PERCY ALLEN II
In First Person: An Oral History

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KIM GARBER: Today is Thursday, April 19, 2012. My name is Kim Garber, and I will be interviewing Percy Allen II, who has devoted his career to leadership positions in the Midwest and New York City and Baltimore. He was the CEO of University Hospital of Brooklyn during the ’90s and then became of the CEO of the Bon Secours Baltimore Health System. Mr. Allen, it’s great to have this opportunity to speak with you.

PERCY ALLEN II: Thank you. It’s a pleasure to have you here.

GARBER: Could you tell of your family background?

ALLEN: I was born in 1941 in New Orleans. My mother worked as a housekeeper when she found a job. My dad was a forklift driver. We didn’t really know how poor we were. I didn’t realize that people had their own bedroom. We always had four or five of us sleeping in the same bed. We had a two-bedroom home with five or six of us, and sometimes my mother’s family members.

My daddy was a very positive man. He always instilled in us that you can be whatever you want to be. He said, “You are somebody.” He supported us in everything. My dad didn’t finish eighth grade, but he had a Ph.D. in life. He helped my sisters, brothers, and me with our high school math – geometry – every evening. I played sports in school but he was not able to come to the events because of the nature of his work hours. Only twice in my four years in high school was he able to come to one of the high school basketball and football games. But I always felt his presence. He was always there and always supportive.

My parents made sure we had dinner as a family every evening. We discussed the day’s activities, and it was my father’s way of ensuring that we connected with one another, which formed the basis for our closeness. Everybody sat at the table every day. We talked. We had our chores by week. There was a lot of love and encouragement, and that’s what I was brought up around.

I excelled at things, but basically because my dad always was there, not in an overbearing way, but in a supporting way. My dad is my role model. Everything I do, I do it in his honor, because he saw the possibilities in me.

GARBER: You said your father was a forklift driver?
ALLEN: Yes, he was a forklift driver at the Flintkote tile making plant in New Orleans. He did that for many years. Later it was discovered that asbestos was used in the tile making – my dad died at 50 of lung cancer.

GARBER: Were there other relatives who were influential during your childhood years?

ALLEN: Some of my uncles and aunts were and, of course, my teachers. Mostly, to be honest with you, my dad really was influential, and then also my teachers.

GARBER: You went to elementary and high school in New Orleans?

ALLEN: In elementary school, I was at Marie C. Couvent Elementary School through the seventh grade, and then I went to eighth grade at a school that was consolidated – Rivers Frederick. But elementary school was inspiring to me because of a first grade teacher, although she didn’t have me in class. Miss Burris taught my mother and my aunts and uncle. She taught us how to play tennis. She was creative and innovative – we didn’t have anything at those schools. We had second-hand books. But she got the industrial arts teacher to make tennis paddles, and they put up a net in the school yard, and that’s how we learned to play tennis. That same first grade teacher helped me with my first resume. I don’t know why she fell in love with me, but she was such an inspiration, and she made sure that if I asked her for something, I got it.

In eighth grade, there was a teacher by the name of Miss O.W. Nelson. At the elementary school I went to, they didn’t expect us to finish eighth grade, much less go to high school. When we merged, I was in the 8-1 class, and Miss Nelson was the teacher. She was so inspiring, and she saw something in me that I didn’t see in myself. When we finished eighth grade, all the kids were going on to high school. I didn’t know anything about Xavier Prep, a private high school, but she said, “Percy, I’m going to speak to your parents. I want to give you bus fare, and I want to pay for you to take the exam to go there.” She talked to my parents and they okayed it. That’s why I went to the Prep. I took the exam. I got a scholarship there, because she saw something in me, and she saw that I could compete at Xavier Prep. Miss Nelson became a principal at one of the schools. I kept in contact with her over the years. Once I entered adulthood and health care management, I returned to her school every year until she died to speak to her classes.

GARBER: Were the schools that you went to segregated?

ALLEN: Yes, totally segregated. I went to Xavier University Preparatory School. It was segregated. All the schools were segregated at that time. But Xavier Prep was a private top academic school. Most kids who went to the Prep graduated, and most of them went to college. I learned a lot at the Prep. I was class secretary of the senior class; I was vice president of my various classes. I was selected to attend Bayou Boys State, where you would spend a week at the Capitol, and where you learned the importance of representation and advocacy of the legislative branches. I got involved with everything at school. I enjoyed school and was a good student. I didn’t come out cum laude, but I came out with excellent grades. I was All-City Football, co-captain of the football
team, played basketball, and ran track. I also played in the band for a while.

**GARBER:** Could you talk a little bit about what it was like to grow up in New Orleans in the ‘50s as far as being a segregated city?

**ALLEN:** I had a very astute father who taught us well. Coming up in New Orleans, you knew what to do. First of all, you didn’t get the jobs. When I was in high school, I applied to go to the Naval Academy in Annapolis. I didn’t know that you had to have a Congressperson recommend you. I was naïve. I wanted to go. I didn’t get accepted, but I didn’t realize why until years later.

We sat on the back of the bus when we traveled. There were African-American restaurants but the majority of the restaurants were segregated. Even in New Orleans, there was a segregated colored-only section in restaurants. You realized that that’s the way it was.

In my senior year in high school, we began to challenge the system. I had my dad’s support. We began to do things like sometimes not sit in the back of the bus. If the bus driver said something, we’d move. You learned to live with segregation. I didn’t really see much in New Orleans. I didn’t get exposed to broader academic, economic, and social opportunities until I left New Orleans.

I received a scholarship in football, but my parents didn’t understand scholarships. They always said, “Son, what would happen if you break your leg or do something like that? We can’t afford to bring you back home.” I went instead to integrate LSUNO [Louisiana State University New Orleans] in September of ’59, and stayed there until December of ’59. It was pretty rough. This was the second year LSUNO was being integrated.

**GARBER:** What sorts of rough things did you encounter?

**ALLEN:** They often called us names, and sometimes they would throw tomatoes at us. Most of the students were selected to go there. Most students who went there were expected to graduate, but when we got our papers back in class, they were marked up in red – I mean all red. I never got more than an F in a class in most cases. My parents wanted me to hang in there, but I thought, this is a road to nowhere.

The Newman Club, the social organization for LSUNO Catholic students, was the only group that reached out to the African-American students. We’d go to meetings with them, and they were welcoming. But that was just about once a week. After I saw that there was no way to limit the academic and social isolation, I left school. I didn’t tell my parents I was dropping out. I went to the recruiter, and I joined the Air Force. I told them afterward that I was going into the Air Force on December 7. They understood. Deep down, they understood what we were going through, and so I left LSUNO and joined the Air Force.

**GARBER:** At LSUNO, you found more prejudice and bigotry among the faculty perhaps than the other students?
ALLEN: The students also, except for the Newman Club. You would go to class and study and take the exam. When you got your paper back, there was more red on the paper than blue, but you couldn’t talk to the professors because they wouldn’t talk to you. I didn’t run across any professor willing to sit down and talk with me to explain my grade, and how I could improve. They didn’t intend for us to improve, really. They didn’t intend for us to be there. It was deep, deep, deep-seated in their hearts that they didn’t want African Americans there, and they wanted to make sure that we wouldn’t graduate from there. They were very discouraging. But, that was the way it was, and I knew what to do about it. I decided to move on.

GARBER: What was your Air Force experience like?

ALLEN: That was a great experience. I was in the Air Force for four years and nine months. After boot camp, I went to technical school, where I became an administrative assistant—a secretary, basically. When I finished that program, I went to Oscoda, Michigan. I was there in northern Michigan. I said, “My goodness, this is good. Things are going to change.”

I was surprised by the cold when I took the train from New Orleans to Detroit. In Detroit, we got off the train and went to the bus station to take a bus up to Oscoda. I hadn’t been outside of New Orleans in my life, so I didn’t know any better. This was May 1960, and I had on my shortsleeve uniform for New Orleans. I fell asleep on the bus until I heard, “Oscoda, Michigan!” I woke up and saw it was covered with snow. The next day they started giving us arctic gear. You got big parkas and boots. That was my first exposure to Oscoda.

I worked for the squadron commander. I worked for the base commander. I had a great job. Sometimes the administrative assistants had the inside track on things.

I met and married my wife, Zennia McKnight, in Detroit. Eventually, I decided I wanted to bring my wife and first child, Merrily, up to the base, because they lived in Detroit, so I started looking for housing. There were signs on houses that said, “Cats – yes. Dogs – yes. ‘N-word’ – no.” I was appalled. I’m saying to myself, “My goodness, this is the North!” I went to the base Advocate General, and I told him that I needed a place for my family. I was always one to stand up for what I thought was right. I said, “You want me to go to war for this country. I need a place that’s decent.” There were garages that had been turned into apartments for minorities. I believe that I made a difference there because the Advocate General did a study and they paid everybody with two-dollar bills so that they could show the impact of the base on the community. Everyone got paid in two-dollar bills, no checks – the

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1 Wurtsmith Air Force Base near Oscoda, Michigan, was established as an Army Air Field in 1924 (originally named Camp Skeel). The base was closed in 1993. [http://www.wafb.net/](http://www.wafb.net/) (accessed Feb. 11, 2013)
total base, from the General on down – and they were circulated through the town. The town saw how important the base was. Then changes were made in the housing codes.

**GARBER:** That’s an interesting story. Let me see if I understand. The point was that they paid everybody on the base with two-dollar bills because two-dollar bills were not commonly in circulation, and they wanted the local merchants to understand when they saw all these two-dollar bills the impact of the base on the local economy.

**ALLEN:** Right, and that began to change their attitudes.

**GARBER:** You were very young when you got married.

**ALLEN:** Yes, I was. I got married young. I had my first job, then my daughter. Then my son, Percy, was born a couple years later. He was born on base. My daughter was born in Detroit. By the time my son was born everything was pretty well settled on the base.

I stayed there my entire career. I went to England for temporary duty for about six months. Over there, I worked in a reconnaissance squadron. They had not passed inspection for a while. I went in and worked 16 to 20 hours a day. I just worked basically around the clock with the colonel and a chief master sergeant, putting everything in order. When they had the inspection, we passed, and they were impressed with that. My tour of duty was pretty nice over there after that because they had passed inspection.

**GARBER:** Your military service was in the early ‘60s – from 1959 to ’64. This was about ten or fifteen years after President Harry Truman had signed an executive order that desegregated the armed services. What was your experience of race relations in the Air Force at that time?

**ALLEN:** Race relations in the armed services were fine. It was the race relations when you left the military base that was a problem. The captain I worked for helped me orchestrate the protest with the two-dollar bills and meeting with the Advocate General. The captain was from Lofton, Texas. I thought, *What is this guy doing, helping me – a Texan?* He was the most liberal, most informed person that I’d met. We met at his home where we developed the strategy, and he coached me on what to do and what not to do.

I didn’t have any problem when I was in the service on base. I got on well with people. I did what I had to do and tried to go above and beyond expectations all the time. I got promoted on time and sometimes before time. But I did my job. I didn’t circumvent anything. If you go in and do what you have to do and do it well, you’re always going to be on top. So, I had a great time in the Air Force.

**GARBER:** You did what needed to be done, did it well, got along with people. Were those innate character traits, or did you have to learn to behave in that way to succeed?

**ALLEN:** No, I was taught order, structure, diligence, and reaching goals at home. I have a basic foundation in those things. My dad taught us, if you do it, do it right. Do it right the first
time. I was taught that. I’m a very proud man. My daddy was a very proud and smart man. We knew what to do. I understand being a black man in America, and that sometimes you have to break down the barriers. The captain and all the people I worked with were surprised to see that I would take the initiative on things. But that’s how I was taught.

GARBER: You were a bit of a rebel. You mentioned that when you were in high school, sitting at the front of the bus, and later the two-dollar bill protest.

ALLEN: I believe in pushing the envelope sometimes in a creative way. It’s not being a rebel, it’s standing up for what’s right. That’s what I do. A lot of folks at the base, from New York or Chicago, accepted the status quo. I just felt that I had accepted enough at LSUNO, and that it was time for me to help make a difference and change things, in the right way. I think the Advocate General was impressed, first of all that I would come up to see him about these things. But also, I learned the political game of life. My dad taught me the game early. You have to stand up for what you believe.

GARBER: You were serving at a time when there was an escalation in the troops in Vietnam. Did that affect you at all? What were your views towards the war in Vietnam?

ALLEN: Being in the military, I didn’t have a view, to be very candid with you. When you get a call to duty, you go. Also, I was in the Air Force. The Air Force was not on the ground that much, so I had a pretty comfortable job.

I really had to gear up when they had the Cuban missile crisis. I was stationed on a large Strategic Air Command base, and it was put on full alert. That was where the bomb was and the fueling tanks. I had to get involved and be more assertive in raising my visibility and administrative management expertise.

My brother was in the Vietnam War. He was in the Army and got wounded. But I didn’t really have an opinion about whether we should be in the war. When you’re in the military, it’s okay to protest about housing. But you can’t be in the military and protest against your boss, the President of the USA. So, I didn’t really think about getting involved with why or whether it was right or wrong, because if you’re in the military, you can’t protest. You signed up for duty.

GARBER: What happened next after you were discharged from the Air Force?

ALLEN: I decided I wanted to go and tackle LSUNO again. I had been around the country and done a lot of things. I had matured, and I’d learned the politics of working in a system without being dominated by that system. So I went back to LSUNO.

There was a Dean of Students there who I thought was very good. After I enrolled at LSUNO, I was informed that there was an opportunity to integrate Delgado Trade and Technical Institute in New Orleans. There was a program called the Manpower Development Training Act that was sponsoring this training in which you would go to school for about ten months. There was drafting and an executive secretary program. In ten months, I’d be able to get out with a skill, and I had a wife and two kids at that time. I talked to the Dean at LSUNO about the program. She said, “Percy, go over there and try it out and see if you can get in. If you can get in, I’ll give you a couple weeks to see how things go, and you can come back if you want to. It won’t change anything.”
I applied at Delgado and took a test, which they told me I failed. I said, “Failed the exam?” They said I didn’t have a mechanical aptitude. Then I met with school officials and told them that when I was growing up, I had a hammer, a saw, a screwdriver, a pair of pliers. I didn’t understand all those instruments there. I asked them to let me into the school. If I didn’t keep up, I would leave. So, they let me in. I finished with a 95.4 average. You can’t measure determination. I went back and told the Dean I was doing fine, so I finished there and went back to Detroit.

GARBER: You were willing to go in and integrate Delgado after your first experience at integrating LSUNO had been so difficult?

ALLEN: Yes, but I had over four years in military service. I’d met a lot of people. I’d seen a lot of the country. I had sharpened my skills on how to be a master of the game called life.

GARBER: You grew up in New Orleans. You were in the service in Michigan, then went back to New Orleans for a short time for schooling and then back to Detroit again?

ALLEN: Yes, that’s where my wife was from, plus I knew that’s where the opportunities were. I took my portfolio and my car and I got a U-Haul. I put my wife and kids on the train, because I didn’t know whether the car was going to make it there or not. But I got to Detroit with about $3 in my pocket. That was it. I was scared to death.

I took my portfolio and started visiting companies to pursue employment. I went out to Chrysler and met Herb Trexler, in defense engineering for Chrysler. I had my portfolio and he said, “This looks good,” and hired me. Now, I was the first black in that division. When I got hired, I didn’t know about the pay scale. I didn’t know how much to ask for. I didn’t know anything about salary negotiation. When I was back in New Orleans, in the evening I was working for $1.25 an hour after school in the shop where they sold hamburgers.

I’d say, “Good morning” but only a few people would respond. At Chrysler, there were big drafting tables. The guy sitting next to me would get up, take his newspaper, and take breaks all day long. Well, I wasn’t accustomed to doing that. I learned a lot from just watching others.

There were two quality control officers who checked your work and one day they called me over to their table. They said, “Percy, what’s your title?” I said, “I’m a junior detailer.” They said, “You do very good work. You should be higher than that.” I said, “Okay, thank you for bringing that to my attention.” The very next morning I was at Herb Trexler’s desk. I said, “Herb, I want to be a senior detailer. I think I can do that work.” He said, “You do?” “Yes, sir.” He said, “I’ll look into it.” About three days later, he came to me with a promotion, saying, “Now you’re a senior detailer.” From that time on, he promoted me on a timely basis. Herb Trexler was a very fair man.

I started at Chrysler as a draftsman. Then there was the opportunity get into the Management Training Program. The management program was in the automobile-production side of the industry. I had been working on the tank-making side when I was at Chrysler. I trained and became a quality control manager for Chrysler in the auto plant. I was probably the first black quality control manager. I think the background in engineering drafting helped me a lot.

Then the automobile industry began to decline. I went back to Chrysler defense engineering. I was out there to talk to the Human Resource manager, and he was telling me, “Well, you know, Percy, if we bring you back, you’ll have to be at a lower level.” Then I saw the CEO of
that area and he said, “Percy, how are you doing?” I said, “The automobile industry is going down the tubes and I want to come back. But they are telling me I’ve got to take a pay cut. I can’t come back as a senior draftsman.” He said, “No, let’s go back in there.” He gave me a top drafting job, and I did that for a while.

My dad passed in 1969. He had always wanted one of his children to finish college. I thought about it for a long time. I went to my wife and said, “What do you think about me going back to school and getting a degree?” She said, “Well, Percy, I don’t know.” I said, “We can sell the house, sell the cars, sell the travel trailer. I promise you that when I finish, you’ll get to move into a new house twice the size of this one.” She said, “Percy, if you really want to do this, let’s do it,” and we did. She was also working at one of Chrysler’s auto stamping plants.

We sold the house. I went to Oakland University where I enjoyed pursuing my academic credentials. I was working, too, while I was going to school. I went there with eleven credit hours, and I finished a four-year program in two years. It was academic work around the clock. After that, I decided to go to graduate school. When I graduated from Cornell University in New York, we bought a new house. My family moved into this brand new house on an acre of land. I fulfilled my commitment and promise to my wife. That had been a journey. I was serious about education, and I had an opportunity. I couldn’t fail, and I didn’t have time to play. I remained focused.

GARBER: Before leaving the subject of the ‘60s and your time at Chrysler, I think it’s worth talking about the tumultuous social situation. There was a riot in Detroit in 1967. What was it like living in Detroit at that time?

ALLEN: When I went back to Detroit, within a year I bought a home. I worked at Chrysler as a draftsman during the day and as a janitor at an office building in downtown Detroit. I was involved in my church. On the day when the riot happened, I was out at a Chrysler company picnic. I came back and saw all the things going on. We were able to go through all the barricades to get to our home; and, once we got home, we were fine. There was a lot going on, not in my neighborhood, but there were streets that were blocked off.

At that time, I was in the process of looking at setting up a summer camping program for our church. I had spent a whole summer going to camps all around the State of Michigan. The riots were going on. Our first camping program was in 1968. I was the founder and director. The emphasis on camping and the outdoors changed the focus and moved away from the negative experiences of the riot. I began to deal with the healing process and doing something different and moving forward, especially in the minds of those kids. It was important that I did this program.

The camping program came about because when I was a kid, when you went back to school in the fall, the teachers asked you, “How was your summer? Talk about what you experienced.” Well, we didn’t go anywhere. We didn’t have any money. We didn’t do anything. The kids would come back and talk about where they had been. I started making up a story, “I went to Texas to visit my aunt and uncle.” I decided, Lord, if I ever have an opportunity, I want to found a program where I can expose kids from the inner city, so when they return to school from their summer break, they can talk about a substantive experience. That was the inspiration behind me starting the camping program. I was director for about six years.

The program lasted for 28 years. We took thousands of kids through these programs. I
looked forward versus looking backwards. I wanted to give hope versus despair. The camping program was one way of doing that, because we had horseback riding, fishing, Bible classes, and it was in the country. Some of the kids had never been outside of the city. When you give them that environment, and horseback riding, it was a beautiful thing! Seeing the smiles on their faces was very rewarding. We had a program that was very strict. You made your own bed, you did these things, you reported for KP—everybody, whether you were six years old or whether you were fifteen years old. So during that time, I was focused on the other things, and the riot wasn’t near me, but it threatened to come my way. There was a whole lot going on at that time, but I really focused on trying to do something different.

**GARBER:** How did you and your friends react to the assassination of the Reverend Dr. Martin Luther King, Jr., in 1968?

**ALLEN:** Oh, my goodness, it was devastating. I was in shock. You know, I couldn’t believe it. Then you say, well, people are unbalanced. But it set me back a bit. It set me back in my thinking, but also pushed me forward. You’ve still got to keep moving, keep pushing and try to make Dr. King’s dream come true. I usually take things like that and step back, then I try to look at it. What can I do? What can I do to contribute to the society in a positive manner? That’s how I was thinking at that time.

**GARBER:** In the early ‘70s, you were a student at Oakland University and became involved in running the residence hall system?

**ALLEN:** When I sold my home, I leased a place up there. I was studying with students and saw that the residence hall system was in disarray. Students were taking over the residence hall and head residents were afraid of students. Some of my camp counselors went to Oakland University, and they said, “Mr. Allen, you ought to take over this residence hall. You can do this.” I thought, Well, you know what? If I got the residence hall job, I would have an apartment in the residence hall. That would cut down on expenses and I’d have my wife and kids happy and on the premises.

I applied for the job, but they told me, “You have to have a master’s degree.” I said, “I have a lot of experience doing other things. What you need is somebody to come in and take over this residence hall, because the students are running it. You hire me, and I will make it right.” I convinced them. They had to go to the Board of Regents to hire someone without a master’s degree. At the time, I didn’t have an undergraduate degree.

I assumed responsibility for a 600-unit student residence hall. We moved into the residence hall, and I told everybody, “This is my home and your home, too, and I expect it to be treated as such.”

My assistant and I turned the residence hall into a desirable place to live because we taught, and we believed in, respect. We emphasized the importance of students completing their degrees in four years. They were expected to attend classes and maintain their grades. Professors volunteered to come to the residence hall and tutor students. There was a significant turnaround from an environment of chaos, disrespect, and intolerance, to a livable, functioning and peaceful learning community. Students were working with and respecting each other. The accomplishments were documented and presented by Jack Wilson, the dean of students, at a national conference.
I had a wonderful time. It was tough times but we changed the system. They didn’t expect it to make money for years. But the atmosphere in the residence hall, the lounge furniture, and the other amenities we introduced to make it comfortable, contributed positively to the atmosphere. People talked and had fun, enjoyed it, and that’s what it was supposed to be about.

The dean of students at Cornell University was at the national conference and was impressed with Jack Wilson’s presentation. He requested a meeting with me and offered me a job at Cornell. He had been the dean of students at Oakland before he went to Cornell. I said, “Look, I really didn’t intend to work because I know graduate school is tough.” He said, “I will arrange my schedule around your schedule – my meetings around your schedule – and I’ll hire your wife. I want you here.”

GARBER: Do you recall any memorable professors at Cornell?

ALLEN: There was an Economics professor who helped me a lot. That was the first time that there were that many African Americans at Cornell. I was not social. I had a family, and I was going to school to get out, and all I wanted was my degree. I knew once I got my degree, I would be leaving the area. I knew a research assistant by the name of Tom Peters, who was an assistant to the professors. He was a wizard in statistics, a brilliant guy who happened to be black. He was respected by all the professors. I hired him with my G.I. Bill money to help us with statistics. I don’t know how many of us there were, maybe fifteen in the class. Tom was the key for me passing that statistics class. You had to pass statistics to get out and go to the next year. He was very
supportive. He was the major factor with a challenging subject. The good thing about the professors there, and one of the things that I took away from Cornell, was that they were brilliant, but they also had experience because they were advisors and consultants to major corporations. So, they understood not only the academics, but the applications to the real world, and I thought that was a big value of the program.

GARBER: During the summers, you did an internship at Detroit General Hospital?²

ALLEN: I went to Detroit General because someone from the Placement Office called saying, “Percy, I think you’d fit this job.” I said, “No, I don’t want to work there,” because I had a job on campus in the summer. I went, and I didn’t know anything about the job at the interview. I waited about 45 minutes. The secretary kept telling me, “Be patient.”

I met Elliott Roberts there.³ When he turned around in that chair, I was surprised to see that he was African American. We talked. He said, “I like your resume. I like what you’ve done. I want you to come work with me.” I said, “Sir, I’d like to do that. But, you know, I’ve been in school. I don’t have suits and ties.” He said, “I’m sure you have some, but I’ll help you.” So he hired me. That was the summer of 1974, before I went to Cornell.

That was one of the best experiences I’ve had. I worked with Elliott, and he took me everywhere he went. He took me to every meeting he went to; and, returning to the hospital, we talked about what had transpired in the meeting. He really taught me the soft side of professionalism skills, the basics about what I had not been exposed to, like going to the Detroit Club for the big planning meetings.

Then I went to Cornell, and in the summer between my first and second year, I returned to work with Elliott at Detroit General. When I went back there, after about three weeks, one of the administrators passed away. So, they said, “Go take over the lab.” He coached me. Elliott Roberts is one of the major contributors to my success. He is a smart man. He was like my older brother. He molded me. I watched him operate, his mannerisms and his calmness. I wanted to work for Elliott Roberts when I finished Cornell, but I received an offer from Parkview Hospital. Elliott told me, “Percy, take the Parkview job. We need you in the nonprofit sector. You can handle the nonprofit system. That’s one of the primary reasons I took the job, because I really wanted to work for Elliott. But he told me, “Percy, you go out. You’re going to do well.” He is my mentor and my friend.

GARBER: The job that you’re talking about that he wanted you to move to was at Parkview Memorial in Fort Wayne.⁴ What was offered to you there?

ALLEN: I had sent letters out to many hospitals. I sent out 500, maybe 600, resumes

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² In the early ‘70s, Detroit General Hospital was a 475-bed city-owned teaching hospital. [American Hospital Association Guide to the Health Care Field, 1974 ed. Chicago: AHA, 1974.]
³ Elliott C. Roberts, Sr., was the CEO of a number of urban safety net hospitals, including Detroit General in the ‘70s, Cook County Hospital (Chicago), and Charity Hospital (New Orleans). His oral history: Garber, K.M., editor. Elliott C. Roberts, Sr. in First Person: An Oral History. Chicago: American Hospital Association and Health Research & Educational Trust, 2012, can be found here: www.aha.org/chhah (accessed Feb. 11, 2013)
⁴ Parkview Hospital (Fort Wayne, IN) is a large not-for-profit teaching hospital [AHA Guide, 2012 ed. Chicago: American Hospital Association, 2011].
when I was about to complete graduate school. Colleagues would ask, “Percy, what are you doing? 600 resumes?” I said, “All I need is one positive response.”

I received a letter from David Ridderheim, who was the chief operating officer at Parkview. I didn’t understand the letter, so I picked up the phone and said, “Sir, I don’t understand your letter.” He said, “We’ve got our final two candidates, and then I got your resume.” He said, “I was impressed. Would you come down?” I said, “Yes, I’ll come.” So I went there and I met with him. He asked me to come back, and he hired me. I was wondering why. Parkview Hospital was one of the top hospitals in the country at that time. The population of African Americans in Fort Wayne, Indiana, was about 13 percent. The patient mix at Parkview Hospital at that time had about 3 to 4 percent African Americans.

Prior to accepting the position, I was invited to David Ridderheim’s house for a barbeque. He had four girls and three adopted African-American boys. The chairman of the board came and he had a little African-American girl and he said, “This is my daughter, Sarah.” That’s my sister’s name, so I remember that very well. This was an indication to me that race and color did not mean anything to them. I took the job and never regretted it. David was brilliant.

**GARBER:** What was the position at the hospital?

**ALLEN:** I was hired as an assistant administrator at Parkview. At the organization, they had the CEO, chief operating officer, two assistant administrators, and another administrator who managed the foundation, and that was the composition of the senior team. I was hired to be on the senior team. I was responsible for various departments throughout the hospital.

At the time there were people who were reluctant to report to me. I was the first African American in that hospital at that level. There was one African American director who was responsible for the laundry. When I took over, I told them we’re going to respect each other and we’re going to make a difference and we’re going to be winners. That was my first meeting. I was trying to minimize their concerns.

It was a wonderful experience. I had some great team members. People became more comfortable, and we felt we could make a difference as a team. I believe in respect. I believe in fairness. Eventually we’ll get to know each other, but the main thing was to see how we could work together. No one wanted to leave when it was time to rotate. That’s how I worked, and I had a wonderful experience there.

At Parkview Hospital, everyone who worked there as an assistant administrator became a

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5 David S. Ridderheim, Jr., went on to become the President/CEO of Parkview Memorial Hospital through 1994. [Guide to the Health Care Field, various historical editions. Chicago: American Hospital Association.]
CEO later somewhere in the country. Stan Nelson at Henry Ford, Mark Slen – everybody went through there. They were very supportive. They implemented diversity initiatives and customer satisfaction reviews while everyone else was just talking about it. Also, customer satisfaction was part of the culture of the institution and was everyone’s responsibility. We’d go on retreats, and we’d talk about diversity, we’d talk about what we needed to be doing. Parkview was far ahead of the curve with customer satisfaction and quality.

Mark Slen, the CEO, and I played racquetball every Sunday night. Then we met every Monday morning at 7 o’clock – the chairman of the board, CEO, COO, and the two assistant administrators and the administrator for the foundation. Can you imagine that? A 700-bed hospital, an excellent hospital, with customer satisfaction always off the chart. I learned a lot there.

The hospital was also a pioneer in establishing shared services with rural and outlying hospitals. As an example, computerized EKGs were transmitted to the hospital for interpretation by the Chief of Cardiology and the results returned expeditiously.

GARBER: You talked about the high-level team that met every Monday morning. Are there other factors that you attribute to the fact that Parkview was ahead of the curve in so many aspects?

ALLEN: The leadership was progressive. Fort Wayne, Indiana, was a stressful place to be as an African American at that point in time. Can you imagine having a great hospital with no problems, and then you bring an African American in, and no one had seen an African American at that level? That was progressive. I think they brought me in because they thought I could make a difference. It was give-and-take and sharing. I was involved in the community. I was the president and chairman of the board of the Fort Wayne Urban League. I was on the board of the United Way.

David Ridderheim was insightful. I went there in May or June. In November that first year, he sent me a card at Thanksgiving. He wrote on the card, “Percy, I want to thank God for sending you to us,” and he included a bonus in there.

GARBER: Is Mr. Ridderheim still alive?

ALLEN: Yes, he’s still alive. He became the CEO, and he’s retired now. He’s still living in the Fort Wayne area. One of the reasons I left was because I saw that David Ridderheim had been there 12 or 15 years. Mark Slen had been there maybe 20 years. Now that was quite a team. I knew I wasn’t going to take David’s place, and David wasn’t going to take Mark’s place at that time. I looked around and talked to them about it. I decided I wanted to grow professionally or move on. It was a wonderful experience, but I didn’t see an opportunity for advancement.

GARBER: You served on the board at the Urban League and United Way. What were those experiences like?

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6 Stanley R. Nelson became CEO of Abbott-Northwestern Hospital (Minneapolis) and later of Henry Ford Hospital (Detroit) after serving as an assistant administrator and then CEO at Parkview in the ‘50s. [2000 Directory. Chicago: American College of Healthcare Executives, 2000.]

ALLEN: They were great experiences. I served on other boards there also. But the United Way was where all the money was, and I was the Chairman of the Planning and Allocations Committee. I was the chairman of board of the Urban League for a couple years, and it was a great experience also because the Urban League was about jobs and programs.

I hadn’t realized how powerful and how expansive the Urban League was until I went to my first national meeting, and I saw thousands of people. But I enjoyed it, and people were great, and then I really became involved in the Urban League and served on national committees. We had a great director in Fort Wayne - Gayle Greer. She was a great person, creative, innovative. We had a good board and did a lot of good things for the city, particularly in the area of staff training and development, business relationships, and economic development.

GARBER: Did you learn any lessons about governance that you were later able to apply to situations when you were the CEO of hospitals?

ALLEN: I learned a lot about governance prior to that, because I was also on the board of trustees at Mount Moriah Baptist Church. I was the youngest trustee ever. That’s where Reverend Dr. Benjamin Hooks was the pastor, and he also was the Chairman of the NAACP.8 I was young compared to other people when I was put on the trustee board. I watched that operation. I watched Elliott Roberts handle a board, too. So, I was exposed to things that you normally don’t get exposed to. Remember, I was an older student. I learned some from the Urban League about dealing with people – all boards are about dealing with people – not just controlling the board, but letting people express themselves. You have to be a great listener, but also know when to say, “Okay, now, thank you very much. Let’s move on.” I was able to get first-hand experience.

The key is dealing with people. A leader needs to address what’s on the agenda and not get personal, and then get people to feel free, that they can communicate their thoughts. There are talkers on the board and there are listeners. You’ve got to make sure that you get the listeners to talk sometimes.

GARBER: The next place that you served was at Sinai Hospital of Detroit for three years in the early ‘80s. You were now about 40 years old. There was an opportunity that became available at Sinai.

ALLEN: I went there as the senior associate administrator. I reported to the chief operating officer, Arnold Kimmel.9 He’s the one who hired me. I was one of two senior associates reporting to Arnold. Then he left, and that’s when they made me interim COO, reporting then to Irving Shapiro directly.10

GARBER: Sinai was another big private hospital like Parkview. This is now the early ‘80s,

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10 Irving A. Shapiro had been with Sinai Hospital of Detroit since 1970, moving into the top leadership position in 1979. [1984 Directory. Chicago: American College of Healthcare Executives, 1984.]
the beginning of the Reagan Era. In 1983, President Reagan signed the legislation that created the prospective payment system. This was a huge change in the way hospitals are reimbursed. How did that affect Sinai?

ALLEN: It affected Sinai like most hospitals. The hospital had to change its whole view on how to do business. Sinai began to lose money. The hospital was at one time doing very well. The problem with Sinai was that its core supporters – the Jewish community – were moving out of the city to the suburbs. A change then appeared in the patient mix. The issues were: how do you maintain and grow in a community that’s changing; and, how do you get people to come back to Detroit? The plan was to build a suburban hospital in West Bloomfield Hills.

When I was there, my focus was on how to sustain the business. To do that with the prospective payment system, you need to deal with partnerships. I was in the position of saying, “We need a partnership with this nursing home so we can get patients out of the hospital.”

What I did was work with the Hartford Nursing and Rehabilitation Center across the street. We’d get these patients out of the hospital and put them in an appropriate place – a nursing home. I started doing that and during the two years I was there, we made money. I worked with the physicians to educate them on what was happening and how we had to do business differently and that we could be successful. We collaborated with each other, and we did very well. The new hospital being built in the suburbs also gave another opportunity for them to have practices. We had to sustain the inner city, and I encouraged them to be flexible.

Also, we did some creative things – we did some renovations, because we realized that you’ve got to attract the privately insured, and hospital aesthetics are important. Everybody wanted these patients now, and they wanted to get them in and get them out. People adjusted to that fairly well. Sinai did. When I left, they were making money.

GARBER: What other strategies did you develop to sustain the inner city hospital besides the development of partnerships with post-acute care facilities?

ALLEN: We focused on primary care and preventive care issues. We also tried to get community physicians involved so that preventive care could be introduced early. If you’ve got patients in – you need to have a place to transfer them afterward that was of good quality. You would not get paid for those long lengths of stay that people were accustomed to. Emergency room visits could be minimized and length of stay reduced for hospitalized patients.

People resisted change, and we had to find an effective method of communicating to emphasize the current regulatory changes and the importance of their role in addressing and implementing new strategies. This was accomplished through numerous one-on-one meetings with the physicians. They finally realized the importance of their input and cooperation. I like to meet with physicians one-on-one – chairman, chiefs of departments – meet and explain and talk about it and find out, “What’s the pushback from you? Why? How can we meet in the middle here?”

GARBER: Was Sinai in discussions as far as partnerships with other hospitals?

ALLEN: I don’t think so. I don’t think Sinai recognized that maybe they should begin to look at other partners. Because they were building out in West Bloomfield, they weren’t looking at partnerships at that time.
GARBER: After you served at Sinai, you moved on to New York City?

ALLEN: Yes, I was in New York for fourteen years. I was in Brooklyn. I was in Manhattan for three or four years with the Health and Hospitals Corporation who recruited me to New York. I was there in 1984 or 1985 – something like that. I really never wanted to go to New York. I had an opportunity to go to New York when I finished at Cornell, but I said, “No, I don’t want to go to New York.” After a while, when they recruited me, I thought about it. I prayed over it. I said, “Lord, is this what you want me to do?”

CONVERSATION DURING THE BREAK

GARBER: Did your family enjoy the years when you were a student?

ALLEN: When we were at Oakland University in Michigan, my kids thought they had the biggest house in the world – the residence hall – and a nice apartment. At Cornell, my kids didn’t know I was a student. They thought I was a professor or something. I should have told that story in my previous discussion. When I went to Cornell, for the whole two years of school, the maximum amount of sleep I got per day was four hours. I didn’t sleep. What I did was, when my kids were in school, I’d make sure I’d be home when they came from school and we ate dinner together. Then I helped with their homework. Then they’d go to bed. Then I’d go back to work at Cornell. So they never knew I was a student. They didn’t really understand. They didn’t know. It was a wonderful education for them because they learned to ski up there and they had a great time. But they didn’t know their dad was really a student. They had a nice apartment and I had a job and my wife had a job with the university. Our schedules were flexible, so one of us was going to be home when the children arrived home from school.

My wife was instrumental in taking that risk with me back then. She passed away several years ago. She agreed that I would take a leave of absence from Chrysler to go back to school, sell the house, sell the cars, sell the travel trailer – that was a big commitment. Agreeing to and supporting that move was the first step to getting me where I am today, because without the degrees, I wouldn’t be what I am. She was a super role model as a mother to the kids. That’s important. I just wanted to share that.

INTERVIEW PART II

GARBER: Could you tell how you made the career change that took you to the New York Health and Hospitals Corporation?

ALLEN: I had said I never wanted to work in New York. That proves that you shouldn’t say “never.” A recruiter asked me to look at the job as the CEO of one of the Health & Hospitals Corporation
I went up and looked at the hospital and met with Steve Lenhardt. He said, “I’d like you to meet the President, Dr. Jo Ivey Boufford.” I met with the president. At lunch, she said, “With your experience, I’d like you to consider working here in the corporate office. We don’t have anybody with actual hands-on hospital experience in the corporate office. I think you’d serve us better here.” I asked what that entailed. They said, “We’re creating this job. We don’t have anybody who’s in that position now.”

About a week or so later, I accepted. Instead of going to work at the hospital, I was in the corporate office, responsible for the affiliation contracts, but I also worked on Joint Commission compliance with all of the hospitals in the system. I did that for a while, but I missed hospital operations. At that time there were problems at North Central Bronx Hospital. I said, “Let me go there and work with the administrator, and then we’ll see what happens. I kept my job in the corporate office, but I expanded it by going to North Central Bronx. Eventually, I took over North Central Bronx as the CEO, but I still had responsibilities to the corporate office.

I worked at North Central Bronx for a while, and then I got a call from a search firm asking me to consider a job as CEO at Downstate Medical Center University Hospital. I was happy in my current position and working with Dr. Boufford, so I declined. They were persistent – and I finally went for an interview with Donald Wilson, M.D., chairman of medicine, at his home and had breakfast with him. I told him I wasn’t going to take the job until I met the president.

I met with Ross Clinchy, assistant to the president of the University, then I met with Donald Sherrill, M.D., president, and then I decided to take the job. It was a good move. I told Dr. Boufford and Steve and it was fine with them because they thought that it was a good opportunity. We were very close, and they were very supportive in all of the things I had done at the Health and Hospitals Corporation.

The job at University Hospital was quite a challenge. There had been no CEO who lasted more than three years there. I don’t know what happened, but it was a tough job. I had never been at a university hospital before. I said to the president, “I want to clarify my reporting relationship.” We discussed it, and the result was that I reported directly to Don Sherrill, the president, along with Richard Schwartz, the dean. It was nice to see the young people receiving medical degrees, and I enjoyed medical school graduations. I enjoyed it a lot.

I learned a great deal from Dr. Don Sherrill. He and I used to ride back and forth to the capitol, Albany. One thing he taught me. He said, “Percy, what you need to make sure you do is always ask the right question.” That stuck with me and now I use it all the time.

GARBER: What does it mean to ask the right question?

ALLEN: We might ask an administrative team member, “How are we doing with the

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13 University Hospital of Brooklyn-State University of New York Health Sciences Center at Brooklyn was a 377-bed teaching hospital in the late ‘80s. [American Hospital Association Guide to the Health Care Field, 1990 ed. Chicago: AHA, 1990.]
computer installation?” “Well, we’re doing all right.” But, the right question is, “How are we doing, and when is it going to be completed?” That’s a different way of approaching it; you frame the project installation. You get an end. The conclusion is not dangling out there. So, you need to ask, “Now when can I expect it to be installed?” That’s an example.

GARBER: It takes courage to ask the right question, doesn’t it, because you’re putting people on the spot?

ALLEN: Yes, putting them on the spot. But I think what you’re doing is you’re teaching them to complete staff work. When they understand that your expectations are high, then their expectations become high. It’s also developing people

GARBER: What were the most significant challenges that University Hospital of Brooklyn faced during the ten years that you were CEO?

ALLEN: We did some innovative things about how the hospital looked. I met with the physicians and we made a commitment that we were going to change. The old art they had on the walls didn’t reflect the community. We took everything off the walls and put up new art. People said, “Percy, you’re putting this art up. Somebody’s going to steal it.” That’s what they thought. The whole ten years I was there, not one piece of art was stolen from the wall. I realized the community wanted to be exposed to beautiful things and that they would take care of it.

Then I met with people. I had town hall meetings, talked about where we were and how people could help us move in a new direction. I spoke to everybody; that was a change of culture. I said, “Good morning,” the little things that people may overlook in New York City.

I sent everybody a card on their birthday, and I’d randomly select a few who would come have breakfast with me. Then I did it at night for the night shift. People would tell me, “Mr. Allen, you know what? I’m here at night. I walk around and see all this beautiful art. It’s wonderful.” We put up a canopy, planted beautiful flowers and the lawn was green. The employees loved it. Our customers loved it. The physicians loved it. It changed the culture.

Then I tried to instill a “we can do” attitude. We reduced our expenses; we became creative. We invested $70 million over a five-year period. We upgraded the OR suites, the lounges, the patient rooms, the lobby. Our patients and stakeholders deserve it, and when you come in to work, you deserve to have a pleasant entry. We renovated the hospital exterior.

All that happened, and people bought into it. People were very productive. I empowered the team. I had a good team – that was another thing. I hired good people who were creative. All these things came into place. We were in the *U.S. News and World Report* in the top ten categories. We had several of our specialties, including cardiology, endocrinology, cancer, and neurology, that were in the top ten. No one ever expected us to rank so highly, because we were in an urban area. We excelled because we believed in each other and functioned for the greater good of the community we served.

The whole culture changed. You have to believe in people, and I believed in the employees and the community. It became a beautiful place. People took pride in the hospital, and you can’t underestimate people’s determination. When they come together, they can move mountains. That’s what happened there. I enjoyed it.
We went into the community. We had a community center. We also put a clinic in a school that was not too far from us, and the primary care physicians provided services there. We opened a Caribbean women’s health center. I went to the community physicians and met with them and convinced some of them to open offices in the community.

One of the things that happened was that people underestimated me. I still talk like I’m from Louisiana, so people think I’m a country boy and don’t understand things. I’ve always liked people to underestimate me, but I never underestimate people. I met with all the legislators, state and national. I had breakfast with them and with other community leaders and shared my plan with them. There were some negative things between the community and the university hospital when they were building it. In the past, people had chained themselves around the building in protest.

GARBER: Why?

ALLEN: Because they were protesting building the hospital at that time. I don’t know the details but it was a hostile environment. I asked a physician, Dr. Frank Folk, about one of the leaders, who was very powerful in Brooklyn, “Do you know him? See if you can set up a luncheon. I’d like to meet him.” I met with him, and we talked, and he said, “Brother Allen, I like you.” I said, “Well, you know, I’m just telling you how it is. You need to come by and visit. Let me take you around.” He came to the hospital, and we went on a tour. He said, “You know what I’m going to do? I’m going to have a breakfast with a group of ministers.” He had about 20 pastors from the other churches, and he invited me to speak to them. He told them he believed in me. As a matter of fact, he never used any hospital but Downstate after that. I said to them, “I don’t know exactly what happened years ago, but here’s what’s happening today. Here’s what I’d like to do, with your support.”

GARBER: It sounds as if your outreach activities in all these different activities – the clinic in the school, the Caribbean women’s clinic, and then talking with the community – bore fruit in many ways for you.

ALLEN: It absolutely did. The other thing I did that was unique was that we didn’t have an emergency room. The trauma center was across the street. We opened an emergency department that provided excellent and timely services, which was a viable and customer-friendly option for the community. It was also a valuable asset for the hospital and a source of referrals for the primary care physicians and specialists.

Another story that’s interesting. I met an elderly lady in the hallway who was turned away because she was late for an appointment. I took her back to the Ophthalmology Department and spoke to the chief. She was seen as scheduled. I saw that lady a few weeks later, and she was still appreciative.

I recall visits to Charity Hospital with my mother. She was given a number and moved up on benches until her number was called. She was never called by her name. I remember these

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13 University Hospital is located across Clarkson Avenue from Kings County Hospital Center which, in the early ’90s, was operating three times the number of beds as University and was owned by New York City Health and Hospitals Corporation. At that time, Kings County had an emergency department and a trauma center; University Hospital offered neither. [American Hospital Association Guide to the Health Care Field, 1991 ed. Chicago: AHA, 1991.]
experiences and have tried to correct them so that nobody in a facility run by me is ever treated like less than a human being. Respect and dignity have been the foundation of my philosophy.

These principles permeated the hospital. Employees knew how I felt about people, quality, excellence, and I believe the culture reflected that. That’s how we changed the institution. I had outstanding physicians, nurses, and employees on the team. I was very fortunate and very blessed, because they believed that they could make a difference.

I attended luncheons, breakfast meetings, and town hall meetings. People felt I was approachable and sincere. I cared, and I believed that we could excel and exceed all expectations. Therefore, they began to believe it, and that’s how we were successful.

**GARBER:** Is there anybody in particular that you would like to name?

**ALLEN:** Several people – Sandra Gould\(^{14}\) – she was exceptional; Richard Greene, chief operating officer; Jamesetta Boyce, chief nurse; Joel Celestine, chief financial officer, and the physicians, chairmen of the clinical departments. These are just a few of the names on a long list of people who supported my vision at the hospital. I found that the best way to ensure that the entire staff was on board was to hire creative people, empower them, give them the authority to make changes and hold them accountable for their actions. That’s been my philosophy throughout my career, and that philosophy helped make me successful. The people who believe you and trust you – they’ll go an extra mile for you, and you can believe and trust them.

When I had senior staff retreats, I invited the spouses/significant others to attend. This gave them the opportunity to interact socially with the team, and I could personally express my appreciation for their support during challenging times. This worked for me.

**GARBER:** What made you leave University Hospital?

**ALLEN:** I retired in early 1999 to join my wife, who was already retired.

A recruiter called and said, “Percy, I know you’re retired, but I want you to look at this job.” I thought about it, and said, “Well, I'll look.” A colleague, Everard Rutledge, encouraged me to look at the job. I interviewed for the position at Bon Secours Baltimore Health System and was offered the job. I committed to five years. This was my first experience in a Catholic health system. There were numerous challenges, but I take pride in turning problems and challenges into opportunities with successful outcomes.

Prior to my appointment, there was a decision to demolish Liberty Medical Center (previously known as Provident Hospital). There were community concerns and objections because this had been an historically African American institution. I was facing my first challenge. I immediately convened staff meetings and developed a plan to convert the site into a memorial garden that would reflect the contributions that were made by the community in maintaining Liberty over the years. It would be named Trinity Garden and serve as a peaceful oasis of flowers, trees, ponds with fish, bridges, benches, and a memorial wall with the names of contributors.

I was ready to share the plan with the community leaders. They were scheduled to meet at the summer home of Elizabeth Adams. Mary Demory, director for community relations, arranged an invitation for me to speak with them. I was not sure what to expect. I discussed the plan and asked for their support. They were surprised and impressed when I went out to the car and brought in the detailed layout plan for their review. They were very supportive throughout the process. The hospital was demolished; the garden was built; and the beginning of open communication and trust was established with the community.

I realized that there were still outstanding issues with the community that needed to be addressed. I spent time in the community because I believe in one-to-one communication. People are more likely to ask questions, judge your sincerity, and respond more positively when you are meeting face-to-face.

Although the Bon Secours hospital facility was old, we were able to build on several initiatives that were in progress. In fact, there were three senior citizen complexes that were already built, and I added two additional complexes. Physicians were encouraged to return, and a replacement of capital equipment began. Primary care services, physician offices, psychiatric services, and the fitness center remained on the Liberty campus. The community surrounding the hospital was our focus. There were no banks in the community, and the cash checking businesses exploited the customers because of the fees charged to use the service. We got a credit union to agree to open. The Bon Secours Foundation community center provided GED certification classes, home ownership counseling, job placement, and parenting classes. We also met with community organizations, private corporations, the city, and the state to begin a strategic plan to rehabilitate the west Baltimore community. Five hundred housing units were transformed into attractive apartments for low and middle income families. We took back the community, one block at a time.

Next, I had to begin financial restructuring and staff reduction through attrition. In the meantime, we had to change the culture to one that had a winning attitude. The staff was concerned about the possible closing of the west Baltimore hospital because of the closing of Liberty hospital. I had to reassure them that “nothing was going to go under on my watch.”

I used some of the same methods from the past to reassure the staff. I had town hall meetings with the staff, also sent cards out for their birthdays, and had birthday luncheons once a month. We would randomly select a group of people to attend the luncheon. Those were communication systems, getting people to believe that we’re going to stay there.

I used to eat in the cafeteria regularly. One day when I was having lunch, an employee said, “Mr. Allen, may I ask you a question?” I said, “Yes.” I got up and I went and sat with her. She said, “Mr. Allen, I want to buy a home, but I keep hearing that the place is going to close.” I said, “Let me tell you this, if you can, buy two. Go on, get your home.” Two years later, I saw her. She had bought that home. She said, “Mr. Allen, you were right.”

There were several challenges in the meantime. It wasn’t easy, but every challenge is an opportunity; as an example, communication with the physicians. Physicians are very important, and they have to be part of the strategic planning process. We needed to have intensivists in the Bon Secours ICU, so I went and spoke to Donald Wilson, M.D., dean of the University of Maryland Medical School. We developed a relationship and contracted with them so that they would provide intensivists in the Bon Secours ICU. In addition, we eventually put in a service robot camera that
was used by Dr. Neal Reynolds to visualize and monitor ICU patients from his computer at home.

We met with legislators and received funding to renovate and expand the emergency room, brought in new capital equipment. We needed an MRI, ours was not state-of-the-art. The Bon Secours system had other hospitals putting in new equipment. I said, “I’ll take their used equipment.” We got it, had it all shipped, checked it to make sure everything was fine, and installed it.

I started brokering deals everywhere, trying to get the right equipment in, and we were successful. The Bon Secours corporate office was very supportive in a lot of these initiatives. There was a board chair by the name of Arnold Williams. He was outstanding, very supportive, and he also was creative. I also had a regional senior executive by the name of Chuck Neumann, who was very supportive. We went up to the corporate office several times, explaining our situation and our solution. I think you not only have to deal with the problem, but you also need to have a proposed solution. Too many times we complain, but don’t have any recommendations. We went with a plan to take care of the problem.

Bon Secours was a wonderful place which I enjoyed. It was another superb team of people. I can’t express the importance of having good people who are willing to stretch the envelope, who are willing to give you 150 percent, and people don’t give you 150 percent until you demonstrate that you deserve it. It’s a contract, not written, but a commitment with the same objectives. I took all these challenging jobs, and people would say to me, “You’ve got to be out of your head!” But there are solutions to most problems, if you are willing to sit down and negotiate.

I was speaking to a graduating class several years ago, and I told them, “You’ve got to negotiate. You can’t come out with everything. You have to have a win/win attitude. The other person has got to leave with something. If it’s 10 percent, 20 percent, 30 percent, but it’s got to be a win/win situation. When people feel that they got something out of the deal, they’re more willing to make it work.”

GARBER: At the Bon Secours system had they changed to lay leadership?

ALLEN: Yes, they had lay leadership through the system; however, Sister Pat Eck was the chairman of the board of the national system, and Sister Anne Lutz was the executive vice-president for sponsorship for the region.

GARBER: Was there anything else that you wanted to add about your time at Bon Secours?

ALLEN: I enjoyed the people. I enjoyed the challenges. I enjoyed the results. I also enjoyed the support that I received from the Sisters of Bon Secours, the corporate office, my board, and the support I received from the community and my co-workers. I earned their support, and the rewards were that, at the end – we provided excellent care with respect and dignity, and we made a difference in the quality of life for people in the community. That’s all you can ask. We were challenged, but it was fun. I have no regrets there or any other place I went, because when I left, it was a better place than when I went in.

GARBER: Are there one or two things that you wish you would have done differently at Bon Secours?
**ALLEN:** Yes, there are some things. I made some mistakes. I wasn’t perfect. There were some changes I made in the medical staff that could have been done differently, but I went back and apologized. It turned out to be the best decision for the institution, but I could have gone about it a different way by communicating more effectively to one of the doctors who was involved.

**GARBER:** Let’s switch gears a little bit. Would you like to talk about your experience with NAHSE, the National Association of Health Services Executives?\(^{15}\)

**ALLEN:** Yes, of course! Elliot Roberts introduced me to NAHSE when I was a student. NAHSE has been an integral part of my career. I was very fortunate to be around Haynes Rice,\(^ {16}\) Everett Fox,\(^ {17}\) Elliot Roberts, Hank Whyte,\(^ {18}\) and many others – the founders of this organization. These are the people on whose shoulders I stood to get where I am today. To interact and have lunch with some of the founders and leaders was quite an honor, plus it was educational. NAHSE is celebrating its 44\(^ {th} \) year and I have been a member for 39 years.

NAHSE is an organization that has made a difference, especially since one of its goals is to ensure greater participation of minority groups in the health field and to more effectively have input in the national delivery system. When we were talking about health care reform during the Clinton administration, I was the elected president of NAHSE and we were able to be part of that process.

Twenty-seven years ago, Elsworth Taylor recommended that NASHE convene its own educational conference to provide a forum for talented African-American professionals to participate as presenters. He was the mastermind behind the organization’s educational programming.

At the first meeting, we had maybe 35 attendees, but now there are over 600 attendees and a large selection of outstanding presenters. As part of our goal to develop young health care leaders, we established the Everett Fox Case Competition where students from across the country participate and the winning team receives scholarships.

We had a joint venture with ACHE to look at the disparities in health care leadership. I give credit to Tom Dolan\(^ {19}\) for his interest and participation. We conducted a study with a team from ACHE and a NAHSE team led by Nat Wesley.\(^ {20}\) We had a press conference about the study outcome on the race comparison of career attainment in health care management. The study continues and now includes other ethnic groups. These are some of the initiatives that NAHSE.

\(^{15}\) The National Association of Health Services Executives was founded in 1968. [www.nahse.org](http://www.nahse.org) (accessed Feb. 11, 2013). There is a detailed published history of NAHSE, which was used for information in some of the footnotes below: *National Association of Health Services Executives: 40 Years of Breaking the Color Line in Health Care Management.* (Washington, DC: NAHSE, 2008).


\(^ {18}\) Henry J. Whyte was the administrator of Flint-Goodridge Hospital (New Orleans) and a founder and second president of NAHSE. [1979 Directory. Chicago: American College of Hospital Administrators, 1979.]


\(^ {20}\) Nathaniel Wesley, Jr., has served as the historian for NAHSE.
engaged in.

We started a program where we went to other industries – Abbott, Baxter International, and ServiceMaster – to partner with us as sponsors of some of these programs. Now we have major sponsors of our national conferences. As the president of NAHSE, I used to take some young up-and-coming administrators with me when we went to meet with the CEOs of these various corporations. It was a learning experience for them. One of them was Andrea Price, our current president. That’s what NAHSE does, cultivate young executives; some of them are now presenters at some of our national conferences.

It’s a network of health care leaders. We’ve got members who are leaders of major systems, such as Lloyd Dean, Kevin Lofton, Bernard Tyson, Clifford E. Barnes, and Robert Johnson to name a few.

Have you seen the book on the history of NAHSE? All the past presidents like Andre Lee, Deborah Lee-Eddy, Howard Jessamy, Robert Currie, Patricia Webb, and William Jackson. I interacted with them, learned from them, and shared with them. To me, that’s the greatest thing. In the process, I have had the privilege of mentoring hundreds of people in the health care field, and to see them now and the success they have attained is a blessing.

GARBER: Do you have any advice that you’d like to give to young people considering a career in health administration?

ALLEN: I think it’s still a great career to pursue. When young people go out into the field, they think that what they learned in school is how things operate, but sometimes it’s not that way. School gives you the basics. But it’s relationships, it’s networking, it’s having the right skill set and determination. However, I am impressed with how articulate and talented the young mid-level managers are.

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I tell young people that they can make a difference and they can be successful. They may have to look at different avenues because today it’s not just hospitals, it’s systems and ambulatory care centers, insurance, group practices, and others. That’s why I enjoyed Baltimore so much – they had housing, fitness centers, preventive care – they had everything.

Don’t expect to be a CEO in two years. I always tell people, sometimes it’s okay to be an observer in an organization and learn from those around you. As I said before, I think that you have to be willing to admit when you’re wrong. If you’re wrong, admit it and move on. Don’t make excuses for your mistakes.

This is a challenging field with lots of opportunities, and we need talented leaders. I encourage people to get into the field, but also, to find a mentor.

Also, I would suggest that they join the National Association of Health Service Executives. I encourage seasoned executives not to forget about NAHSE, but to continue to reach back and help someone.

At the conferences, I make it a point to reach out to as many people as I can and to encourage networking with as many of the executives as they can. Gray hair doesn’t mean lack of memory. Sometimes gray hair can help you get through some of the tough parts in your career. You don’t have to reinvent the wheel. Mentors can tell you where to push aside the bushes and move through rather than go try to cut down the trees. I think it’s a wonderful life and a wonderful career.

GARBER: Do you have any sense of what your legacy will be?

ALLEN: Well, no. I’ve been inducted in the Modern Healthcare Hall of Fame. I was given the first ACHE President’s Award by Tom Dolan, inducted in the NAHSE Hall of Fame, and now I’m doing this interview. I think my legacy is that I always had the time to help somebody along the way. I was never too busy to listen to their concerns. I hope that the legacy would be that I made a difference in the quality of life of the people that we served in the community. I hope I make a difference mentoring and taking time to help develop current and future health care leaders.

I’ve had a passion for health care delivery and encouraging people to collect African-American art. I’ve been blessed. I’ve come a mighty long way from that two-bedroom shotgun house in New Orleans to where I am today.

I have been fortunate to have a great family, a dynamic wife, a son, a daughter, five grandchildren, and six great grandchildren.
GARBER: That’s a wonderful way to conclude the interview. But before we do, is there anything else you’d like to add?

ALLEN: I appreciate this opportunity to share and hope that somewhere down the road people will be able to read this and it may be inspiring to them, as this whole career has been inspiring to me. I am indeed grateful. Thank you.

GARBER: Mr. Allen, thank you for your time this afternoon. We appreciate it.
CHRONOLOGY

1941 Born April 7, New Orleans, LA

1962 Married to Zennia McKnight Allen (deceased)
Children: Merrily Allen Jackson (1962), Percy Allen III (1964)

1959-1964 United States Air Force
Chief Administrative Clerk

1965-1971 Chrysler Corporation (Detroit, MI)
1965-1968 Engineering Draftsman, Senior Detailer, Management Trainee (1968)
1968-1970 Quality Control Supervisor
1970-1971 Engineering Draftsman

1968-1974 Greater New Mt. Moriah Baptist Church (Detroit, MI)
1968-1974 Summer Camp Founder and Director
1971-1973 Youth Director

1973 Oakland University (Rochester, MI)
Bachelor of Arts (Liberal Arts, major in economics)

1973-1974 Detroit General Hospital (MI)
Summer internships

1975 Cornell University (Ithaca, NY)
Masters in Public Administration

1975-1982 Parkview Memorial Hospital (Fort Wayne, IN)
Senior Assistant Administrator

Visiting Professor

1982-1985 Sinai Hospital of Detroit (MI)
Vice President, Administration / Interim Chief Operating Officer

1986-1989 New York City Health and Hospitals Corporation
1986-1987 Assistant Vice President / Hospital Operations
1986-1989 Senior Executive
1987-1988 Senior Assistant Vice President / Hospital Operations
1988-1989 North Central Bronx Hospital (Bronx, NY) Executive Director

1989-1999 University Hospital of Brooklyn SUNY Health Science Center (Brooklyn, NY)
1989-1999 Vice President, Hospital Affairs / Chief Executive Officer
1994 One of seven National Association of Health Services Executives (NAHSE) executives chosen to visit South Africa to provide and share expertise with South African leaders

1997 Married to Fay Malcolm of Kingston, Jamaica

1999-2006 Bon Secours Baltimore Health System (Baltimore, MD)
Chief Executive Officer

MEMBERSHIPS AND AFFILIATIONS

American College of Healthcare Executives
   Life Fellow; and, Member, Nominating Committee

American Hospital Association
   Member; and, Committee, Section for Metropolitan Hospitals

American Public Health Association
   Member

Association of MBA Executives
   Member

Cornell, Sloan Program Sesquicentennial Scholarship (SPSS)
   Member

Fort Wayne Urban League
   Chair, board

Greater New Mt. Moriah Missionary Baptist Church (Detroit)
   Member, board; and, Trustee

Greater New York Hospital Association
   Member

Indiana Hospital Association
   Member

Maryland Hospital Association
   Member

National Association of Health Services Executives
   President, 1991 – 1993
   President-elect, 1989 - 1990
   Member

Parent Teacher Association (Detroit)
   Member, board

Piney Grove Baptist Church
   Member; and, Trustee

Portsmouth Community Health Center
   Member, board

United Way of Fort Wayne
   Chair, Planning and Allocation Committee; and, Member
AWARDS AND HONORS

2012  Cornell, Sloan Program in Healthcare Administration announced the establishment of the Percy Allen II Sloan Lectures on Healthcare Leadership in Urban Communities

2011  *Modern Healthcare* Hall of Fame Inductee

2006  American College of Healthcare Executives President’s Award Recipient

2006  National Association of Health Services Executives Hall of Fame Inductee

2004  National Association of Health Services Executives, New York Regional Chapter established the Percy Allen II Senior Healthcare Leadership Award

1994  Congressional Award

1992  National Association of Health Services Executives President’s Award Recipient

1991  *Who’s Who in Health and Medical Services*

1980/1981  *Who’s Who in Black America*

1973  *Who’s Who Among Students in American Universities and Colleges*

PUBLISHED WORKS


(L to R) Dr. Andre Lee, Allison Lee, Percy Allen II, and Fay Malcolm-Allen

(L to R) Janice, Percy IV, and Nelson with Percy II

Thomas Dolan presenting the *Modern Healthcare* Health Care Hall of Fame Award to Percy Allen II
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