County: Hampton

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
J & T RESIDENTIAL CARE FACILITY 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 FAC.#:803-943-7177 HAMILTON DA'ASIA S PH#: 803-943-7177 **Facility Email:** Not on File	Hampton / Sole Proprietorship 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 THELMA S MYERS **CRC-1094 / 05/31/2017**	10
Alzheimer Care:Yes **Max # Resident:10** **Alzheimer Unit: No** **Max # Beds: 0** **Certifications:None**		
SEVILLE'S RESIDENTIAL CARE FACILITY 109 BENNETT LN HAMPTON, SC 29924-1375 FAC.#:803-943-9131 JENKINS GENORA W PH#: 803-943-9131 **Facility Email:** KAMILLE.JENKINS@GMAIL.COM	Hampton / Sole Proprietorship 109 BENNETT LN HAMPTON, SC 29924-1375 GENORA W JENKINS **CRC-1178 / 08/31/2017**	10
Alzheimer Care:No **Max # Resident:0** **Alzheimer Unit: No** **Max # Beds: 0** **Certifications:None**		
VARNVILLE COMMUNITY RESIDENCE 266 HAMPTON RD VARNVILLE, SC 29944 FAC.#:803-943-4818 MCQUIRE ELISE S PH#: 803-943-4818 **Facility Email:** ELISEMAC@YAHOO.COM	Hampton / PO BOX 128 HAMPTON, SC 29924 HAMPTON COUNTY DISABILITIES AND SPECIAL NEEDS BOARD **CRC-1211 / 05/31/2017**	8
Alzheimer Care:No **Max # Resident:0** **Alzheimer Unit: No** **Max # Beds: 0** **Certifications:None**		

Totals For Facility/License Type: Community Residential Care Facility

Number of Activities/Facilities licensed: 3 **Number Licensed Units: 28**

County: Hampton

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
HAMPTON REGIONAL MEDICAL CENTER 595 W CAROLINA AVE VARNVILLE, SC 29944-4735 FAC.#:803-943-2771 HAMILL DAVE PH#: 803-943-2771 **Facility Email:** JALLEN@HAMPTONREGIONAL.ORG	Hampton / Non-Profit Corporation PO BOX 338 VARNVILLE, SC 29944-0338 HAMPTON REGIONAL MEDICAL CENTER (INC) **HTL-0027 / 07/31/2017**	32

Licensed Beds: General: 32 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s)

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 1 Number Licensed Units: 32

County: Hampton

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
ANGEL ARMS IN HOME AND PERSONAL CARE SERVICE LLC 160 WOOD ST ESTILL, SC 29918-4799 FAC.#:803-625-9010 PH#: **Facility Email:** AANMHHC@CENTURYLINK.NET	Hampton / Limited Liability PO BOX 1516 ESTILL, SC 29918-1516 ANGEL ARMS HOME HEALTH CARE SVC LLC **IHCP-0140 / 05/31/2017**	- 1
LOW COUNTRY FAMILY SERVICE 61 HICKORY HILL VARNVILLE, SC 29944 FAC.#:803-943-1099 PH#: **Facility Email:** LOWCOUNTRY.FAMILY@YAHOO.COM	Hampton / Corporation PO BOX 912 VARNVILLE, SC 29944-0912 LOW COUNTRY FAMILY SERVICE INC **IHCP-0406 / 07/31/2017**	- 1
MORNING STAR HOME CARE SERVICES LLC 196 TILLMAN AVE VARNVILLE, SC 29944 FAC.#:803-943-3254 PH#: **Facility Email:** MORNSTAR@EMBARQMAIL.COM	Hampton / Limited Liability PO BOX 883 VARNVILLE, SC 29944 MORNING STAR HOME CARE SERVICES LLC **IHCP-0180 / 06/30/2017**	- 1

Totals For Facility/License Type: Inhome Care Provider

Number of Activities/Facilities licensed: 3 **Number Licensed Units: - 3**

County: Hampton

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
PRUITTHEALTH - ESTILL 252 LIBERTY AVE S ESTILL, SC 29918 FAC.#:803-625-3852 LOCKLAIR JEREMY JERRY L PH#: 803-625-3852 **Facility Email:** JLOCKLAIR@PRUITTHEALTH.COM	Hampton / Ltd. Liability 252 LIBERTY AVE S ESTILL, SC 29918 PRUITTHEALTH - ESTILL LLC **NCF-0922 / 09/30/2017**	104

Licensed Beds: Nursing Home: 104 **Institutional Nursing Home:** 0

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

Certifications:None

Totals For Facility/License Type: Nursing Home

Number of Activities/Facilities licensed: 1 **Number Licensed Units: 104**

County: Hampton

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
NEW LIFE CENTER COMMISSION ON ALCOHOL AND OTHER DRUG ABUSE 102 GINN ALTMAN AVE STE C HAMPTON, SC 29924-3962 FAC.#:803-943-2800 RIVERS ESTELLE PH#: 803-842-7770 **Facility Email:** ESTELLERIVERS@GMAIL.COM **Certifications:None**	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 / 05/31/2017**	3

Totals For Facility/License Type: PSAD Outpatient

Number of Activities/Facilities licensed: 1 **Number Licensed Units: 3**

Number of Activities/Facilities licensed in county of : Hampton # Lics: 9
Number Licensed Units : 164

Report Totals

Total Number of Activities/Facilities licensed: 9 **Total Number Licensed Units: 164**