

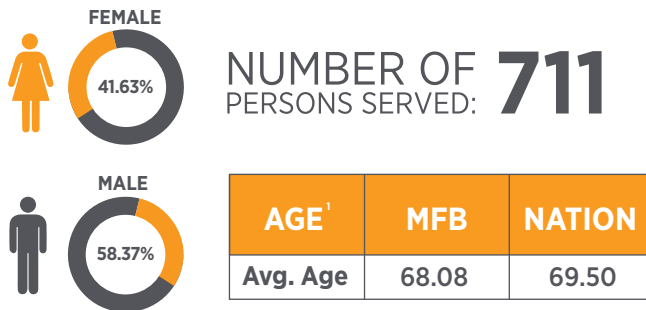
STROKE PROGRAM OUTCOMES

STRIVING FOR EXCELLENCE

Mary Free Bed Rehabilitation gathers information on results achieved by patients served in its programs. These results are offered so you can see what others have accomplished during their inpatient stay.

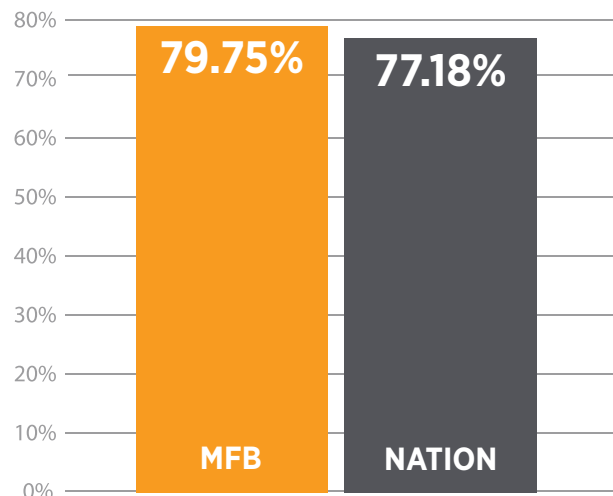
We always learn from our patients about how to improve on excellent care, each and every time, no exceptions!

PERSONS SERVED



DISCHARGE TO HOME AND COMMUNITY

At Mary Free Bed, more people were discharged to live in the community compared to the nation



FUNCTIONAL IMPROVEMENT

Using the QRP Scale

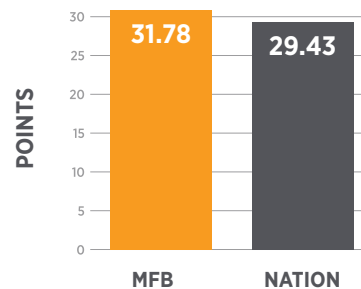
The level of functional improvement of patients in rehabilitation is measured in points gained from admission to discharge for a variety of skills and abilities used in daily life. This is reported to the Centers for Medicare and Medicaid (CMS) through the Quality Reporting Program (QRP), which enables us to compare the functional improvement of Mary Free Bed patients to other rehabilitation patients across the nation.

Mary Free Bed patients achieved more functional improvement than the national average as measured through the QRP scale.

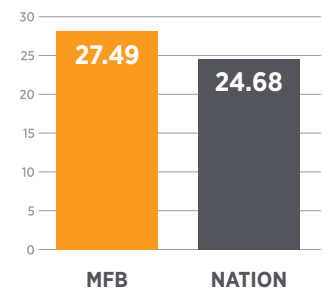
QRP FUNCTIONAL CATEGORIES

Self-Care	Eating Oral Hygiene Toilet Hygiene Shower/Bathe Self Upper Body Dress Lower Body Dress Footwear
Mobility	Rolling, laying down and sitting up in bed Sit to stand Transferring to and from a bed and a chair Transferring to and from the toilet Transferring in and out of the car Ambulation (walking) Stairs Retrieval of item from ground Wheelchair mobility

FUNCTIONAL IMPROVEMENT



FUNCTIONAL IMPROVEMENT FOR WHEELCHAIR USERS



STROKE PROGRAM OUTCOMES

AVERAGE NUMBER OF THERAPY HOURS

The average number of therapy hours per day for all adult inpatients who have experienced stroke includes time spent in physical therapy, occupational therapy, speech therapy, and orthotics and prosthetics. During FY2026, patients participated in an average of 3.49 hours of daily therapy over a five-day therapy week.

Additionally, and as needed, our patients receive psychology services, respiratory therapy, recreational therapy, registered dietitian services, driver rehabilitation and attend peer support meetings.

UNPLANNED TRANSFERS FOR ACUTE CARE¹

Under certain circumstances, a patient may demonstrate changes in his or her medical condition that warrant a transfer to acute care for close medical monitoring. If this occurs, patients are transferred to acute care services and typically return to the inpatient rehabilitation program within a few days. During FY2026, the frequency of these transfers for patients who have experienced stroke at Mary Free Bed Rehabilitation was 9.42%.

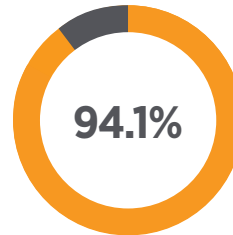
PATIENT SATISFACTION

In our most recent FY2026 patient satisfaction survey data for adult inpatients who have experienced stroke, 89.42% of Mary Free Bed Rehabilitation patients responded “Definitely yes” when asked if they were likely to recommend to a family member or friend.



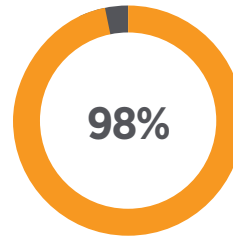
FOLLOW-UP¹

After discharge, patients who have experienced stroke receive a 30-day follow-up call to find out how those served are functioning following the inpatient rehabilitation stay.



PHYSICAL ABILITY

In this survey, 94.1% of the stroke patients who were contacted stated their physical abilities had improved or remained the same compared to the time of discharge.



HEALTH STATUS

The survey also showed that 98% of patients who experienced a stroke who responded had improved or maintained their health status since discharge.



CARF Accredited as an Inpatient Hospital Stroke Specialty Program-Adults.



Accredited by the Joint Commission.