

County: Edgefield

Facility Type: Adult Day Care

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

EDGEFIELD COUNTY ADULT DAY CARE CENTER	Edgefield / Non-Profit Corporation	30
15 CENTER SPRING RD	PO BOX 510	
EDGEFIELD, SC 29824-3961 FAC.#:803-637-5326	EDGEFIELD, SC 29824-0510	
GRIFFITH, JAMES R PH#: 803-637-5326	EDGEFIELD COUNTY SENIOR CITIZENS COUNCIL	
Facility Email: JRGRIFFFITH@ECSCC.ORG	ADC-0006 / 07/31/2010	

Number of Participants	30
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Totals For Facility/License Type Adult Day Care	
Number of Activities/Facilities licensed:	Number Licensed Units
<input type="text" value="1"/>	<input type="text" value="30"/>

County: Edgefield

Facility Type: Habilitation R15

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
EDGEFIELD COMMUNITY RESIDENCE	Edgefield / State	8
1305 HILLCREST DR	PO BOX 4706	
EDGEFIELD, SC 29824 FAC.#:803-637-5468	COLUMBIA, SC 29240-4706	
HALL, HARRIET PH#: 803-637-5468	SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS	
Facility Email: No Facility Email on Record	MR15-0139 / 07/31/2010	

Totals For Facility/License Type Habilitation R15	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="8"/>

County: Edgefield

Facility Type: Nursing Home

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

TRINITY MISSION HEALTH & REHAB OF EDGEFIELD	Edgefield / Ltd. Liability	120
226 WA REEL DR	PO BOX 668	
EDGEFIELD, SC 29824-4534 FAC.#:803-637-5312	EDGEFIELD, SC 29824-0668	
FALLAW, DENISE PH#: 803-637-5312	TRINITY MISSION HEALTH & REHAB OF EDGEFIELD LLC	
Facility Email: DFALLAW@TMEDGEFIELD.COM	NCF-0941 / 07/31/2010	

Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	Number Licensed Units
1	120

County: Edgefield

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
DCA OF EDGEFIELD 306 MAIN ST EDGEFIELD, SC 29824-1326 FAC.#:803-637-3225 CLARKE, SHARON M PH#: 803-637-3225 Facility Email: SCLARK@DIALYSISCORPORATION.COM	Edgefield / Limited Liability 214 SENATE AVE STE 300 CAMP HILL, PA 17011-2236 DCA OF EDGEFIELD LLC ERD-0149 / 09/30/2010	15

Licensed Stations: Hemodialysis: 15 Peritoneal: 0

Totals For Facility/License Type Renal Dialysis	
Number of Activities/Facilities licensed:	Number Licensed Units
1	15

Number of Activities/Facilities licensed in county of Edgefield	# Lics	5
	Number Licensed Units :	198

Report Total

Total Number of Activities/Facilities licensed	5	Total Number Licensed Units	198
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