NEW YORK STATE | Office of Alcoholism and Substance Abuse Services

ANDREW M. CUOMO
Governor

ARLENE GONZÁLEZ-SÁNCHEZ, M.S., L.M.S.W.
Commissioner

November 16, 2015

UPS GROUND

Mr. Bob McMahon
Chief Executive Officer
820 River St., Inc.
428 Duane Avenue
Schenectady, New York 12307

Re: Provider #35210
Operating Certificate #171111329
PRU #51851

Dear Mr. McMahon:

Operating Certificate #171111329 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 820 River St., Inc. to operate a Part 819 chemical dependence community residential service at 13 Crandall Street, Glens Falls, effective December 1, 2015.

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

820 River St., 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

Janet L. Paloski
Director
Bureau of Certification and Systems Management

Enclosures

cc w/encs.: Charles W. Monson
Tim Donovan
Deb Czubak
Lynn DeFruscio
Rob York (Warren County)
Kevin Luibrand, Esq. (Board of Directors President, 820 River St., Inc.)
Elwood L. Powell, Jr. (Program Director, 820 River St., 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: 820 River St., Inc.
Active Parent Corporation:
Certified Program/Service Reviewed: Community Residential

Building:
Room/ Floor
Street Address: 13 Crandall Street
City and Zip Code: Glens Falls, 12801

Provider Number: 35210
Operating Certificate Number: 1711 11329
Recertification Review Number: AL15037
Recertification Review Conducted: 7/8/2015 to: 7/10/2015

PRU Number(s): 51851 Capacity: 21

RECERTIFICATION REVIEW COMPLIANCE RATING TABLE

Compliance Scores	Compliance Ratings	Term of Renewed Operating Certificate
---	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			
	Quality Indicator	Overall	Yes/No	Renewal Term
▶Case Records	4.00	3.91		3 years
▶Service Management	4.00	4.00		3 years
▶Facility	3.50	3.81		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

FISCAL VIABILITY REVIEWS

Term

☐ Fiscal viability package not submitted.

☐ Data received insufficient to determine fiscal viability.

☐ Fiscal viability determination not applicable, given the service provider is a governmental entity or New York State Department of Health certified hospital (Article 28).

Fiscal Viability Levels

Current Ratio Current Assets to Current Liabilities	Total Ratio Total Assets to Total Liabilities
.90 to 1.0 = 3 year Certificate	1.0 to 1.0 = 3 year Certificate
.60 to .89 = 2 year Certificate	.60 to .99 = 2 year Certificate
.40 to .59 = 1 year Conditional Certificate	.40 to .59 = 1 year Conditional Certificate
< .40 = 6 month Conditional Certificate	< .40 = 6 month Conditional Certificate

☑ Current Ratio 0.72 Overall Ratio 0.81 2 year

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

820 River St., 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)
13 Crandall Street Glens Falls, New York 12801-3414	Road to Recovery Community Residence	• Part 819 Community Residential - 21 beds

Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

171111329

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: December 01, 2015
EXPIRATION DATE: November 30, 2017