



2025

Rehabilitation Center
Annual Report



HealthPartners®

Regions Hospital Rehabilitation Center

We're a CARF-accredited inpatient rehabilitation facility. We provide comprehensive care to our patients, follow the highest standards of care and continue to evolve our program to meet the needs of those we serve.



Highlights of 2025

New team member

Rehabilitation psychologist Jonathan Tsen, PhD, Behavioral Health, joined the team in 2025. He meets with patients to assess their emotional, behavioral and cognitive functioning following their injury or illness, and provides counseling and therapy to support adjustment, coping and resilience. He collaborates with team members to help patients reach their highest potential and help families feel supported and informed about rehabilitation plans.

New certification

Zach Barton, CRRN; Tara Gordon, CRRN; Amber Shandley, CRRN; Jocelyn Throne, CRRN; and Ariann Busini, CRRN, earned the distinction of Certified Rehabilitation Registered Nurse this year. Each has a minimum of two years of experience as an RN and passed the CRRN exam.



Jonathan Tsen, PhD, Behavioral Health

“For me, the most impactful part of being a rehab nurse is helping patients regain independence and achieve their highest potential.

– Shannon Peterson, CRRN

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.

Maintaining excellence

Our rehabilitation center continues to be accredited by the Commission on Accreditation of Rehab Facilities (CARF), which ensures we're providing high-quality and person-centered rehabilitation care.

Improving stroke care

We're participating in American Heart Association's Mission: Lifeline Stroke Post-Acute Care, a three-year initiative to enhance stroke rehabilitation care delivery and resources across Minnesota.


3.31

average hours
per day of
patient therapy

Exceeded the national average of therapy hours during admission

In 2025, our patients received an average 3.31 hours of therapy per day, five to six days per week. The average hours per day was 3.39 for stroke, 3.38 for brain injury and 3.10 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.

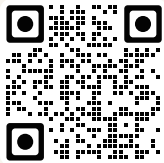
96%

of surveyed
patients sustained or
improved function
90 days
post-discharge

Durability of outcomes in 2025*

Approximately 90 days post-discharge, 96% of surveyed patients reported sustained or improved functional status for mobility and self-care. This performance significantly exceeded the national average for self-care (88%) and mobility (81%).

*Based on calls made to a representative sample of our patients who discharged from Q4 2024 through Q3 2025



Innovation through giving

Regions Hospital Rehabilitation Center received a generous donation through partnership with Regions Hospital Foundation to purchase an Xcite2 functional electrical stimulation device. This technology delivers electrical stimulation directly to muscles via electrodes to help regain arm and leg function. It's often used after stroke and other neurological injuries. Scan the QR code or visit regionshospital.com/donate to donate or learn more.



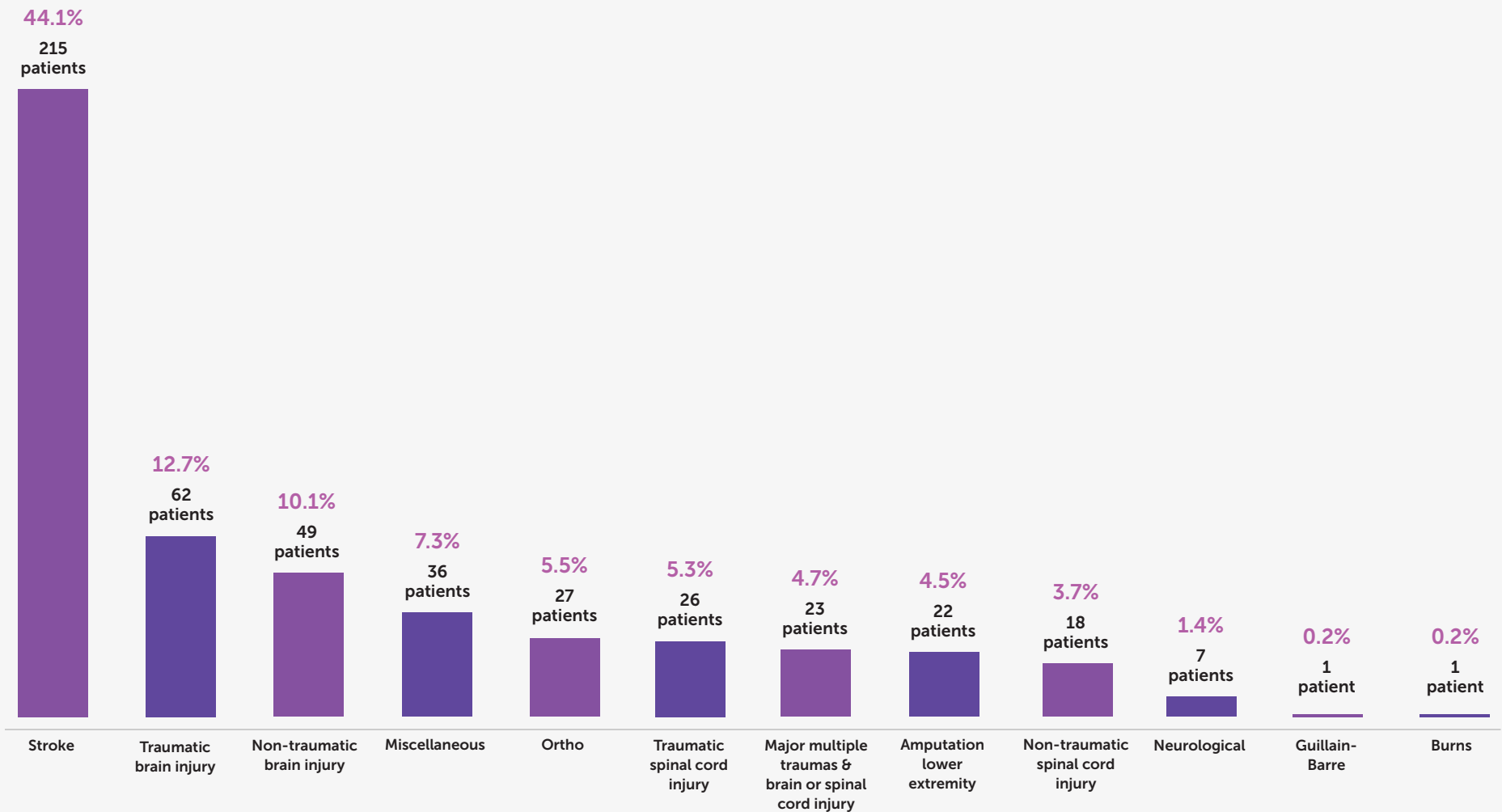
I love how electrical stimulation helps my arm grab stronger and gives me enhanced awareness and strength in my leg.

– Pauline, rehab patient and stroke survivor

2025 outcomes and data

487 patients served at Regions Hospital Rehabilitation Center

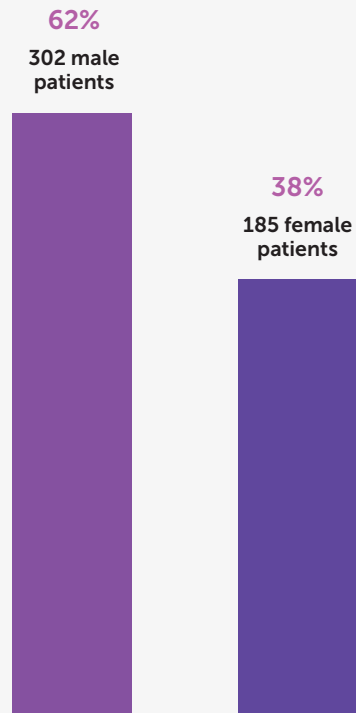
Patients served by rehab impairment category



2025 outcomes and data

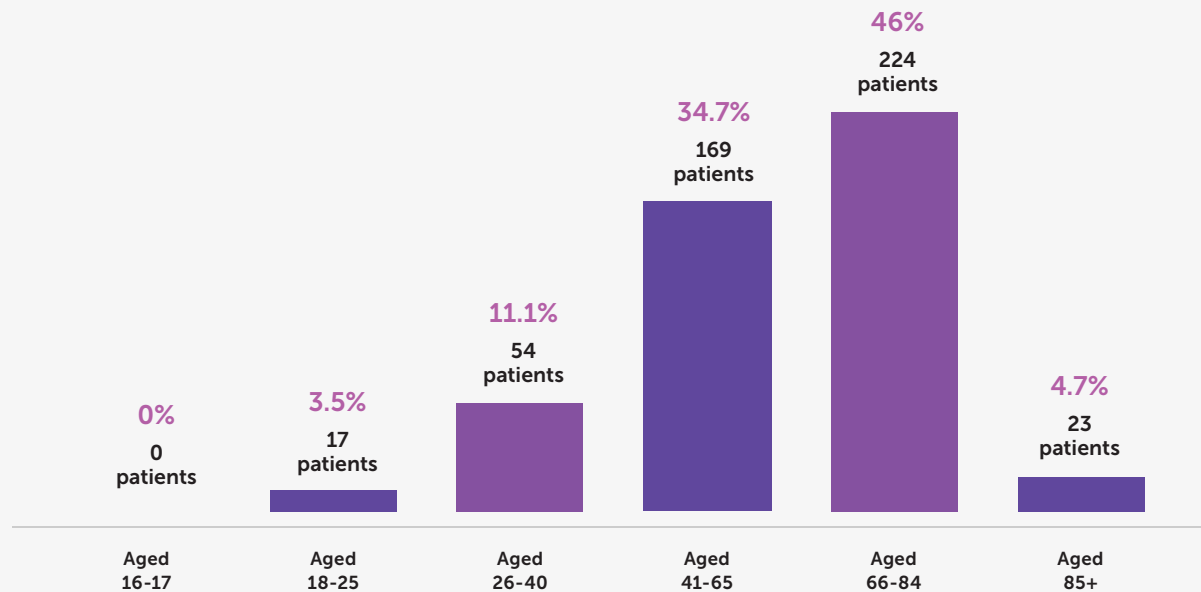
487 patients served at Regions Hospital Rehabilitation Center

Patients served by gender



Patients served by age group

The average age of patients at Regions Hospital Rehabilitation Center was **62 years**.



All patient outcomes

Our patients made expected* functional gains in their mobility and ability to care for themselves more often than the surrounding region and discharged to acute care less often.

Outcomes for patients with stroke

Our patients with stroke achieved expected* mobility gains at a rate similar to the surrounding region and discharged to acute care less often. Discharge to home and community will be a focus in 2026.

	Our program	Surrounding region, adjusted**
All persons served 487 patients		
Average length of stay in days	15	13
Self-care: % meeting risk-adjusted expected* gains by discharge	58.2%	54.5%
Mobility: % meeting risk-adjusted expected* gains by discharge	55.5%	53%
Discharge destination		
To home and community	71.3%	78.8%
To long-term care, including transitional care units	20.7%	12%
To acute care	7.2%	8.8%
To other	0.8%	0.3%

	Our program	Surrounding region, adjusted**
Stroke 215 patients		
Average length of stay in days	16.8	14
Self-care: % meeting risk-adjusted expected* gains by discharge	51.3%	53.8%
Mobility: % meeting risk-adjusted expected* gains by discharge	53.9%	53.7%
Discharge destination		
To home and community	67%	75.8%
To long-term care, including transitional care units	27.9%	15.8%
To acute care	5.1%	8%
To other	0%	0.2%

*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.

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 achieved expected* functional gains in their mobility and ability to care for themselves more often than the surrounding region.

Outcomes for patients with traumatic brain injury

Our patients with traumatic brain injury achieved expected* functional gains in 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 2026.

	Our program	Surrounding region, adjusted**
Major multiple traumas and brain or spinal cord injury 23 patients		
Average length of stay in days	15.5	14.7
Self-care: % meeting risk-adjusted expected* gains by discharge	63.2%	54%
Mobility: % meeting risk-adjusted expected* gains by discharge	57.9%	53.9%
Discharge destination		
To home and community	65.2%	79.7%
To long-term care, including transitional care units	17.4%	10.3%
To acute care	13%	8.7%
To other	4.3%	0.9%

	Our program	Surrounding region, adjusted**
Traumatic brain injury 62 patients		
Average length of stay in days	13.9	11.5
Self-care: % meeting risk-adjusted expected* gains by discharge	60%	52.6%
Mobility: % meeting risk-adjusted expected* gains by discharge	62%	53.4%
Discharge destination		
To home and community	66.1%	80.7%
To long-term care, including transitional care units	22.6%	8.3%
To acute care	9.7%	10.4%
To other	1.6%	0.4%

*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.

Outcomes for patients with non-traumatic brain injury

Our patients with non-traumatic brain injury achieved expected* functional gains in 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 49 patients		
Average length of stay in days	11.9	10.3
Self-care: % meeting risk-adjusted expected* gains by discharge	63.3%	50.5%
Mobility: % meeting risk-adjusted expected* gains by discharge	60%	52.6%
Discharge destination		
To home and community	73.5%	84.6%
To long-term care, including transitional care units	12.2%	6.8%
To acute care	12.2%	8.4%
To other	2%	0%

Outcomes for patients with traumatic spinal cord injuries

Our patients with traumatic spinal cord injury discharged to acute care less often than the surrounding region. Discharge mobility will be a focus in 2026.

	Our program	Surrounding region, adjusted**
Traumatic spinal cord injury 26 patients		
Average length of stay in days	23	19
Self-care: % meeting risk-adjusted expected* gains by discharge	52.4%	58.8%
Mobility: % meeting risk-adjusted expected* gains by discharge	42.9%	59.1%
Discharge destination		
To home and community	65.4%	67.2%
To long-term care, including transitional care units	26.9%	19.6%
To acute care	7.7%	12.6%
To other	0%	0.5%

*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.

Outcomes for patients with non-traumatic spinal cord injuries

Our patients with non-traumatic spinal cord injury discharged to acute care less often than the surrounding region. Discharge mobility will be a focus in 2026.

	Our program	Surrounding region, adjusted**
Non-traumatic spinal cord injury 18 patients		
Average length of stay in days	16.2	12.7
Self-care: % meeting risk-adjusted expected* gains by discharge	58.8%	62.5%
Mobility: % meeting risk-adjusted expected* gains by discharge	47.1%	62%
Discharge destination		
To home and community	77.8%	83.5%
To long-term care, including transitional care units	16.7%	7.8%
To acute care	5.6%	8.5%
To other	0%	0.2%

Number of patients with spinal cord injury (SCI) by level and type in 2025

	Number of traumatic SCI	Number of non-traumatic SCI
Level and type of injury		
Paraplegia incomplete	7	11
Paraplegia complete	4	0
Quadriplegia	0	0
Quadriplegia incomplete C1-4	7	4
Quadriplegia incomplete C5-8	6	0
Quadriplegia complete C1-4	0	0
Quadriplegia complete C5-8	0	0
Total	24***	15****

* 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.

*** Two traumatic spinal cord injuries did not fall within these categories.

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



Age of patients with spinal cord injury (SCI) in 2025

	Number of traumatic SCI	Number of non-traumatic SCI
Age group (years)		
16-17	0	0
18-25	1	0
26-40	7	2
41-65	6	6
66-84	11	9
85+	1	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	0 patients
Central line-associated infections	0 patients
Deep vein thromboses	0 patients
Hospital-acquired pressure injuries	1 patient
Hand hygiene compliance	95.1%

Surveyed patients who recommended our facility

	Net promoter score	Responses
Diagnosis		
Stroke	63%	30
Brain injury	81%	21*
Spinal cord injury	83%	6*
All	77%	70

*Requires 30 responses to be statistically significant