



February 26, 2013

UPS GROUND

Mr. James O'Connor
Executive Vice President and CEO
St. Charles Hospital, Port Jefferson, New York
1st Floor
200 Belle Terre Road
Port Jefferson, New York 11777-1928

Re: Operating Certificate #160111398

Dear Mr. O'Connor:

Operating Certificate #160111398 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. Charles Hospital, Port Jefferson, New York to operate a Part 818 chemical dependence inpatient rehabilitation service at 200 Belle Terre Road, Port Jefferson, effective February 1, 2013.

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

St. Charles Hospital, Port Jefferson, New York 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
Acting Director
Bureau of Certification and Systems Management

Enclosures

cc w/encs.: Charles W. Monson
Steven Rabinowitz
Antonette Whyte-Etere
Holly Livingston
Gail Keeler
Rate Based Provider Unit (DOH)

Arthur Flescher (Suffolk County)
Jerome Poller (President – Eastern Division
Board of Directors, St. Charles Hospital,
Port Jefferson, New York)
Claire Olsen (Program Director, St. Charles
Hospital, Port Jefferson, New York)

**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. Charles Hospital, Port Jefferson, New York
 Active Parent Corporation: _____
 Certified Program/Service Reviewed: Inpatient Rehabilitation Services

Building: _____
 Room/ Floor: 5th Floor
 Street Address: 200 Belle Terre Road
 City and Zip Code: Port Jefferson, 11777

Provider Number: 82100
 Operating Certificate Number: 1601 11398
 Recertification Review Number: NY12047
 Recertification Review Conducted: 1/29/2013 to: 1/31/2013

PRU Number(s) 51415 Capacity: 40

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	3.57		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>
437	5th Floor, 200 Belle Terre Road, Port Jefferson 11777	ML	18136	5/25/2012	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. Charles Hospital, Port Jefferson, New York

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

5th Floor
200 Belle Terre Road
Port Jefferson, New York 11777-
1928

Program Name(s)

● Part 818 Inpatient Rehabilitation Services - 40 beds

Service(s)



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

160111398

CERTIFICATE NUMBER

EFFECTIVE DATE: February 01, 2013

Renewed

EXPIRATION DATE: January 31, 2016