These hospitals account for about 25% of all general care beds in the City. Although not shown in Table II (b), there was not one representative of labor nor one consumer advocate serving on the boards of the listed hospitals.

The impact of third-party payers, particularly the involvement of government in the health care industry has brought about many changes in the voluntary hospital. Public funds (Medicare and Medicaid) represent about 50% and Blue Cross payments represent about 35% of the operating income of hospitals. Self-insured labor-management health and welfare funds, commercial insurance, Workmen's Compensation and self-pay patients provide the rest of the operating income of hospitals. In the past, philanthropic or charity care was a hallmark of voluntary hospitals. Philanthropic and private contributions (including donations from board members, grants, legacies, community chests, etc.) represent only a small percentage of the operating income of hospitals today. (See Table III).

The reduction in total operating income supported by philanthropic and other private contributions and the increase in public money (Medicare, Medicaid, Blue Cross, Workmen's Compensation, etc.) to pay for hospital operating expenses has brought about a concern for public accountability. Consumer representatives are asking for a voice in determining the policies of hospitals in their communities. This is an inevitable development of the concern of consumers about the quality and cost of hospital care.

Although few people question the right of consumers

to participate in health care delivery, there is continuing discussion about who, how and how much consumer participation is necessary.

**TABLE III
TOTAL OPERATING INCOME, TOTAL PHILANTHROPIC AND PRIVATE CONTRIBUTIONS USED FOR OPERATIONS AND TOTAL PHILANTHROPIC AND PRIVATE CONTRIBUTIONS AS A PER CENT OF TOTAL OPERATING INCOME AT SELECTED VOLUNTARY HOSPITALS, NEW YORK CITY (FISCAL YEAR ENDING DECEMBER 31, 1972)**

HOSPITAL	Total Operating Income	Total Philanthropic and Private Contributions Used for Operations	Philanthropic and Private Contributions as a % of Total Operating Income
Montefiore	\$106,601,734	\$1,329,591	1.2
Presbyterian	85,726,051	498,143	0.6
Mount Sinai	81,628,264	643,968	0.6
New York	75,346,128	1,647,368	2.2
Bronx-Lebanon	34,342,726	—	0.0
Jamaica	13,643,021	37,538	0.3
Flushing	12,868,321	46,652	0.4
Peninsula	11,293,125	424,654	3.8
Midtown	1,719,090	249,768	1.5
Totals	\$422,868,460	\$4,877,682	1.2

Recently, women and minority representatives were appointed to the Board of Managers of Nassau County Medical Center. These appointments were made in response to demands by consumer advocates and com-

TABLE IV (a)

CHARACTERISTICS OF NEW YORK CITY VOLUNTARY HOSPITAL BOARDS, BY BORO, (CIRCA 1973).

Hospital	Number of Board Members		Board Meetings Held During Last Fiscal Year	Average Attendance Number or Percent	Term of Office for Board Members	Month of Annual Meeting	Hospital	Number of Board Members		Board Meetings Held During Last Fiscal Year	Average Attendance Number or Percent	Term of Office for Board Members	Month of Annual Meeting
	Authorized	Actual						Authorized	Actual				
MANHATTAN													
Beekman Downtown	9 to 45	26	5	50%	1 year	January	Hosp. of the Holy Family *	n/a	n/a	n/a	n/a	n/a	n/a
Beth Israel Med. Center	75	64	12	22	3 years	n/a	House of St. Giles the Cripple	50	33	10	70%	3 years	May
Columbus	n/a	16	n/a	n/a	n/a	n/a	Kingsbrook	60	56	4	19	1-3 years	December
Doctors	n/a	17	n/a	n/a	n/a	n/a	Long Island College	31	30	10	18	5 years	June
Flower & Fifth Ave.	25	25	9	16	3 years	December	Lutheran	n/a	14	11	10	6 years	November
French & Polyclinic Med.	4 to 60	21	12	n/a	3 years	April	Lutheran Medical Ctr.	27	20	6	12	6 years	November
Hospital for Joint Diseases	n/a	34	n/a	n/a	n/a	n/a	Maimonides	60	43	10	24	3 years	April
Hosp. for Special Surgery	30	25	10	20	1 year	April	Methodist	55	55	5	27	4 years	December
Jewish Memorial	50	35	8	20	1 year	May	St. John's Episcopal	n/a	22	n/a	n/a	n/a	n/a
Knickerbocker	18	11	12	6	3 years	April	St. Mary's *	n/a	n/a	n/a	n/a	n/a	n/a
Lenox Hill	39	32	10	20	3 years	March	Samaritan	n/a	n/a	n/a	n/a	n/a	n/a
LeRoy	n/a	9	n/a	n/a	n/a	n/a	Swedish	24	10	n/a	90%	1 year	March
Manhattan Eye, Ear & Throat	17 to 50	26	11	10	3 years	April	Unity	15	11	10	8	3 years	March
Memorial Hosp. for Cancer & Allied Diseases	39	32	4	17	1 year	March	Victory	n/a	n/a	n/a	n/a	n/a	n/a
Midtown	n/a	13	n/a	n/a	n/a	n/a	Wyckoff	45	31	9	16	3 years	February
Mount Sinai	55	51	11	22	5 years	March	BRONX						
N.Y. Eye & Ear Infirmary	29	25	8	50%	3 years	May	Bronx-Lebanon	50	31	12	20	3 years	April
New York	30	25	10	20	Until 70	December	Misericordia	n/a	5	n/a	n/a	n/a	n/a
New York Infirmary	50	44	5	23	3 years	March	Montefiore	40-70	60	7	30	3 years	May
N.Y.U.-Medical Center	28	28	11	22	1 year	April	St. Barnabas	24	23	9	12	1-6 yrs.	January
Presbyterian	50	45	19	20	4 years	April	Union	n/a	13	n/a	n/a	n/a	n/a
Roosevelt	40	21	6	15	Life	December	STATEN ISLAND						
St. Clare's	11	11	4	10	1 year	October	Richmond Memorial	n/a	24	n/a	n/a	n/a	n/a
St. Luke's	53	33	6	28	3 years	October	St. Vincent's	30	29	4	23	1-3 yrs.	June
St. Vincent's	15 to 25	21	4	18	1 year	July	Staten Island	20	19	10	15	3 yrs.	June
Trafalgar	25	10	8	8	1 year	March	QUEENS						
BROOKLYN													
Adelphi	n/a	n/a	n/a	n/a	n/a	n/a	Booth Memorial	n/a	n/a	n/a	n/a	n/a	n/a
Brookdale	45	45	9	25	3 years	December	Catholic Medical Center	35	21	4	13	3 years	April
Brooklyn Eye and Ear	21	21	10	61%	1 year	January	Flushing	33	29	9	21	3 years	March
Brooklyn	30	27	10	14	3 years	May	LaGuardia	7-15	9	10	n/a	1 year	May
Brooklyn Womens	35	22	10	10	3 years	n/a	Jamaica	51	41	9	25	3 years	February
Caledonian	n/a	20	n/a	n/a	n/a	n/a	L.I. Jewish-Hillside	60	54	9	28	3 years	June
Community	n/a	25	n/a	n/a	n/a	n/a	Mary Immaculate *	n/a	n/a	n/a	n/a	n/a	n/a
							Peninsula	51	38	12	60%	3 years	April
							St. John's *						

*See Catholic Medical Center of Brooklyn and Queens - listed under Queens as Catholic Medical Center

munity groups for greater representation on the Board. The demands were made at a Public Information Hearing at the time of the hospital's accreditation survey by the Joint Commission on Accreditation of Hospitals. An alternate plan to establish an advisory committee to the Board never materialized. The effects of consumer pressure at this county-operated hospital are expected to be felt at voluntary hospitals also.

The Consumer Commission is devoting this issue of Health Perspectives to a listing of the Board members of the voluntary hospitals in Greater New York. This data will make it possible for concerned consumers and health care purchasers to understand governing bodies of hospitals in relation to their communities and constituents. This listing serves the purpose of identifying those persons who determine hospital policy. Information on board vacancies, attendance, etc. is shown where available and can be

used by community groups, social agencies, labor, government agencies and all other concerned parties to meet their particular needs.

Although every hospital must make its board members' names and addresses public in an annual report, according to Joint Commission standards, most hospitals surveyed by the Consumer Commission did not provide this information. It is possible that changes have occurred recently in the information listed in Tables IV (a) and IV (b).

Write to your local hospital and ask for the most recent annual report and the names and addresses of the Board members. If the hospital refuses to provide you with this information, write to Dr. Porterfield, Director, Joint Commission on Accreditation of Hospitals, 875 North Michigan Avenue, Chicago, Illinois, 60611 and state that the hospital is not meeting JCAH standards.

TABLE IV (b)

**NAMES OF MEMBERS OF NEW YORK CITY VOLUNTARY HOSPITAL GOVERNING BOARDS, YEARS ON BOARD, AND ATTENDANCE
AT BOARD MEETINGS DURING THE HOSPITAL'S LAST FISCAL YEAR, BY HOSPITAL AND BORO (CIRCA MID-1973).**

MANHATTAN		Number of years on Board	Number of meetings attended last year	Number of years on Board	Number of meetings attended last year	Number of years on Board	Number of meetings attended last year	Number of years on Board	Number of meetings attended last year
BEEKMAN DOWNTOWN			(Max. 5)	COLUMBUS HOSPITAL				KNICKERBOCKER	
*Peter Bafor	4	3		n/a	n/a	n/a	n/a	*Michael Diana, M.D.	(Max. 12)
Norborne Berkeley, Jr.	1	3		n/a	n/a	n/a	n/a	Bernard Gifford, (Dr.)	2
*John Birkelund	2	2		n/a	n/a	n/a	n/a	George Goodman	2½
*Hawley Chester, Jr.	3	4		n/a	n/a	n/a	n/a	Hon. Frank Hogan	4
Willie Daniels	1	1		n/a	n/a	n/a	n/a	*William Hudgins	13
Frederick Donaldson	4	3		n/a	n/a	n/a	n/a	Clarence Jones	4
*Walter Dennis, President	11	5		n/a	n/a	n/a	n/a	*Mrs. Arthur Logan	1
*William Donaldson	4	1		n/a	n/a	n/a	n/a	*Robert Marshak, (Dr.)	4
David Eastick	2	4		n/a	n/a	n/a	n/a	*Edward Quirin	1
Louis Fox, M.D.	2	1		n/a	n/a	n/a	n/a	*Bayard Rustin	15
Garret Garretson II	11	1		n/a	n/a	n/a	n/a	*Rev. M.L. Wilson, President	5
*H. Clay Johnson	7	3		n/a	n/a	n/a	n/a		6
William Kerby	4	0		n/a	n/a	n/a	n/a		
*H. Stanley Krusen	14	3		n/a	n/a	n/a	n/a	LENOX HILL	(Max. 10)
*Andrew Lee	11	4		n/a	n/a	n/a	n/a	Irwin Baron	4
John Loeb	23	2		n/a	n/a	n/a	n/a	*Arthur Beltaver	6
Thomas McKenna	2	2		n/a	n/a	n/a	n/a	George Brownell	27
Paul Miller	6	3		n/a	n/a	n/a	n/a	Richard Bullen	2
Edward Mortola, (Dr.)	4	3		n/a	n/a	n/a	n/a	*Benjamin Bittenweiser	27
*Crayson Murphy	17	3		n/a	n/a	n/a	n/a	*Abram Claude, Jr.	4
James Needham	1	n/a		n/a	n/a	n/a	n/a	Mrs. Norman Deane	2
George Roeder, Jr.	4	2		n/a	n/a	n/a	n/a	*Thomas Dewey Jr.	12
William Salomon	3	1		n/a	n/a	n/a	n/a	Mrs. John Drye Jr.	15
*David Schiff	6	5		n/a	n/a	n/a	n/a	Robert Hills	9
W. Bruce Thomas	2	3		n/a	n/a	n/a	n/a	Allan Johnson	1
N.H. Wentworth	3	0		n/a	n/a	n/a	n/a	C. Otto v. Kienbusch	25
BETH ISRAEL MEDICAL CTR.		(Max. 12)		DOCTORS HOSPITAL, INC.				Jesse Knight	28
Mrs. Benjamin Amo	3	6		n/a	n/a	n/a	n/a	*Hugh Knowlton, Jr.	11
*David Aronow	14	1		n/a	n/a	n/a	n/a	*Mynslow Lovejoy, Jr.	15
*Mrs. H. F. Baerwald	15	6		n/a	n/a	n/a	n/a	John McCloy	38
*David Baird	7	0		n/a	n/a	n/a	n/a	Hon. Emil Mosbacher, Jr.	14
*Howard Bitman	7	3		n/a	n/a	n/a	n/a	Richard Nye	½
Sheldon Blumenkrantz	4	4		n/a	n/a	n/a	n/a	Arthur Richardson	27
*Isidore Cohen	7	3		n/a	n/a	n/a	n/a	F. M. E. Schaefer	36
Milton Cohen	8	3		n/a	n/a	n/a	n/a	Steven Seiden	1
*Thomas Cole	14	1		n/a	n/a	n/a	n/a	*E. Everett Smith, Chairman	19
Leo Cooper	30	0		n/a	n/a	n/a	n/a	Donald Stralem	14
*Hon. David Edelstein	13	6		n/a	n/a	n/a	n/a	Earle Thompson	29
*Max Etra	21	11		n/a	n/a	n/a	n/a	*Harold Uris	7
*George Farkas	7	0		n/a	n/a	n/a	n/a	Mrs. Frederick Warburg	22
*Robin Farkas	3	0		n/a	n/a	n/a	n/a	Robert Wetenhall	2
*H.I. Feldman	13	11		n/a	n/a	n/a	n/a	A. Wickersham	7
*Harold Fietman	17	9		n/a	n/a	n/a	n/a	Charles Wimpfheimer	2
*David Finkelstein	1	2		n/a	n/a	n/a	n/a	Stephen Wright, (Dr.)	3
*Mitchel Flaum	3	8		n/a	n/a	n/a	n/a	*Douglas Yates	19
*Hon. Stanley Fuld	2	4		n/a	n/a	n/a	n/a	William Zinsser	40
*Robert Gallop	3	0		n/a	n/a	n/a	n/a	LE ROY HOSPITAL	
*Newton Glekel	18	0		n/a	n/a	n/a	n/a	Larry Bruenn	n/a
*David Goldberg	2	12		n/a	n/a	n/a	n/a	Schuyler Chapin	n/a
Hyman Green	3	0		n/a	n/a	n/a	n/a	Hugh Conklin	n/a
*Isidore Grossman	21	0		n/a	n/a	n/a	n/a	S. Howard Goldman	n/a
*Mrs. Louis Grumbach	21	9		n/a	n/a	n/a	n/a	Franklin Knobel, President	n/a
*Samuel Hausman	31	11		n/a	n/a	n/a	n/a	Harry Lindquist	n/a
*Harry Janin	11	9		n/a	n/a	n/a	n/a	George Whittaker	n/a
Albert Joffe	25	1		n/a	n/a	n/a	n/a	Hon. Louis Wallach	n/a
*Joseph Kaplan	14	5		n/a	n/a	n/a	n/a	John Fox	n/a
*Irving Kapas Jr.	1	6		n/a	n/a	n/a	n/a	MAN. EYE, EAR & THROAT	(Max. 11)
*Sol Kittay	19	0		n/a	n/a	n/a	n/a	*William Breed, Jr.	32
Abraham Krasne	30	0		n/a	n/a	n/a	n/a	William Breed, III	5
*Davis Kriser	7	8		n/a	n/a	n/a	n/a	*Sylvan Coleman	7
*Robert Krissel	4	5		n/a	n/a	n/a	n/a	John Elliott	26
*Louis Lefkowitz	1	2		n/a	n/a	n/a	n/a	*James Flinley	6
*Jacob Leichman	4	6		n/a	n/a	n/a	n/a	Edward Herndon	10
Harold Leitman	11	3		n/a	n/a	n/a	n/a	Gilbert Kahn	19
*Arthur Levitt	1	3		n/a	n/a	n/a	n/a	Francis Keil, Jr., M.D.	13
*Joseph Levy	35	0		n/a	n/a	n/a	n/a	*Charles Meares	18
*Jack Linsky	16	1		n/a	n/a	n/a	n/a	*Mrs. G. Miller	8
*Irving Lipkowitz	26	2		n/a	n/a	n/a	n/a	J. B. Miller	25
*Abraham Malamut	5	7		n/a	n/a	n/a	n/a	*R. Paton, M.D.	31
Robert Mangum	3	2		n/a	n/a	n/a	n/a	*William Renchard, President	23
*Richard Netter	13	3		n/a	n/a	n/a	n/a	*Auguste Richard	51
*Louis Nizer	1	2		n/a	n/a	n/a	n/a	Charles Robertson	½
*Louis Oresman	19	3		n/a	n/a	n/a	n/a	*James Robison	4
Milton Petrie	9	0		n/a	n/a	n/a	n/a	*Arthur Rossiter, Jr.	32
*Seymour Phillips	35	8		n/a	n/a	n/a	n/a	*George Snell	1
Mrs. David Podell	24	5		n/a	n/a	n/a	n/a	Peter Sprague	1
*Hon. Milton Pollack	2	5		n/a	n/a	n/a	n/a	*Boye Staniford, Jr.	4
*Harry Potash	2	3		n/a	n/a	n/a	n/a	Henry Steeger	4
*Alfred Richman	7	7		n/a	n/a	n/a </tr			

	Number of years on Board	Number of meetings attended last year		Number of years on Board	Number of meetings attended last year		Number of years on Board	Number of meetings attended last year		Number of years on Board	Number of meetings attended last year
Edward Butler	5	1	LAGUARDIA HOSPITAL		(Max. 10)	*Harold Tucker	2	n/a	*Saul Steinberg	n/a	1
Mother Francis Carlin	5	2	George Baehr, M.D.	n/a	n/a	*Frank Wieland	8	n/a	*John Straus	n/a	0
Mr. Thomas Cuite	5	4	Leon Cohen	n/a	n/a	Fred Wilkinson	3	n/a	Stuart J. Voisin	n/a	2
Sr. Joan de Lourdes	5	3	Esmond Gardner	n/a	n/a	L.I. JEWISH-HILLSIDE MEDICAL CENTER		(Max. 9)	*Hon. Sol Wachtler	n/a	5
John DePalma	3	2	August Groeschel, M.D.	n/a	n/a	A. Jacob Abrams	n/a	0	Samuel Weinberg	n/a	1
Sr. M. deSales	3	0	Morris Iushewitz	n/a	n/a	Mortimer Aronson	n/a	9	*Irving Wharton	n/a	6
*Archibald Glover	5	3	Allan Komfeld, President	n/a	n/a	Martin Barell	n/a	6	Alfred Wohl	n/a	0
*Harold Hay,	5	3	Donald Logsdon, M.D.	n/a	n/a	Charles Bassine	n/a	0	*Joseph Wohl	n/a	7
*Rev. John Hunt	5	1	Joseph Petrocelli	n/a	n/a	*Saul Belcock	n/a	9	Leonard Zahn	n/a	8
Mother Mary Loyola	5	0	Mrs. Lillian Roberts	n/a	n/a	*Gustave Borne	n/a	9	MARY IMMACULATE		
Most Rev. Francis Mugavero, Chmn.	5	4	THE JAMAICA HOSPITAL		(Max. 9)	*John Bendheim	n/a	7	(See Catholic Medical Center of Brooklyn and Queens Listed under Queens County)		
Theodore Noides	3	0	*Park Adikes	6	n/a	Robert Boas	n/a	1	PENINSULA HOSPITAL CTR.		(Max. 12)
*Michael O'Brien, Jr.	5	2	Frank Anbun	5	n/a	Robert Brimbert	n/a	1	Edward Brill	33	9
*Preston O'Sullivan	5	3	*Lawrence Cormier	6	n/a	Morris Brecher	n/a	1	Stanley Cirkor	11	3
Raymond Riley	5	3	Lawrence Costiglio	3	n/a	Arthur Cohen	n/a	1	Samuel Dillon, M.D.	4	11
Sr. Rose Margaret	1	4	*Harry Eichler	7	n/a	*Eli Cohen	n/a	8	Solomon Dobin	12	5
*Rev. Joseph Sullivan	5	4	*William Erhardt	8	n/a	Wilfred Cohen	n/a	1	Lawrence Franklin	1	5
*James Twoby	5	3	John Fitzgibbons	7	n/a	*Saul Epstein	n/a	8	Joseph Friedman	4	11
*Paul Winters	2	4	Reginald Freeman	6	n/a	Thomas Epstein	n/a	2	Irving Gomerov	18	9
FLUSHING HOSPITAL		(Max. 9)	Stanley Gertz, President	6	n/a	*Arthur Fall	n/a	1	Theodore Ginsberg	3	5
*John Anderson	11	6	Joseph Giffuni	0	n/a	*Arthur Garson	n/a	5	*Julius Granier	33	12
Albert Barrett	3½	0	Mortimer Gold	6	n/a	*Maurice Glinert	n/a	6	Bernard Hoffman	6	11
Joseph Bondanza, Jr.	4	9	*Hon. J.R. Hockert	9	n/a	Mrs. Herbert Greenberg	n/a	8	Louis Hoffman, M.D.	1½	9
Mrs. Sarah Boreneman	3	7	Douglas Hughes	4	n/a	*Aaron Gural	n/a	9	Nathaniel Kaplan	5	1
George Bymes	1	7	Nathan Kalikow	3	n/a	*Hon. Leonard Hanower	n/a	7	Nathan Kom	11	8
John Creedon, M.D.	4	6	Henry Kiernan	5	n/a	Hon. Bertram Hamett	n/a	8	Lila Langer	4 mos.	1
*Stewart Cunningham,	5	1	*Clarence Knickman	6	n/a	Leo Hausman	n/a	5	*Ira Lechtman	4	9
*Lawrence DiNapoli	14	4	Robert Koop	8	n/a	Gilbert Helman	n/a	7	Abner Levine	2	2
Dennis Doulos	1	6	*Sidney Kraut	1	n/a	Millon Herman	n/a	0	Arthur Mandelbaum	17	4
*James Duane, Jr.	5	7	Ralph Kress	6	n/a	Kaufman Katz	n/a	6	Irving Meyersfeld	1	4
Hon. William Giaccio	10	8	Wayne Lampert	5	n/a	Victor Kiam	n/a	0	Benjamin Newman	3	0
*Robert Gill, President	12	9	*William Leck	7	n/a	*Arnold Kramer	n/a	4	Gerard Orsi	4	1
Laurence Halleran	9½	7	Louis Licht	3	n/a	Arthur Levien	n/a	6	Kenneth Perkins	2	2
John Hawthorne	25	8	John Linakis	5	n/a	*Jack Liebowitz	n/a	8	Frederick Randolph, M.D.	3	9
*John Hoffman	12	7	Walter Lunt, Jr.	8	n/a	Daniel Lipsky	n/a	7	Morton Reifer	1½	9
*Hon John Hogan	8½	4	*Walter McDougal	3	n/a	Leon Lowenstein	n/a	0	Anthony Rivara	10	5
*Max Kupferberg	4	9	Harold Merahn	4	n/a	*Hon. Charles Margelt	n/a	4	*Patte Roberts	4 mos.	1
*Hon. Emil Levin	10½	6	Mrs. Armand Newman	n/a	n/a	Arthur Maslow	n/a	8	Richard Schmeelk	2½	5
John Lowry, M.D.	3 mos.	2	Emil Olivieri	n/a	n/a	Robert Match, M.D.	n/a	8	Henry Schwaeber	9	9
James McKinley	5	4	Paul Proske	n/a	n/a	Hon. Samuel Rabin	n/a	4	Alexander Shapiro	4½	7
Thomas Mullaney	3	8	*Charles Pfadenhauer	7	n/a	Charles Revson	n/a	n/a	Robert Shapiro	1	7
Gerald Murphy	10	5	Hon. John Santucci	4	n/a	*Irving Schneider	n/a	8	Victor Silber	3	8
Victor Nevins	5	8	Henry Schwartz	n/a	n/a	*Stephen Shalom	n/a	9	Louis Silver	20	9
George Reilly	10½	8	Chester Schwimmer	5	n/a	Carl Singer	n/a	2	Joseph Smyth	2	2
John Roe	3	4	*Bernard Segall	5	n/a	*Aaron Solomon, President	n/a	6	Fred Springer	4	11
Miss Madeline Sheridan	1½	8	Harold Strauss	3	n/a	Mrs. Edwin Sonfield	n/a	7	Jay Springer	1	7
Mrs. Melvin Thompson	19	7	*Clifton Thomas	4	n/a	*Mike Stein	n/a	7	*Allen Sylvane	10	12
*Edward Veprovsky, M.D.	13	2	Robert Todaro, M.D.	n/a	n/a	Julius Steinberg	n/a	0	*Herbert Wasserman	13	7
*William Whiting	9½	7	*Fred Trump	n/a	n/a				William Werner, M.D.	3	10
*Edward Winters	12	7						James Wolfson	6	8	
								*Isidor Wolkowitz	18	8	

NOTES: Knickerbocker Hospital has been renamed to Arthur C. Logan Memorial Hospital

* Denotes membership on Executive Committee of Governing Body; Sr.-Sister; Ctr.-Center

ST. JOHN'S
(See Catholic Medical Center of Brooklyn and Queens Listed under Queens County)

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