

# Fast Facts: Acute Rehabilitation Program

Madonna Rehabilitation Hospital is accredited by CARF, the rehabilitation accreditation commission as a Comprehensive Integrated Inpatient Rehabilitation Program with specialty accreditation in Brain Injury, Spinal Cord Injury, Stroke, and Pediatric Family Centered care. This means that Madonna meets higher standards relating to staff competency and programmatic components, patient family education and advocacy.



## A Madonna Miracle — John Andrews



John Andrews was enjoying a bike ride home one night when an accident sent him over the handlebars and chin-first onto the street. He woke up in an MRI machine to find out that he had damaged his spinal cord and was unable to move from the chest down.

With intensive therapy, John made rapid improvements. Eventually, he was able to stand up, then take assistive steps. John's dream to walk out of Madonna was realized in March 2008 when he made his way through a crowd of family, friends and Madonna staff. John continues to make improvements through outpatient therapy and offers encouragement to others who share the same path.

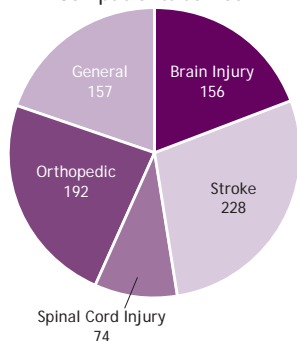
## The Program

Acute rehabilitation is appropriate for individuals who require an intense inpatient program. Typical patients include those with brain injury, spinal cord injury, neurological conditions or complex orthopedic injuries.

## Who We Served

Madonna Rehabilitation Hospital serves adults and children with a wide variety of diagnoses on its Acute Rehabilitation (AR) level of care. During the fiscal year ending June 2008, 807 individuals were discharged from AR.

Acute Rehab Discharges FY 08  
807 patients served



- Patients on AR received, on average, three hours of physical therapy, occupational therapy and speech therapy per weekday with supplemental services on the weekend.
- Patients also received other rehab services including respiratory therapy, recreational therapy, nutrition therapy, rehab psychology and rehab nursing care.

## Outcomes

AR outcomes across all diagnostic groups include:

- On average, patients were admitted 15 days post onset and stayed 21 days.
- 65.2% discharged to community settings and 10.7% to acute care hospitals, which is similar to the region.
- Patients made excellent functional gains as measured by the FIM\*. Patients gained an average of 20.68 points on the FIM\* scale which is slightly higher than the region (20.47).
- 93.4% of patients rated AR as “Excellent” or “Good” overall.
- 92.1% of those surveyed 3 months after discharge reported maintaining the gains made during their stay.
- 10.7% of patients were discharged to an acute care hospital which is similar to regional rate of 10% and better than the national rate of 11.6%.
- Patients received, on average 3 hours of physical, occupational and/or speech therapy each week day in addition to psychology, recreational, nutrition, and respiratory therapies as needed. Additional therapy was provided on the weekend on an as-needed basis.
- In addition to therapies, patients received skilled rehabilitation nursing care 24 hours per day, 7 days per week, and were seen by a rehabilitation physician nearly every day.

\*FIM (Functional Independence Measurement) is a 7-point tool used by rehabilitation hospitals throughout the nation to assess a patient's function in 18 areas, including self-care, bowel and bladder function, transfers, locomotion, communication and cognition.

The data on this form is taken from the fiscal year July 1, 2007-June 30, 2008.

[www.Madonna.org](http://www.Madonna.org)