



January 9, 2015

UPS GROUND

Anne Errichetti, M.D.
President and CEO
St. Peter's Hospital of the City of Albany
315 South Manning Boulevard
Albany, New York 12208

Re: Provider #83060
Operating Certificate #180110255
PRU #50234

Dear Dr. Errichetti:

Operating Certificate #180110255 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 St. Peter's Hospital of the City of Albany to operate a Part 819 chemical dependence community residential service at 64 Second Avenue, Albany, effective February 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*.

St. Peter's Hospital of the City of Albany 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

Dr. Anne Errichetti

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cc w/encs.: Charles W. Monson

Kathy Murphy

Tim Donovan

Janet Rucki

Stephen J. Giordano, Ph.D. (Albany County)

Robert J. Bylancik, CHE (Board President, St. Peter's Hospital of the City of Albany)

Stephen Lape (Program Manager, St. Peter's Hospital of the City of Albany)

**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:	St. Peter's Hospital of the City of Albany
Active Parent Corporation:	
Certified Program/Service Reviewed:	Community Residential

Building:	
Room/ Floor	
Street Address:	64 Second Avenue
City and Zip Code:	Albany, 12202

Provider Number:	83060
Operating Certificate Number:	1801 10255
Recertification Review Number:	AL14079
Recertification Review Conducted:	8/13/2014 to: 8/15/2014

PRU Number(s): 50234 Capacity: 22

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	3.36	3.48		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>
24	64 Second Avenue, Albany 12202	ML	19884	1/30/2014	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 type="checkbox"/> | Current and overall financial positions viable. | 3 years |
| <input checked="" 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
St. Peter's Hospital of the City of Albany

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

64 Second Avenue
Albany, New York 12202-1240

Program Name(s)

SPARC Halfway House

Service(s)

- Part 819 Community Residential - 22 beds



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

180110255

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: February 01, 2015

EXPIRATION DATE: January 31, 2018