

Shady Grove the Shakes Church

PART ONE OF TWO

Several years ago, while I was doing research into the murder of Pope John Paul I (*see our book by that name; 56 pp., \$3.50 + \$1.50 p&h*), **I came across the startling fact that a new, very successful technique for robbing a bank was devised in the 1970s.** (When copied in America in the 1980s, it produced a score of U.S. Savings and Loan collapses.) The method was devised by the Mafia while working closely with Paul Marcinkus, head of the Vatican Bank, and is simple enough: **The best way to rob a bank is to buy it. Then, as president or CEO, you can strip it bare.**

If you will read some of our earlier articles on the subject, **by the late 1980s certain Adventist Health System leaders had stumbled onto a variation of the trick:** If you want to siphon the money out of an Adventist medical institution, get yourself appointed president.

It was deliberate siphoning and laundering of funds that caused the AHS/NEMA crisis in 1989. Adventist Living Centers, Inc. was sucked dry.

Unfortunately, the scandals have not ceased. **Within less than ten years (1990-1999) two hospital administrators, working with a small coterie of associates, managed to drag Greater Boston Regional Hospital down into the April 1999 bankruptcy.** (*See WM-875 and WM-918 for details.*)

When you find termites eating through a house, if nothing is done about the matter, it is likely that their brothers will soon be devouring the rafters, studs, and floor joists of others nearby.

The worst part of the tragedy is that, when executives siphon the finances out of one of our church institutions, absolutely nothing is done to avoid a repeat performance elsewhere! Nothing, absolutely nothing. Instead, feverish activity is directed toward hiding the scandal from church members!

Is that what we do when we have termites? sweep up their sawdust and deny that they exist?

Friends, this is a situation to weep over! Such things

did not happen in the church when us older ones were young! We had many dedicated leaders earlier in the century.

It was only a few months after the total collapse of Greater Boston, that the crisis at Shady Grove surfaced. **Yet we only learned about the first because it went into bankruptcy, and about the second because one of America's largest newspapers exposed it.** From the best we can tell, essentially the same method of siphoning was used in both: **Institutional funds were ruthlessly diverted to immense salary increases for top executives, which placed the facility in an operational crisis.**

SHADY GROVE HISTORY

In 1974, Montgomery County civic and community leaders invited the Seventh-day Adventist Church to build a hospital to serve upper Montgomery County. (Both Takoma Park and Silver Spring are in that county.) In September 1977, construction began on a four-story 224-bed acute-care hospital. Having opened in December 1979, by 1993 Shady Grove was serving more than 110,000 patients each year. Over the years, local businessmen have contributed over \$5 million to the hospital, but the lion's share of construction and other expenses have been carried by the denomination.

THINGS CHANGED IN 1996

But by 1996, news of the generous manner in which our hospital executives in Massachusetts were rewarding themselves reached our hospital executives in Maryland. **Surely, it was felt, if Greater Boston's bank account can be handed over as salaries and bonuses to its executives, then the same can be done in Greater Washington, D.C.**

Hundreds of thousands of dollars went into the pockets of a few administrators in 1996, 1997, and 1998. (As of this writing, salary and bonus data for 1999 is not known). **Four men voted themselves millions of dollars. Between 1996 and 1998, here is what they**

paid themselves:

- \$4.74 million to Bryan Breckenridge
- \$3.1 million to Edmund R. Peters
- \$972,000 to Ronald M. Wisbey
- \$1,976,000 to Cory S. Chambers.

But, by 1997, so many workers had been laid off at Shady Grove Hospital and Washington Adventist Hospital (in Takoma Park, next door to Sligo Church and Columbia Union College), that news articles were appearing about the drastically reduced quality of patient care at those two facilities. The situation became so bad that one patient died from lack of attention.

THE PROBLEM BLOWS OPEN

It was the *Washington Post*, one of America's leading newspapers, which broke open the sorry spectacle of what was happening at Shady Grove. It is a tragedy when worldlings have to be our monitor, to keep us on the right path.

On Sunday, October 17, 1999, an article appeared in the *Post* about how patient care at Shady Grove was rapidly worsening. It cited "complaints by doctors about staffing and patient care."

The next day (October 18), the Maryland State Department of Health began an investigation into Shady Grove. An on-site probe of complaints about low-staffing levels was initiated. The following day (October 19), another *Post* article appeared, which disclosed the inspection.

Three days later, (Friday, October 22), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO)—a national organization—arrived at Shady Grove for a one-day surprise survey. On October 26, the *Post* reported on the visit.

This crisis was too big to sweep under the rug; for the *Post* had publicized it throughout all of Washington, D.C.; northern Virginia; and Montgomery County, Maryland. **Deciding to get out quick, on November 3, Cory Chambers, the CEO of Adventist HealthCare announced his resignation** at a special board meeting.

Half a month later, on November 15, the Maryland State Department of Health released a report of on-site probe. **JCAHO, based in Chicago, had revoked Shady Grove's accreditation status, and now Maryland State health officials issued their own report on Shady Grove. A remarkable number of problems and cover-ups were cited, including an operation performed on the wrong hip of one woman and the death of the intensive care patient who was left waiting in a hallway.**

On the 17th, the *Post* published an article on these latest developments.

At about that time, in the hope of frightening them off the case, Ronald Wisby board chairman of Adventist HealthCare, wrote a scathing letter to the *Washington Post*.

As you may recall, **while president of Columbia Union in 1980, Wisby had been the one who laun-**

dered money for the unsalaried wives of Folkenberg and McClure secretly through the CU "Worthy Student Fund." It would still be going on, if David Dennis had not openly blown the whistle on it half a year later. That eventually resulted in the firing of Dennis and the elevation of Wisby to an extremely high-paid job with Adventist Health Systems/NEMA. (See our book, *Collision Course*, for details; 56 pp., 8½ x 11, \$5.00 + \$1.50 p&h.) In 1995, he was moved further up the ladder to chairmanship of the board of Adventist HealthCare and Kettering Medical Center. In Dennis' lawsuit, Wisbey is named as a benefactor of shady dealings on behalf of fellow church officials. Dennis was the last whistleblower at the General Conference; there are none there now.

The *Washington Post* was not one to be frightened by Wisbey's letter. They decided to do still more checking and, on December 1, released their bombshell newspaper article, "*Compensation of Top Executives at Adventist HealthCare.*" We published a report on that article in our January *Checkpoints*. In order that the present report might be more complete, that *Checkpoints* news release is reprinted immediately below.

SALARIES UNCOVERED BY THE POST

SHADY GROVE ADVENTIST HOSPITAL—This denominationally owned hospital in Rockville, Maryland is quite close to General Conference headquarters. Like a number of other Adventist medical institutions, it is siphoning off funds—and handing them to chief executives.

I do not know how these men can sleep at night, knowing they are stealing all this money from the church. On top of that, they grind the faces of the poor with long hours and poor pay, and then, complaining of inadequate profits, lay them off in their 50s so they will not have to pay them retirement; all the while they skim the cream off the top—and pay themselves mammoth yearly salaries. Why do the church members not wake up and demand that this theft stop?

(We recently learned that an Adventist attorney resigned from denominational employment, because he learned that church institutions routinely push out older, lifetime workers, just before they would receive retirement benefits.)

Here are excerpts from this report by one of America's three most influential daily newspapers: *The Washington Post*.

"In the three years before staff cuts at Shady Grove Adventist Hospital led to increasing complaints from doctors, nurses and patients about the quality of care at the Rockville facility, **the hospital's executives gave themselves large raises and severance payouts**, according to federal tax returns.

"The largest amount went to Bryan Breckenridge, who received \$4.74 million in compensation and lump-sum pay in 1997 [a single year's pay package], when he left his job as president of

Adventist HealthCare Inc., the regional nonprofit company that also owns Washington Adventist Hospital in Takoma Park, seven nursing homes and a New Jersey hospital. His top aide, chief financial officer **Edmund R. Peters, left soon afterward with \$3.1 million.**

“Adventist [Healthcare Inc.] officials said it was a recognition of the pair’s lengthy service and part of a broader attempt by the hospital system’s board to catch up with compensation paid by other health-care organizations in the region.

“The board made **a reasonable business decision that retirements for a number of the executives . . . were not adequately funded** in comparison to what they would otherwise have received’ in a nonreligious organization, said Adventist’s general counsel, Kenneth B. DeStefano. ‘The decision was made to do a catch-up, if you will.’

“Adventist’s board chairman, **Ronald M. Wisbey, saw his compensation leap from \$161,000 in 1996 to \$447,000 the next year and \$364,000 in 1998.** Adventist officials said half of Wisbey’s compensation—salary, benefits, deferred salary, and expense accounts—is reimbursed by another pair of Adventist hospitals in Ohio that also employ Wisbey as their board chairman.”

[Wisbey, famous for his “Worthy Student Fund,” is the board chairman of Shady Grove Hospital, Rockville, MD; Charles F. Kettering Memorial Hospital, Kettering, Ohio; and Sycamore Hospital, Miamisburg, Ohio. **Wisbey has been handsomely rewarded for money laundering** with highest-paying jobs throughout the 1990s; yet Wisbey has no educational background in either business or health care.]

“**Cory Chambers received \$319,000 in total compensation as Adventist’s executive vice president in 1996, followed by \$815,000 the next year and \$842,000 in 1998.** After a range of patient-care problems at Shady Grove was publicized last month, Adventist’s [Adventist Healthcare’s] board forced Chambers to resign and named Wisbey as his temporary replacement.

[There are nine Adventist Health Systems in the U.S. at this time, all of them with bloated high six-figure salaries to their executives, as well as their hospital managers. Adventist Healthcare, Inc. (we will refer to it as AH) is over Shady Grove Hospital (SGH). Until recently, Cory Chambers was manager of SGH. Although not a very large hospital, it decided to pay its executives top dollars. **According to a previous paragraph, AH’s excuse was that it wanted to pay its board and hospital executives that which “nonreligious organization” executives were making. But the next paragraph reveals they were paying their men far above equivalent salaries elsewhere in the D.C. area.]**

“The salaries, according to the Adventist system’s own consultant reports, are well above the amount paid to hospital executives in this region with similar responsibilities. The figures have

been closely held [secretly guarded] by the Adventist system, but were disclosed yesterday in response to a request by *The Washington Post* to review documents the tax-exempt organization has filed with the IRS.”—*The Washington Post, December 1, 1999.*

The article discusses the fact that **the high-paid management of Shady Grove was lowering patient care, in order to save money (i.e., for higher executive bonuses the following year); at least one patient died as a result.**

“**‘I think it’s outrageous that a hospital claiming financial constraints [difficulties] can compensate their executives to this extent,’** said Alan Kravitz, a surgeon who pushed the Shady Grove medical staff to voice its concerns about the quality of care at the 263-bed hospital in response to a patient death. Kravitz added that he was shocked by the salary figures.”

The article went on to state that **State regulators are threatening to downgrade Shady Grove’s status, because of mismanagement. Meanwhile, Breckenridge, Peters, Wisbey, and Chambers refuse to comment.**

So much money has been siphoned off from the yearly “surplus” for the executives, that the finances at Shady Grove are in danger of collapsing. —You will recall that this is exactly what happened over a ten-year period at Boston Regional (which is in a different AHS: Atlantic Adventist Healthcare), which led to its recent bankruptcy! But management keeps cutting costs, to increase year-end profits which it can divide up among its executives.

“The Adventist hospital had an operating surplus of \$13.4 million in 1996, \$12.5 million in 1997 and \$19.5 million in 1998. But **its financial situation has gotten tighter this year, and the system has laid off or redefined the duties of 78 employees at Shady Grove and Washington Adventist Hospitals.**

“As a result, doctors and nurses at Shady Grove say **nurses are being worked too hard, leading to an increase in treatment mistakes . . .** [examples cited] . . . Ronald Marx . . . said **the company’s growing executive payroll helped put Shady Grove into a position of overworking its nursing staff . . .**

“Adventist officials have commissioned several surveys of executive compensation in area hospital systems. **Consultants found that in several cases, Adventist executives with relatively high salaries were receiving big raises anyway. In 1996, Breckenridge, for example, was receiving \$416,000 in total [yearly] pay—equal to the highest pay in the surveys—but his compensation for that year was increased to \$716,000.**” [Read that again!]

We take a deep breath at the audacity, the brazenness of such wickedness.

But the worst part is that officials who are over the nine Adventist Health Systems permit this to continue. They are all General Conference subsidiaries.

Oh, please, please, let us pray that God will clean up the offices of the denomination! How much more time can elapse before His patience will be exhausted? (Note the principle stated in *Life Sketches*, 413:3.)

Yet the only ones who are considered to be doing wrong—are the few who speak up and plead that these sins be repented of and put away.

—That concludes our January 2000 Checkpoints news release concerning the December 1, 1999, Washington Post article.

NURSING HOMES INVOLVED

As if that was not enough opprobrium, the *Washington Post* also sent an investigative team to check on some other area health-care facilities operated by our denomination. **On December 2, a Post article appeared about inadequate patient care at Sligo Creek Nursing Home and four other nursing homes operated by Adventist HealthCare in the State of Maryland.**

Here is that article:

“Shady Grove’s Owner Cited for Deficiencies at Nursing Homes—**The church-affiliated company that owns troubled Shady Grove Adventist Hospital in Rockville has been battling state and federal regulators over deficiencies in the quality of care at five of its seven nursing homes in Maryland, state officials say.**

“After six weeks and a series of changes in patient care procedures, 102-bed Sligo Creek [Nursing Home] was recertified by state officials to receive Medicaid funds. Money from the state-administered federal insurance program for the poor and disabled represents about 65 percent of the facility’s income.

“**Four other area nursing homes run by Adventist HealthCare Inc., which is controlled by the Seventh-day Adventist Church, also have been cited in the past year for deficiencies that regulators said could have led to expulsion from Medicare and Medicaid.** However, those facilities righted themselves before enforcement efforts reached that point, officials said.

“**Of Maryland’s 261 nursing homes, only Sligo Creek and nine others persistently failed inspections to the point that officials cut off their Medicare and Medicaid funding in the past year.** Among the 10, two facilities closed and relocated all their residents.

“After Sligo Creek had its Medicare and Medicaid payments suspended in the spring, Adventist HealthCare hired Ellen Reap, Delaware’s former chief nursing home inspector and a frequent ad-

viser to federal officials who oversee Medicare, the federal insurance program for the elderly. As vice president of senior living services, she oversees nursing homes assisted-living facilities and adult day-care operations.

“Reap declined to comment on the problems at Adventist nursing homes, saying she preferred to discuss improvements in care and standards she is planning for the 1,200 employees she supervises.

“‘People know that I represent quality,’ she said. ‘My goal is to be the leader in the state and the nation . . . I believe that our nursing home residents can receive that kind of care.’

About six weeks after cutting taxpayer support for Sligo Creek’s residents, state regulators reinspected the nursing home and found that the facility had begun a program to prevent bedsores by having nurses regularly turn over patients and perform more thorough skin assessments. The state resumed Medicaid funding on May 20.

Federal officials at Medicare’s regional office in Philadelphia have not decided whether to reopen that program to Sligo Creek Adventist HealthCare. Officials say they are still waiting for a requested reinspection by Medicare officials.

“‘You can argue that it’s a single incident and that from time to time something like this will happen for any nursing home operator,’ said Carol Benner, who heads Maryland’s office of health care quality. ‘On the other hand, you certainly would not want this to happen to someone you knew.’

Georges C. Benjamin, Maryland’s health secretary, said nursing home enforcement in the state is more stringent than ever.

“‘I think it says we’re serious,’ he said of the payment suspensions. ‘The industry has been working with us to improve . . . There has been nationwide concern about the quality of care in nursing homes.’

“**Adventist HealthCare operates a total of 838 beds at six nursing and rehabilitation centers in the region in addition to Sligo Creek.** They are Bradford Oaks in Clinton; Fairland in Silver Spring; Glade Valley in Walkersville, Frederick County; Shady Grove in Rockville; Springbrook in Silver Spring; and Shore in Denton, Md.

“**Maryland cited Shore for patient falls, Glade Valley for falls and management problems, Fairland for management problems and Bradford Oaks for patient bedsores, officials said.**

“The problems at Adventist nursing homes were identified by Maryland health officials long before the medical staff’s executive committee at Shady Grove Adventist Hospital complained in October to administrators that **staff cuts and other changes**

Shady Grove the Shakes Church

**PART TWO
OF TWO**

W
M
9
3
4

Continued from the preceding tract in this series

at the Rockville facility had damaged patient care.

“State officials had not made regular inspections of the hospital as long as it held the highest ranking granted by the Joint Commission on the Accreditation of Healthcare Organizations [JCAHO], a national group that rates hospitals.

“But after *The Washington Post* reported the medical staff’s complaints and the death of a patient from the intensive care unit who had been left unattended in a hallway at Shady Grove, the joint commission reversed itself. On November 15, the commission moved to revoke the accreditation of Shady Grove after concluding that patient care at the 263-bed facility had suffered.

“A day later, state health officials issued their own report on Shady Grove, citing mistakes in patient care that included medication errors, several patient falls, a chronic failure among staff members to note mistakes and adverse incidents in hospital records, an operation performed on the wrong hip of one woman, and the death of the intensive care patient.

State officials reported that **a review of the minutes of hospital board meetings going back a year lacked any ‘substantive discussion of quality issues or any oversight of the quality of care.’**

Hospital officials dispute many of the state report’s findings and say they will vigorously fight the move to lift its accreditation. **Minus accreditation, Shady Grove could lose contracts with health plans and see its bond rating damaged.**

“Adventist HealthCare spokesman Robert Jepson said the company is committed to providing quality care as part of its Christian mission, adding that the problems reflect the harsh environment facing the nation’s nursing home industry. Financial pressures have driven a growing list of nursing home companies into financial trouble as governments heighten their scrutiny of care.”—*Washington Post*, “*Shady Grove’s Owner Cited for Deficiencies at Nursing Homes,*” *Thursday, December 2, 1999.*

THE CRISIS DEEPENS

By this time, the situation was becoming very seri-

ous. So, on December 7, Adventist HealthCare leaders addressed a specially called meeting of the Montgomery County Council. The *Post* reported on it the next day. **Both county officials and businessmen were deeply irate that this situation had been permitted to continue since 1996.**

(At this point, let me mention that Montgomery County, Maryland, is no little backwoods place. In 1969 the present writer was told by an employee in Sears Robuck, in Silver Spring, that Montgomery County had the highest per-capita income of any county in the U.S. This was due to the fact that a very large number of its citizens are higher-paid government workers in the District.)

In quick succession, over the next week three more reports were issued by the *Washington Post*.

On Thursday, December 9, the *Post* reported on a surprise inspection by JCAHO to Washington Adventist Hospital the previous day. In the Sunday, December 12 edition, the *Post* reported on charges that JCAHO (the Joint Commission on Accreditation of Healthcare Organizations, connected with the American Medical Association) had been too lenient with Adventist hospitals in the past. **Maryland State and Montgomery County had trusted JCAHO to provide suitable oversight of these Adventist health-care institutions, and this had apparently not been done.**

On the 14th, the *Post* disclosed the previous day’s presentation by Adventist HealthCare (AHC) before the central board of JCAHO in Chicago, Illinois. AHC had gone there to appeal Shady Grove’s preliminary non-accreditation status. The meeting lasted 7 hours, and Shady Grove managed to regain probationary certification. JCAHO officials announced they would issue a final report on February 3.

Another week passed and then, on the 21st, the *Post* announced that **the family of the woman who had died in the hallway at Shady Grove had filed a lawsuit against the Shady Grove and Adventist HealthCare.**

So much evidence has surfaced of staff shrinkage and consequent patient neglect, all primarily due to siphoning of funds for gifts to management—which did not manage properly,—that the likelihood of a generous jury award to the relatives of the victim was likely.

The next day, the *Post* reported on a pay raise for nurses at Shady Grove. Perhaps the extra money was

doled out to ensure their loyalty in the ensuing investigations—especially now that attorneys for the relatives would be interviewing them in their search for witnesses and evidence.

All this placed in crisis mode the Potomac Conference, Columbia Union, and General Conference—all of which are deeply involved in Montgomery County.

COLUMBIA UNION VISITOR ARTICLE

Something had to be done; so, in the January 2000 issue of the *Columbia Union Visitor*, a three-page article appeared under the title, “*Maryland Health Institutions Face Scrutiny, Challenges.*”

Here, in brief, are news items in it which we had not mentioned earlier:

“The board of directors for Adventist Health-Care accepted the resignation of the organization’s chief executive officer on November 3.

This came as part of an overall restructuring plan designed to strengthen the management of the organization’s hospitals.”—*Columbia Union Visitor, January 2000.*

That CEO was Cory Chambers who, the article quotes Wisbey as saying, “It is with much regret that we accepted the resignation of Cory Chambers, a person of high integrity and great moral character.”

He surely must have had a lot of both, to have been rewarded so highly for three years straight:

“Cory Chambers received \$319,000 in total compensation as Adventist’s executive vice president in 1996, followed by \$815,000 the next year and \$842,000 in 1998.”—*Washington Post, December 1, 1999.*

And, surely Ron Wisbey would consider Chambers to be full of Wisbey-oriented “integrity,” since Chambers had been a member of the small board which had voted Wisbey an outlandish amount of money.

“Adventist’s board chairman, Ronald M. Wisbey, saw his compensation leap from \$161,000 in 1996 to \$447,000 the next year and \$364,000 in 1998.”—*Washington Post, December 1, 1999.*

Chambers had been appointed CEO of Shady Grove, in 1994, and also CEO of Adventist HealthCare in September 1997. Wisbey had been appointed Chairman of the board of Adventist HealthCare in 1995.

As for Wisbey, the *Visitor* now reported that he had been appointed “interim chief executive officer” of Shady Grove because the Adventist HealthCare board said “it has an overriding responsibility to its patients, doctors, employees and other community members to ensure the maintenance of high standards of quality care.” So the fox moved from one henhouse to the other.

“I can’t stress enough the amount of respect the board has for Cory, who devoted his professional life to this organization and mission,” added Wisbey.”—*Columbia Union Visitor, January 2000.*

“The Adventist HealthCare board decided on December 16 to hire an outside expert to con-

duct a complete analysis of compensation within the organization. During the meeting, the board reviewed executive compensation with another outside compensation expert and then unanimously voted to expand the review to all levels within the organization.”—*Ibid.*

Remarkable. The board gave itself (its individual members) fantastic rolls of cash for three years,—and now when it is caught red-handed, it decides to hire an expert to decide if it might have been too generous.

“The independent expert will study salary patterns and pay equity. In addition, departmental comparability and comparability with other market-based health-care positions will be reviewed. The analyst will be charged with addressing salary and compensation policies both retrospectively and prospectively.”—*Ibid.*

Secular corporate experts will compare these immense executive salary handouts with those of other corporations, taking into account that our leaders received very little until only recent decades. **Their conclusion will probably be that, compared with the world, we are not paying our top executives as much as we ought to. We really did not give away the bank after all.**

What should have been done was for our leaders to openly confess, “Those executives did wrong. We sat on their boards and we let them. We share in the wrongdoing. *But it will stop! We will enact legislation, on the North American Division level, which will both clean up this mess and ensure that it will never happen again!*”

None of our denominational hospitals are independent. They are all subject to union, division, and General Conference rulings. These financial scandals, which have occurred throughout our health-care facilities for nearly 20 years, can be permanently stopped. But our church leaders are strangely unwilling to do this.

Some will say that we should not tell you what is going on. Remember that, **if the *Washington Post* had not disclosed these immense money gifts,—no committees would have been appointed to consider it. Instead, it would continue on, secretly as before. Our leaders are on all these boards; they did not have to read it in the *Washington Post* to know what is taking place.**

These words are revealing:

“Our goal is to ensure fairness in our pay scales and comparability with the market for all positions,” said Ken DeStefano, vice president and general counsel for Adventist HealthCare.”—*Ibid.*

It is a well-known fact that top executives, of both for-profit and non-profit corporations in America, receive an average of \$1.5 million in compensation, stock options, and bonus packages each year.

If we are going to compare Shady Grove and AdventistCare salaries with those of the world instead of with those in the Bible and Spirit of Prophecy, we will find

that our lower-level hospital staff (most of which are non-Adventist) are paid what equivalent hospital workers elsewhere are paid,—or we could not staff our medical facilities. But our top executives are underpaid. Ever since the late 1980s, they have each been receiving several hundred thousand dollars a year in salary (that is a fact!), whereas executives elsewhere are receiving much more.

But, if we compare them with health-care executive salaries in the greater Washington, D.C. area, we find that these men were paid much more! And, according to the following quotations, church leaders knew it!

“The salaries, according to the Adventist system’s own consultant reports, are well above the amount paid to hospital executives in this region with similar responsibilities . . .

“Adventist officials have commissioned several surveys of executive compensation in area hospital systems. Consultants found that in several cases, **Adventist executives with relatively high salaries were receiving big raises anyway.** In 1996, **Breckenridge, for example, was receiving \$416,000 in total [yearly] pay—equal to the highest pay in the surveys—but his compensation for that year was increased to \$716,000.**”—*Washington Post, December 1, 1999.*

This three-page article in the Columbia Union Visitor did not make one comment about the patient left to die in the hallway or the woman who had her one good hip operated on instead of the one which was broken. Instead, the emphasis was on how we are going to get worldly experts to tell us how to make sure our administrators and staff are paid as much as elsewhere.

On the very next page, after the three-page statement, was a one-page article, “*Shady Grove Adventist Hospital Creates a New Place for Children and Families.*” It tells how kind the staff are to children which come to the hospital.

This is followed, on page 10, by an article about a heart operation at Washington Adventist Hospital; and, on page 11, there is an article by Ron Wisbey, entitled “*Healing Ministry: Why Do We Have Adventist HealthCare Facilities?*” On the upper right of the page, there is a black cross with a white, radiating sun shining from its head-point. The article quotes Matthew 25:35-36, Living Bible (“I was hungry and you fed Me”).

“Central to the future of Adventist HealthCare is a commitment to continue the healing ministry of Jesus Christ. Thus Adventist HealthCare seeks the integration of a personal faith in Jesus Christ with competent health-care delivery . . . Adventist HealthCare institutions across the Columbia Union are an important part of Adventism’s ‘get acquainted’ bouquet of opportunities.”—*Ibid.*

Unfortunately, Maryland is becoming very well acquainted with the pattern of ministry by Adventists in their area: ignore the needs of the patients and minister

to the welfare of the executives.

ANOTHER EXECUTIVE DEPARTS

We will next quote a January 7, 2000, *Washington Post* article:

“Less than two years after joining the nonprofit company that owns troubled Shady Grove Adventist Hospital in Rockville, **the firm’s chief financial officer has resigned.**

“The departure this week of Harry Weis, who had held the job at Adventist HealthCare Inc. since March 1998, continues changes that have roiled the company since October, when Shady Grove doctors complained that patient safety was being compromised by staff cuts and poor management.

“After a string of medical mishaps—including the death of one attended patient and the replacement of the wrong hip of another—the hospital is fighting to retain its accreditation and to persuade state and federal health officials that it should continue receiving Medicare and Medicaid funds. Without such financial support, the hospital probably would have to close.

“In November, soon after the medical staff’s complaints became public, Adventist HealthCare board members forced the company’s chief executive to resign, and reassigned another top executive. On an interim basis, Adventists brought in a new board chairman and chief executive and installed a president at Shady Grove.

“Weis will be replaced temporarily when he leaves in February **to become the chief financial officer of a group of California Adventist hospitals,** said Adventist spokesman Robert Jepson, who added that Weis was recruited by his new employer and was not forced out.

“His leaving is not related to the issues that have been in the press recently,” Jepson said. “They did approach him. He’s somebody whose knowledge is widely respected.” **Adventist HealthCare employs 5,000 people in Maryland, the District, Virginia and New Jersey at seven nursing homes, a regional home health agency and three hospitals, including Shady Grove and Washington Adventist Hospital in Takoma Park.** In 1998, the firm reported revenue of \$314 million.

“Financially, the regional Adventist health care companies are independent and unrelated to the Seventh-day Adventist Church. But the regional firms’ boards are dominated by representatives of the church.

“Weis collected \$379,000 in compensation in 1998, including \$200,000 in base pay, \$25,000 in bonuses and \$131,000 in company retirement contributions.

“Six months before he joined the firm, the previous chief financial officer, Edmund R. Peters, departed Adventist HealthCare with a severance package worth \$3.1 million [in September 1997]. Another executive, Bryan Brecken-

ridge, left about the same time with a \$.7 million package.

“Although the chief financial officer job description does not require candidates to be church members, Jepson said, “traditionally the position has been filled by a Seventh-day Adventist.”—*Maryland Chief Financial Officer Quits Adventist Hospital Company, The Washington Post, January 7, 2000.*

We do not know the story of Weis. He may only have been the one required to write the big checks to the executives while ignoring the needs of Adventist HealthCare facilities. Even though he was probably on the crucial boards, he may have had to go along with the big guys, or else. But notice that Weis was also the recipient of large amounts of money. The board treated its voting members very well. At any rate, Weis—the number two man at Shady Grove—quit in January. He will now be an executive at an Adventist health-care facility in California.

CONCLUSION

The problem is that we have committee men protecting committee men. Some do this to keep their jobs; others do it because they share in the rewards.

It has been a known fact, since the early 1980s (when the Davenport scandal broke; we wrote what was, by far, the most complete account of that debacle), that **men on high-placed church committees will not put a stop to the wrongdoing—because they are rewarded for not doing so.** Lower-level church workers dare not speak up, lest they not be steadily advanced up the ladder. Upward mobility is very important to those who serve on committees, for it is from the ranks of committee men that the future leaders of the church are selected.

As for the laymen, they frequently do not want to be disturbed. The Laodicean spirit flavors not only their personal lives, but even the way they view problems in the denomination.

Look about you: In the midst of deepening financial scandals and outright apostasy in our church, the majority in the church is careful not to appear disturbed; for “that is the Christian thing to do.”

First toleration, then acceptance, then participation. The slope downward keeps getting steeper, the fall more rapid.

Wake up my people! Wake up!

A mixture of Conference, union, North American Division, and General Conference men sit on these health-care boards, along with health-care executives.

“Financially, the regional Adventist health care companies are independent and unrelated to the Seventh-day Adventist Church. But the regional firms’ boards are dominated by representatives of

the church.”—*Washington Post, January 7, 2000.*

Ever since the late 1980s, **health-care executives are voted high salary increases each year, and church executives on those committees are assured that their sons and relatives can be hired into good-paying jobs, and they themselves, upon retirement, can be slipped into executive positions. The worst offenders in the Davenport scandal were transferred over to high-paying AHS positions.**

Yes, there are many good men in our denomination, but the bad apples are increasing, as new theology spreads among them. **If a person believes he is saved in his sins, he does not mind cheating the church a little. It really does not matter, since “he was saved 2,000 years ago” and is assured a place in heaven.**

One of the fabulously wealthy popes of the 14th century made the comment, “This myth of Christianity has been good for us.” Adventist health-care executives would agree. “The Advent Movement is a real windfall. We run the show, pay ourselves anything we want, and church officials on our boards never object.”

Angels weep at our apathy. My people, when are you going to wake up and demand that genuine reforms be made. Not until then will they be made. God will not do for us what we are not willing to do ourselves, when confronted with the facts. Leaders—even the good ones—appear powerless to cut into the wickedness and get it out of the church.

I am told that I should say less about what is happening. Should I be silent when people are going to burn in fire for the corruption they are spreading through the church?

Because of what is taking place, millions will be lost—either unreached in the world or irreparably compromised in the church.

The best arrangement is the one in the Bible: “The leaders lead and the people follow.” That is the plan carried out in heaven, and the church ought to be a little heaven on earth. But, unfortunately, there are times when public disclosure is the only way to shake leadership into making needed changes. The heavenly plan only works when both leadership and followers are converted. Both are needed just now.

What is needed now are true ministers. “To every minister the Lord declares: ‘O son of man, I have set thee a watchman unto the house of Israel; therefore thou shalt hear the word at My mouth, and warn them from Me. When I say unto the wicked, O wicked man, thou shalt surely die; if thou dost not speak to warn the wicked from his way, that wicked man shall die in his iniquity; but his blood will I require at thine hand. Nevertheless, if thou warn the wicked of his way to turn from it . . . thou hast delivered thy soul.’ Ezekiel 33:7-9.”—*Acts of the Apostles, 360-361.*