



January 14, 2015

UPS GROUND

Ms. Linn Becker  
Executive Director  
Hospitality House T.C., Inc.  
271 Central Avenue  
Albany, New York 12206

Re: Provider #170  
Operating Certificate #171210043  
PRU #692

Dear Mr. Becker:

Operating Certificate #171210043 is issued by the Office of Alcoholism and Substance Abuse Services (OASAS) pursuant to the New York State Mental Hygiene Law. This Operating Certificate renews authorization for Hospitality House T.C., Inc. to operate a Part 819 chemical dependence intensive residential rehabilitation service at 271 Central Avenue, Albany, effective January 1, 2015.

The three year term of the Operating Certificate is based on the scores identified on the attached *Operating Certificate Renewal Compliance Summary Sheet*.

Hospitality House T.C., Inc. is responsible for complying with applicable building occupancy limitations and securing any necessary approvals from other governmental entities.

This Operating Certificate is to be prominently displayed at the service site.

The Mental Hygiene Law requires services to be operated in accordance with the terms of the Operating Certificate. Therefore, please carefully examine this certificate and notify the Bureau of Certification immediately if it contains any inaccuracies.

Sincerely,

Janet L. Paloski  
Director  
Bureau of Certification and Systems Management

Enclosures

Ms. Linn Becker  
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cc w/encs.: Charles W. Monson  
Kathy Murphy  
Tim Donovan  
Janet Rucki  
Stephen J. Giordano, Ph.D. (Albany County)  
Kenneth McGuinness (President, Board of Directors, Hospitality House T.C., Inc.)  
James W. Jeffreys (Clinical Director, Hospitality House T.C., Inc.)

**NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES  
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION**

**OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET**

Provider Legal Name:	Hospitality House T.C., Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Intensive Residential Rehabilitation

Building:	
Room/ Floor	
Street Address:	271 Central Avenue
City and Zip Code:	Albany, 12206

Provider Number:	170
Operating Certificate Number:	1712 10043
Recertification Review Number:	AL14057
Recertification Review Conducted:	7/22/2014 to: 7/25/2014

PRU Number(s): 692 Capacity: 72

**RECERTIFICATION REVIEW COMPLIANCE RATING TABLE**

<u>Compliance Scores</u>	<u>Compliance Ratings</u>	<u>Term of Renewed Operating Certificate</u>
---	Quality Services Review	9 months
---	Red Flag Deficiency(ies)	6 months
0 - 1.75	Noncompliance	6 months
1.76 - 2.50	Minimal Compliance	1 year
2.51 - 3.25	Partial Compliance	2 years
3.26 - 4.00	Substantial Compliance	3 years

**RECERTIFICATION REVIEW RESULTS**

**COMPLIANCE STATUS**

	<u>Quality Indicator</u>	<u>Overall</u>	<u>Yes/No</u>	<u>Renewal Term</u>
▶ Case Records	3.72	3.82		3 years
▶ Service Management	4.00	4.00		3 years
▶ Red Flag Deficiency(ies) (For specific Red Flag Deficiency(ies), please refer to Program Review Report issued at conclusion of Recertification Review)				
▶ Quality Services Review				n/a

**FACILITY INSPECTION RESULTS**

<u>Site#</u>	<u>Address</u>	<u>Site Type</u>	<u>Ins #</u>	<u>Date</u>	<u>Deficiency</u>	<u>Renewal Term</u>
756	271 Central Avenue, Albany 12206	ML	19921	3/4/2014	CAP Completed	3 years

**Site Type Codes**

ML - Main Location
AL - Additional Location
Apt - Apartment

**Deficiency Code Examples**

Red Flag - imminent structural failure; fire service sprinkler system disabled; or a required exit that is permanently blocked
Significant - pathways to exits blocked; fire alarm systems in trouble mode; or broken stair treads
Notable - any other OASAS or building code violation

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OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET

**FISCAL VIABILITY REVIEWS**

- |                                     |  |          |
|-------------------------------------|--|----------|
| <input type="checkbox"/>            | Fiscal viability package not submitted.  | 6 months |
| <input type="checkbox"/>            | Data received insufficient to determine fiscal viability.  | 6 months |
| <input type="checkbox"/>            | Current financial position NOT viable; however, an acceptable financial recovery plan submitted.   | 2 years  |
| <input type="checkbox"/>            | Current financial position viable; however, overall financial position NOT viable.   | 2 years  |
| <input checked="" type="checkbox"/> | Current and overall financial positions viable.  | 3 years  |
| <input type="checkbox"/>            | Fiscal viability determination not applicable, given the service provider is a governmental entity or New York State Department of Health certified hospital (Article 28). | n/a      |

**CERTIFICATE TERM**

The term for the enclosed Operating Certificate is three years

State of New York  
**Office of Alcoholism and Substance Abuse Services**  
Pursuant to the provisions of Article 32 of the Mental Hygiene Law  
**Hospitality House T.C., Inc.**

is hereby granted this

**CHEMICAL DEPENDENCE  
OPERATING CERTIFICATE**

authorizing the operation of Chemical Dependence Services, in compliance with the requirements of  
14 NYCRR Parts 800 and 814 and the laws and regulations of the State of New York

Site

Program Name(s)

Service(s)

271 Central Avenue  
Albany, New York 12206-2611

- Part 819 Intensive Residential Rehabilitation - 72 beds



Charles W. Monson

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

171210043

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: January 01, 2015

EXPIRATION DATE: December 31, 2017