### AVALONIA GROUP HOMES INC

**Name of Facility:** AVALONIA GROUP HOMES INC  
**Location Street:** 404 HAMPTON AVE  
**Location City, State:** PICKENS, SC 29671-2608  
**Facility Email:** MSHORT@RECOVEROURYOUTH.ORG  
**Fac. Con. Email:** MSHORT@RECOVEROURYOUTH.ORG  
**License #/Expiration:** RTF-0020 / 09/30/2020  
**County/Ownership Type:** Pickens / Corporation  
**Mailing Address:** PO BOX 968  
**City, State:** TRAVELERS REST, SC 29690-0968  
**Facility Name:** AVALONIA GROUP HOMES INC  
**Facility Phone:** SHORT MARVIN J PH#: 864-897-8050  
**Total Licensed Beds:** 55

### EXCALIBUR YOUTH SERVICES LLC

**Name of Facility:** EXCALIBUR YOUTH SERVICES LLC  
**Location Street:** 3683 S INDUSTRIAL DR  
**Location City, State:** SIMPSONVILLE, SC 29681-3238  
**Facility Email:** JSHORT@RECOVEROURYOUTH.COM  
**Fac. Con. Email:** JSHORT@RECOVEROURYOUTH.COM  
**License #/Expiration:** RTF-0022 / 12/31/2020  
**County/Ownership Type:** Greenville / Limited Liability  
**Mailing Address:** PO BOX 968  
**Total Licensed Beds:** 60

### GENERATIONS RESIDENTIAL PROGRAMS INC

**Name of Facility:** GENERATIONS RESIDENTIAL PROGRAMS INC  
**Location Street:** 841 DUNKLIN BRIDGE RD  
**Location City, State:** FOUNTAIN INN, SC 29644  
**Facility Email:** HEATHER@GENERATIONSGROUP.COM  
**Fac. Con. Email:** HEATHER@GENERATIONSGROUP.COM  
**License #/Expiration:** RTF-0027 / 08/31/2020  
**County/Ownership Type:** Greenville / Non-Profit Corporation  
**Mailing Address:** PO BOX 80009  
**Total Licensed Beds:** 30

### NEW HOPE CAROLINAS INC

**Name of Facility:** NEW HOPE CAROLINAS INC  
**Location Street:** 101 SEDGEWOOD DR  
**Location City, State:** ROCK HILL, SC 29732-2315  
**Facility Email:** SAMP@NEWHOPETREATMENT.COM  
**Fac. Con. Email:** SAMP@NEWHOPETREATMENT.COM  
**License #/Expiration:** RTF-0021 / 11/30/2020  
**County/Ownership Type:** York / Corporation  
**Mailing Address:** 7515 NORTHSIDE DR STE 200  
**Total Licensed Beds:** 150

### PALMETTO PEE DEE BEHAVIORAL HEALTH LLC

**Name of Facility:** PALMETTO PEE DEE RESIDENTIAL TREATMENT CENTER  
**Location Street:** 601 GREGG AVE STE B  
**Location City, State:** FLORENCE, SC 29501-4316  
**Facility Email:** STEPHANIE.TURNER@UHSINC.COM  
**Fac. Con. Email:** DANIEL.EICHELBERGER@UHSINC.COM  
**License #/Expiration:** RTF-0014 / 09/30/2020  
**County/Ownership Type:** Florence / Corporation  
**Mailing Address:** 601 GREGG AVE STE B  
**Total Licensed Beds:** 59
### Residential Treatment Facilities for Children & Adolescents

**Name of Facility**

**Location Street**

**Location City, State**

**Administrator**

**License#/Expiration**

**County/Ownership Type**

**Mailing Address**

**Facility Email**

**Fac. Con. Email**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>License# / Expiration</th>
<th>County/Ownership Type</th>
<th>Mailing Address</th>
<th>Facility Email</th>
<th>Fac. Con. Email</th>
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<tbody>
<tr>
<td>PALMETTO PINES BEHAVIORAL HEALTH</td>
<td>RTF-0017 / 01/31/2020</td>
<td>Dorchester / Corporation</td>
<td>SUMMERTON, SC  29485-8104</td>
<td><a href="mailto:LINCOLN.LAWRENCE@UHSINC.COM">LINCOLN.LAWRENCE@UHSINC.COM</a></td>
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<tr>
<td>PRISMA HEALTH MARSHALL I PICKENS CHILDRENS</td>
<td>RTF-0031 / 10/31/2020</td>
<td>Greenville / Corporation</td>
<td>GREENVILLE, SC  29605-5611</td>
<td><a href="mailto:GMMCAR@PRISMAHEALTH.ORG">GMMCAR@PRISMAHEALTH.ORG</a></td>
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<tr>
<td>RIVERSIDE BEHAVIORAL HEALTH SERVICES AT WINDWOOD FARM</td>
<td>RTF-0025 / 03/31/2020</td>
<td>Charleston / Non-Profit Corporation</td>
<td>AWENDAW, SC  29429-5951</td>
<td><a href="mailto:MCKELVEY@WINDWOODFARM.ORG">MCKELVEY@WINDWOODFARM.ORG</a></td>
<td></td>
</tr>
<tr>
<td>SPRINGBROOK BEHAVIORAL HEALTH SYSTEM RTF</td>
<td>RTF-0001 / 08/31/2020</td>
<td>Greenville / Corporation</td>
<td>TRAVELERS REST, SC  29690-9447</td>
<td><a href="mailto:MIKE.ROWLEY@SPRINGBROOKBHS.COM">MIKE.ROWLEY@SPRINGBROOKBHS.COM</a></td>
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<tr>
<td>THREE RIVERS RESIDENTIAL TREATMENT-MIDLANDS CAMPUS</td>
<td>RTF-0018 / 01/31/2020</td>
<td>Lexington / Corporation</td>
<td>WEST COLUMBIA, SC  29170-2024</td>
<td><a href="mailto:LAURIE.MEAD@UHSINC.COM">LAURIE.MEAD@UHSINC.COM</a></td>
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**Total Licensed Beds:**

| 64 | 22 | 12 | 73 | 64 |

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### Contact Information

**Facility Email:**

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<thead>
<tr>
<th>Facility Name</th>
<th>Facility Email</th>
<th>Facility Contact Email</th>
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<tr>
<td>PALMETTO PINES BEHAVIORAL HEALTH</td>
<td><a href="mailto:ISIS.FRASIER@UHSINC.COM">ISIS.FRASIER@UHSINC.COM</a></td>
<td></td>
</tr>
<tr>
<td>PRISMA HEALTH MARSHALL I PICKENS CHILDRENS</td>
<td><a href="mailto:GMMCAR@PRISMAHEALTH.ORG">GMMCAR@PRISMAHEALTH.ORG</a></td>
<td>No Facility Contact Email on Record</td>
</tr>
<tr>
<td>RIVERSIDE BEHAVIORAL HEALTH SERVICES AT WINDWOOD FARM</td>
<td><a href="mailto:MCKELVEY@WINDWOODFARM.ORG">MCKELVEY@WINDWOODFARM.ORG</a></td>
<td></td>
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<tr>
<td>SPRINGBROOK BEHAVIORAL HEALTH SYSTEM RTF</td>
<td><a href="mailto:MIKE.ROWLEY@SPRINGBROOKBHS.COM">MIKE.ROWLEY@SPRINGBROOKBHS.COM</a></td>
<td></td>
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<td><a href="mailto:LAURIE.MEAD@UHSINC.COM">LAURIE.MEAD@UHSINC.COM</a></td>
<td></td>
</tr>
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<td>Name of Facility</td>
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<td>County/Ownership Type</td>
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<tr>
<td>WILLOWGLEN ACADEMY SOUTH CAROLINA</td>
<td>RTF-0023 / 03/31/2020</td>
<td>Williamsburg / Corporation</td>
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<tr>
<td>1370 WILLIAMSBURG COUNTY HWY N</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KINGSTREE, SC 29556</td>
<td></td>
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<tr>
<td>FACILITY #:843-201-4888</td>
<td></td>
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<tr>
<td>VASSAR TERESA PH#: 843-201-4888</td>
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<tr>
<td>Facility Email: <a href="mailto:TVASSAR@WILLOWGLENSC.COM">TVASSAR@WILLOWGLENSC.COM</a></td>
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<tr>
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**Total Licensed Beds: 40**

**Total Number of Facilities: 11**

**Total Licensed Beds: 629**