TIRR Memorial Hermann is a nationally recognized rehabilitation hospital that returns lives interrupted by neurological illness, trauma or other debilitating conditions back to independence.

Some of the world’s leading physicians in rehabilitation medicine provide care at TIRR Memorial Hermann. The patient care environment blends passionate people, exemplary care and a commitment to each patient’s overall quality of life.

TIRR Memorial Hermann offers comprehensive rehabilitation programs and services that address the individual needs of each patient. Core rehab programs include:

- Stroke
- Brain Injury
- Spinal Cord Injury
- Amputation
- Specialty Rehabilitation
  - Neurodegenerative diseases
    - Includes multiple sclerosis, Parkinson’s disease, post-polio syndrome, rheumatoid arthritis, lupus
  - Multiple trauma
  - Any debilitating conditions

TIRR Memorial Hermann’s comprehensive inpatient, outpatient and vocational services are accredited by CARF, the Commission on Accreditation of Rehabilitation Facilities.

Our programs focus on maximizing the patient’s functional abilities by providing specialized medical management, nursing and therapy services in individual, group and community settings.

With our interdisciplinary team approach, support groups, counseling and individualized training are provided to prepare patients, their families and caregivers for additional responsibilities upon discharge.
Spinal Cord Injury (SCI) Program Fact Sheet

We consider our mission to be accomplished when persons with spinal cord injuries, within the scope of their individual capabilities and opportunities, achieve a quality of life with personal independence, productive functioning and maximum state of health.

"My first day there was very frightened, because I understood for the first time that I was headed down a different path," Meena says. "I thought they transferred me to TIRR Memorial Hermann so that I could learn to walk again, but instead they were teaching me to be functional in a wheelchair. I knew it was the start of a journey of learning the 'new me,' so I gritted my teeth and moved forward. My son was 3 weeks old when the accident occurred. My kids were my motivation to get better and get home."

Meena Dhanjal Outlaw, Spinal Cord Injury
Spinal Cord Injury
Fact Sheet

Spinal Cord Injury Program Information

The Spinal Cord Injury (SCI) Program at TIRR Memorial Hermann has a team of physicians, therapists, nurses, case managers and social workers dedicated to expert care of persons with a spinal cord injury.

- The Spinal Cord Injury Program offers a two-week series of educational classes dedicated to teaching you and your family about spinal cord injury.
- The SCI Program provides patient rooms, nursing care units and gym space specifically designed and equipped to meet the unique needs of a person with spinal cord injury.

![Types of Spinal Cord Injury](image)

In 2015, 311 patients were discharged from the Spinal Cord Injury Program.

- 109 patients, or 35 percent, had non-traumatic spinal cord injuries. Non-traumatic spinal cord injury means trauma is not the cause of the injury. Examples of these are surgery-related spinal cord injuries or tumors.
- 202 patients, or 65 percent, had traumatic spinal cord injuries. Traumatic spinal cord injury means trauma is the cause of the injury. Examples of these are falls or vehicle accidents.

Adult Patient Statistics by Age and Gender
Spinal Cord Injury Fact Sheet

In 2015, 296 adult patients were discharged from the Spinal Cord Injury Program.

- The average age of a patient with a non-traumatic spinal cord injury was 58.
- Of the total number of non-traumatic SCI patients (108), 77 (or 71 percent), were male and 31 (or 29 percent) were female.
- The average age of a patient with a traumatic spinal cord injury was 40.
- Of the total number of traumatic spinal cord injury patients (188), 158 (or 84 percent) were male and 30 (or 16 percent) were female.

### Adolescent Patient Statistics by Age and Gender

*For our purposes, we define adolescent patients as ages 13 to 17.*

In 2015, 15 adolescent patients were discharged from the SCI Program.

**Non-Traumatic SCI**
- The average age of a patient with a non-traumatic spinal cord injury was 17.
- Of the total number of non-traumatic SCI patients (1), 1, or 100 percent, was female.

**Traumatic SCI**
- The average age of a patient with a traumatic spinal cord injury was 15.
- Of the total number of traumatic spinal cord injury patients (14), 8, or 57 percent, were male and 5, or 36 percent, were female.
Length of Stay

How many days are Spinal Cord Injury patients at TIRR Memorial Hermann?

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TIRR Memorial Hermann’s length of stay is in green and the National average is in red.

Each patient care team contributes to the decision about how long you will be at TIRR Memorial Hermann, based on your individual rehabilitation needs.

- The average length of time patients with spinal cord injury were at TIRR Memorial Hermann was 28 days.
- The national average length of time similar patients with spinal cord injury were at other rehabilitation facilities was 25 days.
Meeting Goals
Assistance in Setting Patient Goals and Meeting Patient Goals

The rehabilitation process begins by setting patient goals. The care team, working with you or your family member, helps to establish goals that you will be working toward achieving by discharge. These goals assist the team in development of a treatment plan, which is designed to help patients meet their discharge goals.

In 2015, the mean score for staff assisting the patient, or family members, with meeting their discharge goals was at 95 for those patients in the Spinal Cord Injury Program.

Upon discharge, patients often continue working towards their goals through Outpatient therapy programs such as those offered at TIRR Memorial Hermann Adult and Pediatric Outpatient Rehabilitation or other outpatient therapy campuses within the Memorial Hermann Rehabilitation Network.
Average Number of Treatment Hours
How Much Therapy Do Patients Receive?

Therapy services include physical, occupational, speech, music and recreational therapies. Each member of your care team will evaluate you. This team will help develop and coordinate your treatment plan. Based on this treatment plan, you will receive combined therapy equaling three or more hours per day, for five out of seven days a week.

- On the average, patients received three to four hours of therapy per day among all disciplines, including group therapy sessions.
- The maximum number of hours of therapy that can be provided is between five and six hours per day.
- Rehabilitation nursing services, along with addressing medical care needs, are key parts of the therapeutic process which assist in carryover of therapy skills outside of therapy sessions. These needs may be scheduled or unscheduled and require attendance or participation to maximize independence, training, and/or recovery.
- While therapy is maximized during the week, weekend therapies are considered an integral part of the treatment schedule as well.
- Weekend Program includes (as designed by your team)
  - Education classes for families and patients
  - Therapeutic activities
  - Community re-entry activities
  - Medical management
  - Individual therapy sessions
  - Group sessions
- Scheduled therapy sessions may begin as early as 7am and can occur in the evenings as well, as late as 8pm, depending on patient goals that your team identifies. Therapeutic activities at TIRR occur every day of the year.
TIRR Memorial Hermann is well known for its management of patients who require use of a ventilator. In 2015, TIRR admitted 47 patients on ventilators.

- 28 of these patients (or 60 percent) were completely weaned from the ventilator at the time of discharge.
- 6 patients (or 13 percent) were breathing without the ventilator for eight to 24 hours per day and continued weaning programs after discharge.
- 13 patients (or 28 percent) were discharged with a ventilator.
- 27 patients (or 96 percent) weaned using TIRR Vent Weaning Protocol.
The Results of Rehab
How Many Spinal Cord Injury Patients Go Home to the Community?

Discharge Location Percentages in 2015

- Home and Community, 75%
- Planned Acute-Care Transfer, 3%
- Unplanned Acute-Care Transfer, 13%
- Skilled Nursing Facility, 8%
- Other, 1%

You and your care team will work together to decide the safest and most appropriate place to discharge.

- The percentage of patients who discharge to home or a place in the community from TIRR Memorial Hermann with a SCI was 74 percent. TIRR Memorial Hermann patients are most often discharged home; however, some go to acute-care hospitals for additional treatment or surgery and some go to a transitional setting such as a skilled nursing facility or long-term care.

In 2015:

- The percentage of patients with an SCI who discharged to an acute-care facility, unplanned and planned, was 16 percent.
- The percentage of patients with an SCI who discharged to a skilled nursing facility was 8 percent.
- The percentage of patients with an SCI who discharged to other care facilities was 1 percent.
- Sometimes patients with medical complications have to return to an acute-care hospital for further medical care. At times these transfers are unplanned and are called “unpreventable unplanned acute-care transfers.” Of 311 patients discharged, 41, or 13 percent, had an unpreventable unplanned acute-care transfer during their stay.
You will be asked to complete a satisfaction survey after your stay at TIRR Memorial Hermann. You will be asked to rate the overall care at the hospital on a scale of 1 to 5 and the scores are converted to a scale of 0 to 100.

- In 2015, patients with spinal cord injury and their families rated their care 93 points out of 100.
- When patients and family members were asked if they would recommend TIRR Memorial Hermann to others, 94 percent responded that they would.

Thank you for choosing TIRR Memorial Hermann for your rehabilitation care.