



As a CARF accredited program, we at On With Life hold ourselves to extensive and challenging quality outcome measures. Our Post-Acute Inpatient Rehabilitation program is the only program in the world outside of a hospital that is CARF accredited as a "Comprehensive Integrated Inpatient Rehabilitation Program" for both adults and children with brain injury and stroke. The following measures were captured from fiscal year 2022 (July 1, 2021 - June 30, 2022).



97%

QUALITY OF THERAPY RECEIVED

95%

RESPONSIVENESS OF OUR MEDICAL STAFF TO CONCERNS AND MEDICAL NEEDS

51

AVERAGE AGE

62% MALE
38% FEMALE

GENDER

98%

COURTESY AND RESPECT SHOWN BY OUR STAFF

94%

OVERALL SATISFACTION RATE

7

STATES SERVED

70 DAYS

LENGTH OF STAY

Stroke Rehabilitation Program

77%

of persons served in our stroke program
DISCHARGE TO HOME

67

AVERAGE AGE (STROKE)

56% MALE
44% FEMALE

GENDER (STROKE)

67 DAYS

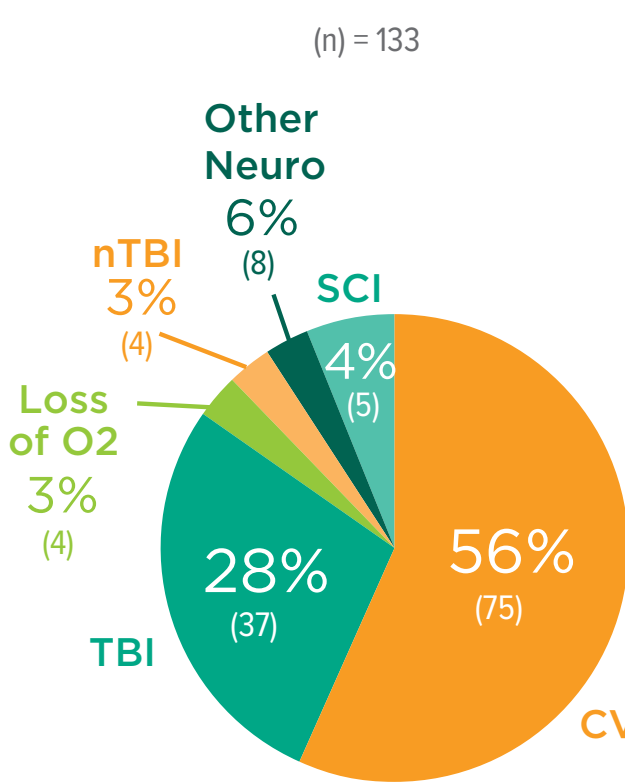
LENGTH OF STAY (STROKE)



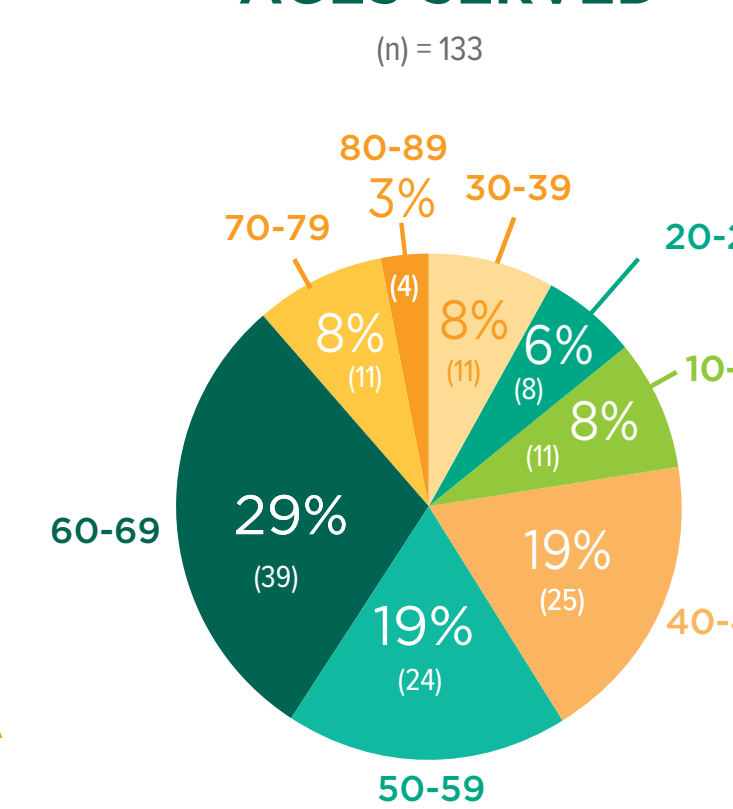
PERSONS SERVED

In FY22, On With Life served 133 individuals, ranging in age from 13-85, in our Post-Acute Inpatient Rehabilitation program.

TYPE OF INJURY (n) = 133



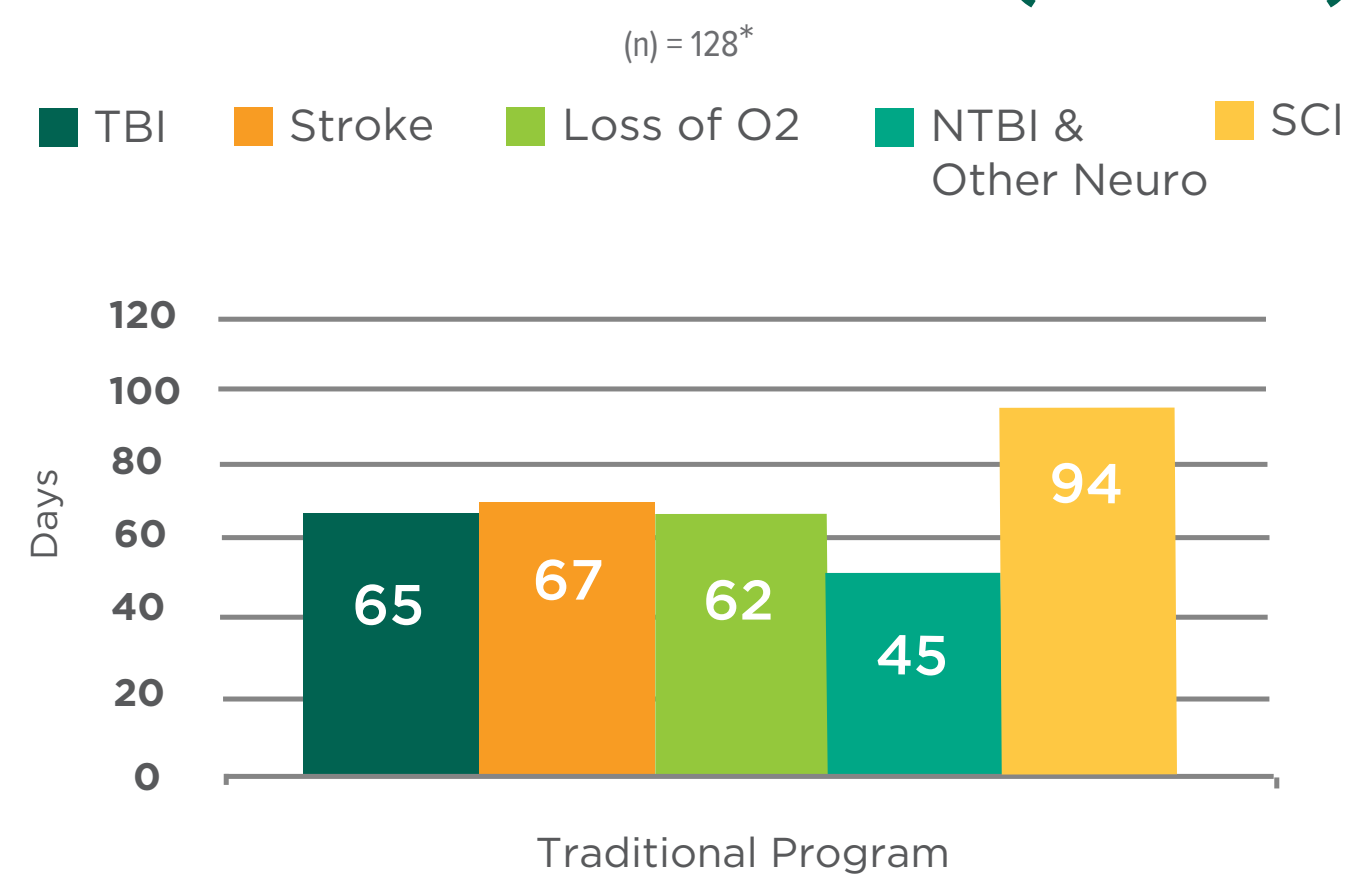
AGES SERVED (n) = 133



COLLABORATIVE CARE

As specialists in brain injury rehabilitation, we know that each brain injury survivor is unique, with specific needs, capabilities and potential, and deserves a treatment plan that is highly specialized. The comprehensive rehabilitation team at On With Life includes persons served and their families and collaboratively develops a treatment plan that meets their personal, cultural and spiritual goals and preferences. The length of stay for those we serve varies greatly depending on personal goals, family support, response to treatment, medical needs and insurance authorization.

AVERAGE LENGTH OF STAY (IN DAYS) (n) = 128*



*5 persons served had a length of stay which were considered to be outliers in the dataset, and were excluded to provide a more accurate representation.

NURSING HOURS PER PERSON PER DAY

10.3 HOURS

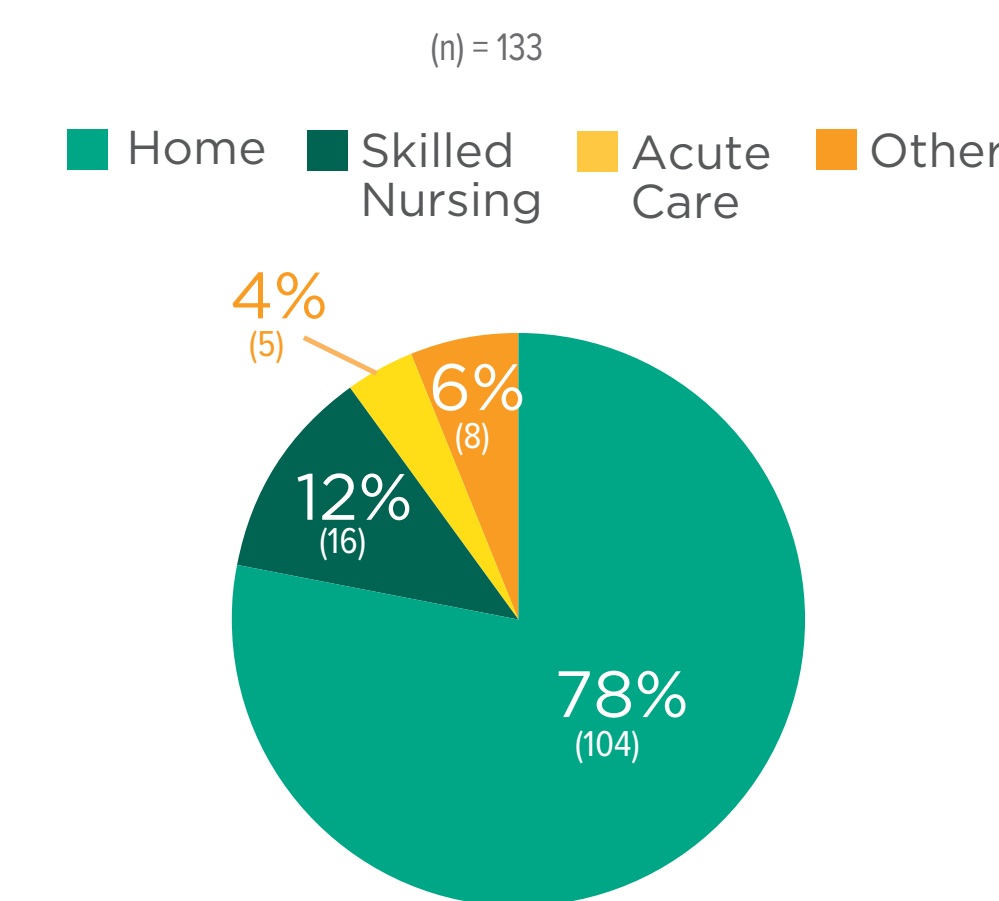
DOC AND TRADITIONAL REHAB

Due to the severity of the injuries we see at On With Life, our medical acuity is 42% higher than a typical skilled nursing facility. Our nursing hours per patient per day far exceed the state and national averages when compared to traditional skilled facilities. In FY22, On With Life only had 44 unplanned transfers to acute care.

RETURN TO WORK, SCHOOL AND THE COMMUNITY

Our Case Management team closely monitors the person served throughout the rehabilitation process, maintaining consistent contact with family members and external case managers to communicate information, address critical issues and coordinate discharge planning. Rehabilitation does not end when a person leaves our inpatient program. Our staff understands these challenges and continues to offer support to individuals and their families after discharge.

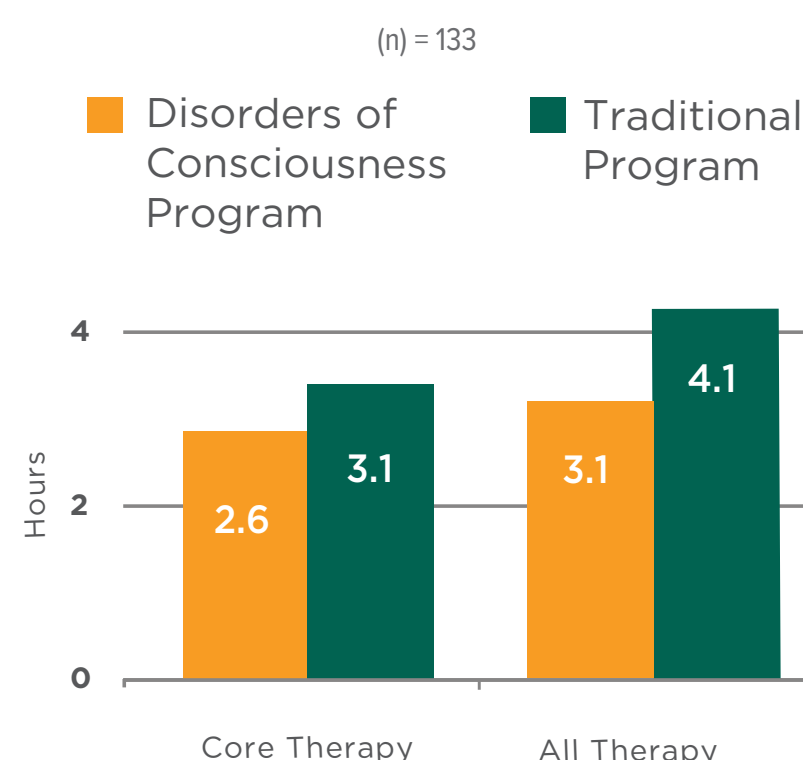
DISCHARGE LOCATION (n) = 133



INTENSIVE REHABILITATION SERVICES

Persons served at On With Life receive core therapy services (physical, occupational and speech therapy). The category of all therapy includes music therapy, therapeutic recreation, clinical counseling, peer mentoring and neuropsychology.

THERAPY HOURS DELIVERED PER DAY (n) = 133

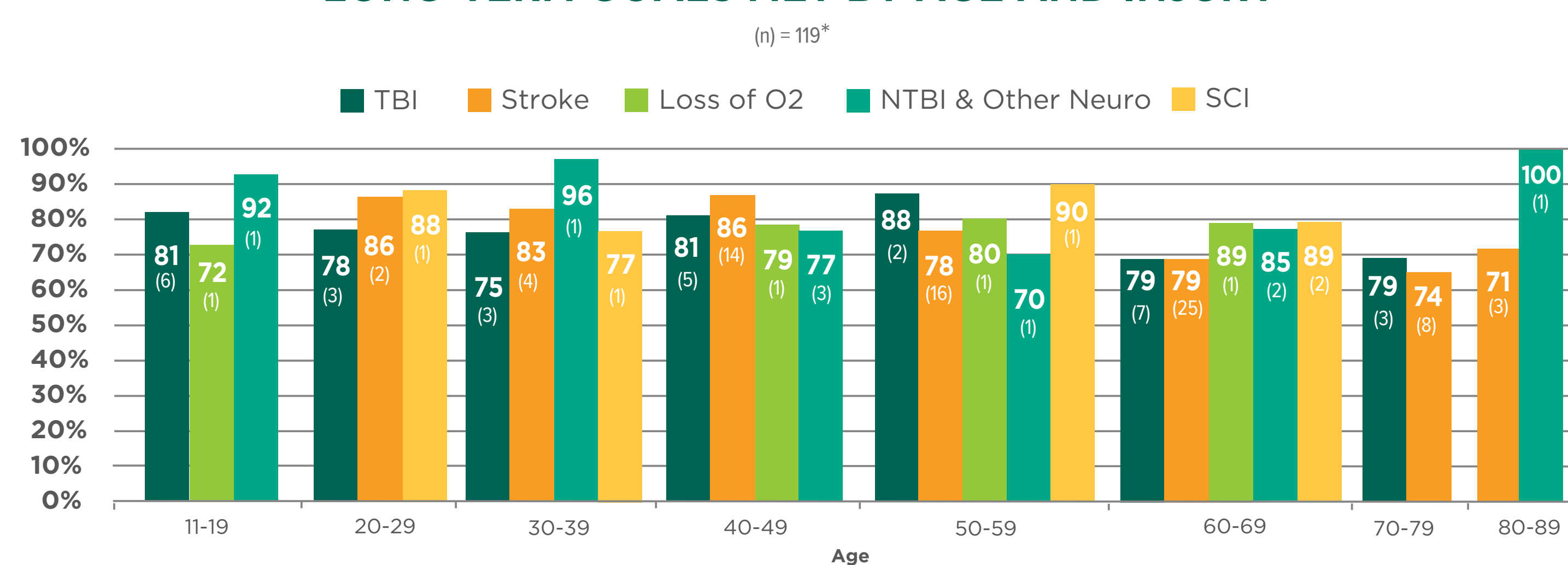


INDIVIDUALIZED FUNCTIONAL THERAPY

Our therapists are experts in eliciting effort and engagement from our persons served with individualized therapy plans that address their needs while appealing to their vocational and leisure interests.

*14 persons served experienced unexpectedly short lengths of stay; therefore, their long-term goals were unable to be accurately tabulated.

LONG-TERM GOALS MET BY AGE AND INJURY (n) = 119*

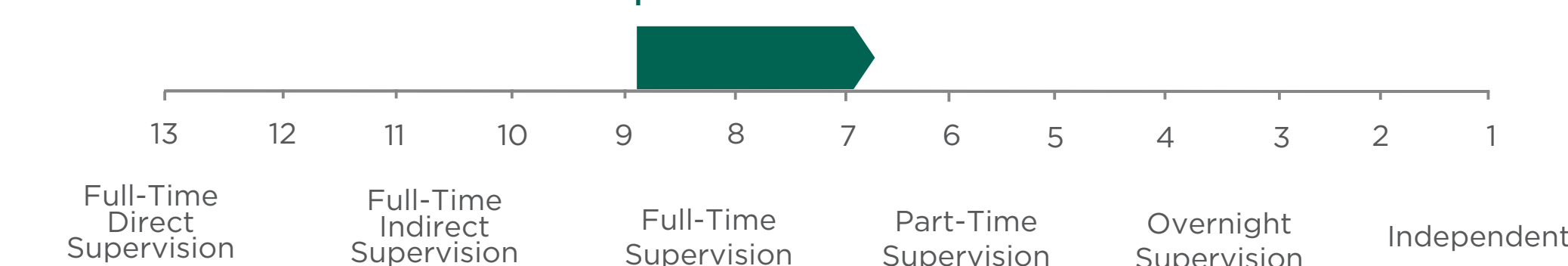


ADMISSION TO DISCHARGE IMPROVEMENT

SUPERVISORY RATING SCALE (SRS)

The Supervisory Rating Scale (SRS) measures the level of supervision that a person served receives from caregivers.

On average, each person served demonstrated 1.7 pt improvement on the SRS



MAYO-PORTLAND ADAPTABILITY INVENTORY (MPAI-4)

The Mayo-Portland Adaptability Inventory (MPAI-4) items represent the range of physical, cognitive, emotional, behavioral, and social problems that people may encounter after acquired brain injury.

*20 persons served were excluded from MPAI-4 calculations due to a short length of stay, or a diagnosis that is inappropriate for use of this assessment

61%

SHOWED SIGNIFICANT OR ROBUST IMPROVEMENT ON THE MPAI-4 SCALE (n) = 113*