



May 13, 2014

UPS GROUND

Mr. Ron Thomas
Executive Director
Baden Street Settlement of Rochester, Inc.
152 Baden Street
Rochester, New York 14605-2054

Re: Provider #16220
Operating Certificate #160510671
PRU #130

Dear Mr. Thomas:

Operating Certificate #160510671 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 Baden Street Settlement of Rochester, Inc. to operate a Part 822-4 chemical dependence outpatient service at 585 Joseph Avenue, Rochester, effective June 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*.

Baden Street Settlement of Rochester, 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

Mr. Ron Thomas
Page 2 of 2
May 13, 2014

cc w/encs.: Charles W. Monson
Kathy Murphy
Donna Pagano-Stott
Holly Livingston
Gail Keeler
Rate Based Provider Unit (DOH)
David Putney (Monroe County)
Gaynelle Wethers (President of the Board of Directors, Baden Street Settlement
of Rochester, Inc.)
Hector Diaz (Program Director, Baden Street Settlement of Rochester, 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: Baden Street Settlement of Rochester, Inc.
 Active Parent Corporation: _____
 Certified Program/Service Reviewed: Outpatient Services

Building: _____
 Room/ Floor: 1st and 2nd Floor
 Street Address: 585 Joseph Avenue
 City and Zip Code: Rochester, 14605

Provider Number: 16220
 Operating Certificate Number: 1605 10671
 Recertification Review Number: AL13111
 Recertification Review Conducted: 12/17/2013 to: 12/20/2013

PRU Number(s) 130 Capacity: _____

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	3.23	3.23		2 years
▶ Service Management	3.43	3.38		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>
1269	1st and 2nd Floor, 585 Joseph Avenue, Rochester 14605	ML	19613	10/29/2013	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

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

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
Baden Street Settlement of Rochester, 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 and 2nd Floor
585 Joseph Avenue
Rochester, New York 14605-1215

Program Name(s)

● Part 822-4 Outpatient Services

Service(s)

Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

160510671

CERTIFICATE NUMBER

EFFECTIVE DATE: June 01, 2014

Renewed

EXPIRATION DATE: May 31, 2016

