

County: Newberry

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
NEWBERRY COUNTY COUNCIL ON AGING ADULT DAY HEALTH CARE 1300 HUNT ST NEWBERRY, SC 29108-3082 FAC.#:803-276-8266 STOCKMAN, LYNN M PH#: 803-276-8266 Facility Email: LYNN@NCCOA.ORG	Newberry / Non-Profit Corporation 1300 HUNT ST NEWBERRY, SC 29108-3082 NEWBERRY COUNTY COUNCIL ON AGING ADC-0073 / 10/31/2010	15
Number of Participants		15

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="15"/>

County: Newberry

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
SOUTHSIDE RESIDENTIAL CARE 425 S WHEELER AVE PROSPERITY, SC 29127-9347 FAC.#:803-364-0022 BOSTON, TONJA L PH#: 803-364-0022 Facility Email: No Facility Email on Record	Newberry / Sole Proprietorship 425 S WHEELER AVE PROSPERITY, SC 29127-9347 ROY L BOWERS SR CRC-1155 / 04/30/2010	30

Certifications:None

SPRINGFIELD PLACE RESIDENTIAL CARE 2006 SPRINGFIELD CIR NEWBERRY, SC 29108-3084 FAC.#:803-405-1585 MONTGOMERY, KATHY N PH#: 803-405-1585 Facility Email: LPARKS@JFHAWKINS.ORG	Newberry / County 2006 SPRINGFIELD CIR NEWBERRY, SC 29108-3084 NEWBERRY COUNTY CRC-1250 / 05/31/2010	50
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Certifications:Alzheimer Care

Totals For Facility/License Type Community Residential Care Facility

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

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
H A MCCULLOUGH COMMUNITY RESIDENCE 2600 HOLLOWAY ST NEWBERRY, SC 29108-4500 FAC.#:803-276-1542 BROOKS, JENNIFER L PH#: 803-276-1542 Facility Email: JTBROOKS@NCDSNB.ORG	Newberry / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0102 / 03/31/2010	12

Totals For Facility/License Type Habilitation R15	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="12"/>

County: Newberry

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
NEWBERRY COUNTY MEMORIAL HOSPITAL 2669 KINARD ST NEWBERRY, SC 29108-2932 FAC.#:803-276-7570 TRAINOR, JOE PH#: 803-276-7859 Facility Email: LYNNBEASLEY@NEWBERRYHOSPITAL.NET	Newberry / County PO BOX 497 NEWBERRY, SC 29108-0497 NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD HTL-0015 / 01/31/2010	90
Licensed Beds: General: 90 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: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="90"/>

County: Newberry

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	

J F HAWKINS NURSING HOME	Newberry / County	118
1330 KINARD ST	1330 KINARD ST	
NEWBERRY, SC 29108-3096 FAC.#:803-276-2601	NEWBERRY, SC 29108-3096	
GAMBILL, ELIZABETH A PH#: 803-284-4313	NEWBERRY COUNTY	
Facility Email: GGAMBILL@JFHAWKINS.ORG	NCF-0234 / 06/30/2010	

Licensed Beds Nursing Home 118 Institutional Nursing Home 0

Certifications:Alzheimer Unit, Alzheimers Care

NEWBERRY COUNTY MEMORIAL HOSPITAL TRANSITIONAL CARE UNIT	Newberry / County	12
2669 KINARD ST	PO BOX 497	
NEWBERRY, SC 29108-2932 FAC.#:803-276-7570	NEWBERRY, SC 29108-0497	
ROBERTS, DEBRA G PH#: 803-405-7244	NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD	
Facility Email: NEWBERRYHOSPITAL.ORG	NCF-0763 / 02/28/2010	

Licensed Beds Nursing Home 12 Institutional Nursing Home 0

Certifications:None

WHITE OAK MANOR-NEWBERRY	Newberry / Corporation	146
2555 KINARD ST	2555 KINARD ST	
NEWBERRY, SC 29108-2903 FAC.#:803-276-6060	NEWBERRY, SC 29108-2903	
GILLIAM, MELISSA S PH#: 803-276-6060	WHITE OAK MANOR-NEWBERRY INC	
Facility Email: MGILLIAM@WHITEOAKMANOR.COM	NCF-0884 / 12/31/2009	

Licensed Beds Nursing Home 146 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home

Number of Activities/Facilities licensed: Number Licensed Units

County: Newberry

Facility Type: PSAD Inpatient

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
WESTVIEW BEHAVIORAL HEALTH SERVICES (INPATIENT)	Newberry / Non-Profit Corporation	15
909 COLLEGE ST	PO BOX 738	
NEWBERRY, SC 29108 FAC.#:803-321-2109	NEWBERRY, SC 29108-0738	
HILTON, DAN L PH#: 803-276-5690	NEWBERRY COMMISSION ON ALCOHOL AND DRUG ABUSE	
Facility Email: DHILTON@WESTVIEWBEHAVIORAL.ORG	ITP-0001 / 05/31/2010	
Licensed Beds Medical Detox 0 Social Detox:	15 Res. Treatment Program	0

Totals For Facility/License Type PSAD Inpatient	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="15"/>

County: Newberry

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
WESTVIEW BEHAVIORAL HEALTH SERVICES (OUTPATIENT) 800 MAIN ST NEWBERRY, SC 29108 FAC.#:803-276-5690 HILTON, DAN L PH#: 803-276-5690 Facility Email: DHILTON@WESTVIEWBEHAVIORAL.ORG	Newberry / Non-Profit Corporation PO BOX 738 NEWBERRY, SC 29108-0738 NEWBERRY COMMISSION ON ALCOHOL AND DRUG ABUSE OTP-0041 / 11/30/2009	1

Certifications:None

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

County: Newberry

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 NEWBERRY 2041 MEDICAL PARK DR NEWBERRY, SC 29108-2262 FAC.#:803-276-2860 MONTGOMERY, SUSAN N PH#: 803-276-2860 Facility Email: No Facility Email on Record	Newberry / Limited Liability 2041 MEDICAL PARK DR NEWBERRY, SC 29108-2262 FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC ERD-0020 / 02/28/2010	16

Licensed Stations: Hemodialysis: 16 Peritoneal: 0

Totals For Facility/License Type Renal Dialysis	
Number of Activities/Facilities licensed:	Number Licensed Units
1	16

Number of Activities/Facilities licensed in county of Newberry	# Lics	11
	Number Licensed Units :	505

Report Total

Total Number of Activities/Facilities licensed	11	Total Number Licensed Units	505
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