

County: Newberry

Facility Type: Adult Day Care

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

NEWBERRY COUNTY COUNCIL ON AGING ADULT DAY HEALTH CARE	Newberry / Non-Profit Corporation	15
1300 HUNT ST	1300 HUNT ST	
NEWBERRY, SC 29108-3082 FAC.#:803-276-8266	NEWBERRY, SC 29108-3082	
BALLENTINE JANET PH#: 803-276-8266	NEWBERRY COUNTY COUNCIL ON AGING	
Facility Email: LYNN@NCCOA.ORG	ADC-0073 / 10/31/2018	

Number of Participants: 15

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: 1      Number Licensed Units: 15

County: Newberry

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>PALMETTO GARDENS</b>	Newberry / Sole Proprietorship	30
425 S WHEELER AVE	425 S WHEELER AVE	
PROSPERITY, SC 29127 FAC.#:803-364-9113	PROSPERITY, SC 29127	
PEOPLES TIFFANY PH#: 803-364-9113	YVONNE HARRISON	
<b>Facility Email:</b> PALMETTOGARDENSRESIDENTIAL@GMAIL.COM	<b>CRC-1916 / 04/30/2018 (Renewal Pending)</b>	

Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

<b>SPRINGFIELD PLACE RESIDENTIAL CARE</b>	Newberry / Limited Liability	50
2006 SPRINGFIELD CIR	2006 SPRINGFIELD CIR	
NEWBERRY, SC 29108-3084 FAC.#:803-405-1585	NEWBERRY, SC 29108-3084	
KESLER-COUNTS ABBY PH#: 803-405-1585	NEWBERRY OPERATOR LLC	
<b>Facility Email:</b> AKESLER@NEWBERRYCCRC.COM	<b>CRC-1250 / 02/28/2019</b>	

Alzheimer Care:Yes      Max # Resident:2      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Community Residential Care Facility

Number of Activities/Facilities licensed:     2          Number Licensed Units:     80

County: Newberry

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
H A MCCULLOUGH COMMUNITY RESIDENCE 2600 HOLLOWAY ST NEWBERRY, SC 29108-4500 FAC.#:803-276-0078 JONES ROBERT S PH#: 803-276-0078 Facility Email: BJONES@NCDSNB.ORG	Newberry / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0102 / 03/31/2019	12

**Totals For Facility/License Type: Habilitation R15**

Number of Activities/Facilities licensed: 1      Number Licensed Units: 12

County: Newberry

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

KINDRED AT HOME-MIDLANDS 2521 EVANS ST NEWBERRY, SC 29108 FAC.#:803-276-0273 GUY HARRIETT PH#: 803-276-0273 Facility Email: JANET.COMBS@GENTIVA.COM	Newberry / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC HHA-0040 / 12/31/2018	11
---	--	----

Counties Served: Aiken, Barnwell, Chester, Edgefield, Fairfield, Lancaster, Lexington, Newberry, Richland, Saluda, York

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y  
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other: REGISTERED NURSE

Totals For Facility/License Type: <u>Home Health</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>11</u>

County: Newberry

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

NEWBERRY COUNTY MEMORIAL HOSPITAL 2669 KINARD ST NEWBERRY, SC 29108-2932 FAC.#:803-276-7570 BALDWIN BRUCE PH#: 803-276-7570	Newberry / County PO BOX 497 NEWBERRY, SC 29108-0497 NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD HTL-0015 / 01/31/2019	90
<b>Facility Email:</b> EMILY.METTS@NEWBERRYHOSPITAL.NET		

Licensed Beds: General: 90 Psychiatric: 0 Rehab: 0 Substance Abuse: 0  
 Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary  
 Number of Activities/Facilities licensed: 1      Number Licensed Units: 90

County: Newberry

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ANGEL CARE HOME CARE LLC</b> 1303 MAIN ST STE 413 NEWBERRY, SC 29108 FAC. #:803-321-1087 PH#:	Newberry / Limited Liability PO BOX 626 NEWBERRY, SC 29108 ANGEL CARE HOME CARE LLC <b>IHCP-0251 / 07/31/2018</b>	- 1
<b>AT HOME SENIOR CARE</b> 1700 MAIN ST NEWBERRY, SC 29108-3548 FAC. #:803-801-0611 PH#:	Newberry / Limited Liability 1700 MAIN ST NEWBERRY, SC 29108-3548 AT HOME SENIOR CARE <b>IHCP-0303 / 08/31/2018</b>	- 1

<b>Totals For Facility/License Type: <u>Inhome Care Provider</u></b>	
<b>Number of Activities/Facilities licensed:</b> <u>2</u>	<b>Number Licensed Units:</b> <u>- 2</u>

County: Newberry

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>J F HAWKINS NURSING HOME</b> 1330 KINARD ST NEWBERRY, SC 29108-3096 FAC.#:803-276-2601 RANDELL TY L PH#: 803-276-2601 Facility Email: TRANSDSELL@NEWBERRYCCRC.COM	Newberry / Limited Liability 1300 KINARD ST NEWBERRY, SC 29108 NEWBERRY OPERATOR LLC NCF-0234 / 02/28/2019	118
--	--	-----

Licensed Beds: Nursing Home: 118 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

<b>WHITE OAK MANOR-NEWBERRY</b> 2555 KINARD ST NEWBERRY, SC 29108-2903 FAC.#:803-276-6060 GILLIAM MELISSA S PH#: 803-276-6060 Facility Email: MGILLIAM@WHITEOAKMANOR.COM	Newberry / Corporation 2555 KINARD ST NEWBERRY, SC 29108-2903 WHITE OAK MANOR - NEWBERRY INC NCF-0884 / 12/31/2018	146
--	--	-----

Licensed Beds: Nursing Home: 146 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>Totals For Facility/License Type: <u>Nursing Home</u></b>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>264</u>

County: Newberry

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
WESTVIEW BEHAVIORAL HEALTH SERVICES (OUTPATIENT) 800 MAIN ST NEWBERRY, SC 29108-3351 FAC.#:803-276-5690 GRAY HUGH B PH#: 803-276-5690 Facility Email: HGRAY@WESTVIEWBEHAVIORAL.ORG	Newberry / Non-Profit Corporation PO BOX 738 NEWBERRY, SC 29108-0738 NEWBERRY COMMISSION ON ALCOHOL & DRUG ABUSE OTP-0041 / 11/30/2018	2

Certifications:None

Totals For Facility/License Type: <u>PSAD Outpatient</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>2</u>



County: Newberry

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>FRESENIUS MEDICAL CARE NEWBERRY</b> 2850 KINARD ST NEWBERRY, SC 29108 FAC.#:803-276-2860 CARTER SAMONTRA PH#: 803-276-2860 Facility Email: SAMONTRA.CARTER@FMC-NA.COM	Newberry / Limited Liability 2850 KINARD ST NEWBERRY, SC 29108 FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC ERD-0020 / 02/28/2019	24
--	--	----

Licensed Stations: Hemodialysis: 22 Peritoneal: 2

<b>Totals For Facility/License Type: <u>Renal Dialysis</u></b>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>24</u>

County: Newberry

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>REDEMPTION INKWORKS</b> 522 NWHEELER AVE NEWBERRY, SC 29108 FAC.#:803-364-5209 BUCHANAN BENJAMIN JOHN PH#: 803-552-7143 Facility Email: JEFFT@REDEMPTIONINKWORKS.COM	Newberry / Ltd. Liability 522 N WHEELER AVE PROSPERITY, SC 29127 THINK INK SC LLC TF-0171 / 08/31/2018	2

<b>Totals For Facility/License Type: <u>Tattoo Facility</u></b>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>2</u>

Number of Activities/Facilities licensed in county of : <u>Newberry</u>	# Lics: <u>13</u>
	Number Licensed Units : <u>498</u>

Report Totals

Total Number of Activities/Facilities licensed: 13 Total Number Licensed Units: 498