



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

October 31, 2016

UPS GROUND

Mr. Robert E. Detor
President and Chief Executive Officer
The Long Island Home d/b/a South Oaks Hospital
400 Sunrise Highway
Amityville, New York 11701-2508

Re: Provider #81980
Operating Certificate #181011489
PRU #50695

Dear Mr. Detor:

Operating Certificate #181011489 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 The Long Island Home d/b/a South Oaks Hospital to operate a Section 816.7 medically supervised inpatient withdrawal & stabilization service, with the use of methadone, at 400 Sunrise Highway, Amityville, effective November 1, 2016.

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

OASAS received The Long Island Home d/b/a South Oaks Hospital's letter dated October 27, 2016, indicating that no changes have been made to the currently approved Medical Detoxification Protocols. Please refer to Local Services Bulletin No. 2010-01, OASAS Policy Regarding Medical Detoxification and the Use of Medications (2/11/10), prior to making modifications in these protocols.

The Long Island Home d/b/a South Oaks Hospital 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. Robert E. Detor
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cc w/encs.: Charles W. Monson
Belinda Greenfield
Gregory James
Steven Rabinowitz
Antonette Whyte-Etere
Cathy Shippey
Lynn DeFruscio
Rate Based Provider Unit (DOH)
Mike Ogborn (DOH)
Nichole Washington (CSAT)
Richard Springer (DEA)
Ann Marie Csorny (Suffolk County)
Robert F. Rose (President/Chairman, Board of Trustees, The Long Island Home
d/b/a South Oaks Hospital)
Jean Jackson (Administrative Director, The Long Island Home d/b/a South Oaks
Hospital)

**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:	<u>The Long Island Home d/b/a South Oaks Hospital</u>
Active Parent Corporation:	_____
Certified Program/Service Reviewed:	<u>Medically Supervised Inpatient Withdrawal & Stabilization Services</u>

Building:	<u>Jennings Hall</u>
Room/ Floor	<u>2nd Floor</u>
Street Address:	<u>400 Sunrise Highway</u>
City and Zip Code:	<u>Amityville, 11701</u>

Provider Number:	<u>81980</u>
Operating Certificate Number:	<u>1810 11489</u>
Recertification Review Number:	<u>NY16064</u>
Recertification Review Conducted:	<u>6/20/2016 to: 6/23/2016</u>

PRU Number(s): 50695 Capacity: 24

<u>RECERTIFICATION REVIEW COMPLIANCE RATING TABLE</u>		
<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	4.00	4.00		3 years
▶ Service Management	4.00	3.92		3 years
▶ Facility	n/a	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

FISCAL VIABILITY REVIEWS

Term

- Fiscal viability package not submitted.
- 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

<u>Current Ratio</u>	<u>Total Ratio</u>
<u>Current Assets to Current Liabilities</u>	<u>Total Assets to Total Liabilities</u>
.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 1.07 Overall Ratio 0.94 2 year

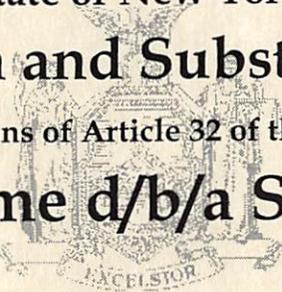
<u>CERTIFICATE TERM</u>	The term for the enclosed Operating Certificate is <u>two years</u>
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State of New York

Office of Alcoholism and Substance Abuse Services

Pursuant to the provisions of Article 32 of the Mental Hygiene Law

The Long Island Home d/b/a South Oaks Hospital



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)

Jennings Hall
2nd Floor
400 Sunrise Highway
Amityville, New York 11701-
2508

- Part 816.7 Medically Supervised Inpatient Withdrawal & Stabilization Services - 24 beds [with the use of methadone]



Charles W. Monson

181011489

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: November 01, 2016
EXPIRATION DATE: October 31, 2018