

County: Laurens

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
SENIOR OPTIONS ADULT DAY HEALTH CARE 512 PROFESSIONAL PARK RD CLINTON, SC 29325-7627 FAC.#:864-938-0572 ROBINSON, JACQUELINE G PH#: 864-938-0572 Facility Email: No Facility Email on Record	Laurens / Corporation 512 PROFESSIONAL PARK RD CLINTON, SC 29325-7627 SENIOR OPTIONS INC ADC-0093 / 02/28/2011	30
Number of Participants		30

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

County: Laurens

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
SURGERY AND LASER CENTER AT PROFESSIONAL PARK 136 PROFESSIONAL PARK RD CLINTON, SC 29325-7623 FAC.#:864-938-9836 LUTZ RN, CAREY A PH#: 886-938-9836 Facility Email: No Facility Email on Record	Laurens / Ltd. Liability 136 PROFESSIONAL PARK RD CLINTON, SC 29325-7623 SURGERY AND LASER CENTER AT PROFESSIONAL PARK LLC ASF-0103 / 11/30/2010	3
Operating Rooms 2 Procedure Rooms 1 Endoscopy Rooms 0		

Totals For Facility/License Type Ambulatory Surgery	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="3"/>

County: Laurens

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
Certifications:Alzheimer Care		
AGAPE ASSISTED LIVING OF LAURENS 420 W FARLEY AVE LAURENS, SC 29360-3039 FAC.#:864-984-9844 SAMOL, APRIL B PH#: 864-984-9844 Facility Email: ASAMOL@AGAPESENIOR.COM	Laurens / Corporation 420 W FARLEY AVE LAURENS, SC 29360-3039 AGAPE ASSISTED LIVING OF LAURENS INC CRC-1439 / 01/31/2011	100
Certifications:Alzheimer Care		
BAILEY MANOR 300 JACOBS HWY CLINTON, SC 29325-9401 FAC.#:864-833-3425 STANLEY, RITA G PH#: 864-833-3425 Facility Email: R.STANLEY@BAILEYMANOR.ORG	Laurens / Non-Profit Corporation 300 JACOBS HWY CLINTON, SC 29325-9401 CAROLINA CHRISTIAN MINISTRIES INC CRC-0732 / 08/31/2010	30
Certifications:Alzheimer Care		
DAVIDSON STREET COMMUNITY RESIDENCE 313 DAVIDSON ST CLINTON, SC 29325-2023 FAC.#:864-833-7284 GODFREY, ANDRIKA PH#: 864-682-2314 Facility Email: QDAVIDSON@LCDSNB.ORG	Laurens / Non-Profit Corporation 313 DAVIDSON ST CLINTON, SC 29325-2023 LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1420 / 12/31/2010	8
Certifications:None		
LAFORREST COMMUNITY CARE CENTER 2841 BYPASS 127 LAURENS, SC 29360-8332 FAC.#:864-984-8001 MCDANIEL, SHEILA L PH#: 864-984-8001 Facility Email: No Facility Email on Record	Laurens / Corporation PO BOX 27 LAURENS, SC 29360-0027 LAFORREST COMMUNITY CARE CENTER INC CRC-0681 / 05/31/2010	34
Certifications:None		
LANGSTON HOUSE 939 SPRINGDALE DR CLINTON, SC 29325-7266 FAC.#:864-833-0338 MORGAN, MARY A PH#: 864-833-0386 Facility Email: LANGSTONHOUSE@ALCCO.COM	Laurens / Corporation 939 SPRINGDALE DR CLINTON, SC 29325-7266 ASSISTED LIVING CONCEPTS INC CRC-1408 / 11/30/2010	44
Certifications:None		
LAURENS MEMORIAL HOME FOR AGED 3744 TORRINGTON RD LAURENS, SC 29360-0638 FAC.#:864-682-2322 PENLAND, CAROLYN B PH#: 864-682-2322 Facility Email: CPENLAND@PRTCNET.COM	Laurens / Non-Profit Corporation PO BOX 638 LAURENS, SC 29360-0638 LAURENS MEMORIAL HOME FOR AGED INC CRC-0316 / 12/31/2010	50
Certifications:Alzheimer Care		

County: Laurens

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
MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY (CRCF) 1 MARTHA FRANKS DR LAURENS, SC 29360-1799 FAC.#:864-984-4541 HAIR, DINA M PH#: 864-984-4541 Facility Email: DHAIR@SCBMA.COM	Laurens / Non-Profit Corporation 1 MARTHA FRANKS DR LAURENS, SC 29360-1799 SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC CRC-0360 / 02/28/2011	82

Certifications:None

MILL STREET COMMUNITY RESIDENCE 415 MILL ST LAURENS, SC 29360-1905 FAC.#:864-984-3506 GODFREY, ANDRIKA PH#: 864-682-2314 Facility Email: QMILLSTREET@LCDSND.ORG	Laurens / Non-Profit Corporation PO BOX 986 LAURENS, SC 29360-0986 LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1419 / 12/31/2010	8
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Certifications:None

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON (CRCF) 801 MUSGROVE ST CLINTON, SC 29325-1796 FAC.#:864-833-5190 MEDLIN, JOHN R PH#: 864-833-5190 Facility Email: ASNIDER@PRESHOMESC.ORG	Laurens / Non-Profit Corporation 2817 ASHLAND RD COLUMBIA, SC 29210-5009 PRESBYTERIAN HOME OF SOUTH CAROLINA INC CRC-0014 / 04/30/2010	81
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Certifications:None

Totals For Facility/License Type Community Residential Care Facility		
Number of Activities/Facilities licensed:	9	Number Licensed Units 437

County: Laurens

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CLINTON MANOR COMMUNITY RESIDENCE 101 CLINTON MANOR DR CLINTON, SC 29325 FAC.#:864-833-2873 WHITSEL, STACY PH#: 864-938-0572 Facility Email: QCLINTONMANOR@LCDSNB.ORG	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0194 / 06/30/2010	8
OAK GROVE COMMUNITY RESIDENCE 3552 TORRINGTON RD LAURENS, SC 29360 FAC.#:864-682-9734 WHITSEL, STACY PH#: 864-938-0572 Facility Email: QOAKGROVE@LCDSNB.ORG	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0027 / 07/31/2010	8
SOUTH HARPER STREET HABILITATION CENTER 817 S HARPER ST LAURENS, SC 29360-2811 FAC.#:864-984-0436 CUNNINGHAM, DAMEL PH#: 864-984-0436 Facility Email: QSOUTHHARPER@LCDSNB.ORG	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0096 / 12/31/2010	8
SULLIVAN STREET COMMUNITY RESIDENCE 503 SULLIVAN ST LAURENS, SC 29360-3449 FAC.#:864-984-6394 CUNNINGHAM, DAMEL PH#: 864-984-0436 Facility Email: QSULLIVAN@LCDSNB.ORG	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0221 / 06/30/2010	8

Totals For Facility/License Type Habilitation R15	
Number of Activities/Facilities licensed: <input type="text" value="4"/>	Number Licensed Units <input type="text" value="32"/>

County: Laurens

Facility Type: Habilitation R16

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
WHITTEN CENTER - CENTRAL SQUARE UNITS 201 204 205 207 AND 209 28373 HWY 76 E CLINTON 29325 FAC.#:864-833-2733 BRUMFIELD, GLENN A PH#: 864-833-2873 Facility Email: MFULLER@DDSSNGOV	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR16-0411 / 08/31/2010	143
WHITTEN CENTER SUBER UNITS 301 302 303 AND 304 28373 HWY 76 E CLINTON, SC 29325-5328 FAC.#:864-833-2733 BRUMFIELD, AL PH#: 864-833-2733 Facility Email: MFULLER@DDSSNSC.GOV	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR16-0184 / 07/31/2010	68
WHITTEN CENTER-CAMPUS 101 102 103 104 105 106 107 108 AND 110 28373 HWY 76 E CLINTON, SC 29325-5328 FAC.#:864-833-2733 HOWARD, RUTH A PH#: 864-833-2733 Facility Email: MFULLER@DDSSNSC.GOV	Laurens / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR16-0164 / 08/31/2010	152

Totals For Facility/License Type Habilitation R16	
Number of Activities/Facilities licensed:	3
Number Licensed Units	363

County: Laurens

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AMEDISYS HOME HEALTH OF CLINTON 210 PHYSICIANS PARK DR STE U CLINTON, SC 29325-7565 FAC.#:864-833-3212 BERRY, ERIKA N PH#: 864-833-3212 Facility Email: 2204@AMEDISYS.COM	Laurens / Corporation 210 PHYSICIANS PARK DR STE U CLINTON, SC 29325-7565 AMEDISYS HOME HEALTH INC OF SOUTH CAROLINA HHA-0186 / 01/31/2011	4
Counties Served Abbeville, Greenville, Greenwood, Laurens 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:		

NHC HOMECARE-LAURENS 700 PLAZA CIR STE O CLINTON, SC 29325-7556 FAC.#:864-833-2368 MITCHELL, JENNY PH#: 864-833-2368 Facility Email: NHCARE@BELLSOUTH.NET	Laurens / Limited Liability Limited Partnership PO BOX 309 LAURENS, SC 29360-0309 NHC/OP LP HHA-0183 / 06/30/2010	2
Counties Served Greenville, Laurens 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: DIETARY CONSULTATION		

Totals For Facility/License Type Home Health	
Number of Activities/Facilities licensed:	2
Number Licensed Units	6

County: Laurens

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE OF LAURENS COUNTY-HOSPICE HOUSE 1304 SPRINGDALE DR CLINTON, SC 29325-7226 FAC.#:864-833-6287 BROWN, LINDA R PH#: 864-833-6287 Facility Email: LBROWN@HOSPICEOFLAURENSCOUNTY.COM	Laurens / Non-Profit Corporation PO BOX 178 CLINTON, SC 29325-0178 HOSPICE OF LAURENS COUNTY INC HPF-0014 / 10/31/2010	12

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="12"/>

County: Laurens

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AGAPE COMMUNITY HOSPICE OF ANDERSON 420 W FARLEY AVE LAURENS, SC 29360-3039 FAC.#:803-454-1221 MC MAHON, VERONICA PH#: 803-454-1221 Facility Email: DHAM@AGAPESENIOR.COM	Laurens / Corporation 420 W FARLEY AVE LAURENS, SC 29360-3039 CAROLINAS COMMUNITY HOSPICE INC HPC-0118 / 02/28/2011	5
Counties Served Anderson, Greenville, Laurens, Oconee, Pickens		
HOSPICE OF LAURENS COUNTY 1304 SPRINGDALE DR CLINTON, SC 29325-7226 FAC.#:864-833-6287 BROWN, LINDA R PH#: 864-833-6287 Facility Email: LBROWN@HOSPICEOFLAURENSCOUNTY.COM	Laurens / Non-Profit Corporation PO BOX 178 CLINTON, SC 29325-0178 HOSPICE OF LAURENS COUNTY INC HPC-0025 / 09/30/2010	6
Counties Served Greenville, Greenwood, Laurens, Newberry, Spartanburg, Union		

Totals For Facility/License Type Hospice Program	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="11"/>

County: Laurens

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
LAURENS COUNTY HOSPITAL	Laurens / District	76
22725 HWY 76 E	PO BOX 976	
CLINTON, SC 29325-7527 FAC.#:864-833-9151	CLINTON, SC 29325-0976	
DALBERTO, RICHARD E PH#: 864-833-9100	LAURENS COUNTY HEALTH CARE SYSTEM	
Facility Email: STHOMPSON@LCHCSORG	HTL-0531 / 11/30/2010	
Licensed Beds: General: 76 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds NICU: 0 Neonatal Special Care: 0		
Certifications: Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	Number Licensed Units
<input style="width: 100px;" type="text" value="1"/>	<input style="width: 100px;" type="text" value="76"/>

County: Laurens

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LAURENS COUNTY HEALTH CARE SYSTEM SKILLED NURSING FACILITY 22725 HWY 76 E CLINTON, SC 29325-7527 FAC.#:864-938-2843 FISCUS, DEBORAH B PH#: 864-938-2843 Facility Email: DFISCUS@LCHCSORG	Laurens / District 22725 HWY 76 E CLINTON, SC 29325-7527 LAURENS COUNTY HEALTH CARE SYSTEM NCF-0786 / 04/30/2010	14
<p>Licensed Beds Nursing Home 14 Institutional Nursing Home 0</p>		

Certifications:None

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY 1 MARTHA FRANKS DR LAURENS, SC 29360-1799 FAC.#:864-984-4541 ORCUTT, LINDA PH#: 864-984-4541 Facility Email: DHAIR@SCBMA.COM	Laurens / Non-Profit Corporation 1 MARTHA FRANKS DR LAURENS, SC 29360-1799 SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC NCF-0435 / 03/31/2010	88
<p>Licensed Beds Nursing Home 81 Institutional Nursing Home 7</p>		

Certifications:Alzheimer Unit, Alzheimers Care

NHC HEALTHCARE CLINTON 304 JACOBS HWY CLINTON, SC 29325-7279 FAC.#:864-833-2550 SELLARS, GIDEON PH#: 864-833-2550 Facility Email: GSELLARS@NHCCCLINTON.NET	Laurens / Ltd. Liability PO BOX 727 CLINTON, SC 29325-0727 NHC HEALTHCARE/CLINTON LLC NCF-0804 / 06/30/2010	131
<p>Licensed Beds Nursing Home 131 Institutional Nursing Home 0</p>		

Certifications:None

NHC HEALTHCARE LAURENS 379 PINEHAVEN ST EXT LAURENS, SC 29360-1259 FAC.#:864-984-6584 SHEARER, RICKIE L PH#: 864-984-6584 Facility Email: RSHEARER@NHCLAURENSCOM	Laurens / Ltd. Liability PO BOX 1259 LAURENS, SC 29360-1259 NHC HEALTHCARE/LAURENS LLC NCF-0326 / 06/30/2010	176
<p>Licensed Beds Nursing Home 176 Institutional Nursing Home 0</p>		

Certifications:Alzheimer Care

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON 801 MUSGROVE ST CLINTON, SC 29325-1796 FAC.#:864-833-5190 SNIDER, ANN T PH#: 864-833-5190 Facility Email: ASNIDER@PRESHOMESC.ORG	Laurens / Non-Profit Corporation 801 MUSGROVE ST CLINTON, SC 29325-1796 PRESBYTERIAN HOME OF SOUTH CAROLINA INC NCF-0366 / 04/30/2010	66
<p>Licensed Beds Nursing Home 0 Institutional Nursing Home 66</p>		

Certifications:None

County: Laurens

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

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	5
Number Licensed Units	475

County: Laurens

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
GATEWAY COUNSELING CENTER 219 HUMAN SERVICES RD CLINTON, SC 29325-7548 FAC.#:864-833-6500 NELSON, LELAND J PH#: 864-833-6500 Facility Email: LNELSON@GATEWAYCOUNSELING.ORG	Laurens / County 219 HUMAN SERVICES RD CLINTON, SC 29325-7548 LAURENS COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE OTP-0035 / 10/31/2010	1

Certifications:None

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

County: Laurens

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
FRESENIUS MEDICAL CARE FOUNTAIN INN/GRAY COURT 298 CHAPMAN RD FOUNTAIN INN, SC 29644-6129 FAC.#:864-862-2273 BROCK, VIRGINIA G PH#: 864-233-9866 Facility Email: No Facility Email on Record	Laurens / Corporation 298 CHAPMAN RD FOUNTAIN INN, SC 29644-6129 RCG UNIVERSITY DIVISION INC ERD-0177 / 10/31/2010	11
Licensed Stations: Hemodialysis: 11 Peritoneal: 0		
RCG PALMETTO 317 PROFESSIONAL PARK RD CLINTON, SC 29325-7625 FAC.#:864-833-0717 POWELL, JEANNIE D PH#: 864-833-0717 Facility Email: No Facility Email on Record	Laurens / Corporation 317 PROFESSIONAL PARK RD CLINTON, SC 29325-7625 RCG UNIVERSITY DIVISION INC ERD-0126 / 03/31/2010	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 0		

Totals For Facility/License Type Renal Dialysis	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="32"/>

County: Laurens

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
INKWORKS TATTOO 2283 S MAIN ST FOUNTAIN INN, SC 29644-6832 FAC.#:864-862-5552 SIERPUTOWSKI, PHILLIP J PH#: 864-862-5552 Facility Email: INKWORKSTATTOO@BELLSOUTH.NET	Laurens / Sole Proprietorship 102 OAKLAND WAY FOUNTAIN INN, SC 29644-1932 SIERPUTOWSKI, PHILLIP J TF-0056 / 09/30/2010	4

Totals For Facility/License Type Tattoo Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="4"/>

Number of Activities/Facilities licensed in county of Laurens	# Lics	33
	Number Licensed Units :	1,482

Report Total

Total Number of Activities/Facilities licensed 33 Total Number Licensed Units 1,482