



January 29, 2014

UPS GROUND

Donald C. Schultz, Ph.D.  
Executive Director  
Fellowship House, Inc.  
M.P.O. Box 606  
625 Buffalo Avenue  
Niagara Falls, New York 14302-1322

Re: Provider #38030  
Operating Certificate #160110161  
PRU #51091

Dear Dr. Schultz:

Operating Certificate #160110161 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 Fellowship House, Inc. to operate a Part 819 chemical dependence supportive living service at the administrative site located at 1204 Niagara Street, Niagara Falls, with the certified sites listed on the Operating Certificate Addendum, effective February 1, 2014.

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

Fellowship House, Inc. has 24 beds operational of the 36 beds authorized under Operating Certificate #160110161.

Fellowship House, 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

Donald C. Schultz, Ph.D.  
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cc w/encs.: Charles W. Monson  
Kathy Murphy  
Patrick Morrison  
Gail Keeler  
Antoinette Lech (Niagara County)  
Linda A. D'Amore-O'Grady (Chairperson, Board of Directors, Fellowship  
House, Inc.)  
Douglas Werth (Program Coordinator, Fellowship House, Inc.)

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

**OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET**

Provider Legal Name:	Fellowship House, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Supportive Living

Building:	
Room/ Floor	1st Floor
Street Address:	1204 Niagara Street
City and Zip Code:	Niagara Falls, 14303

Provider Number:	38030
Operating Certificate Number:	1601 10161
Recertification Review Number:	AL13074
Recertification Review Conducted:	9/30/2013 to: 10/3/2013

PRU Number(s) 51091 Capacity: 36

**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	3.00	3.23		2 years
▶ Service Management	3.60	3.79		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>
5890	1st and 2nd Floors, 407 6th Street, Niagara Falls 14302	Apt	18106	5/18/2012	CAP Completed	3 years
5814	1st Floor, 1204 Niagara Street, Niagara Falls 14303	ML	17202	5/19/2011	CAP Completed	3 years
5153	2nd Floor, 1204 Niagara Street, Niagara Falls 14303	Apt	18107	5/18/2012	CAP Completed	3 years
5154	2nd Floor, 1206 Niagara Street, Niagara Falls 14303	Apt	18108	5/18/2012	CAP Completed	3 years
6967	141 Caledonia Street, Lockport 14094	Apt	18734	2/13/2013	CAP Completed	3 years
7559	35 Corinthia Street, Lockport 14094	Apt	19271	6/28/2013	CAP Completed	3 years
7272	Floors 1 & 2, 348 East Avenue, Lockport 14094	Apt	18751	2/13/2013	CAP Completed	3 years
7272	Floors 1 & 2, 348 East Avenue, Lockport 14094	Apt	18752	2/13/2013	CAP Completed	3 years

NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES  
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**OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET**

**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

**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 checked="" 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 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 two years

State of New York  
**Office of Alcoholism and Substance Abuse Services**  
Pursuant to the provisions of Article 32 of the Mental Hygiene Law  
**Fellowship House, 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

1st Floor  
1204 Niagara Street  
Niagara Falls, New York 14303-  
1414

Program Name(s)

- Part 819 Supportive Living - 36 beds

Service(s)

Supportive Living Addendum Attached



*Charles W. Monson*

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

160110161

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: February 01, 2014

EXPIRATION DATE: January 31, 2016

State of New York

Office of Alcoholism and Substance Abuse Services

CHEMICAL DEPENDENCE

ADDENDUM TO OPERATING CERTIFICATE NUMBER 160110161

**Fellowship House, Inc.**

**CERTIFIED SUPPORTIVE LIVING LOCATION(S)**

As of February 01, 2014

24 beds out of 36 adult beds authorized. Up to 8 authorized beds for their children.

2nd Floor  
1204 Niagara Street  
Niagara Falls, NY 14303  
3 Adult Bed(s) Certified

2nd Floor  
1206 Niagara Street  
Niagara Falls, NY 14303  
3 Adult Bed(s) Certified

141 Caledonia Street  
Lockport, NY 14094  
5 Adult Bed(s) Certified and up to 2 beds for their children

Floors 1 & 2  
348 East Avenue  
Lockport, NY 14094  
5 Adult Bed(s) Certified and up to 3 beds for their children

35 Corinthia Street  
Lockport, NY 14094  
5 Adult Bed(s) Certified and up to 2 beds for their children

1st and 2nd Floors  
407 6th Street  
Niagara Falls, NY 14302  
3 Adult Bed(s) Certified and up to 1 beds for their children