

Regions Hospital Rehabilitation Center

We're an intensive inpatient rehabilitation facility that's CARF accredited. We provide comprehensive care to our patients, follow the highest standards of care and continue to evolve our program to meet community needs.



Highlights of 2024

New leadership

We welcomed Eileen Worrell, Rehab Director; Emma Jensen, Rehab Supervisor; and Rebecca Barnes, Support Staff Supervisor, to our rehab leadership team.

New physician

We welcomed physical medicine and rehabilitation physician Sarah Mahasin, MD. She completed a brain injury fellowship in 2024 and she primarily cares for patients at HealthPartners Neuroscience Center.

New certification

Maria Canubida, RN, achieved designation as a certified rehabilitation registered nurse.

National collaboration

Together with regional partners, we remain a designated Minnesota Regional Spinal Cord Injury Model System (SCIMS) program. This connects us to 17 other sites across the nation and helps us promote excellence in spinal cord injury care through research, staff development and community engagement.

Health equity

We're proud that CMS comparison data of Medicare spending per beneficiary and discharge to community rates were not statistically different across income levels or between patients of color and white patients within our facility, demonstrating our strong commitment to health equity.



Sarah Mahasin, MD

Maintaining excellence

Our rehabilitation center continues to be accredited by the Commission on Accreditation of Rehab Facilities (CARF), with specialty certification in stroke, brain injury and spinal cord injury care.

Stroke INSPIRE

Support for stroke survivors and their care partners continues to be provided throughout the recovery journey by our Stroke INSPIRE program, with in-person and virtual mentor visits, support groups and well-being offerings. In 2024, Regions Hospital INSPIRE mentors completed 978 peer visits to stroke survivors.

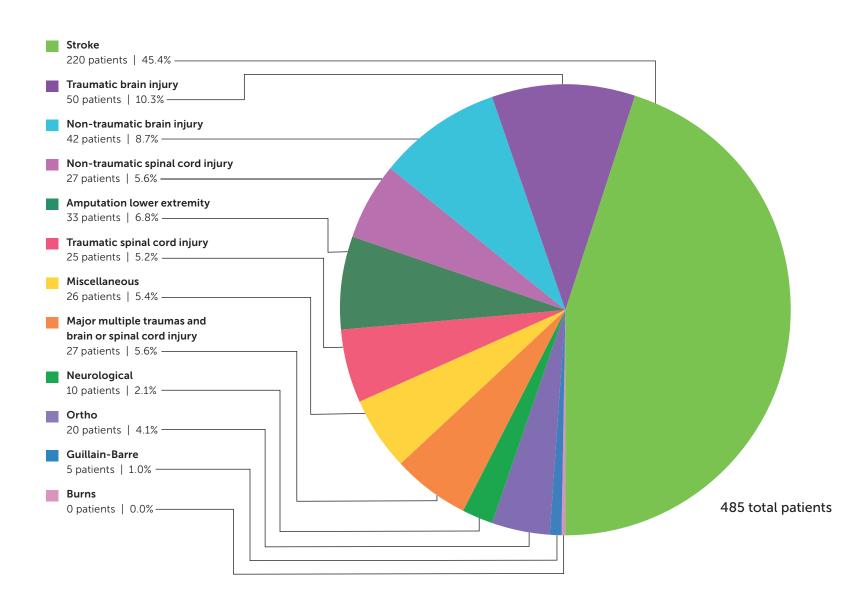
Safety for all

Regions Hospital received new equipment, such as Sara Stedy lifting and sit-to-stand equipment. This helps ensure safety for staff and patients.

Information access

We published information about stroke, brain injury, spinal cord injury and other neurologic conditions at **healthpartners.com/neurowell**. This site provides resources to support patients and caregivers throughout their recovery.

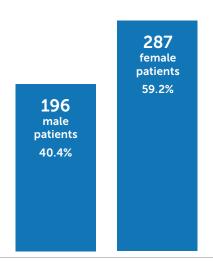
Patients served by rehab impairment category



2024 outcomes and data

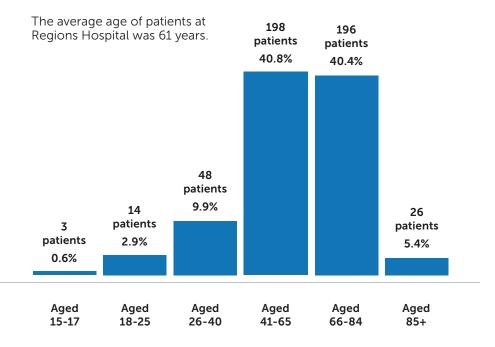
485 patients served at Regions Hospital Rehabilitation Center

Patients served by gender



Note: This graph shows the distribution of male and female patient stays. One patient identified as non-binary during two stays.

Patients served by age group



All patient outcomes

Our patients made expected* functional gains in their ability to care for themselves more often than the surrounding region. Expected* mobility gains were achieved at a rate comparable to the surrounding region.

	Our program	Surrounding region, adjusted**
All persons served 485 patients		
Average length of stay in days	13.8	13.4
Self-care: % meeting risk-adjusted expected* gains by discharge	60.4%	55.6%
Mobility: % meeting risk-adjusted expected* gains by discharge	53.8%	53.9%
Discharge destination		
To home and community	67.6%	76.9%
To long-term care, including transitional care units	22.9%	12.9%
To acute care	8.9%	9.8%
To other	0.4%	0.3%

Outcomes for patients with stroke

Our patients with stroke achieved expected* functional gains in their ability to care for themselves more often than the surrounding region and discharged to acute care less often. Discharge to home and community will be a focus in 2025.

	Our program	Surrounding region, adjusted**
Stroke 220 patients		
Average length of stay in days	14.7	14.0
Self-care: % meeting risk-adjusted expected* gains by discharge	58.2%	54.8%
Mobility: % meeting risk-adjusted expected* gains by discharge	51.3%	54.2%
Discharge destination		
To home and community	65.5%	75.2%
To long-term care, including transitional care units	27.3%	16.1%
To acute care	6.8%	8.5%
To other	0.0%	0.2%

^{*}Risk adjustments and expected values are based on severity and

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

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

Our patients with major multiple trauma and brain or spinal cord injury discharged to long-term care less often than the surrounding region and achieved expected* functional gains in their ability to care for themselves at a comparable rate.

	Our program	Surrounding region, adjusted**
Major multiple traumas and brain or spinal cord injury \mid 27 patier	nts	
Average length of stay in days	15.2	14.1
Self-care: % meeting risk-adjusted expected* gains by discharge	52.6%	52.7%
Mobility: % meeting risk-adjusted expected* gains by discharge	42.1%	51.9%
Discharge destination		
To home and community	66.7%	82.1%
To long-term care, including transitional care units	7.4%	8.5%
To acute care	18.5%	8.5%
To other	0.0%	0.0%

Outcomes for patients with traumatic brain injury

Our patients with traumatic brain injury achieved expected* functional gains in both their mobility and ability to care for themselves at a higher rate than the surrounding region. Discharge to home and community will be a focus in 2025.

	Our program	Surrounding region, adjusted**
Traumatic brain injury 50 patients		
Average length of stay in days	12.7	11.8
Self-care: % meeting risk-adjusted expected* gains by discharge	63.9%	56.3%
Mobility: % meeting risk-adjusted expected* gains by discharge	63.9%	56.9%
Discharge destination		
To home and community	66.0%	78.4%
To long-term care, including transitional care units	22.0%	9.4%
To acute care	12.0%	11.9%
To other	0.0%	0.1%

^{*}Risk adjustments and expected values are based on severity and

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

Outcomes for patients with non-traumatic brain injury

Our patients with non-traumatic brain injury achieved expected* functional gains in both their mobility and ability to care for themselves at a higher rate than the surrounding region.

	Our program	Surrounding region, adjusted**
Non-traumatic brain injury 42 patients		
Average length of stay in days	12.2	11.4
Self-care: % meeting risk-adjusted expected* gains by discharge	70%	53%
Mobility: % meeting risk-adjusted expected* gains by discharge	67%	54%
Discharge destination		
To home and community	76.2%	79.0%
To long-term care, including transitional care units	14.3%	8.2%
To acute care	9.5%	12.3%
To other	0.0%	0.3%

Outcomes for patients with traumatic spinal cord injuries

Our patients with traumatic spinal cord injury achieved expected* functional gains in their mobility more often than the surrounding region. Discharge to acute care will be a focus in 2025.

	Our program	Surrounding region, adjusted**
Traumatic spinal cord injury 25 patients		
Average length of stay in days	18.6	20.5
Self-care: % meeting risk-adjusted expected* gains by discharge	50.0%	55.7%
Mobility: % meeting risk-adjusted expected* gains by discharge	56.3%	51.5%
Discharge destination		
To home and community	56.0%	65.0%
To long-term care, including transitional care units	24.0%	20.0%
To acute care	20%	13.4%
To other	0.0%	1.6%

^{*}Risk adjustments and expected values are based on severity and

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

Outcomes for patients with non-traumatic spinal cord injuries

Our patients with non-traumatic spinal cord injury achieved expected* functional gains in both their mobility and ability to care for themselves at a higher rate than the surrounding region. They also discharged to home more often and to acute less often.

	Our program	Surrounding region, adjusted**
Non-traumatic brain injury 42 patients		
Average length of stay in days	14.9	15.7
Self-care: % meeting risk-adjusted expected* gains by discharge	79.2%	52.8%
Mobility: % meeting risk-adjusted expected* gains by discharge	58.3%	53.4%
Discharge destination		
To home and community	74.1%	71.3%
To long-term care, including transitional care units	18.5%	15.7%
To acute care	7.4%	12.4%
To other	0.0%	0.6%

Number of patients with spinal cord injury (SCI) by level and type in 2024

	Number of traumatic SCI	Number of non-traumatic SCI
Level and type of injury		
Paraplegia incomplete	6	19
Paraplegia complete	2	1
Quadriplegia	0	0
Quadriplegia incomplete C1-4	11	4
Quadriplegia incomplete C5-8	6	0
Quadriplegia complete C1-4	0	0
Quadriplegia complete C5-8	0	0
Total	25	24***

^{*}Risk adjustments and expected values are based on severity and other factors.

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

^{***} Three non-traumatic spinal cord injuries did not fall within these categories.

Age of patients with spinal cord injury (SCI) in 2024

	Number of traumatic SCI	Number of non-traumatic SCI
Age group (years)		
15–17	0	0
18-25	3	0
26-40	6	7
41–65	8	9
66-84	5	10
85+	3	1

Patient and team member safety

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

Patient safety	
C. difficile infections	2 patients
Central line-associated infections	0 patients
Deep vein thromboses	0 patients
Hospital-acquired pressure injuries	1 patient
Hand hygiene compliance	94.4%

Surveyed patients who recommended our facility

	Percent rank	Responses
Diagnosis		
Stroke	87%	34
Brain injury	82%	12
Spinal cord injury	82%	11
All	87%	82

average hours per day of patient therapy

Exceeded the national average of therapy hours during admission

In 2024, our patients received an average 3.27 hours of therapy per day, five to six days per week. The average hours per day was 3.27 for stroke, 3.25 for brain injury and 3.08 for spinal cord injury. Our patients also received psychology services, therapeutic recreation, rehabilitation nursing, integrative therapy (massage and acupuncture), music therapy and pet therapy, upon request.

98% of patients sustained or improved

Durability of outcomes in 2024*

At 90 days after discharge, patients from our program had sustained or improved their functional status from discharge to follow-up. This exceeded the national average of 85%.

*Based on calls made in 2024 to patients discharged from Q4 2023 to Q3 2024



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



Innovation through giving

Regions Hospital Foundation continues to fund care, research and outreach to improve health and well-being through partnerships with generous benefactors from our community. Visit healthpartners.com/foundations/regions to donate or learn more.