County: Williamsburg

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
H ALTON BOYD SENIOR CENTER 484 NELSON BLVD KINGSTREE, SC 29556-4025 FAC.#:843-355-2420 MITCHELL VICKIE B PH#: 843-372-5104 **Facility Email:** VICKIEMITCHELL55@YAHOO.COM	Williamsburg / Limited Liability 484 NELSON BLVD KINGSTREE, SC 29556-4025 H ALTON BOYD SENIOR CENTER LLC **ADC-0299 / 01/31/2017**	40
Number of Participants:	**40**	
HOPEWELL SENIOR DAY CARE 1277 BLAKELY RD SALTERS, SC 29590-3439 FAC.#:843-387-6376 EVANS DOTTIE M PH#: 843-387-6376 **Facility Email:** HOPEJ@FTC-I.NET	Williamsburg / Corporation 1277 BLAKELY RD SALTERS, SC 29590-3439 HOPEWELL SENIOR DAY CARE INC **ADC-0206 / 08/31/2017**	12
Number of Participants:	**12**	
LOVELY DOVE SENIOR CARE 1307 N LONGSTREET ST KINGSTREE, SC 29556-2739 FAC.#:843-230-1918 EPPS ROBBIE C PH#: 843-230-1918 **Facility Email:** SMSTRONG1@YAHOO.COM	Williamsburg / Limited Liability 525 REED ST APT 33 KINGSTREE, SC 29556-4051 LOVELY DOVE LLC **ADC-0325 / 09/30/2016 (Renewal Pending)**	13
Number of Participants:	**13**	
RUTH LOUIS ADULT HEALTH DAY CARE 1349 SEABOARD RD ANDREWS, SC 29510-5628 FAC.#:843-221-5848 NESMITH PEARL PH#: 843-221-5848 **Facility Email:** RUTHLOUISADC@FTC-I.NET	Williamsburg / Non-Profit Corporation 1349 SEABOARD RD ANDREWS, SC 29510-5628 RUTH LOUIS ADULT HEALTH DAY CARE INC **ADC-0226 / 05/31/2016 (Renewal Pending)**	30
Number of Participants:	**30**	
RUTH LOUIS ADULT HEALTH DAY CARE #2 111 E MILL ST KINGSTREE, SC 29556-3427 FAC.#:843-355-2333 NESMITH PEARL PH#: 843-221-5848 **Facility Email:** RUTHLOUISADC@FTC-I.NET	Williamsburg / Non-Profit Corporation 111 E MILL ST KINGSTREE, SC 29556-3427 RUTH LOUIS ADULT HEALTH DAY CARE INC **ADC-0250 / 12/31/2016**	69
Number of Participants:	**69**	

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: 5 **Number Licensed Units: 164**

County: Williamsburg

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
GOOD SAMARITAN RESIDENTIAL CARE 1356 BUBZY RD KINGSTREE, SC 29556-5246 FAC.#:843-382-3530 DUROUSSEAU MATTIE H PH#: 843-382-3530 **Facility Email:** GOODSAMARITAN1000@YAHOO.COM	Williamsburg / Corporation 1356 BUBZY RD KINGSTREE, SC 29556-5246 GOOD SAMARITAN RESIDENTIAL CARE FACILITY INC **CRC-1015 / 05/31/2017**	9
Alzheimer Care:No **Max # Resident:0** **Alzheimer Unit: No** **Max # Beds: 0** **Certifications:None**		
WILLIAMSBURG RESIDENTIAL CARE FACILITY 14 WRCF ST KINGSTREE, SC 29556-2596 FAC.#:843-355-6214 PH#: **Facility Email:** WRCF@FTC-I.NET	Williamsburg / Sole Proprietorship PO BOX 147 SALTERS, SC 29590-0063 JACKSON JACQUES G **CRC-0038 / 03/31/2017**	24
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: 2 **Number Licensed Units: 33**

County: Williamsburg

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AMEDISYS HOME HEALTH CARE 127 E MILL ST KINGSTREE, SC 29556 FAC.#:843-355-5103 LANGSTON JENNIFER PH#: **Facility Email:** 2241@AMEDISYS.COM	Williamsburg / Limited Liability 127 E MILL ST KINGSTREE, SC 29556 GEORGETOWN HOSPITAL HOME HEALTH LLC **HHA-0188 / 01/31/2017**	2

Counties Served: Georgetown, Williamsburg

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:

Totals For Facility/License Type: Home Health

Number of Activities/Facilities licensed: 1 **Number Licensed Units:** 2

County: Williamsburg

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
WILLIAMSBURG REGIONAL HOSPITAL 500 NELSON BLVD KINGSTREE, SC 29556-4027 FAC.#:843-355-8888 POSTON SHARON PH#: 843-355-8888 **Facility Email:** SPOSTON@WMBGRH.COM	Williamsburg / Non-Profit Corporation PO BOX 568 KINGSTREE, SC 29556-0568 WILLIAMSBURG REGIONAL HOSPITAL INC **HTL-0841 / 10/31/2017**	25

Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital

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

Number of Activities/Facilities licensed: 1 Number Licensed Units: 25

County: Williamsburg

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
ASH-COURT COMPANION CARE LLC 310 E MAIN ST KINGSTREE, SC 29556 FAC.#:843-355-1313 PH#: **Facility Email:** ASHCOURTCOMPANIONCARE@YAHOO.COM	Williamsburg / Limited Liability 310 E MAIN ST KINGSTREE, SC 29556-3513 ASH-COURT COMPANION CARE LLC **IHCP-0139 / 05/31/2017**	- 1
GOOD SAMARITAN HOME CARE SERVICES LLC 3 ROUND SWAMP RD KINGSTREE, SC 29556 FAC.#:843-382-3574 PH#: **Facility Email:** GOODSAMARITANHOMECARESERVICES@YAHOO.COM	Williamsburg / Limited Liability 3 ROUND SWAMP RD KINGSTREE, SC 29556 GOOD SAMARITAN HOME CARE SERVICES LLC **IHCP-0384 / 09/30/2017**	- 1
GUARDIAN ANGEL SENIOR CARE LLC 1238 THORNE AVE KINGSTREE, SC 29556 FAC.#:770-329-3555 TISDALE MARVIN PH#: 770-329-3555 **Facility Email:** MARG756@YAHOO.COM	Williamsburg / Limited Liability GUARDIAN ANGEL CARE LLC **IHCP-0577 / 09/30/2017**	- 1
HEARTS & HANDS CLA LLC 1382 FULTON AVE KINGSTREE, SC 29556 FAC.#:843-372-0745 MCELVEEN-DOZIER JUDY A PH#: 843-372-0745 **Facility Email:** RDOZIERYORK@YAHOO.COM	Williamsburg / Limited Liability HEARTS & HANDS CLA LLC **IHCP-0528 / 04/30/2017**	- 1

Totals For Facility/License Type: Inhome Care Provider

Number of Activities/Facilities licensed: 4 **Number Licensed Units: - 4**

County: Williamsburg

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
KINGSTREE NURSING FACILITY 401 NELSON BLVD KINGSTREE, SC 29556-4024 FAC.#:843-355-6116 SLAVINSKI CANDICE J PH#: 843-355-6116 **Facility Email:** CSLAVINSKI@CMCSENIORCARE.COM	Williamsburg / Limited Liability 401 NELSON BLVD KINGSTREE, SC 29556-4024 CARLYLE SENIOR CARE OF KINGSTREE LLC **NCF-0984 / 07/31/2017**	96

Licensed Beds: Nursing Home: 96 **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: 96**

County: **Williamsburg**

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
WILLIAMSBURG COUNTY DEPARTMENT ON ALCOHOL AND DRUG ABUSE 115 SHORT ST KINGSTREE, SC 29556-3924 FAC.#:843-355-9113 GRAHAM JACKIE S PH#: 843-355-9113 **Facility Email:** JGRAHAM@WCDADA.ORG **Certifications:** **None**	Williamsburg / County PO BOX 506 KINGSTREE, SC 29556-0506 WILLIAMSBURG COUNTY COUNCIL **OTP-0019 / 06/30/2017**	2

Totals For Facility/License Type: **PSAD Outpatient**

Number of Activities/Facilities licensed: **1** **Number Licensed Units:** **2**

County: Williamsburg

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
FMC DIALYSIS SERVICES-ANDREWS 102 S COUNTY LINE RD ANDREWS, SC 29510-8125 FAC.#:843-221-5454 COHENS RN JACQUELINE PH#: 843-357-4840 **Facility Email:** CLINIC2359@FMC-NA.COM	Williamsburg / Corporation 102 S COUNTY LINE RD ANDREWS, SC 29510-8125 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC **ERD-0115 / 05/31/2017**	12
Licensed Stations: Hemodialysis: 12 Peritoneal: 0		
FRESENIUS MEDICAL CARE KINGSTREE 215 N BROOKS ST KINGSTREE, SC 29556-3503 FAC.#:843-355-9750 WEATHERFORD RN BARBARA PH#: 843-355-9750 **Facility Email:** GAIL.PRESSLEY@FMC-NA.COM	Williamsburg / Corporation 215 N BROOKS ST KINGSTREE, SC 29556-3503 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC **ERD-0069 / 02/28/2017**	31
Licensed Stations: Hemodialysis: 31 Peritoneal: 0		

Totals For Facility/License Type: Renal Dialysis

Number of Activities/Facilities licensed: 2 **Number Licensed Units: 43**

County: Williamsburg

Facility Type: Residential Treatment for Children & Adolescents

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
WILLOWGLEN ACADEMY SOUTH CAROLINA 1370 N WILLIAMSBURG COUNTY HWY KINGSTREE, SC 29556 FAC.#:843-201-4888 VASSAR TERESA PH#: 803-201-4888 **Facility Email:** TVASSAR@WILLOWGLENSC.COM	Williamsburg / Corporation 1370 N WILLIAMSBURG COUNTY HWY KINGSTREE, SC 29556 WILLOWGLEN ACADEMY SOUTH CAROLINA INC **RTF-0023 / 03/31/2017**	40

Totals For Facility/License Type: Residential Treatment for Children & Adolescents

Number of Activities/Facilities licensed: 1 **Number Licensed Units:** 40

Number of Activities/Facilities licensed in county of : Williamsburg **# Lics:** 18
Number Licensed Units : 401

Report Totals

Total Number of Activities/Facilities licensed: 18 **Total Number Licensed Units:** 401