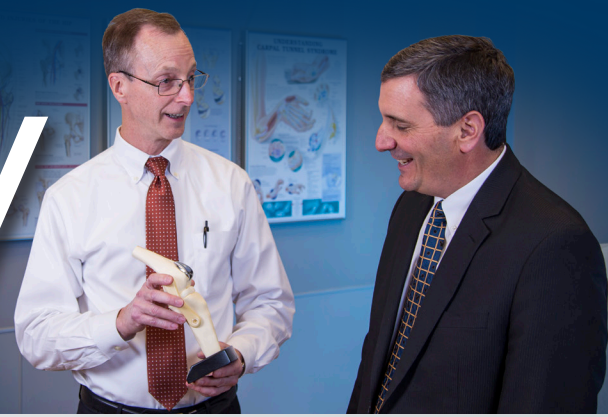


# Licking Memorial Health Systems Quality Report Card



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REHABILITATIVE CARE – INPATIENT AND HOME CARE

## Rehabilitation for Stroke Patients

Individuals who suffer from a stroke may experience a range of physical, cognitive, and emotional effects, depending on the severity and location of the brain damage. Physical effects include weakness or paralysis on one side of the body, difficulty with movement, balance, and coordination, numbness or tingling, problems swallowing, speaking, understanding language, and fatigue. Cognitive impacts may include memory loss, difficulty concentrating and problem solving, confusion, and changes in mood. Individuals may also suffer emotional effects, such as anxiety, depression, fear, frustration, and anger.

Stroke rehabilitation aims to restore function, improve mobility, and enhance the quality of life for individuals who have experienced a stroke. Stroke rehabilitation is comprised of different therapies that are designed to help the patient relearn skills lost after having a stroke. The type of rehabilitation used depends on the areas of the brain that were affected by the stroke. Rehabilitation typically starts in the hospital and can begin as soon as 24 to 48 hours after having a stroke, as long as the patient is stable.

The Acute Inpatient Rehabilitation Unit at Licking Memorial Hospital (LMH) provides acute rehabilitation services for patients who have had a stroke. The goal of the Acute Inpatient Rehabilitation program is to help patients develop the skills necessary to live as independently as possible after leaving the Hospital. The interdisciplinary team focuses on the patient's specific area of disability

caused by the stroke, such as balance and coordination, mobility, daily activities, speech and language, and swallowing.

To qualify for Acute Inpatient Rehabilitation services at LMH, patients must be able to tolerate at least three hours of therapy a day for five days a week and be able to achieve rehabilitation goals in a reasonable time frame. Patients may be referred to Acute Inpatient Rehabilitation by their physicians, social workers, family members, insurance representatives, case managers, or themselves.

LMH also offers home care rehabilitation services for patients who are medically stable enough to leave the Hospital but still need support to recover at home. This option can be chosen when inpatient rehabilitation is not necessary or possible, and it allows for personalized therapy in a familiar environment.

Prior to discharge, the patient will be assessed on their ability to perform basic tasks, mobility, cognitive function, and home safety to determine if home-based rehabilitation is appropriate. Once the patient is home, a nurse or therapist from Licking Memorial Home Services will conduct a home assessment that includes reviewing medical history, assessing the patient's physical and cognitive abilities, checking for safety risks in the home, and identifying goals for recovery. An individualized rehabilitation plan will be created based on the assessment that outlines the types of therapy, frequency of visits, and measurable goals.

Outpatient rehabilitation is also offered through Licking Memorial Rehabilitation Services for patients who need continued therapy after they are discharged from the Hospital. This type of service usually follows inpatient rehabilitation or home care when the patient has regained enough function to leave home but still needs structured therapy.

The comprehensive rehabilitation team provides several types of physical, occupational, and speech therapies that focus on decreasing pain while enhancing function to restore quality of life for the patient. The Rehabilitation Services Department utilizes many tools and technologies to improve an individual's daily living activities, including the STISIM Drive®, a driving simulator that assists patients who may need to strengthen basic driving skills including reaction time, managing pedals, and steering. There is also the BTE™ Simulator II, which replicates hundreds of real-world jobs and daily living functions, and is used for functional upper extremity rehabilitation.

Rehabilitation after a stroke is essential for restoring function, preventing complications, and enhancing quality of life. Starting rehab early, whether it is through inpatient, home care, or outpatient services, will help to ensure the best possible outcomes. The highly skilled team of physicians, nurses, and therapists at LMH will create an individualized plan for each patient, providing them with the necessary tools for a successful recovery.



## Patient Story – Larry Brown

Larry Brown has lived most of his life in Licking County. After graduating from Newark High School, he began work in the office of the Licking County Clerk of Courts. He served in the office and as Clerk of Courts for many years and retired in 2008. During that time, Larry also volunteered his time by serving on a variety of boards of organizations that benefit the community.

Playing golf is one of Larry's passions. While out enjoying a game in July 2024, he missed a step, fell, and injured his hip. An emergency squad quickly arrived and transported Larry to Licking Memorial Hospital (LMH) where he underwent surgery to repair the broken hip. After a few days of recovery, Larry was moved to the Acute Inpatient Rehabilitation Unit (ARU) at LMH. There he began rehabilitation for his injury.

"I spent a total of 12 days in the Hospital, and everyone there was

so good to me," Larry remembered. "The staff in the ARU were able to get me back on my feet. They knew when to push me and make sure I completed the exercises as needed. They were all very professional and courteous. I was also excited to work with David W. Koontz, D.O., because we had met each other prior to my admission to LMH. We had plenty to talk about and much in common. I am so grateful for his expertise, professionalism, and kindness."

The ARU at LMH is a specialized care center for patients who require medical care while receiving therapy to recover from an accident, injury, illness, or surgery. Patients receive individualized care based on physical need and functionality. Family members and care givers are included in this process. The ARU staff is directed by a physician and includes specially trained nurses, social workers, dietitians, and physical, occupational, and speech therapists who focus on living skills to prepare the patients to care for themselves.

Patients must be able to tolerate at least three hours of therapy, five days per week and may include

physical, occupational, and speech therapy. The goal of the ARU is to restore function and maximize independence in a reasonable time with the intention that the patient will be able to return home after being discharged from the ARU.

"When I was ready to go home, the staff assisted in making appointments for continuing therapy and follow-up care," Larry explained. "Thanks to their assistance, I was able to return to the golf course by September. At my age, a broken hip can be devastating and put an end to participating in activities such as golf. I feel blessed that I am able to remain active, play golf, and spend time with my wonderful family."

Larry and his wife, Beverly, have been married for over 60 years. The couple share three children, Scott, Marcie, and Jeff, seven grandchildren, and one great-grandson.

# Rehabilitative Care – Inpatient and Home Care – *How do we compare?*

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare to benchmark measures. Then, we publish the information so you can draw your own conclusions regarding your healthcare choices.

1. Patients who are undergoing rehabilitation are at increased risk for falls due to factors such as the misperception of their own level of independence, weakness, and the possible use of pain medication. Falls can result in injuries and potentially delay a patient’s rehabilitation. All Acute Inpatient Rehabilitation Unit (ARU) patients receive daily fall risk assessments, fall-prevention measures, and are advised of precautionary measures.

	LMH 2022	LMH 2023	LMH 2024	LMH Goal
Unassisted patient falls in the ARU that resulted in injury	0	0	0	0

2. Upon admission to the ARU, patients receive a standardized assessment scoring their ability to perform daily activities, such as walking, dressing, and personal hygiene. Upon completion of the rehabilitation plan, the skills assessment is repeated to determine the degree of improvement in function as a result of treatment.

	LMH 2022	LMH 2023	LMH 2024	National <sup>(1)</sup>
Overall rate of improvement in self-care ability	12.6%	15.1%	13.3%	13.8%
Overall rate of improvement in self-mobility	24.7%	26.5%	26.7%	35.9%

3. The goal of the ARU is to help patients who have experienced an illness or injury improve their functional status and mobility so that they may return home rather than to a nursing care center.

	LMH 2022	LMH 2023	LMH 2024	National <sup>(1)</sup>
ARU patients discharged directly to home	87%	82.2%	80.7%	88.2%

4. Inpatients’ level of satisfaction with their healthcare experience is affected by many factors, such as achievement of therapy goals, staff communication skills, nurse response times, and facility cleanliness. To monitor the quality of care, the ARU at Licking Memorial Hospital (LMH) offers patients an opportunity to provide feedback through a post-discharge survey. A score of 4 or 5 is considered ideal.

	LMH 2022	LMH 2023	LMH 2024	National <sup>(2)</sup>
Overall patient satisfaction with ARU experience	93.9%	92.9%	94.4%	81%

5. LMH Home Care provides skilled professional care to patients at home. Services are based on the individual’s needs and include a wide range of support, such as therapy, nursing care, medication instruction, pain management, home management, financial needs assistance, emotional support, as well as others. LMH surveys Home Care patients regarding their level of satisfaction on a scale of 0 to 10, to evaluate how well their needs are being met. A score of 9 or 10 is considered ideal.

	LMH 2022	LMH 2023	LMH 2024	National <sup>(3)</sup>
Percent of Home Care patients rating LMH a 9 or 10	95.1%	92.9%	96.7%	88.4%

6. LMH Home Care patients often have some degree of physical deficit which can interfere with their ability to walk and quality of life. The Home Care staff provides physical therapy and other support to help patients improve their walking function.

	LMH 2022	LMH 2023	LMH 2024	LMH Goal
Home Care patients with improved walking function	98%	86%	89%	86%

**7.** Patients who have physical impairments due to illness, surgery, or injury may not recognize fall hazards in their homes. Items such as throw rugs, stairs without railings, extension cords across floors, and slippery bathtubs are particularly dangerous to recovering patients. The LMH Home Care staff offers a safety evaluation of the patient’s home, as well as an assessment of the patient’s own physical abilities in the home environment.

	LMH 2022	LMH 2023	LMH 2024	LMH Goal
Fall risk assessment completed for every Home Care patient	100%	100%	100%	100%

**Data Footnotes:** (1) Uniform Data System for Medical Rehabilitation Report. (2) Press Ganey – IRFCAHPS. (3) Press Ganey – HHCAHPS.

Check out our Quality Report Cards online at [LMHealth.org](http://LMHealth.org).



## Using Everyday Items for Rehabilitation

Individuals who experience injury or surgery often will need rehabilitation to regain strength and aid in recovery. They may not always have access to the appropriate equipment, and may feel that they cannot continue their rehabilitation. Fortunately, utilizing everyday items around the house can have the same effect as the equipment at the rehabilitation facility. The following household items can be used to help with stability, proper alignment, gripping, stretching, and resistance:

- Water bottles and milk jugs can be filled and used as weights.
- Athletic balls, such as a tennis ball, can be used to help roll out muscles.
- Towels can assist with stretching and provide a better stretch for those who are unable to reach their toes.
- A leash or belt is also used for stretching but offers more resistance since it is firmer than a towel.
- Stairs provide an easy platform on which to stretch or exercise. Individuals can use stairs to stretch the calf, hips, and hamstrings. Walking up and down stairs can provide a good cardio workout.
- Jumping rope is an excellent, low-impact way to increase heart rate and blood flow. It also works the small muscles in the feet and shoulders.
- Marbles can be used to help strengthen the muscles on the bottom of the foot, which will help prevent inflammation that can cause plantar fasciitis.
- Torn paper, sponges, and cups can be used for activities that improve dexterity and coordination.

It is important to consult with a physician, physical therapist, or occupational therapist before starting any new exercises or rehabilitation program. They can provide a personalized plan and ensure that the patient is using household items safely and effectively for rehabilitation.



Visit us at [LMHealth.org](http://LMHealth.org).

Please take a few minutes to read this month’s report on **Rehabilitative Care – Inpatient and Home Care**. You will soon discover why Licking Memorial Health Systems is measurably different ... for your health!

The Quality Report Card is a publication of the LMHS Public Relations Department. Please contact the Public Relations Department at (220) 564-1572 to receive future mailings.

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