



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

September 22, 2016

UPS GROUND

Ms. Ann Shalof
Executive Director
Neighborhood Coalition for Shelter, Inc.
50 Broadway, Suite 1301
New York, New York 10004

Re: Provider #19920
Operating Certificate #180811623
PRU #52103

Dear Ms. Shalof:

Operating Certificate #180811623 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 Neighborhood Coalition for Shelter, Inc. to operate a Part 822 chemical dependence outpatient service at 921-923 Madison Avenue, effective September 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*.

Neighborhood Coalition for Shelter, 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

Ms. Ann Shalof
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cc w/encs.: Charles W. Monson
Steven Rabinowitz
Ivan Garcia
Cathy Shippey
Janet Rucki
Rate Based Provider Unit (DOH)
Hillary Kunins, MD, MPH, MS (NYC Dept. of Health and Mental Hygiene)
Gail Goldstein (NYC Dept. of Health and Mental Hygiene)
Norma Carmona-Rodriguez (NYC Dept. of Health and Mental Hygiene)
David Oliver (President, Board of Directors, Neighborhood Coalition for Shelter,
Inc.)
Antoinette Rejas (Program Director, Neighborhood Coalition for Shelter, 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:	Neighborhood Coalition for Shelter, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	Basement
Street Address:	921-923 Madison Avenue
City and Zip Code:	New York, 10021

Provider Number:	19920
Operating Certificate Number:	1808 11623
Recertification Review Number:	NY15043
Recertification Review Conducted:	8/4/2016 to: 8/9/2016

PRU Number(s): 52103 Capacity:

<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	3.00	3.43		2 years
▶ Service Management	3.69	3.82		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	
Current Ratio	Total Ratio
Current Assets to Current Liabilities	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 2.38 Overall Ratio 5.6 3 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
Neighborhood Coalition for Shelter, 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)
Basement Chance for Change
921-923 Madison Avenue • Part 822 Outpatient Services
New York, New York 10021-3508

Charles W. Monson
CHARLES W. MONSON
ASSOCIATE COMMISSIONER

180811623
CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: September 01, 2016
EXPIRATION DATE: August 31, 2018