



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

September 15, 2016

UPS GROUND

Ms. Christina M. Gullo
Chief Executive Officer/President
Villa of Hope
274 Goodman Street North
Rochester, New York 14607-1154

Re: Provider #37220
Operating Certificate #180911629
PRU #4856

Dear Ms. Gullo:

Operating Certificate #180911629 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 Villa of Hope to operate Part 817 residential rehabilitation services for youth at 3300 Dewey Avenue, Rochester, effective October 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*.

Villa of Hope 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
cc w/encs.:

Charles W. Monson
Tim Donovan
Donna Stott
Cathy Shippey
Janet Rucki
Rate Based Provider Unit (DOH)
David Putney (Monroe County)
Michael Amico (Board Chair, Villa of Hope)
Saarah Waleed (Program Director, Villa of Hope)

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:	Villa of Hope
Active Parent Corporation:	
Certified Program/Service Reviewed:	Residential Rehabilitation Services for Youth

Building:	Life Residence
Room/ Floor	
Street Address:	3300 Dewey Avenue
City and Zip Code:	Rochester, 14616

Provider Number:	37220
Operating Certificate Number:	1809 11629
Recertification Review Number:	AL16016
Recertification Review Conducted:	6/7/2016 to: 6/10/2016

PRU Number(s): 4856 Capacity: 14

<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	3.13	3.52		2 years
▶ Service Management	4.00	3.84		3 years
▶ Facility	n/a	3.62		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>
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 1.56 Overall Ratio 1.36 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

Villa of Hope



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

Life Residence
3300 Dewey Avenue
Rochester, New York 14616-3741

Program Name(s)

Life Program

Service(s)

- Part 817 Residential Rehabilitation Services for Youth -
14 beds



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

180911629

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: October 01, 2016

EXPIRATION DATE: September 30, 2018