

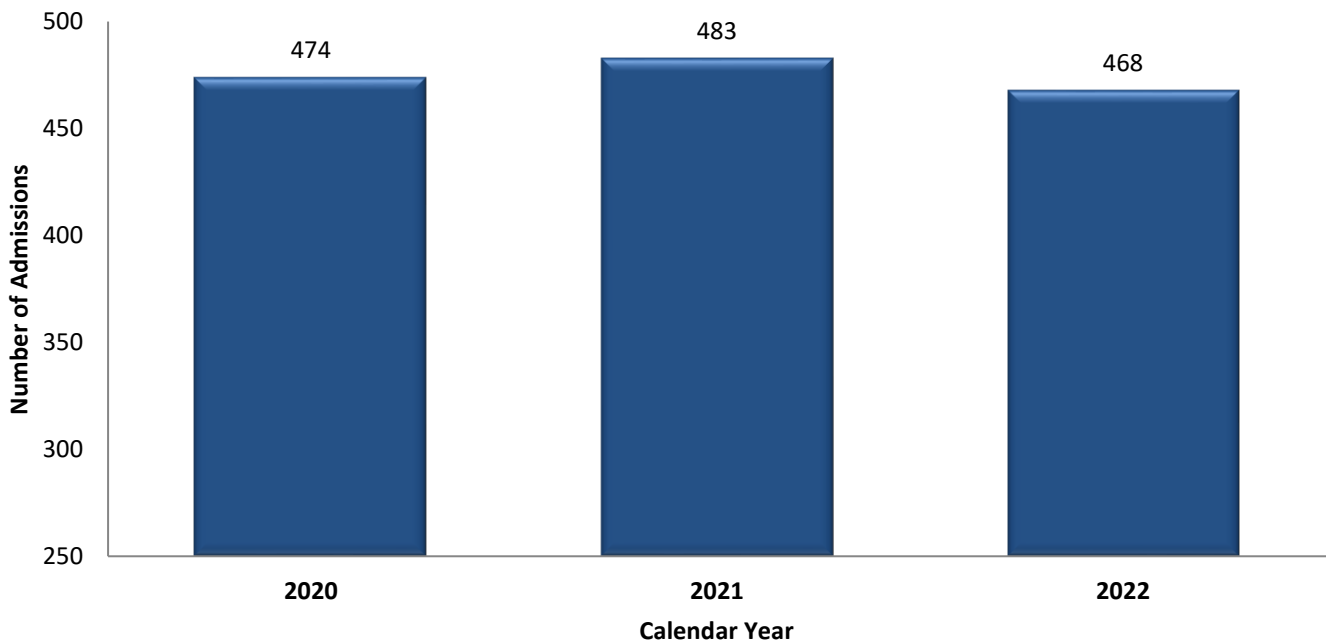
2022 ANNUAL REPORT

Harborview Medical Center
A DESIGNATED LEVEL I TRAUMA CENTER
Inpatient Rehabilitation Unit

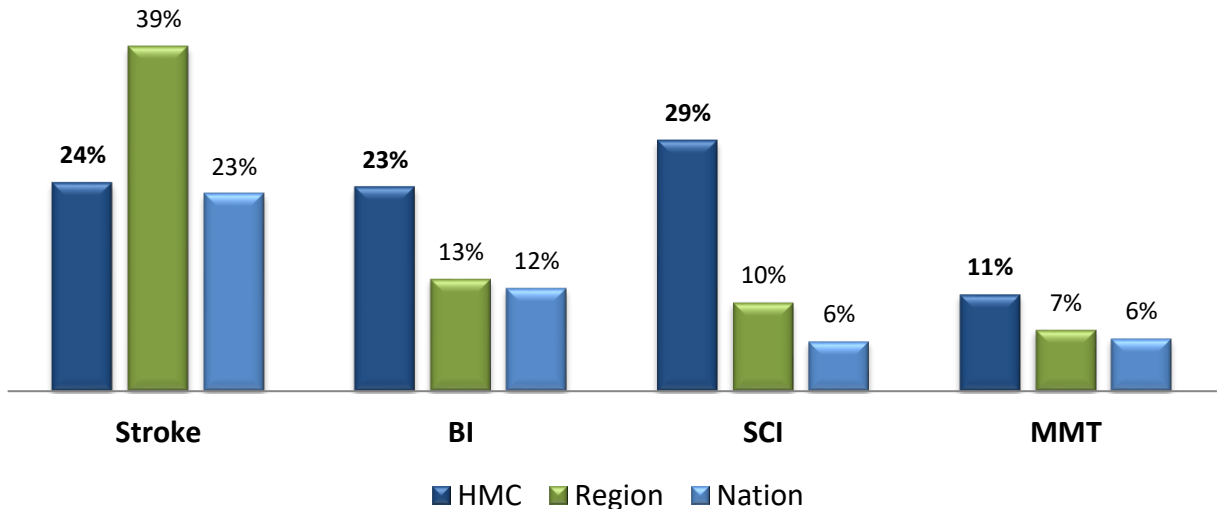
Mission: The mission of the department of Rehabilitation Medicine is to improve the health, function, and quality of life of those we serve.

Values: We strive to provide excellent care, enhanced by a strong commitment to teaching, community service, and research. It is our belief that the highest quality rehabilitation is best achieved in partnership with the patient and their family. Our staff respects diversity and recognizes that every person deserves their own unique treatment plan.

Harborview Inpatient Rehabilitation Admission Count by Calendar Year

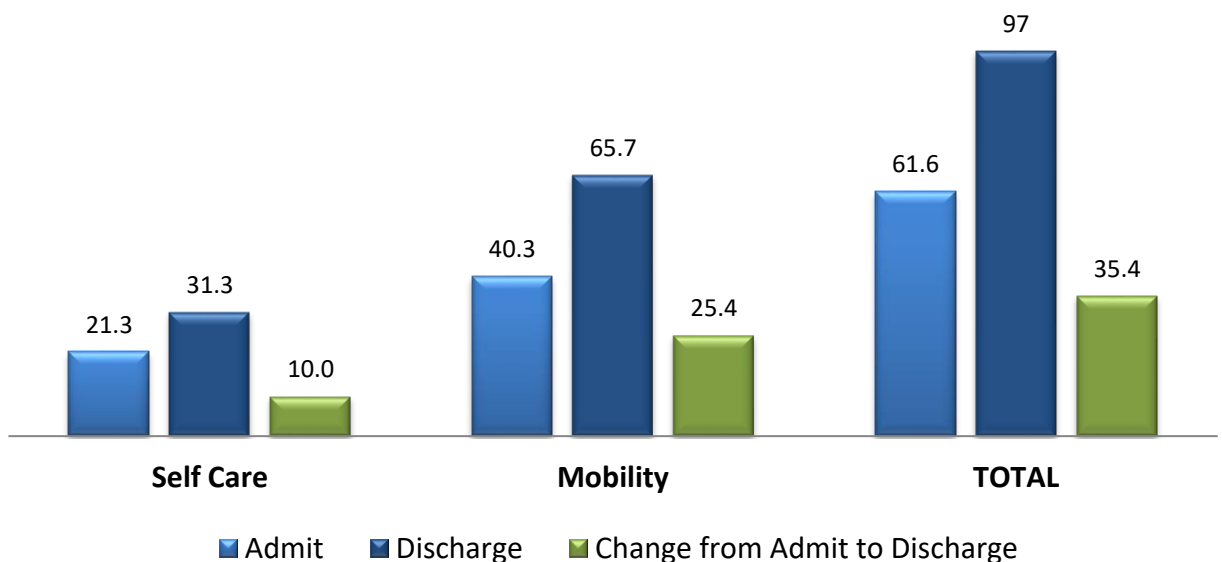


2022 Harborview Inpatient Rehabilitation Unit Case Mix Summary by Diagnosis 2022



In 2022 the Department of Rehabilitation Medicine at Harborview Medical Center served a higher percentage of brain injury, spinal cord injury, amputation, and burn patients than other healthcare facilities in the region and nation. Stroke, brain injury, and spinal cord injury patients comprised 87% of our total patient population for the year.

Functional Self-Care & Mobility Gains 2022



Functional Outcome Measures are used to score a patient's independence include Self-Care and Mobility. The change in score from admission to discharge shows the patient's improvement in independent function.

Harborview Inpatient Rehabilitation Patient Satisfaction

“How would you rate your overall satisfaction with the rehabilitation program”

3.83 of a possible 4.0

Compared to the national benchmark
of **3.77**

Information was obtained from IT Health/Track™ Patient Satisfaction Surveys given to all patients post-discharged from the Harborview Rehabilitation unit.

Stroke, Brain Injury, and Spinal Cord Injuries comprised 87% of our patient population for the year.

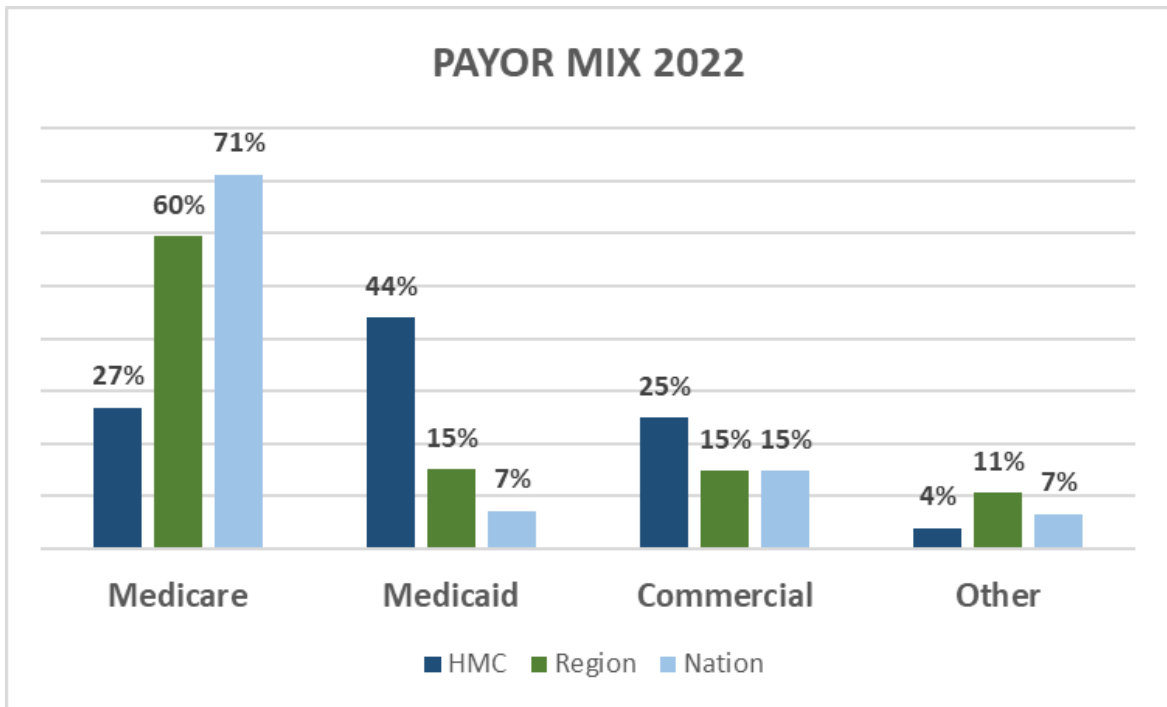
The average HMC patient's age was 50.8 years old, compared to the national average of 62.

The average patient length of stay was 20.5 days.

Male admissions totaled 68%, female admissions 32%

There were 4 adolescents (≤18 yrs) treated during the year.

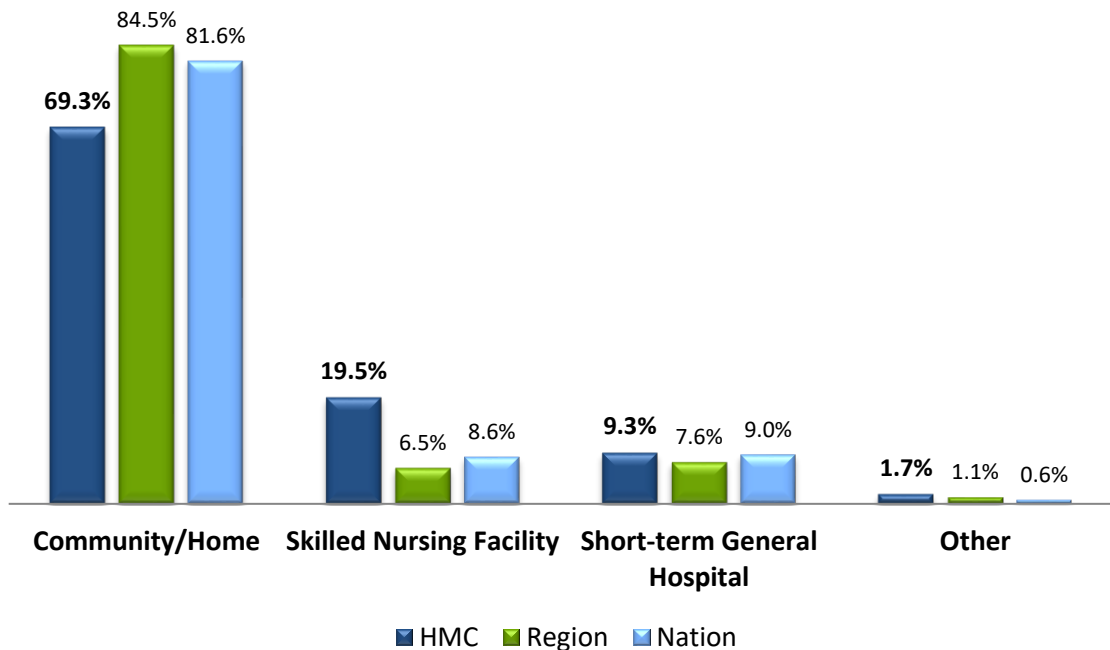
2022 Harborview Inpatient Rehabilitation Unit



Commercial Includes: Blue Cross, Commercial Insurance, HMO (managed care)

Other Includes: Government, Private Pay, Financial Assistance plans

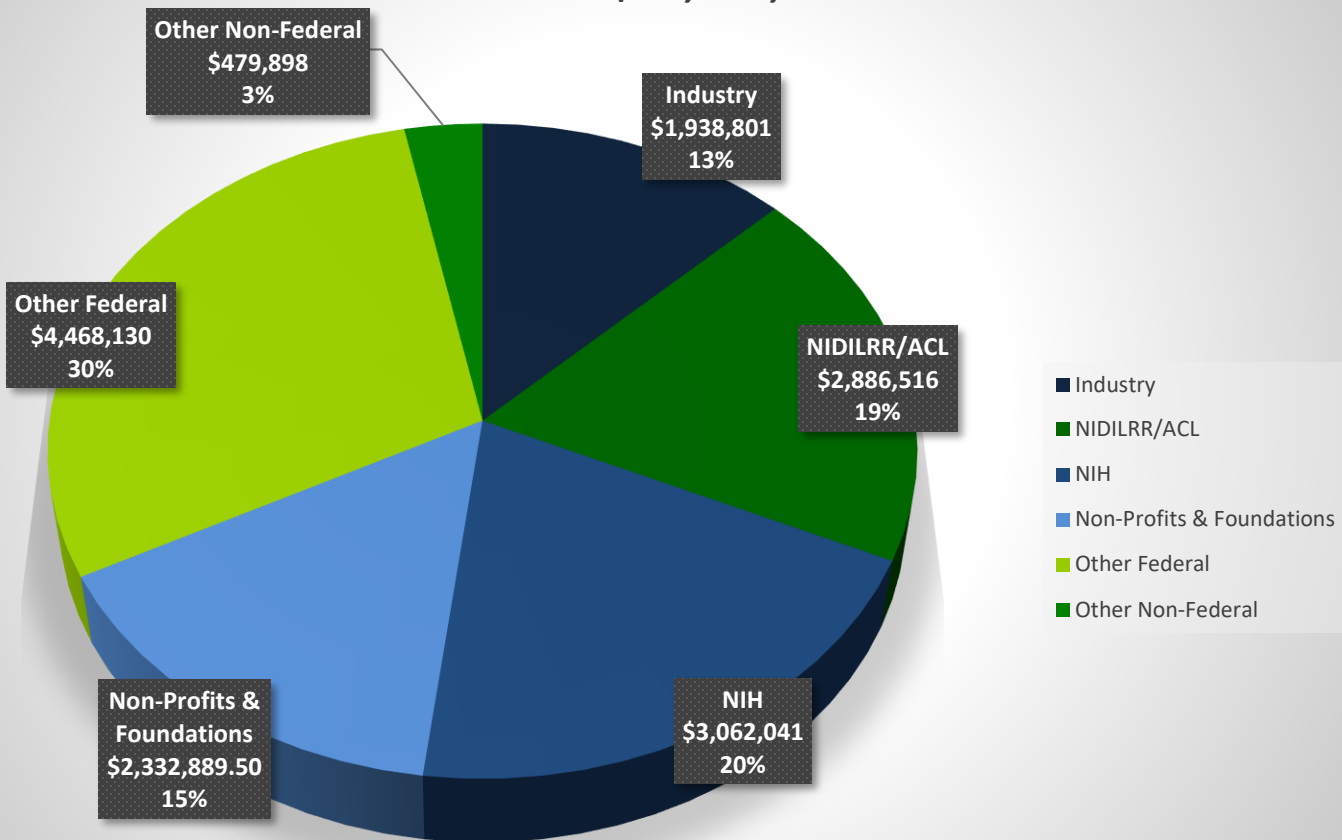
Locations of Patient Discharge 2022



Grant Funding 2022

UW Rehabilitation Medicine

DEPARTMENT OF REHABILITATION MEDICINE: FY22 Award Amounts by Sponsor Type TOTAL: \$15,168,275.50



NIDILRR/ACL= National Institute on Disability, Independent Living, and Rehabilitation Research/Administration for Community Living

NIH = NIH awards or flow through

Other Federal = VA, HRSA and VA subcontracts

Other Non-Federal = King County, private industry, other

PCORI = Patient-Centered Outcomes Research Institute

Model Systems 2011-2022

Harborview Inpatient Rehabilitation Unit

Northwest Regional Spinal Cord Injury System

The Northwest Regional Spinal Cord Injury System (NWRSCIS) is centered within the Department of Rehabilitation Medicine at University of Washington Medical Center and Harborview Medical Center.

The mission of the NWRSCIS is to improve the lives of people with SCI through excellent patient care, research and education. We are continuing to follow individuals enrolled in the SCI Model System funded by the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). We disseminate the most useful, evidence-based information to people with SCI, their families, and professionals through our education forum presentations, written materials and videos posted on our website: sci.washington.edu and on our YouTube channel: <https://www.youtube.com/user/UWSpinalCordInjury>. Faculty have continued to publish scientific studies from data obtained through NIDILRR-funded research.

The University of Washington TBI Model System

The University of Washington Traumatic Brain Injury Model System (TBIMS) successfully competed to be one of 16 centers funded by the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDRR) for 2017-2022 (Grant 90DPTB008).

Our goal is to promote the health, well being, and recovery of persons with TBI by applying knowledge from cutting edge research into our clinical care. UW TBIMS research areas include treatment of chronic pain after TBI, learning about physical activity in the first year after TBI, gaining knowledge on return to driving, and learning more about cognitive function over time following a TBI. We are also partnering with other funding partners to improve the transition from inpatient rehabilitation to the community and assessing sleep apnea after TBI. We continue to provide educational opportunities to the community in partnership with BIAWA by providing expert speakers on a variety of topics. Newsletters and educational materials are also available on our website. We are currently working on developing graphic educational tools on topics in TBI. More information on our TBIMS investigators, projects, and educational materials can be found at www.tbi.washington.edu.

Panels, Groups, and Activities

- **The University of Washington and Harborview Medical Center** sponsor ongoing events to educate and assist former patients as well as the general public. Examples include:
 - Spinal Cord Injury Forum
 - Amputee Support Group
 - Brain Injury Information and Support Group
 - Stroke and Head Injury Caregiver Support Group
 - Young Adults with TBI Support Group
- **The Assistive Technology Board** celebrated its third anniversary this year. The board is comprised of patients, families, clinicians and industry leaders with a focus on facilitating education, resource allocation, development, and collaboration related to assistive technology needs in spinal cord injury rehabilitation.
- **The SCI Peer Program** strives to match newly injured patients, who are interested, to a person in the community who has successfully adjusted to living with an SCI. Our peers have had a similar life experience and this provides an opportunity for the exchange of information, support, encouragement, and presenting a positive role model.
- **The Spinal Cord Injury Forum** is an educational program for persons with SCI and their friends, family members, caregivers, and health providers, held at the UW Medical Center. The forum provides current information on a variety of topics relevant to the SCI community, such as maintaining good nutrition, bladder management, assistive technology, fertility after SCI, recreational activities, and recovery research. [Northwest Regional Spinal Cord Injury System \(washington.edu\)](http://www.nwscisystem.org)

Panels, Groups, and Activities

- **The Amputee Support Group** is held every Tuesday from 11:00-12:30 at 4 West Hospital, Room 73 (except holidays). The group offers a place for amputees and their family members to connect with others who have faced similar challenges. This is a fantastic place to get information and/or support and is open to the community. [Harborview Amputee Support Group \(uw.edu\)](#)
- **Brain Injury Information and Support Group** is held once a week to provide support for families and friends of current HMC patients (critical care/acute/inpatient/outpatient). This group is facilitated by Harborview staff and others who have experienced brain injuries to not only answer questions, but also to provide supportive listening and additional resources. [Homepage Articles - The Weekly Harborview Brain Injury Support... \(uwmedicine.org\)](#)
- **The HMC Stroke Support Group** is a free resource available to stroke survivors and family members seeking additional support. To help lay the foundation for recovery and transition into a life after stroke, members of the HMC Stroke Team will be available to answer questions and review education topics such as risk factors, social resources, medication management, and life after discharge. This group meets every 4th Tuesday from 10:00 am–11:00 am at NJB 671 (HMC).

2022 Publications

Baston CM, Gellhorn AC, Hough CL, **Bunnell AE**. Interrater reliability of quantitative ultrasound measures of muscle in critically ill patients. *PM R*. 2022 Feb;14(2):183-189. doi: 10.1002/pmrj.12758. Epub 2022 Jan 27. PMID: 35014182.

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Goldish DB, Bechtel EL, Jones MW, Carlbom DJ, Burns SP, **Crane DA**. Positive predictive value of a sepsis-screening protocol for patients with tetraplegia. *PM R*. 2022 Oct 21. doi: 10.1002/pmrj.12919. Epub ahead of print. PMID: 36270009.

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Mueller BA, Cheng-Hakimian A, **Crane DA**, Doody DR, Schiff MA, Hawes SE. Morbidity and rehospitalization postpartum among women with epilepsy and their infants: A population-based study. *Epilepsy Behav*. 2022 Nov;136:108943. doi: 10.1016/j.yebeh.2022.108943. Epub 2022 Oct 15. PMID: 36252288.

Schiff MA, Doody DR, **Crane DA**, Mueller BA. Pregnancy outcomes among visually impaired women in Washington State, 1987-2014. *Disability Health Journal*. 2021 July;14(3). PMID: **33384279**.

Ott J, Oh-Park M, Boukrina O. Association of delirium and spatial neglect in right-hemisphere stroke patients. *PM R*. 2022 Nov 15. doi: 10.1002/pmjr.12922.

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