

County: Hampton

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
<b>J &amp; T RESIDENTIAL CARE FACILITY</b> 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 FAC.#:803-943-7177 HIERS, BARBARA M PH#: 803-943-7177 Facility Email: No Facility Email on Record	Hampton / Sole Proprietorship 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 THELMA S MYERS CRC-1094 / 05/31/2010	10

Certifications:Alzheimer Care

<b>SEVILLE'S RESIDENTIAL CARE FACILITY</b> 109 BENNETT LN HAMPTON, SC 29924-1375 FAC.#:803-943-9131 JENKINS, GENORA W PH#: 803-943-9131 Facility Email: PEPPEFORCE@YAHOO.COM	Hampton / Sole Proprietorship 109 BENNETT LN HAMPTON, SC 29924-1375 GENORA W JENKINS CRC-1178 / 08/31/2010	10
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Certifications:None

<b>VARNVILLE COMMUNITY RESIDENCE</b> 266 HAMPTON RD VARNVILLE, SC 29944 FAC.#:803-943-3305 MICKLE, DERRIEL PH#: 803-943-3305 Facility Email: No Facility Email on Record	Hampton / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS CRC-1211 / 05/31/2010	8
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Certifications:None

Totals For Facility/License Type Community Residential Care Facility		
Number of Activities/Facilities licensed:	3	Number Licensed Units <span style="float: right;">28</span>

County: Hampton

Facility Type: Home Health

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
DHEC REGION 8 HOME HEALTH SERVICES	Hampton / State	2
1000 PINE ST, HAMPTON CTY HEALTH DEPT	PO BOX 933	
VARNVILLE, SC 29944 FAC.#:803-943-4649	VARNVILLE, SC 29944-0933	
ROCKWELL, JUDITH E PH#: 803-943-4649	SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL	
Facility Email: ROCKWEJ@DHEC.SC.GOV	HHA-0006 / 11/30/2010	
Counties Served Colleton, Hampton		
License Restrictions		
Physical Therapy Y Speech Therapy:N Occupational Therapy N Med. Social Services Y		
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N		
Other:		

Totals For Facility/License Type Home Health	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="2"/>

County: Hampton

Facility Type: Hospital or Institutional General Infirmary

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

HAMPTON REGIONAL MEDICAL CENTER	Hampton / Non-Profit Corporation	32
595 W CAROLINA AVE	PO BOX 338	
VARNVILLE, SC 29944-4735 FAC.#:803-943-2771	VARNVILLE, SC 29944-0338	
HAMILL, DAVID H PH#: 803-943-2771	HAMPTON REGIONAL MEDICAL CENTER INC	
Facility Email: JALLEN@HAMPTONREGIONAL.ORG	HTL-0027 / 07/31/2010	

Licensed Beds: General: 32	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds: NICU: 0	Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	Number Licensed Units
1	32

County: Hampton

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
UNIHEALTH POST ACUTE CARE-LOW COUNTRY	Hampton / Ltd. Liability	104
200 LIBERTY ST S	200 LIBERTY ST S	
ESTILL, SC 29918-3310 FAC.#:803-625-3852	ESTILL, SC 29918-3310	
SMITH, DEAN PH#: 803-625-3852	HERITAGE HEALTHCARE OF ESTILL LLC	
Facility Email: No Facility Email on Record	NCF-0922 / 09/30/2010	
Licensed Beds Nursing Home 104	Institutional Nursing Home 0	
Certifications:None		

<b>Totals For Facility/License Type Nursing Home</b>	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="104"/>

County: Hampton

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
NEW LIFE CENTER COMMISSION ON ALCOHOL AND OTHER DRUG ABUSE 102 GINN ALTMAN AVE STE C HAMPTON, SC 29924 FAC.#:803-943-2800 RICKENBAKER, RONALD N PH#: 803-943-2800 Facility Email: NLCHAMPTON@EARTHLINK.NET	Hampton / County 102 GINN ALTMAN AVE STE C HAMPTON, SC 29924-3962 NEW LIFE CENTER COMMISSION ON ALCOHOL AND OTHER DRUG ABUSE-BOARD OTP-0078 / 05/31/2010	3

Certifications:None

Totals For Facility/License Type PSAD Outpatient	
Number of Activities/Facilities licensed:	Number Licensed Units
1	3

County: Hampton

Facility Type: Renal Dialysis

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

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HAMPTON DIALYSIS  
593 W CAROLINA AVE  
VARNVILLE, SC 29944-4735 FAC.#:803-943-4334  
BOLTON, STEPHANIE F PH#:  
Facility Email: BEN.DELP@RENALADVANTAGE.COM

Hampton / Limited Liability 13  
115 EASTPARK DR STE 300, RENAL ADVANTAGE-LEGAL DEPT  
BRENTWOOD, TN 37027-2311  
NRA-VARNVILLE SOUTH CAROLINA LLC  
ERD-0125 / 11/30/2010

Licensed Stations: Hemodialysis: 13 Peritoneal: 0

<b>Totals For Facility/License Type Renal Dialysis</b>			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="13"/>

  

Number of Activities/Facilities licensed in county of	Hampton	# Lics	8
	Number Licensed Units :	182	

Report Total

Total Number of Activities/Facilities licensed 8 Total Number Licensed Units 182