

# Rehabilitation Center

2022 Annual Report



# Regions Hospital Rehabilitation

We're an intensive rehabilitation facility that offers patients the highest level of care. In 2022, our program remained strong with high patient census and expanded programming to meet our community's need.

## 2022 highlights

### Program growth and expanded patient care services

**High census:** We maintained the higher average daily census achieved in 2021. We continued to offer bed space for acute care patients in Regions Hospital under the COVID-19 emergency declaration waiver.

**Exceeded industry standards:** On average, our patients received 3.23 hours of therapy per day, 5-6 days of the week, which exceeded the 3-hour minimum.

**Continuity of care:** An improvement project focused on increased scheduling efficiencies. This resulted in greater continuity with patients' primary therapists.

**National collaboration:** Together with regional partners, we were awarded one of 18 grants in the nation to become a Spinal Cord Injury Model System (SCIMS). This elevated staff development, research and community engagement.

**Leveraging technology:** We offered virtual home evaluations and virtual peer mentor opportunities.

**Care partners return:** As hospital visitor guidelines allowed, we welcomed family and friends back to participate in therapy and discharge preparation.

**New INSPIRE leadership:** We welcomed Lynn Kloeckner, MS OTR/L, to Stroke INSPIRE. This program provides stroke survivor and care partner programming across all levels of care, from acute hospital admission through outpatient care.

**Injury prevention:** Our partnership with St. Paul Public School Community Education remained strong. We provided Think First injury prevention curriculum to 445 driver education students.

**Strong community partnership:** Regions Hospital consistently led in referrals placed to the Minnesota Brain Injury Alliance Resource Facilitation Program for brain injury and stroke. This program provides up to two years of phone-based support.

**Equipment improvements:** A new ceiling lift was installed in our therapy gym. We also added new commodes and shower chair equipment to support patients with cervical level spinal cord injury.

**Staff recognition:** Sarah Kraus, Inpatient PT, received the Friend of Nursing award from Regions Hospital. Jennifer Sulzbach, Speech-Language Pathologist, received the HealthPartners President's Award. Both were nominated by their colleagues.

**Pain neuroscience education (PNE):** Our rehabilitation team participated in a day-long training with PNE expert, Adriaan Louw. This commitment to our patients with pain ensures we're using common language and best practices for their care.

### 2022 patient and team member safety

We continuously monitor and follow best practices to prevent common complications and ensure patient safety.

C. difficile infections – 0 patients

Central line-associated infections – 0 patients

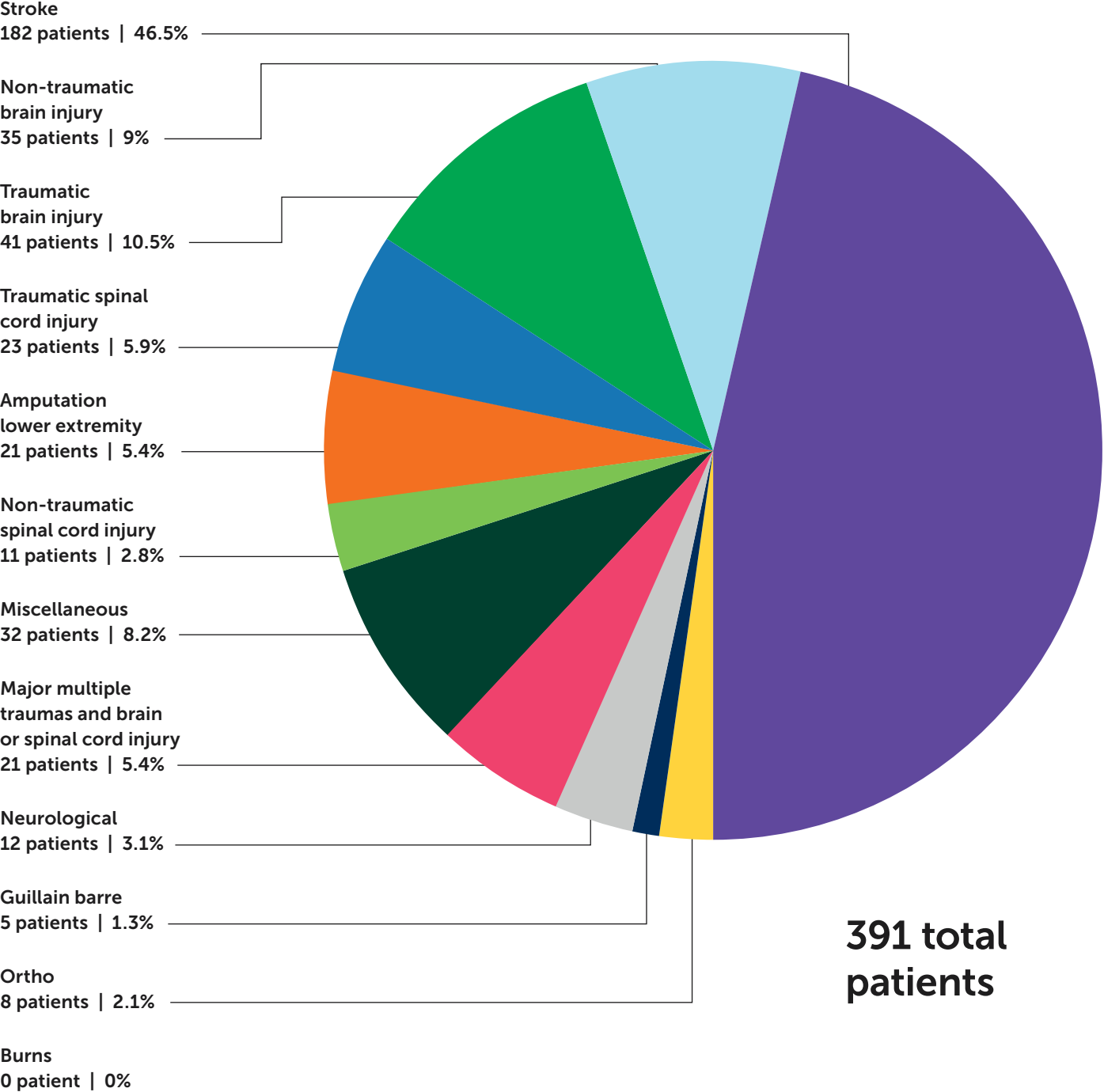
Deep vein thromboses – 0 patients

Hospital-acquired pressure injuries – 0 patients

Hand hygiene compliance – 93.3%

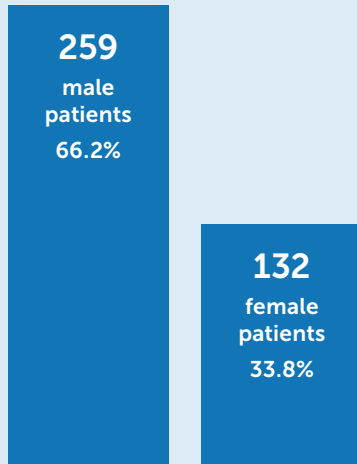
# 2022 outcomes and data

## Patients served by rehab impairment category



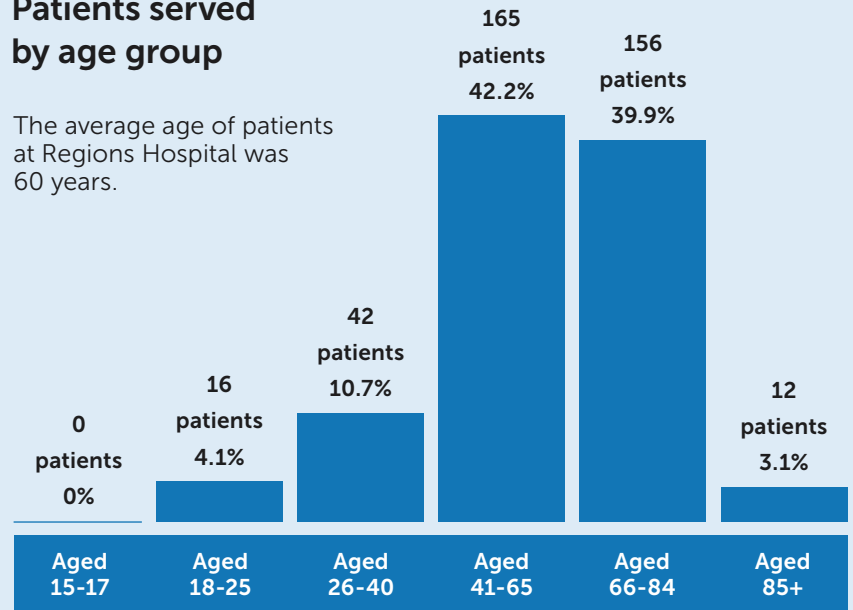
# 391 patients served at Regions Hospital

## Patients served by gender



## Patients served by age group

The average age of patients at Regions Hospital was 60 years.



## All patient outcomes

Our patients made better functional gains and were discharged to acute care at a lower rate than the regional adjusted mean. Patients were discharged home more often than in 2021.

All persons served 391 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	16.1	14.3
Self-care functional improvement ratio (higher is better)	1.11	1.00
Mobility functional improvement ratio (higher is better)	1.13	1.03

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	72.4%	76.8%
To long term care, includes transitional care unit	19.2%	12.5%
To acute care	8.2%	10.2%
To other	0.3%	0.3%

\*Regions Hospital uses the Uniform Data System for Medical Rehabilitation as the source for benchmarking data and outcomes comparison.

## Outcomes for patients with stroke

Our patients made better functional gains than others in the regional adjusted mean. Patients were discharged home more often than in 2021.

Stroke 182 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	16.1	15.0
Self-care functional improvement ratio (higher is better)	1.14	1.00
Mobility functional improvement ratio (higher is better)	1.11	1.04

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	68.7%	74.9%
To long term care, includes transitional care unit	22.0%	15.5%
To acute care	9.3%	9.1%
To other	0.0%	0.2%

## Outcomes for patients with major multiple traumas and brain or spinal cord injury

Our patients with major multiple traumas and brain or spinal cord injury made better functional gains and were discharged to acute care at a much lower rate than the regional adjusted mean.

Major multiple traumas and brain or spinal cord injury 21 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	19.3	16.5
Self-care functional improvement ratio (higher is better)	1.11	1.01
Mobility functional improvement ratio (higher is better)	1.16	1.04

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	66.7%	73.5%
To long term care, includes transitional care unit	23.8%	13.4%
To acute care	9.5%	13.0%
To other	0.0%	0.0%

\*Regions Hospital uses the Uniform Data System for Medical Rehabilitation as the source for benchmarking data and outcomes comparison.

### Outcomes for patients with traumatic brain injury

Our patients with traumatic brain injury made significantly better functional gains than the regional adjusted mean. They also were discharged home much more often and were discharged to acute care at a much lower rate.

Traumatic brain injury 41 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	16.2	12.0
Self-care functional improvement ratio (higher is better)	1.25	1.03
Mobility functional improvement ratio (higher is better)	1.30	1.05

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	85.4%	80.7%
To long term care, includes transitional care unit	12.2%	8.0%
To acute care	2.4%	11.0%
To other	0.0%	0.3%

### Outcomes for patients with non-traumatic brain injury

Our patients with non-traumatic brain injury made better functional gains than the regional adjusted mean. They also were discharged home more often and discharged to acute care at a significantly lower rate.

Non-traumatic brain injury 35 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	14.0	11.2
Self-care functional improvement ratio (higher is better)	1.01	1.00
Mobility functional improvement ratio (higher is better)	1.22	1.03

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	82.9%	80.2%
To long term care, includes transitional care unit	8.6%	7.8%
To acute care	5.7%	11.5%
To other	2.9%	0.3%

\*Regions Hospital uses the Uniform Data System for Medical Rehabilitation as the source for benchmarking data and outcomes comparison.

## Outcomes for patients with traumatic spinal cord injuries

Our patients with traumatic spinal cord injuries made greater functional improvements than others in the regional adjusted mean. Patients were discharged home more often than in 2021.

Traumatic spinal cord injury 23 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	24.1	20.7
Self-care functional improvement ratio (higher is better)	1.15	1.02
Mobility functional improvement ratio (higher is better)	1.12	1.07

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	60.9%	71.2%
To long term care, includes transitional care unit	26.1%	16.6%
To acute care	13.0%	10.7%
To other	0.0%	1.5%

## Outcomes for patients with non-traumatic spinal cord injuries

Our patients with non-traumatic spinal cord injuries made greater functional gains compared to the regional adjusted mean. They were discharged home more often than in 2021. No non-traumatic spinal cord injury patients were discharged to acute care.

Non-traumatic spinal cord injury 11 patients	Regions Hospital mean	Regional adjusted mean*
Length of stay in days	19.5	15.4
Self-care functional improvement ratio (higher is better)	1.09	0.98
Mobility functional improvement ratio (higher is better)	1.08	1.02

Discharge destination	Regions Hospital mean	Regional adjusted mean*
To home and community	63.6%	71.9%
To long term care, includes transitional care unit	36.4%	14.2%
To acute care	0.0%	13.1%
To other	0.0%	0.5%

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## Number of patients with spinal cord injury (SCI) by level and type in 2022

Level and type of injury	Number of traumatic SCI	Number of non-traumatic SCI
Paraplegia Incomplete	5	7
Paraplegia Complete	3	0
Quadriplegia	0	0
Quadriplegia Incomplete C1-4	8	2
Quadriplegia Incomplete C5-8	5	1
Quadriplegia Complete C1-4	0	0
Quadriplegia Complete C5-8	2	0
Total	23	11*

\*One non-traumatic spinal cord injury didn't fall within these categories

## Age of patients with spinal cord injury (SCI) in 2022

Age group (years)	Number of traumatic SCI	Number of non-traumatic SCI
15-17	0	0
18-25	2	0
26-40	3	2
41-65	13	6
66-84	5	3
85+	0	0



We're a Commission on Accreditation of Rehabilitation Facilities-certified comprehensive inpatient rehabilitation program with specialty certifications for stroke, brain injury and spinal cord injury.

**90%**  
of patients

### Durability of outcomes in 2022

At 90 days post-discharge from acute inpatient rehabilitation, 90% of patients reached by phone had sustained or improved their functional status from discharge to follow up. This exceeds the national average of 86.75%.