Spinal Cord Injury

Questions to Consider When Selecting a Rehabilitation Treatment Program

Choosing a rehabilitation facility is one of the most important decisions you will have to make in the near future. It is very important to be confident about the quality of care you or a loved one will receive when entering a rehabilitation program.

In general, it is best to compare at least three rehabilitation programs to make an informed decision on the best facility for your loved one. Admissions personnel will be able to answer these questions for you.

1. How many patients are admitted to the spinal cord injury rehabilitation program each year?

   Shepherd Center: ____________  Facility B: ____________  Facility C: ____________

2. How many patients has the facility treated with injuries similar to yours?

   Shepherd Center: ____________  Facility B: ____________  Facility C: ____________

3. What is the average age of patients in the spinal cord injury program?

   Shepherd Center: ____________  Facility B: ____________  Facility C: ____________

4. Are there patients in the program of the same age and sex as the patient considering admission?

   Shepherd Center: ☐ yes ☐ no  Facility B: ☐ yes ☐ no  Facility C: ☐ yes ☐ no

5. Does the hospital specialize in spinal cord injury rehabilitation services or is it just one of the many medical services offered?

   Shepherd Center: ____________  Facility B: ____________  Facility C: ____________

6. Is the facility equipped to manage life-threatening emergencies?

   Shepherd Center: ☐ yes ☐ no  Facility B: ☐ yes ☐ no  Facility C: ☐ yes ☐ no

7. Is respiratory care provided on a 24-hour basis?

   Shepherd Center: ☐ yes ☐ no  Facility B: ☐ yes ☐ no  Facility C: ☐ yes ☐ no

8. Does the facility offer services for every stage of recovery, including:

   INTENSIVE CARE

   Shepherd Center: ☐ yes ☐ no  Facility B: ☐ yes ☐ no  Facility C: ☐ yes ☐ no
INPATIENT REHABILITATION

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

POST-ACUTE REHABILITATION

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

OUTPATIENT SERVICES

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

9. How often and for how long each day do patients receive treatment by specialists such as physical and occupational therapists? (Treatment should be no less than three hours per day.)

Shepherd Center: ____________  Facility B: ____________  Facility C: ____________

10. Is the patient treated by the same team (physical therapy, occupational therapy, speech therapy) every day?

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

11. Are activities planned for patients on weekends and evenings?

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

Counseling services

1. What types of coping and support services are available?

PEER SUPPORT

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

INDIVIDUAL AND GROUP THERAPY

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

PSYCHOTHERAPY

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

NEUROPSYCHOLOGY

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

FAMILY COUNSELING

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

VOCATIONAL COUNSELING

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no

SUBSTANCE ABUSE COUNSELING

Shepherd Center: □ yes □ no  Facility B: □ yes □ no  Facility C: □ yes □ no
Family members

1. Are family members encouraged to participate in rehabilitation?
   
   **Shepherd Center:** ☐ yes ☐ no  
   **Facility B:** ☐ yes ☐ no  
   **Facility C:** ☐ yes ☐ no  
   
   To what extent?
   
   **Shepherd Center:** __________  
   **Facility B:** __________  
   **Facility C:** __________  

2. Does your facility have a family education program to prepare me for future caregiving responsibilities?
   
   **Shepherd Center:** ☐ yes ☐ no  
   **Facility B:** ☐ yes ☐ no  
   **Facility C:** ☐ yes ☐ no  

3. What type of support does the facility offer after we return home?
   
   **Shepherd Center:** ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   
   **Facility B:** ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   
   **Facility C:** ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

4. Are free or low-cost living arrangements available for family members participating in training?
   
   **Shepherd Center:** __________  
   **Facility B:** __________  
   **Facility C:** __________  

Outcomes

1. What percentage of patients return to home or community rather than long-term care facilities?
   
   **Shepherd Center:** __________  
   **Facility B:** __________  
   **Facility C:** __________  

2. Rehabilitation hospitals measure patient results in terms of “functional improvement.” What is the facility’s average functional improvement measure (FIM) score change for patients with spinal cord injuries?
   
   **Shepherd Center:** __________  
   **Facility B:** __________  
   **Facility C:** __________  

3. What is the facility's average length of stay for patients with injuries similar to yours?
   
   **Shepherd Center:** __________  
   **Facility B:** __________  
   **Facility C:** __________  

On-Site Review

1. Were staff members helpful and friendly when information was requested?
   
   **Shepherd Center:** ☐ yes ☐ no  
   **Facility B:** ☐ yes ☐ no  
   **Facility C:** ☐ yes ☐ no
2. Were you offered an opportunity to tour the facility?

   Shepherd Center: [ ] yes [ ] no  
   Facility B: [ ] yes [ ] no  
   Facility C: [ ] yes [ ] no

3. What were your impressions of the overall atmosphere?

   Shepherd Center: ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________

   Facility B: ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________

   Facility C: ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________
   ________________________________________________________________________________________________

4. Did you have the opportunity to speak with people currently participating in the program?

   Shepherd Center: [ ] yes [ ] no  
   Facility B: [ ] yes [ ] no  
   Facility C: [ ] yes [ ] no

5. Were they satisfied with their rehabilitation program?

   Shepherd Center: [ ] yes [ ] no  
   Facility B: [ ] yes [ ] no  
   Facility C: [ ] yes [ ] no

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LEARN MORE ABOUT SHEPHERD CENTER

If you would like to learn more about Shepherd Center's spinal cord injury program or obtain our answers to the questions on this form, please contact our Admissions Department at 800-743-7437 or email admissions@shepherd.org. Visit us online at shepherd.org.