

Magee Rehabilitation Hospital  
Community Needs Assessment  
Report

*For Fiscal Year Ending June 30, 2013*

**BELIEVE**

**in a way back**

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## **EXECUTIVE SUMMARY**

### **Introduction**

The Patient Protection and Affordable Care Act (ACA) requires tax-exempt hospitals to complete community health needs assessments (CHNA) at least once every three years and to put in place strategies for meeting the needs identified. For the tax year ending June 30, 2013, Magee Rehabilitation Hospital is required to produce a CHNA and describe on Internal Revenue Service Form 990 how these needs are addressed, as well as any needs not being addressed, and why.

### **Magee Rehabilitation Hospital**

Magee Rehabilitation Hospital opened in 1958 as the first free-standing rehabilitation hospital in Philadelphia. The Hospital has over 500 employees and is nationally recognized for outstanding programs in physical and cognitive rehabilitation, with comprehensive services for spinal cord injury, brain injury, stroke, orthopedic replacement, amputation, pain management and work injury. Magee, in conjunction with Thomas Jefferson University Hospital, serves as the federally designated Regional Spinal Cord Injury Center of Delaware Valley. Only 14 such centers exist in the country. Magee is a founding member of The Christopher Reeve Foundation NeuroRecovery Network, which provides state of the art rehabilitation therapy.

Inpatient services are delivered at Magee's main facility located at 16<sup>th</sup> and Race Streets in Center City Philadelphia. Outpatient programs are delivered in a variety of community settings including the Magee Riverfront outpatient center at 1500 South Columbus Boulevard, Magee at Watermark at 18<sup>th</sup> and Callowhill Streets and Magee at Yardley. Work injury and pain management services are offered at the Work Fitness Center located within Magee Riverfront.

### **Magee Rehabilitation Hospital Community**

Magee Rehabilitation Hospital defines the community served by geography and special populations. In regards to geography, the hospital primarily defines its community as Philadelphia County, surrounding Southeastern Pennsylvania counties, as well as the areas of South New Jersey and Delaware. Our special population served is adults with disabilities, many of whom have incurred life-changing injuries and illness including, but not limited to, spinal cord injury, stroke, acquired brain injury, amputation, major orthopedic issues and other often catastrophic injuries and illnesses. For the purposes of our Community Health Needs Assessment, the Hospital focused on the special population served—adults with disabilities.

### **Community Health Needs Assessment Process**

To conduct the Community Health Needs Assessment, in 2010 Magee Rehabilitation Hospital convened a CHNA working group that included administrative staff and specially selected interns under the advisement of upper management. Numerous data sources were used to develop a survey with various drafts edited through 2011 and early in 2012. In April and May 2012, drafts of the survey were presented to various individuals with disabilities to obtain recommendations on content, topic areas, readability and ease of completion. The CHNA survey contained 47 questions, was launched in August 2012 and closed on December 31, 2012. The survey was distributed to numerous former Magee Rehabilitation Hospital patients via the Hospital's Lifetime Follow-Up and Outpatient programs. The survey was also shared with various other organizations that serve adults with disabilities, such as Inglis House, the Mayor's Commission on People with Disabilities, Liberty Resources and others. The survey could be completed in writing and online (via Survey Monkey), and 417 individuals completed the survey.

The CHNA survey was divided into seven main sections grouped by question topic, all of which are primary issues facing individuals living with disabilities.

- Disability
- Health and Social Services
- Income and Employment
- Housing and Transportation
- Technology and Assistive Devices
- Community Participation
- Individual Information

Results of the survey are compiled in the CHNA report that follows. It is clearly understood that individuals with disabilities have many community health needs, and many of these cannot be successfully addressed or solved by Magee Rehabilitation Hospital. The CHNA report identifies such needs, including, but not limited to, substance abuse, employment, transportation, housing and medication.

It is further understood that individuals with disabilities have many health needs that are addressed by Magee Rehabilitation Hospital. Magee Rehabilitation Hospital identified three priority health needs that relate directly to the Hospital's mission: education, injury and illness prevention, and wellness. These priorities all pertain to adults with disabilities who are living in the community, as well as needs of the community at large. Several of these activities involve community partners. These priorities and the activities performed by Magee that support them are fully explained in the CHNA report that follows.

#### **Dissemination of the Report to the Public**

The CHNA is posted on the hospital's website: [www.MageeRehab.org](http://www.MageeRehab.org). The report has been made available to all employees and stakeholders of Magee. It is available in full written form from the Magee Marketing and Public Relations Department by calling 215-587-3363.

#### **Commitment to the Community**

The mission of Magee Rehabilitation is to improve the quality of life of persons with disabilities by providing high quality physical and cognitive rehabilitation services. Magee Rehabilitation Hospital is committed to providing quality rehabilitation and community programs to all who demonstrate a need and who can benefit from our services regardless of their ability to pay. Magee is committed to serve the Delaware Valley as a primary source of rehabilitative care, community involvement, education and research, which are primary aspects of the Magee Mission Statement.

## **I. INTRODUCTION**

### **SITUATION ANALYSIS**

Magee Rehabilitation Hospital in Philadelphia, a tax-exempt hospital, conducted the following Community Health Needs Assessment in accordance with the Affordable Care Act (ACA). Through this process, the Hospital identified health needs of the community it serves and developed implementation strategies to address the most pressing needs.

The development of questions and collection of publicly available data regarding the community served began in February 2012. A survey was developed and distributed between August 27 and December 31, 2012. Assessment data was then compiled and summarized in January 2013, and implementation strategies were developed. The report and implementation strategies were reviewed and approved by the Magee Rehabilitation Hospital Board on May 15, 2013.

### **ABOUT MAGEE REHABILITATION HOSPITAL**

#### *MISSION*

The mission of Magee Rehabilitation is to improve the quality of life of persons with disabilities by providing high quality physical and cognitive rehabilitation services.

#### *VISION*

We will be a preeminent, independent provider of physical and cognitive rehabilitation services within the global market. We will accomplish our vision by:

- Delivering clinical care that sets a world community standard for excellence as measured by outcomes
- Sustaining the highest levels of patient, family, and referral source satisfaction
- Being the employer of choice thus attracting and retaining the most competent, productive work force
- Engaging in strategic partnerships that achieve sustainable clinical outcomes at a lower cost than our competitors

Success in attaining the vision will be gauged by:

- Attainment of business and financial goals without reduction in either quality or patient satisfaction
- Maintaining name equity and reputation
- Recruitment and retention of competent, caring, and effective employees
- Magee being sought out as a strategic partner
- An increase in market share

#### *COMMUNITY SERVED*

Magee Rehabilitation Hospital defines the community served by geography and special populations. In regards to geography, the hospital primarily defines its community as Philadelphia County, surrounding Southeastern Pennsylvania counties, as well as the areas of South New Jersey and Delaware (Figures 1A-

B). Our special population served includes adults with disabilities, many of whom have incurred life-changing injuries and illness including, but not limited to, spinal cord injury, stroke, acquired brain injury, amputation, major orthopedic issues and others (Figure 1C). For the purposes of our Community Health Needs Assessment, the Hospital focused on the special population served.

These communities served were developed using historical data, including admissions, census information and zip codes. Each year, the Hospital treats approximately 1,200 inpatients and 1,300 outpatients. Of those inpatients, approximately 26% are seeking rehabilitation for a stroke; 25% for a spinal cord injury; 22% for orthopedic; 16% for brain injury; 7% for general rehabilitation; and 4% for other types of rehabilitation (Figure 1C).

## **II. METHOD**

### **IDENTIFICATION OF AREAS TO BE ADDRESSED IN CHNA**

To conduct the Community Health Needs Assessment, Magee Rehabilitation Hospital convened a working group that included administrative staff and specially selected interns under the advisement of upper management. Members included Ron Siggs (Development), Vernice Wooden (Case Management), Meg Rider (Volunteer and Guest Services), Kim Shrack (Public Relations) and volunteer CHNA interns Andrea Chaney, Blythe Dim, Elizabeth Wasco, and Magee volunteers Mike Devero and Barbara Salzman. The working group was under advisement from Jack Carroll, President and CEO; Bob Kautzman, Vice President of Clinical Operations; Pat Underwood, Chief Financial Officer; Robert Widmann, Controller; Hank Skoczen, Director of Marketing and Public Relations; and Ron Siggs, Vice President of Development.

After identifying and defining the community served, the group began extensive research to identify areas of potential community health needs to be addressed in assessment. This research included secondary data, such as public records, as well as primary research through consultation with organizations and individuals that represent the broad needs of the community the Hospital serves.

#### *PUBLIC DATA*

In February 2012, the Hospital joined the Public Health Management Corporation's (PHMC) Community Health Database for access to the Southeastern Pennsylvania Household Survey. This biennial health survey collects information on more than 13,000 residents living in the five-county Southeastern Pennsylvania region. The survey provides data on a broad range of health topics including health status, access to and use of health care, personal health behaviors, health screening, health insurance status, women's health, children's health and older adult health and social support needs. This provided the Hospital with critical information regarding the geographic communities served. Also in February 2012, the Hospital utilized the Department of Health for Philadelphia County's database and 2010 Census data for more information on demographics. These databases focused primarily on basic health information, but did not specifically address the unique needs of the disabled community. This prompted the team to focus the CHNA for Magee Rehabilitation Hospital on the special population of adults living with disabilities, as this population had not been previously researched or addressed in-depth.

In February 2012, the Hospital reviewed the 2009 Lehigh Valley Research Consortium Survey, with permission from the researchers (Figure 2A), as well as the 2012 Burke Rehabilitation Hospital Comprehensive 3-Year Plan (Figure 2B). The Lehigh Valley Research Consortium Survey format and content of this survey informed the format and content of the Hospital's CHNA survey, while the Burke Rehabilitation plan was used to inform the content and format of the final report.

The Hospital working group also looked to academic research to inform the content of the CHNA survey. In February 2012, the working group reviewed a report from a 2002 paper from Barrow Neurological Institute in Phoenix, Arizona that addressed what brain injured patients need in the years following their injury. This paper identified long-term needs of the brain-injured patient and addressed how those needs can be met.<sup>1</sup>

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<sup>1</sup> Prigatano, G. P., 2002, What Do Patients Need Several Years After Brain Injury? *Barrow Quarterly*, v. 18.

To ensure the survey's readability for people with varying degrees of ability, the Hospital researched the Americans with Disabilities Act (ADA) guidelines for accessible printed materials on January 28, 2012. The survey was formatted in accordance to these requirements, including the use of a 14 point, easy-to-read, non-italic, sans serif font. The survey was also translated into Braille after the Mayor's Commission on People with Disabilities meeting on November 19, 2012.

#### *ORGANIZATIONAL INPUT*

To develop the survey, Magee Rehabilitation Hospital also sought input from organizations who represent the broad interests of adults living with disabilities, which is one of the communities the Hospital serves. All consultations occurred via phone or email, unless otherwise noted.

- In December 2011, members of Magee's working group consulted with the Delaware Valley Healthcare Council (DVHC), and joined the Council's CHNA working group. Ultimately, the Hospital chose not to participate in the DVHC contracted CHNA survey as it did not address the special populations served by rehabilitation hospitals. On January 13, 2012, the Hospital attended a meeting hosted by the DVHC that discussed possible approaches to defining communities served by rehabilitation hospitals, as well as methods and data that could be used to assess the health status and needs of those communities.
- Beginning in 2010, the Magee working group held monthly conference calls with CHNA working group participants Susan O'Rourke, Director of Planning at Main Line Health and Leighton McKeithen, Director of Marketing at Bryn Mawr Rehabilitation Hospital. During these calls, team members discussed the progress of their respective surveys, shared information and provided feedback as needed.
- On March 22, 2012, the working group began outreach to Charles Horton, Deputy Director and Accessibility Compliance Specialist at the Mayor's Commission on People with Disabilities. He acted as a test evaluator for two versions of the survey, the first on June 20 and the second on August 28. On September 6, members of the working group met with Charles to explain the scope of the project and highlight opportunities for collaboration.
- On May 14, 2012, members of the Magee working group met with Linda Peyton, Executive Director of the Legal Clinic for the Disabled to discuss the inclusion of legal questions in the survey. The working group then sought her opinion as a test evaluator in late June. Because the Legal Clinic for the Disabled is housed at Magee Rehabilitation's main hospital, each of these consultations took place in person.
- Nakea Fuller, Business Manager/Accessibility Coordinator of the Philadelphia Housing Authority, served as a test evaluator in the survey's initial and later stages. She provided her initial feedback on May 23, 2012, and provided further comment on August 28, 2012.
- On July 6, 2012 the working group solicited feedback from Lynette Pawlak, Client Services Project Specialist at Associated Services for the Blind and Visually Impaired. She provided constructive feedback and additional questions for consideration.
- The working group consulted with Nicole Dreisbach, M.P.H., Research Associate at Public Health Management Corporation (PHMC) on the development of the survey between June 22 and July 11, 2012. PHMC was instrumental in helping the working group formulate wording for the questions and answers, and also acted as a test evaluator. The working group also attended two workshops hosted by Nicole and the PHMC in preparation for CHNA efforts on May 16 and June 7, 2012.

## *INDIVIDUAL INPUT*

Magee Rehabilitation Hospital also sought input from individuals who represent the broad interests of adults living with disabilities, the community the Hospital serves. Throughout April and May 2012, these individuals reviewed the survey developed from the public data and offered their recommendations for content, topic areas, readability and usability. These individuals included:

- Mark Chilutti, a former Magee patient and current employee. Mark is a wheelchair user with special knowledge of the health challenges faced by adults living with disabilities.
- Nancy Rosenberg, Psy. D., a clinical psychologist at Magee and the director of the Hospital-wide Peer Mentor Programs for survivors and their families of stroke, brain injury, spinal cord injury and amputation. Given her position and relationship with the special population served, she has a keen understanding of the unique challenges facing people living with disabilities post-rehabilitation.
- Magee's Peer Mentor Program Coordinators, including Marie Protesto (Spinal Cord Injury and Amputation Peers), Jennifer Salomon (Stroke and Brain Injury Peers), Sonya Dibeler (Spinal Cord Injury and Amputation Peers) and Ruth Black, M.S.W. (Family Peers). Given their close interaction with the special population served, they have in-depth knowledge about the challenges facing people living with disabilities, with specific insight into the different challenges impacting people by injury or illness type. For example, those issues that impact amputees more than stroke survivors, etc. Additionally, as wheelchair users, Marie, Sonya and Ruth all have first-hand knowledge of the health needs of this special population.
- Vernice Wooden, M.S.S.A., L.S.W.A., Case Management Continuum of Care Supervisor. Vernice serves as the case manager for all of Magee's outpatients. As such, she interacts with patients across their lifetime continuum of care. As a member of the Mayor's Commission on People with Disabilities (MCPD), Vernice is able to link patients to disability resources outside the Magee community. She ensures that patients' needs are identified and met, even after they have left the hospital. As such, she has a keen knowledge of the resources available in the community, as well as the common needs among people living with disabilities. She is also a member of the CHNA working group.
- Marci Ruediger, P.T., M.S., Magee's Director of Performance Excellence. Marci is focused on patient safety, and leads the monitoring of safety statistics and reporting. She is familiar with the safety challenges facing people living with disabilities, and offered insight into how to best address these issues in the survey.
- Joe Davis, M.S.W., Magee Rehabilitation Hospital's Think First Coordinator. Joe is a wheelchair user with special knowledge of the health challenges of adults living with disabilities. He manages Think First, the National Head and Spinal Cord Injury Prevention Program, in which he conducts outreach to schools, correctional facilities and community centers about injury prevention. His presentations, which are directed toward teenagers and young adults, focus on gun injury prevention, decisions commonly made by young people, as well as other risky behavior that can lead to disabling injuries.
- Outpatients at Magee Rehabilitation Hospital. In July, the Hospital working group approached Magee outpatients as they were in the waiting room prior to appointments and tested the surveys for readability, accessibility, comprehension and length. As they were the target audience for the final survey, the outpatients provided excellent insight on content and layout of the survey.

## **SURVEY**

Magee Rehabilitation Hospital  
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800-96-MAGEE • MageeRehab.org

*DISTRIBUTION AND COLLECTION*

To collect the data on the topic areas identified in the preliminary research, the Hospital constructed a survey that addressed the following topics: disability; health and social services; income and employment; housing and transportation; technology and assistive devices; community participation; and individual information.

The survey, which contained 47 questions (**Figure 2C**), was **launched on August 27, 2012 and closed on December 31, 2012**, and was distributed and collected in three ways:

- 1) **Online:** The survey was developed in the online tool SurveyMonkey, and shared in waves via email to individuals and organizations serving people living with disabilities.
  - a. The first wave of electronic surveys was emailed in late August and early September to all Magee's Peers, volunteers and wheelchair sports teams. It was also shared with outside organizations for distribution, including the Carousel House and Sierra Group Academy.
  - b. The second wave of electronic surveys was emailed on October 31 to the Inglis House, the Multiple Sclerosis Society, the HMS School for Children with Cerebral Palsy, the Mayor's Commission on People with Disabilities and member organizations serving individuals with disabilities. Member organizations of the Mayor's Commission include Office of Vocational Rehabilitation, Library for the Blind, Disability Rights Network of Pennsylvania, Adrienne Theatre, Philadelphia Corporation for the Aging, Children with Special Needs, The Academy/Sierra Group, I.D.E.A.L. Magazine, Philadelphia Parks and Recreation, CATCH, Gateway Health Plan, Best Buddies, Addus-Health Care, Language Interpreters DHCC, Path, National Federation for the Blind, CCPS Job Center, Little ROC Foundation, Hearing Loss Association of Pennsylvania, Penn Elks Homes, Hispanic Community Services, JEVs, Liberty Resources, Ahedd, Bayada Health Care, Epilepsy Foundation of Eastern Pennsylvania, Partnership for Community Supports, Archdiocese of Pennsylvania, PNC Bank, Temple Education, PATF, City of Philadelphia Mural Arts Program, Wheels Inc., Breaking Barriers, U.S. Census Bureau, Victor Support Services, School for the Deaf, Blind & Visual Services, Archdiocese of Philadelphia, Main Line Health Services, Ride/Way, Krapf Coaches, Drexel University College of Medicine, Pennsylvania Care Associates and Moss Rehab.
  - c. Magee staff were also sent the link to the survey and asked to share with people living with a disability and/or organizations serving individuals with disabilities on November 1 and December 13, 2012.
  - d. The online survey was also shared on Magee's website, Twitter and Facebook pages regularly. Other organizations shared via social media as well per the Hospital's request, including the Legal Clinic for the Disabled, SPINALpedia and FacingDisability.com.
  - e. Postcards including instructions for completing the online version of the survey were distributed at the main hospital and outpatient facilities throughout the duration of the survey (FIGURE 2D).
- 2) **Hard-Copy:** Paper versions of the survey were available at Magee's main hospital, as well as Magee outpatient centers from launch of survey to close. Versions of this survey were shared with organizations from initial online survey email blast that requested hard-copies.
  - a. On September 28, 2012, Magee distributed hard-copy versions of the survey to the Hospital's table at Global Abilities' Rec Fest, a Philadelphia-wide event for organizations

providing services to the disabled community and well-attended by people living with disabilities.

- b. On November, 19, 2012, Magee presented the survey at a meeting of the Mayor's Commission on People with Disabilities, which included representatives from Epilepsy Foundation of Eastern PA (EFEPA); Office of Vocational Rehabilitation; Philadelphia Corporation for Aging; Maternity Blessed Virgin Mary Church; Associated Services for the Blind and Visually Impaired; Department of Human Services; Office of Risk Management for City of Philadelphia; Philadelphia Airport; Liberty Resources, Inc.; National MS Society; Moss Rehab; Southeastern Pennsylvania Transportation Authority (SEPTA); Consumers of the Disabled Community; West Point Military Academy; Consumers of the Deaf and Blind Community; and Legislative Committee Council. Paper versions and electronic copies were shared with the Commission and all member organizations. Organizations were then able to translate the survey into Braille and e-readers.
- 3) **Administered:** In the event that the person was unable to take the survey without assistance, Magee volunteers administered surveys in private spaces at the Hospital and its outpatient centers.

Online survey results were collected via SurveyMonkey, which provided detailed statistics on responses. Open-ended questions and "Other" responses were reviewed by working group staff and categorized accordingly.

Hard-copy and administered surveys were reviewed and entered into SurveyMonkey by trained Magee volunteers and marked as non-electronic entry. All paper surveys will be kept on file. Open-ended questions and "Other" responses were reviewed by working group staff and categorized accordingly.

#### *ANALYTICAL METHODOLOGY*

At the close of the survey, results for each question were tabulated and measured in percentages. The Hospital compared the results from the survey with statistics from the Public Health Management Corporation's (PHMC) Community Health Database, the Department of Health for Philadelphia County's database and 2010 Census data. From there, the Hospital identified those areas where statistically significant differences (5%) could be seen between the general population of the geographic community served and the special population served. These areas where significant differences between the communities were identified, as well as responses that indicated an unmet need in the special population, are addressed in this report as community health needs.

Once those areas had been identified, the Hospital performed cross tabulations to identify if any particular populations in the disabled community were more or less impacted by these health needs, including issues by injury/illness type, functional limitations, age ranges, zip code and gender. This additional analysis informed specific implementation strategies for the identified health needs.

### **III. RESULTS**

In total, 431 people started the survey and 417 finished it, for a completion rate of 97%. All percentages detailed in the results section were calculated individually for each question to account for questions that may have been skipped or not appropriate for the person taking the survey.

For ease of use, the CHNA survey was divided into seven main sections grouped by question topic: Disability, Health and Social Services, Income and Employment, Housing and Transportation, Technology and Assistive Devices, Community Participation and Individual Information.

#### **DISABILITY**

Of the total respondents, 282 or 71% were told by a doctor or healthcare professional that their disability is permanent.

Of the population surveyed, spinal cord injury was the most common disability, accounting for 46% of respondents. Orthopedic injuries accounted for the second most common disability, accounting for 18% of respondents. Other disabilities included stroke (16%), brain injury (12%), neurological illness (11%), amputation (4%), other physical disability from birth (1%), and other health comorbidities, such as renal disease (1%). Less than 1% of all respondents indicated a speech and hearing disability, blindness, chronic pain, developmental disability or mental illness.

Of the total respondents, 41% have had their disability for five years or more, but not since birth. Individuals who have had their disability for one year or less accounted for 19% of respondents, while individuals who have had their disability for three to five years accounted for 19% and one to two years accounted for 16%. Of the total respondents, 6% have had their disability since birth.

In addition to the type of disability, respondents were asked to describe their health condition or functional limitation. A majority of respondents, 78%, indicated they had a mobility or physical disability limiting the use of arms, legs or hands. Other common functional limitations included chronic pain (40%); cognitive disability (21%); chronic illness or other health-related disability (16%); psychological, psychiatric or emotional disability (13%); speech disability/impairment, oral motor disability or muteness (11%); blindness/color blindness or severe vision impairment (5%); and auditory disability, deafness or severe hearing impairment (3%).

Respondents were also asked to identify major life activities affected by their health condition, disability or functional limitation. Of the total respondents, 76% indicated mobility, such as walking or climbing, was affected by their disability. Other common life activities impacted by respondents' disabilities included mobility, such as bending or carrying something (70%); self-care, such as bathing, dressing, preparing meals or feeding (52%); remembering and/or concentrating (35%); interacting socially, such as developing friendships (19%); communicating, such as talking with or listening to other people (19%); and learning new skills or activities (18%).

Of the total respondents, 170 indicated they required personal assistance for self-care. Of this population, 72% indicated family members or friends generally provided this care, unpaid. Other care providers included paid home health aides (29%); paid family members or friends (21%); assistance paid for by others (11%); and nursing care facilities (1%).

## **HEALTH AND SOCIAL SERVICES**

A vast majority of respondents had some type of health coverage, with only 2% indicating they did not have health insurance. Of the total respondents, 57% were covered through private health insurance through themselves or a family member. Other common types of health coverage included Medicare (45%); and Medicaid, Medical Assistance or other state program that provides health insurance for low income families (27%). Less common types of health coverage included supplemental insurance, such as AARP (2%), worker's compensation (1%) and long-term care (less than 1%).

Of the five respondents that did not have health insurance, two (40%) were refused coverage due to poor health, illness, age or some other reason, while one (20%) indicated it was too expensive and one (20%) indicated they did not have the proper documentation to obtain insurance.

A majority of respondents (53%) indicated there was no time in the past year when they needed medical care but did not receive it. Of the total respondents, 10% were not able to receive care because the problem or treatment was not covered by insurance; 7% could not find a doctor or healthcare provider that understands their condition; 7% indicated it was too difficult to get to the doctor's office; 6% could not get an appointment; 6% did not know a good doctor or clinic; and 4% could not find a doctor that would accept their insurance. Other reasons respondents could not receive medical care when they needed it was because they did not have health insurance (1%), it was too expensive (1%) or they did not want to miss work (less than 1%).

Respondents were also asked about routine health visits and screenings. Of the total respondents, 71% indicated they see a dentist at least once a year; and 83% indicated they have access to psychological and/or counseling services, if they need them. When asked if they had access to a medical professional for issues related to sexuality and/or reproduction services, 36% indicated they did have access while 53% indicated they did not have a need for these services. Similarly, when asked if they have access to a medical professional for gynecology and/or urology services, 69% indicated they did have access, while 24% indicated they did not have a need for these services.

In regards to medications, 70% of respondents indicated they are always able to get their necessary medications; 24% indicated they are usually able to get their medications; 4% indicated sometimes; and 1% indicated never. Of those respondents that are not able to get their necessary medications, 47% indicate it is because some or all of their medications are too costly. Other common reasons for being unable to obtain medication include difficulty going out to pick up medications (22%); some medications are not available at the local pharmacy either because of medical insurance requirements or because the medication itself is not stocked there (22%); confusion by number of medications they need to take (19%); or coverage of their medication has been denied by their insurance provider (11%).

Physical activity and exercise was also addressed. Of the total respondents, 52% regularly participate in exercise or fitness activities, excluding physical therapy. Of those respondents that did not regularly participate in exercise or fitness activities, 34% indicated they do not know what types of exercises are appropriate for their condition. Other common reasons for not participating in exercise include the lack of the physical capability to participate in any exercise program (24%); no interest (20%); gym memberships and/or home equipment are too expensive (20%); no transportation to gym or other fitness facility (17%); and the facilities near respondents' homes are not accessible or do not have specialized equipment to meet

their needs (17%). Other responses include no places in respondents' communities to exercise (9%), a lack of time (2%) and too much pain when exercising (1%).

Respondents were also asked about their participation in community and complimentary therapy programs. In the past three years, 13% participated in adaptive sports; 11% in art therapy; 7% in horticultural therapy; 6% in pet therapy; 5% in music therapy; and 3% in dance therapy. Of the total respondents, 70% have not participated in any complimentary therapy program in the past three years, while 14% did not find any of these programs beneficial.

Other findings from the Health and Social Services section include: 6% of respondents feel as though drug or alcohol issues impact their daily life; and 14% of respondents needed the services of an attorney in the past year and could not afford one. Of those that required legal assistance, 35% were for planning documents, such as power of attorney or living will. Other legal issues included public benefits (34%); landlord/tenant disputes (15%); mortgage foreclosure (9%); bankruptcy, debt or bills (9%); lawsuits, such as malpractice (9%); domestic relations, such as divorce or custody, (8%); other housing issues (8%); legal issues resulting from accident or injury (6%); MVA (4%); and domestic violence (2%).

### **INCOME AND EMPLOYMENT**

Social Security Disability Insurance (SSDI) was the most common source of income among respondents, accounting for 42% of the population surveyed. Other common sources of income included Social Security Income (27%); wages and earnings (19%); pension program (14%); worker's compensation (10%); disability insurance, privately funded or state issued (9%); and spouse as sole provider (8%). Other less common sources of income included Supplemental Security Income (5%); other sources, such as trust funds, investments, inheritance, etc. (3%); parental/guardian support (3%); welfare (less than 1%); and military care (less than 1%). Of the respondents, 2% indicated they had no source of income.

A majority of respondents indicated they were retired (28%) or unemployed (24%), while 16% indicated they were on disability/medical leave or receiving worker's compensation. Of the total respondents, 14% were working full-time, 7% were working part-time, and 8% were currently looking for work. Several respondents were currently pursuing educational opportunities, with 6% indicating they were full-time students and 5% indicating they were part-time students. Other employment/life statuses included full-time homemaker (3%) and volunteer (8%). Of the total respondents, 2% indicated they were not looking for work.

Of the 100 respondents that indicated they were neither working nor attending school full-time, 63% indicated they were unable to work or attend school due to their disability, injury or illness. Of those respondents, 5% were working part-time, 2% were attending school part-time or receiving at-home tutoring, and 9% were trying to find jobs or applying to schools. Other reasons included retirement (4%); inability to get to work or school due to lack of transportation, equipment needs, etc. (4%); chronic pain or exhaustion (3%); currently act as caregiver or parent (2%); lack of interest in working/attending school (2%); or financial reasons, such as potential loss of government assistance (2%).

### **HOUSING AND TRANSPORTATION**

The most common primary mode of transportation for respondents was a friend or family member providing rides (43%). Other primary modes of transportation included driving own vehicle (37%); public

transportation (23%); Para-Transit or similar service (15%); and paying for a car service or taxi (5%). Of the total respondents, 6% indicated their primary mode of transportation varies, and they take rides however they are able. A smaller percentage of respondents opt not to leave their homes (2%); walk or use their power chair or scooter (1%); or use transportation provided by worker's compensation (less than 1%).

Of the total respondents, 83% indicated their current means of transportation meet their needs. Of those that indicated their transportation needs were not being met, 48 respondents chose to elaborate. Of those respondents, 27% indicated they could not get to where they needed to go due to service restrictions and designated stops; 19% said their current means of transportation does not allow them to follow their own schedule; 19% indicated the vehicle they use is not wheelchair accessible or needs repairs; 17% said their current means of transportation is physically difficult to user; 13% indicated they would prefer to drive themselves; and 6% indicated their current means of transportation is too expensive.

A majority of respondents own their own home (52%), while 9% rent a home. Apartments and condos are less popular, with 4% indicating they own an apartment/condo and 16% indicating they rent an apartment/condo. Other housing situations include living with a family member or friend (18%); residential/long-term care (3%); group home (1%); and renting a room (1%).

Of the total respondents, 82% indicated their housing meets their current needs. Of those that indicated their housing did not meet their needs, 61 respondents chose to elaborate. Of those respondents, 79% indicated their housing was not accessible or needs to be better equipped. Other complaints included expense (7%); repairs needed (3%); too large for needs (3%); too small for needs (3%); would like a home closer to family (3%); and problems with the landlord (2%).

## **TECHNOLOGY AND ASSISTIVE DEVICES**

Of the total respondents, 31% indicated that there are assistive devices or special equipment they currently need, but do not have. Of those that indicated a need for special equipment, the most popular needs included a ramp at their home or apartment (31%); a vehicle large enough to handle a wheelchair or scooter (26%); lifts, chairs or other mechanized assists (24%); computer/software (24%); railing, bars or other non-mechanized assists (21%); and a motorized wheelchair, cart or scooter (21%). Other common needs included walker or cane (17%); wheelchair (17%); lift or carrier to handle wheelchair or scooter in cars (14%); hearing aid device (9%); and a brace or orthotic (8%). Less common needs included vision assistance (4%); artificial limb (3%); voice-activated control device (2%); guide dog (2%); parking permit (1%); and breathing assistance (1%).

## **COMMUNITY PARTICIPATION**

To gauge community participation, respondents were asked whether or not they participated in common activities. Of the total respondents, 89% socialized with close friends, relatives or neighbors; 93% felt there are people they are close to; 73% go to restaurants or out to eat; 44% go to church, synagogue, mosque or other place of worship; 62% go to a show, movie, sports event, club meeting, class or other group event; and 67% feel their daily lives are full of things that are interesting to them.

Despite these high numbers, 51% of respondents indicated they do not participate in their community. Common community involvement activities included social activities, such as attending dinners, movies, group outings, etc. (35%); community service and volunteering (33%); attending church, synagogue, mosque or other place of worship (23%); athletics or fitness activities (10%); civic engagement or community leadership (10%); and participating in clubs or organizations (9%). Other forms of community participation included educational pursuits (6%); family events or children's activities (5%); working (5%); peer mentoring (4%); hobbies (4%); participating in day rehab (2%); and the arts, such as dancing or painting (2%).

Of the respondents that indicated they would like to be more involved in their community, 40% indicated they would like to be involved with community service and volunteering. Other desired activities included more social interaction with peers (15%); participating in athletics or fitness (13%); attending church, synagogue, mosque or other place of worship (9%); working (7%); civic engagement or community leadership (7%); travel (7%); peer mentoring (6%); hobbies (5%); educational pursuits (3%); the arts (3%); and playing with children or participating in their activities (2%).

Similarly, several respondents indicated there were things not covered in the survey that they would like to do, but are prevented from doing or unable to do because of their disability. The top activity was exercise and involvement in sports and fitness activities (25%). Other common desires included employment (17%); travel (16%); and increased participation in social events (15%).

#### **INDIVIDUAL INFORMATION**

Of the total respondents, 56% were male and 44% were female. Most respondents were between the ages of 40 to 59 (45%), while 25.1% were between 18 and 39; 17% were between 60 and 70; 12% were older than 70; and 1% were under 18. Zip codes were also tracked, with the greatest percentage of respondents from 191 zip codes in Philadelphia County (43%).

Of the total respondents, 767% indicated they had been a patient at Magee. Of those respondents, 66% were inpatients and 71% were outpatients.

#### **IV. HEALTH NEEDS IDENTIFIED**

From these results, we were able to identify several health needs specific to the communities Magee serves, both geographic and special needs. These include substance abuse support; employment opportunities; reliable, consistent transportation; accessible housing; access to medications; education; injury and illness prevention; and wellness.

The following are health needs the Hospital identified, as well as the community resources and programs that already address these needs. As these needs are better addressed by outside organizations, the Hospital will continue to refer patients and community members accordingly. As such, in the scope of the requirements for the CHNA, the Hospital will not be implementing additional strategies to address the following needs.

##### **Substance Abuse Support for People Living with Disabilities**

Of the population surveyed, 6.1% indicated they believed drugs or alcohol issues impacted their daily lives, while a survey of Philadelphia County found only 3% of the general population was at risk for problem drinking.<sup>1</sup> While these two statistics are not completely comparable, it is clear that significantly more of those surveyed have a negative relationship with substances when compared to Philadelphia County. As such, there is a need to help people living with disabilities overcome or prevent substance abuse.

Magee Rehabilitation currently plays a role in this with the Addictions Mentor Program. This program, which is currently limited to inpatients, is designed to offer those who struggle with addiction issues the opportunity to talk with a specially selected and trained person who has experience as an addictions advocate. The mentors offer their support, accompany patients to Alcoholics Anonymous and Narcotics Anonymous meetings held at the hospital, share information and resources, and serve as a connection to the community for patients during their transition after an inpatient stay at Magee.

Beyond the Addictions Mentor Program, Magee Rehabilitation Hospital does not intend to meet this need in the community because there are myriad organizations better suited for substance abuse support for the Hospital's community served. In addition to public and private support groups throughout the area, the City of Philadelphia's Office of Addiction Services (OAS) plans, funds and monitors substance abuse prevention, intervention, treatment and recovery support services in Philadelphia. The OAS manages and compiles an up-to-date list of addictions services and programs offered throughout the area, as well as special populations served. These institutions provide specialized care to meet this particular health need of the Hospital's communities served.

##### **Employment Opportunities for People Living with Disabilities**

Of the population surveyed, less than 20% indicated wages and earnings as their primary source of income, compared with more than 71% of the population of Philadelphia County.<sup>2</sup> This difference is staggering and statistically significant. While many of the people surveyed cited disability as the primary reason they were not working, a large group expressed the desire to work. As such, there is a need to train and support those people who are living with disabilities and looking for employment.

While Magee Rehabilitation believes this is a significant need in the communities the Hospital serves, it does not intend to address it directly as there are a variety of organizations throughout the geographic area that currently provide these services, including:

The Office of Vocational Rehabilitation offers services and compensation for Pennsylvania residents with disabilities. The Ticket to Work program helps to reduce the barriers to employment for people with disabilities by emphasizing work incentives and more choices of services leading to work or better wages. Programs Employing People is an organization that offers education, jobs and support for people with mild and moderate disabilities. PEP also offers production work center options for local individuals that pays for assembly line work with multiple business contracts, and matches people with employers in the community. Similarly, the Sierra Group offers an array of recruiting, consulting and training services designed to reverse the high unemployment rate of people living with disabilities.

In addition to helping individuals with disabilities secure jobs, there are also organizations that provide training. InspiriTec offers vocational training programs to enable people living with disabilities to gain skills and jobs in the Information Technology field. Programs include computer assembly and repair/networking, applications development and programming, and Web Design and Development.

Magee often refers patients and their families to these resources.

### **Reliable and Consistent Transportation for People Living with Disabilities**

A majority of those surveyed rely on public transportation, family members or friends for transportation. While many respondents are satisfied with their current means of transportation, many expressed frustration that their current mode of transportation made them late to appointments, did not allow them to go where they needed to go, and did not allow them to travel on their own time. Additionally, when asked what type of adaptive equipment they needed but did not have, many respondents indicated they needed larger vehicles to hold their wheelchairs. As such, there is a need in the community to provide people living with disabilities with more convenient, reliable and consistent methods of transportation.

Through the use of wheelchair accessible vans, Magee currently has the capability to take outpatients into the community or from the Riverfront Outpatient Center to the main hospital. Magee will also provide patients with transportation resources, and in some instances teaches patients to use public transportation with their functional limitations. Beyond these activities, Magee does not intend to meet this health need as the Hospital is unable to provide transportation to the entire community. Currently, there are several organizations that seek to meet this need.

SEPTA, the Southeastern Pennsylvania Transportation Authority, serves Philadelphia and surrounding counties. SEPTA offers a Disability Hotline and Accessible Services. All SEPTA buses are accessible for individuals living with disabilities, and there are currently more than 100 accessible train stations. Other publicly-operated transportation services that offer accessible services include New Jersey Transit and Delaware Transit Corporation. SEPTA, New Jersey Transit and DART also offer Paratransit Services. These services are for people with disabilities who are unable to use regular accessible fixed-route services for some or all of their transportation needs. With Paratransit, individuals can travel within the region where service is offered.

Regional public transportation services, such as Rabbit Transit and Pottstown Urban Transit, offer specific programs for people living with disabilities, including accessible fixed routes, Persons with Disabilities shared ride programs and others. The Philadelphia Corporation for Aging offers Attendant Transportation Service, which provides door-through door and upper floor assistance to impaired older adults, and the Medical Assistance Transportation Program provides transportation to any health care service covered by Medical Assistance, such as doctor's visits, pharmacy for prescriptions, therapy, etc.

Additionally, there are many privately-operated accessible transportation services available throughout the geographic community served. Freedom Taxi is a taxi company serving the area that offers wheelchair accessible vehicles. Regional privately-operated accessible transportation services include TransNet, ROVER Community Transportation, Bucks County Transport, Delaware County Community Transit and the Riders' Club Cooperative. Each of these services provides transportation for people living with disabilities.

Magee often refers patients and their families to these resources.

### **Accessible Housing**

While a majority of respondents were satisfied with their current housing, a common complaint for those that were not was a lack of accessibility. Additionally, when asked if there was any equipment they needed but did not currently have, the most common request among respondents was a ramp for their home or apartment. As such, there is a need in the community to provide more accessible housing and/or make housing units more accessible for people living with disabilities.

While Magee Rehabilitation believes this is a significant need in the communities the Hospital serves, it does not intend to address it directly as there are a variety of organizations throughout the geographic area that currently provide these services.

The Philadelphia Housing Authority offers public housing options for the residents of Philadelphia with financial need, including units that have various features to meet the needs of individuals with mobility, hearing, or vision impairments. A full-time accessibility coordinator is on staff to ensure that individuals with disabilities received a preferred spot on the housing waiting lists and receive reasonable accommodations to meet their needs, including wheelchair lifts, enlarged entrances, visual smoke detector systems, or space for a live-in aide if required. Other housing authorities in the area, including the Delaware County Housing Authority, Montgomery County Housing Authority and Chester County Housing Authority, offer similar accommodations for those living with disabilities.

The Philadelphia Office of Housing and Community Development (OHCD) established the Housing and Disability Technical Assistance Program, TAP, in December of 1999. TAP provides the most up-to-date information on accessible housing, fair housing laws and regulations, financial and technical resources, model projects and other issues related to housing for people with disabilities in the City of Philadelphia. TAP includes a Home Finder and the Philly Primer, which provides information on home buying.

There are also several private, non-profit organizations in the community served that provide these services. Inglis House provides affordable and independent living options for 297 residents. They provide affordable independent living opportunities to Philadelphians with disabilities in units which exceed ADA guidelines. Inglis House properties also include options for nursing and rehabilitative care and day

services for those in need. Liberty Resources, Inc. is a non-profit consumer driven organization that advocates and promotes Independent Living for persons with disabilities. Similarly, the Center for Independent Living of South Central Pennsylvania provides supportive services to persons with disabilities who wish to increase or maintain their level of independence in the community and at home, and offer housing advocacy.

In addition to helping people secure accessible housing, there are also community resources available that advocate on behalf of renters. The Legal Clinic for the Disabled (LCD) provides legal support for tenants in housing issues. LCD is housed in the offices of Magee Rehabilitation Hospital, and provides free high-quality legal services to low-income people with physical disabilities and to the deaf and hard of hearing in Philadelphia, Bucks, Chester, Delaware and Montgomery Counties.

Magee often refers patients and their families to these resources.

### **Access to Medications**

While a majority of respondents indicated they are always able to get the medication they need, 30% indicated there have been times when they were unable. This is primarily due to cost. The surveyed population is significantly more likely to be unable to receive the medication they need due to high cost when compared to adults in Philadelphia County.<sup>3</sup> As such, there is a need to help people living with disabilities receive the medication they need, regardless of cost.

While Magee Rehabilitation believes this is a significant need in the communities the Hospital serves, it does not intend to address it directly as there are a variety of organizations throughout the geographic area that currently provide these services.

Residents of Pennsylvania can have access to a statewide Prescription Assistance Program. It is a free discount prescription card that provides individuals with prescription medication savings of up to 75%. The Partnership for Prescription Assistance helps qualifying individuals without prescription drug coverage get the medications they need for free or nearly free.

In New Jersey, Pharmaceutical Assistance to the Aged and Disabled and Senior Gold are state-funded prescription programs that help eligible New Jersey residents with the cost of prescribed medications. National resources that are also available locally include the USA Drug plan, which is a prescription drug discount card, and Veterans Affairs Medical Centers.

Magee often refers patients and their families to these resources.

## **V. COMMUNITY NEEDS AND IMPLEMENTATION STRATEGIES**

Magee Rehabilitation Hospital focused on its areas of expertise to avoid duplication of services with acute hospitals in the Greater Philadelphia Area. The Hospital's special population served includes adults with disabilities, many of whom have incurred life-changing injuries and illness including, but not limited to, spinal cord injury, stroke, acquired brain injury, amputation and major orthopedic issues.

As such, Magee Rehabilitation Hospital chose three health priorities which relate to the Hospital's mission: education, injury and illness prevention, and wellness.

These priorities all support adults with disabilities who are living in the community, as well as needs of the community at large. Several of these activities involve community partners.

### **EDUCATION**

Through the survey, Magee identified a strong need for education in the special population served. This included education on living with new functional limitations, education on navigating the health care system, as well as education and support for family members of people living with disabilities. There are few outside community resources that provide this type of education. Thus, there is a need for more comprehensive education offerings.

Magee Rehabilitation Hospital offers a variety of peer mentoring programs and support groups aimed at educating adults living with disabilities and their families. These programs are open to all members of the community and are not limited to patients or former patients.

The Peer Mentor Program at Magee is designed to offer someone who is newly injured the opportunity to talk with a specially selected and trained person with a spinal cord injury, stroke, traumatic brain injury or amputation who has returned to a full and meaningful life. The program not only provides a support system and resource network, but also promotes independent living to the level that is attainable. Anyone in the community, regardless of whether or not they have been a patient at the Hospital, is able to become a Peer Mentor. This involvement includes training, which provides education for Peer Mentors. Working with inpatients has also been shown to help peers reintegrate into the community.

The Family Peer Mentor groups are set up similarly to the injury-based Peer Mentor groups. Mentors are family members of people who have sustained a spinal cord injury, stroke or brain injury. They are volunteers who are specially trained to guide and provide information and experiences to families and loved ones of newly-injured individuals. Mentoring can be done in the form of participating in the family group which is held twice monthly at Magee or contacting a new family by telephone or face to face if possible.

In addition to the Peer Mentor Programs, Magee also offers several support groups open to the community that are designed to provide education to those living with disabilities on how to live a full life with their new functional limitations. The Spinal Cord Injury Support Group provides education, recreation and support opportunities to individuals with spinal cord injuries. Traditionally, meetings are held at Magee on the second Thursday of every month, and regular social outings are scheduled. The Amputee Support Group consists of social meetings and events in additions to guest speakers on a variety of topics. Meetings are held the second Tuesday of each month at Magee Rehabilitation Hospital.

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There are also community support groups for people who have had a stroke or brain injury. The Stroke Club is a social group for people who have had strokes, but also provides a regular education component. The club meets every month to socialize, share experiences and provide support to one another. For those who have had strokes or brain injuries and are non-verbal, the Aphasia Community Support Group provides an opportunity to practice speech and language skills in a safe and supportive environment; provides education about aphasia; and encourages socialization among the members. Additionally, there are also specialty education groups Magee offers to members of the community. The Spinal Cord Injury and Sexuality Educational Support Group meets every other Tuesday at Magee Rehabilitation Hospital.

Lastly, Magee offers “Day in the Life Videos” for individuals with spinal cord injuries. There are four educational videos featuring actual accounts of daily community skills from a person with a spinal cord injury who uses a wheelchair in a home or city environment. The videos will give individuals a foundation of skills to use when they return home and offer adaptations and techniques that have helped others to be successful in their home and community environments. Each video includes demonstration by someone using a wheelchair in different environments. The topics addressed in these videos include cooking and kitchen mobility, home mobility, community mobility and general health and fitness. These videos are available on the internet and Magee's website as well as through DVD distribution.

Each of these education programs aimed at individuals living with disabilities in Magee’s geographic community is open to the public. They address a health need otherwise unmet in the area. To build community awareness of these programs and to expand their reach, Magee Rehabilitation Hospital will add a special Ask a Peer section to the hospital blog at [blog.mageerehab.org](http://blog.mageerehab.org), which discusses issues in the disability and geographic community. For those unable to attend support group meetings or unsure about meeting with a peer mentor, this format will allow them to ask their questions in an anonymous venue and have them answered by a trained peer mentor. In this way, the hospital hopes to increase awareness of this service to the community and expand the ways people can participate.

In addition to these current programs, Magee is in the beginning stages of creating an online educational resource of caregivers, family members and friends of people living with disabilities. The online caregiver educational resource is a program designed to assist caregivers of persons with traumatic brain injury. This resource provides educational modules to read or view to increase caregiving knowledge. Family members and friends can access the online modules through Magee’s website at [MageeRehab.org](http://MageeRehab.org). The current modules available include brain physiology, community resources and coping.

While there are few, there are also community resources addressing these educational needs. The Center for Independent Living of South Central Pennsylvania provides supportive services to persons with disabilities who wish to increase or maintain their level of independence in the community or at home.

## **ILLNESS AND INJURY PREVENTION**

Through the survey, as well as results from public data, the Hospital identified illness and injury prevention as a health need for the geographic community. Of those surveyed, only 6% have had their disability since birth, and a majority of the remaining respondents indicated their disability was caused by something preventable.

In addition to the programs at Magee, there is also a community resource addressing this need. The Public Health Management Corporation (PHMC) is a nonprofit public health institute that works to improve the health of the community through partnerships with government, foundations, businesses and community-based organizations. They offer services for special needs populations, health promotions, injury prevention and environmental health.

The Philadelphia County Department of Health's Philadelphia County Health Profile 2010 found assaults and homicides are the leading causes of death of people age 5 to 24.<sup>4</sup> As such, there is a particular need to address violence as a cause of disability in youth in the geographic community. To address this health need, Magee Rehabilitation Hospital offers the Think First program. This award-winning program for teens and young adults is offered to schools and organizations in the Delaware Valley, and stresses prevention and "thinking first" in order to prevent permanent brain and spinal cord injuries. The program is presented in assembly forum to groups of young people, ranging from 15 to 500. The program is led by Joe Davis, M.S.W., C.A.C., who is a wheelchair user and visible community leader. The program is offered to more than 50 schools and community groups annually, and offered free of charge. The program annually reaches more than 10,000 individuals ages 13 to 19.

Another preventable, disability-causing illness prevalent in the community is stroke. The Philadelphia County Department of Health's Philadelphia County Health Profile 2010 found that stroke is the third leading cause of adult death in the Delaware Valley, trailing behind only heart disease and cancer. To address this health need, Magee Rehabilitation Hospital is very active within the Delaware Valley Stroke Council, and also hosts preventative blood pressure screenings open to the community.

Other Magee offerings designed to address the community health need of injury and illness prevention include Magee's Brain Injury Prevention Program, the Osteoporosis Clinic and Concussion Clinic. The Brain Injury Prevention Program provides brain injury education to survivors of brain injury, their families, and those who are at risk for suffering brain injury. Magee participated in two Brain Safety Fairs run by the Brain Injury Association of Pennsylvania in May 2011 and June 2012. Approximately 340 individuals received bicycle helmets and brain injury prevention information, and 17 Magee staff members volunteered. The Magee Osteoporosis Clinic offers free consumer education on osteoporosis to interested audiences, which include local Senior Centers and professional groups. Additionally, the program offers free screenings using heel densitometer to these same groups, as well as Magee employees. Free screenings are also available and open to the community monthly at our Riverfront outpatient facility. In 2012, Magee provided six osteoporosis presentations (with an average 25 people in attendance per event). The Hospital also provided heel densitometer screenings to five groups outside of Magee (with an average 20 people per screening). Lastly, Magee's Concussion Clinic provides concussion prevention and treatment education for high school and college students, nurses and staff as well as for sports teams, trainers and coaches. More than 25 groups were educated in 2012.

Another education resource available at Magee is the Legal Clinic for the Disabled. This non-profit organization is housed within and partially funded by Magee Rehabilitation Hospital, as Magee provides office space free of charge, as well as related overhead expenses such as supplies, computer support, etc. Its mission is to provide civil law legal services at no charge for financially eligible, disabled clients. Individuals with disabilities are referred to lawyers who have volunteered their services to LCD. Cases include wrongful evictions, consumer fraud, employment discrimination and compliance failures related to the Americans with Disabilities Act of 1990. Other services include estate planning and benefit

consulting. Magee supports and promotes the services provided by the Legal Clinic for the Disabled as an educational resource for the community.

In addition to the programs at Magee, there is also a community resource addressing this need. The Public Health Management Corporation (PHMC) is a nonprofit public health institute that works to improve the health of the community through partnerships with government, foundations, businesses and community-based organizations. They offer services for special needs populations, health promotions, injury prevention and environmental health.

## **WELLNESS**

Through the survey and review of public data, Magee identified a strong need for programs that address wellness for the geographic community and the special populations served. The survey found that 48.3% of respondents, who are adults living with disabilities, do not regularly participate in exercise. This is significantly more than adults in Philadelphia County. According to the PHMC's Community Health Data Base Southeastern Pennsylvania Household Survey, 2012, only 21.7% of adults in Philadelphia indicate they never exercise or exercises less than once a week. Of the survey respondents that did not participate in regular exercise, some of the most common reasons were lack of knowledge about the types of exercises they should do, and that their local gyms were not accessible.

To address this health need, Magee Rehabilitation Hospital created the Magee Health and Wellness Center at the Hospital's Riverfront Outpatient Center in South Philadelphia. The Wellness Center offers flexible hours, levels of membership and equipment that can be used by both able-bodied and people with disabilities, and most pieces are wheelchair accessible. Treadmills, free weights, elliptical, arm bike and NuStep (a cross between a recumbent bike and an elliptical machine), accompany more specialized equipment, such as the RTI bike with its electrical stimulation, Motomed, multi-fitness trainer and total gym so individuals with a broad array of disabilities can participate in physical activity. Membership is open to the community and is \$50 per month. Scholarships are provided as needed. Additionally, to address the common concern that people living with disabilities were unsure of the exercises appropriate for them, all Health Center users meet with the director of the Center before they become members to talk about their health and fitness goals. The director then develops a personalized fitness plan, and shows them how to use all the equipment. Physical and occupational therapists are available if any questions arise during workouts. The Wellness Center also offers yoga classes.

Of the total survey respondents, 87% indicated they have not participated in adaptive sports in the past three years, but when asked how they would like to be involved in their community or what they would like to do that their disability has prevented, sports and athletics was a common desire. To address this need, Magee offers a Wheelchair Sports Program, which includes basketball, rugby, tennis, and hand-cycling for individuals with disabilities. While most Magee athletes participate for recreational outlet, several do compete in regional, national, and even international sporting events. Magee employs a wheelchair sports coordinator to lead the program, which has over 50 individuals participating. The annual budget for the program is approximately \$150,000. Any adult with a disability can participate in the program free of charge.

A variety of Magee's support groups and clubs, including the Stroke Club, peer mentors and others, as referenced in education section, support the Hospital's geographic and special communities in a wellness capacity. These are documented and explained in the Education section of this report (see page 20).

There are also community organizations that offer adaptive sports programs for people living with disabilities, many of which act as Magee partners. Philadelphia Department of Recreation offers a year-round program in a 6.4 acre indoor and outdoor complex called the Carousel House, which includes a playground, fitness track, gymnasium, exercise room with wheelchair accessible weight equipment, and swimming pool with an adjustable floor. Activities include swimming, dance, athletics, summer day camp, martial arts, weight lifting, nature walks, track meets and other athletic tournaments. The Philadelphia Center for Adapted Sports is a non-profit organization providing sport and recreation programs for people with disabilities. Magee refers individuals to this organization. Similarly, YMCAs in the Greater Philadelphia area offer adapted aquatics at all locations, and some locations offer additional adaptive sports options for children with physical or emotional limitations including martial arts, soccer, basketball or gymnastics.

More specialized community adaptive sports programs include the Eastern Amputee Golf Association, a non-profit organization designed to assist in the rehabilitation of amputees and provide for their general welfare, both physical and psychological, through the medium of golf and its associated activities; American Dance Wheels, an artistic organization that trains individuals with disabilities, their able-bodied partners, ballroom dance teachers and occupational and physical therapists the art of Wheelchair Ballroom and Latin Dancing; and All Riders Up, a non-profit charitable organization that provides area residents with special needs a way to exercise, improve balance and coordination, strengthen core muscles, and develop self-confidence by learning to ride horses.

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<sup>1</sup> (2010). Behavioral Risk Factor Surveillance System. Department of Health for Philadelphia County.

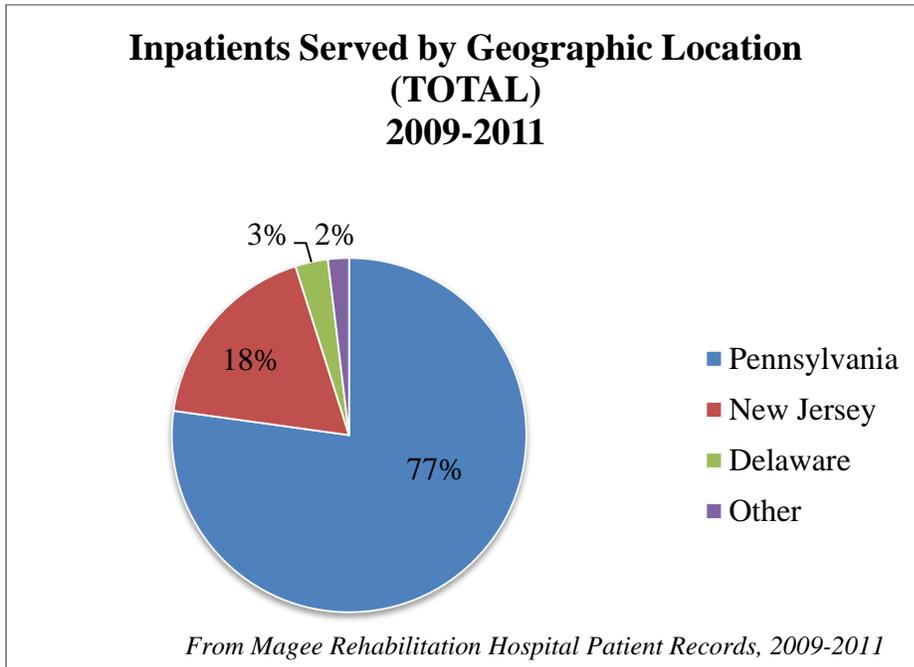
<sup>2</sup> (2011). American Community Survey 5 Year Estimates. U.S. Census Bureau.

<sup>3</sup> (2012). Southern Pennsylvania Household Health Survey. PHMC's Community Health Data Base.

<sup>4</sup> (2010). Philadelphia County Health Profile. Philadelphia County Department of Health.

**VI. APPENDIX**

**Figure 1A**



**Figure 1B**

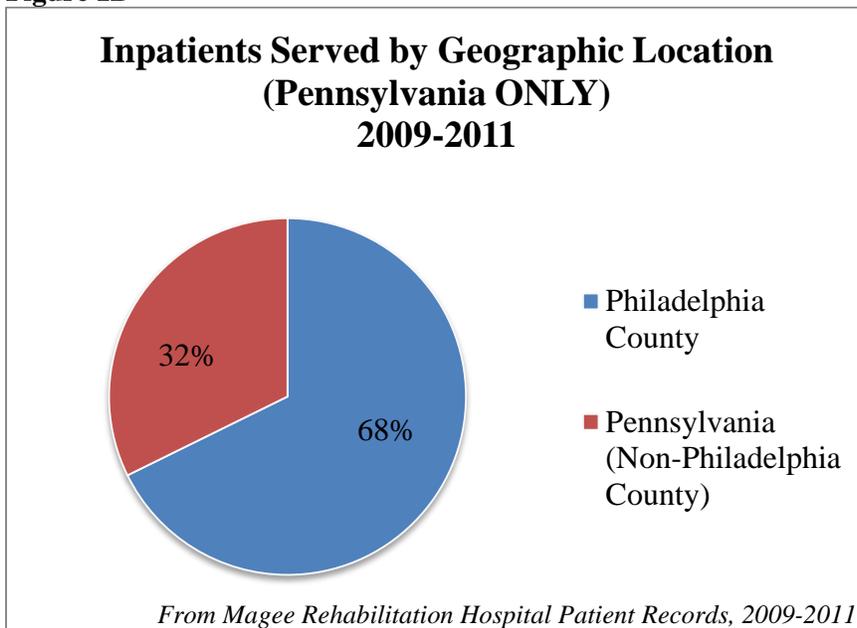


Figure 1C

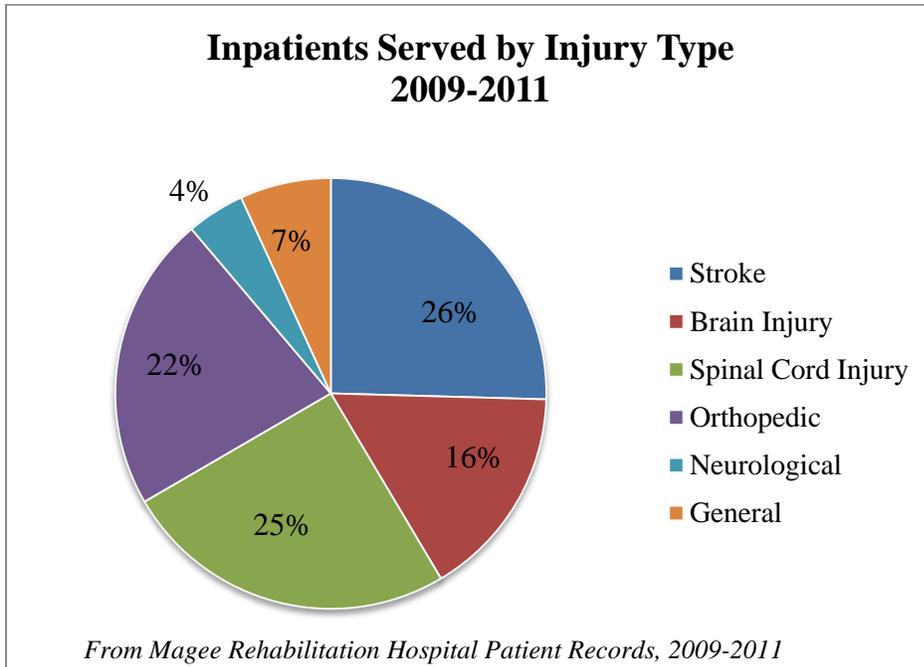


Figure 2A



## Survey of People with Disabilities & Their Caregivers

This survey is being conducted by the Lehigh Valley Research Consortium (LVRC)—a group of researchers from colleges and universities in Lehigh and Northampton Counties, in conjunction with Good Shepherd Rehabilitation Network.

The purpose of the survey is to gather feedback from people with disabilities and their caregivers. Persons with disabilities of all kinds are encouraged to participate.

**Your responses will be used to help build and empower a long-term Partnership for a Disability Friendly Community.**

Please **DO NOT put your name** anywhere on this survey. We have provided a postage-paid return envelope for you to return the survey. **Your answers will remain completely anonymous and confidential.** There is no way for us to connect your responses and answers to you personally; your identity will remain unknown to the researchers. There are no risks or costs associated with completing a survey. This survey is intended to be completed by adults, ages 18 years and older. Your completion and submission of this survey indicates that you are at least 18 and voluntarily consent to participating. **Average time to complete this survey is 30 to 40 minutes.**

Copies of this survey are also available in Spanish, large print, and Braille. For copies or questions, please contact:

**Dr. Lanethea Mathews-Gardner**  
LVRC Disability Project Director  
Department of Political Science  
Muhlenberg College  
2400 Chew Street  
Allentown, PA 18104-5586  
Fax: 484-664-3536  
Phone: 484-664-3737  
Email: [mathews@muhlenberg.edu](mailto:mathews@muhlenberg.edu)

You can also complete this survey on-line at: [http://lehighvalleyresearch.org/disability\\_study](http://lehighvalleyresearch.org/disability_study)

*Thank you for sharing your insight  
and for helping us to make the Lehigh Valley more disability friendly!*



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**Part 1. Disability**

1. Which of the following best describes you?

- I am a person with a disability completing this survey on my own behalf.
- I am a person with a disability completing this survey with the assistance of someone else.
- I am a parent or other family member of an adult person with a disability.
- I am a parent of a minor child under the age of 18 with a disability.
- I am a paid caregiver of an adult person with a disability.
- I am a paid caregiver of a child with a disability.

2. Please describe, in your own words, the health conditions, impairments, disabilities, and/or functional limitations that restrict or prevent you (or your child or the person you care for) from taking part in the normal life of your community on an equal level with others?

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3. Which of the following categories best describes this health condition, impairment, disability or functional limitation? **Please check all that apply.**

- Mobility or physical disability or handicap limiting use of the legs, arms, or hands.
- Mental, psychological, psychiatric, or emotional disability (e.g., bipolar disorder, schizophrenia, depression)
- Neurological disability (e.g., epilepsy)
- Visual disability, blindness, severe vision impairment, color blind
- Auditory disability, deafness, or severe hearing impairment
- Speech disability, oral-motor disability, speech impairment, or muteness
- Learning or cognitive disability (e.g., dyslexia, learning disabled)
- Chronic illness or other health-related disability (e.g., diabetes, HIV/AIDS, respiratory disease, lupus)
- Traumatic brain injury
- Other: \_\_\_\_\_

4. Would you describe this disability (or disabilities) as:

- Mild       Moderate       Somewhat Severe       Very Severe

5. Were you (or was your child or the person you care for) born with this disability?

- YES       NO. If no, at what age was the disability diagnosed, or did the disability begin? \_\_\_\_\_ (write in age)

6. Which of the following major life activities are limited by this health condition, impairment, disability, or functional limitation? **Please check all that apply.**
- |   |   |
|---|---|
| <input type="checkbox"/> Self care, such as bathing, dressing, or feeding?  | <input type="checkbox"/> Self-direction, such as making important decisions concerning health care, education, or career?               |
| <input type="checkbox"/> Communicating, such as talking with or listening to other people?  | <input type="checkbox"/> Living independently, such as preparing meals, shopping for groceries and personal items, and doing housework? |
| <input type="checkbox"/> Learning any new skills or activities?   | <input type="checkbox"/> Going outside the home alone to shop or visit a doctor?  |
| <input type="checkbox"/> Remembering and/or concentrating?  | <input type="checkbox"/> Managing finances, such as keeping track of your money and paying bills?                                       |
| <input type="checkbox"/> Interacting socially, such as developing friendships?  | <input type="checkbox"/> Other, please explain: _____   |
| <input type="checkbox"/> Working at a job or business for employment?   |   |
| <input type="checkbox"/> Mobility, such as bending, walking, climbing stairs, or carrying something weighing approximately 10 pounds? |   |
7. Do you (or does your child or the person you care for) ever require personal assistance, or get help from someone, with basic needs such as getting dressed, preparing meals, or bathing?
- NO
- YES. If yes, who generally provides this care? **Please check all that apply.**
- |  |  |
|--|--|
| <input type="checkbox"/> Family members or friends | <input type="checkbox"/> Others paid for providing this help |
| <input type="checkbox"/> Home health aides (paid)  | <input type="checkbox"/> Someone else; please explain: _____ |
8. Has there been a time in the past 6 months when you (or your child or the person you care for) have needed help from someone with basic needs such as getting dressed, preparing meals, or bathing, but have not been able to get it?
- NO
- YES. If yes, *how many times in the past 6 months* were you unable to get the help you needed? \_\_\_\_\_

**Part 2. Health & Health Care.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

9. In general, would you say your health overall (including physical and mental health) is
- |                                    |                               |                                     |
|------------------------------------|-------------------------------|-------------------------------------|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Good | <input type="checkbox"/> Don't Know |
| <input type="checkbox"/> Very Good | <input type="checkbox"/> Fair |                                     |

10. Please indicate which of the following sources of health insurance you are covered by. **Please check all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Health insurance through my work or union<br><input type="checkbox"/> Health insurance through somebody else's work or union<br><input type="checkbox"/> Health insurance bought directly by me or another member of my family<br><input type="checkbox"/> Medicare (the government plan that pays health-care bills for people ages 65 and older and for some young people with disabilities) | <input type="checkbox"/> Medicaid, Medical Assistance, or a Pennsylvania state program that pays health care for people with low incomes<br><input type="checkbox"/> Health insurance from some other source<br><input type="checkbox"/> No health insurance<br><input type="checkbox"/> Don't know<br><input type="checkbox"/> Other; <i>please explain:</i><br>_____ |
|---|--|

11. If you *do not* have health insurance, what is the primary reason why?

- |   |   |
|---|---|
| <input type="checkbox"/> It's too expensive.<br><input type="checkbox"/> I was refused coverage due to poor health, illness, age, or some other reason<br><input type="checkbox"/> I don't need it.<br><input type="checkbox"/> I don't know how to get it. | <input type="checkbox"/> My employer does not offer it.<br><input type="checkbox"/> I am not eligible for employer coverage.<br><input type="checkbox"/> Don't know<br><input type="checkbox"/> Other reason; <i>please explain:</i><br>_____ |
|---|---|

12. In the past year, was there a time when you needed medical care but did not get it?

- YES; If yes, please explain the medical care you needed, but did not get:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- NO

13. If there was a time in the past year when you needed medical care but did not get it, what was the **main** reason? **Please check one.**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Couldn't get an appointment.<br><input type="checkbox"/> Couldn't find a doctor who speaks my language.<br><input type="checkbox"/> Didn't know a good doctor/clinic to go to.<br><input type="checkbox"/> Couldn't find a doctor that would accept my insurance. | <input type="checkbox"/> It cost too much.<br><input type="checkbox"/> Too difficult to get to the doctor's office.<br><input type="checkbox"/> Not covered by insurance.<br><input type="checkbox"/> Too much paperwork.<br><input type="checkbox"/> Too nervous or afraid.<br><input type="checkbox"/> Difficulties/disagreements with my doctor. | <input type="checkbox"/> My health problem went away.<br><input type="checkbox"/> Couldn't find a doctor who understands my condition and is willing to treat it.<br><input type="checkbox"/> Couldn't find a doctor who is willing to work with a sign-language interpreter.<br><input type="checkbox"/> Didn't want to go.<br><input type="checkbox"/> Other: _____ |
|--|---|---|

*For each of the following, please indicate how satisfied you are (if you are a parent or caregiver, please answer questions **from the point of view of the person for whom you provide care**):*

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Not applicable
14. The availability of care management services when I need them.	<input type="checkbox"/>				
15. My access to medical services and health care.	<input type="checkbox"/>				
16. My access to dental services.	<input type="checkbox"/>				
17. My access to mental health services.	<input type="checkbox"/>				
18. My access to reproductive and sexual health services.	<input type="checkbox"/>				
19. My access to rehabilitative services.	<input type="checkbox"/>				
20. My access to alternative health practices.	<input type="checkbox"/>				
21. My access to affordable and adequate health insurance.	<input type="checkbox"/>				
22. The affordability of my prescriptions.	<input type="checkbox"/>				
23. The quality of health care that I receive.	<input type="checkbox"/>				
24. The quality of care that I receive from my caregiver.	<input type="checkbox"/>				
25. The quality of my communication with my doctor.	<input type="checkbox"/>				
26. My access to information about fitness and exercise relevant to my health.	<input type="checkbox"/>				
27. My knowledge and awareness of health services and resources that are available to me.	<input type="checkbox"/>				

28. How frequently do you participate in exercise or fitness activities?

- Daily
  Once a week
  Never  
 Two to four times a week
  Rarely

29. How often do you smoke or use other tobacco products?

- Daily
  Once a week
  Never  
 Two to four times a week
  Rarely

30. How frequently do you consume more than two drinks of alcohol?

- Daily
  Once a week
  Never  
 Two to four times a week
  Rarely

**Part 3. Transportation.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

31. How often do you need transportation but are unable to obtain it?

- A few times per day
  Never  
 Daily
  A few times per week  
 Once a week
  Several times per month

32. Is inadequate transportation a major problem, minor problem, or not a problem for you?

- Major problem
  Not a problem  
 Minor problem
  Don't know

33. Is the availability of handicap parking a major problem, minor problem, or not a problem for you?

- Major problem
  Not a problem  
 Minor problem
  Don't know

*For the following, please indicate how much you agree or disagree with each statement:*

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
34. When I use public transportation (such as a bus) I feel as if there are convenient schedules to easily make a round trip to the doctor, the store, or to some social function.					
35. I feel as though a taxi cab may not stop to pick me up because I have a disability.					
36. It is difficult for me to use our public transportation system due to my disability.					
37. I have a variety of public transportation options available to make traveling convenient.					

**Part 4. Employment.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

38. What is your current employment status? **Check more than one if applicable.**

- |  |  |
|--|--|
| <input type="checkbox"/> Working fulltime        | <input type="checkbox"/> Looking for work    |
| <input type="checkbox"/> Working part time       | <input type="checkbox"/> Full time student   |
| <input type="checkbox"/> Retired and not working | <input type="checkbox"/> Full time homemaker |
| <input type="checkbox"/> Unemployed              | <input type="checkbox"/> Other; _____        |

39. If you are unemployed, what is the **primary** reason why?

- |   |  |
|---|--|
| <input type="checkbox"/> Unable to work due to health problem or disability | <input type="checkbox"/> Might lose income assistance or health benefits if I work |
| <input type="checkbox"/> Cannot find a job that accommodates my disability  | <input type="checkbox"/> Cannot find a job based on my skills                      |
| <input type="checkbox"/> I prefer not to work                               | <input type="checkbox"/> Other reason; <i>please explain:</i><br>_____             |

40. If you are currently working, or volunteering, is your workplace easily accessible to you?

- YES
- NO. If no, please explain how your work place is NOT accessible: \_\_\_\_\_  
 \_\_\_\_\_

41. What kind of work (or volunteering) do you do? \_\_\_\_\_

42. In what municipality/town do you work and/or volunteer? \_\_\_\_\_

*For each of the following, please indicated how much you agree or disagree with the statement (if you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care):*

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
43. I can set and pursue goals related to my employment.	<input type="checkbox"/>				
44. I know how to find job training when I want it.	<input type="checkbox"/>				
45. I am engaged in meaningful work.	<input type="checkbox"/>				
46. I am satisfied with my salary.	<input type="checkbox"/>				
47. I am satisfied with my work hours.	<input type="checkbox"/>				

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
48. I am satisfied with my work benefits.	<input type="checkbox"/>				
49. I am able to obtain assistance in finding and keeping employment when I need it.	<input type="checkbox"/>				

**Part 4. Housing.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

50. What type of housing do you have?

- |   |   |
|---|---|
| <input type="checkbox"/> Private housing that I own or partially own<br><input type="checkbox"/> Private apartment or home that I rent<br><input type="checkbox"/> Group home | <input type="checkbox"/> Residential or long term care<br><input type="checkbox"/> Other: _____ |
|---|---|

51. Does your current housing meet your needs?

- YES
- NO. If no, please explain how your current housing does not meet your needs

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52. If your current housing does not meet your needs, what is preventing you from obtaining more adequate housing? **Please check all that apply.**

- |  |   |
|--|---|
| <input type="checkbox"/> Adequate housing is too expensive.<br><br><input type="checkbox"/> I don't know where to look for adequate housing.<br><br><input type="checkbox"/> I've looked but been unable to find adequate housing. | <input type="checkbox"/> Adequate housing would force me to move; I don't want to move.<br><br><input type="checkbox"/> There is a waiting list for the housing that I want.<br><br><input type="checkbox"/> Other reason; <i>please explain:</i> _____ |
|--|---|

*For the following, please indicate how much you agree or disagree with each statement:*

	Strongly Agree	Agree	Disagree	Strongly Disagree
53. I am able to choose where I want to live.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. I am able to choose with whom I want to live.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. My home is safe.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. My housing arrangements are affordable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. I am happy with the location of my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. My home allows me to live independently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. My neighbors treat me with respect and include me in neighborhood activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*For the following, please indicate how worried you are about each situation:*

	Not at all worried	Somewhat worried	Very Worried	Extremely worried
60. Having to go into a nursing home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Not having long-term housing plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Being able to afford long-term housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Not being able to care for myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Being a burden on my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Needing to get help with basic needs, like getting dressed, preparing meals, or bathing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Becoming disconnected from my friends and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Losing my health insurance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
68. Losing my disability benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 5. Technology & Assistive Devices.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

69. Is there any special equipment or type of assistive devices that you currently *need but do not have*?

- NO
- YES; if Yes, what type of special equipment or assistive device is that? \_\_\_\_\_
- Don't Know

70. What kind of special equipment or assistive devices *do you need but do not have*? **Please check all that apply.**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Motorized wheel chair/cart/scooter                  | <input type="checkbox"/> Lifts/chairs/other mechanized assists   | <input type="checkbox"/> Hearing aid                          |
| <input type="checkbox"/> Walker/cane   | <input type="checkbox"/> Railing/bar/other non-mechanized assist | <input type="checkbox"/> Computer/software                    |
| <input type="checkbox"/> Wheelchair  | <input type="checkbox"/> Knee/ankle braces                       | <input type="checkbox"/> Communication device                 |
| <input type="checkbox"/> Lift/carrier to handle wheelchairs/scooters in cars | <input type="checkbox"/> Prosthetic                              | <input type="checkbox"/> Vision assistance                    |
| <input type="checkbox"/> Vehicle big enough to handle wheelchair/scooter     | <input type="checkbox"/> Adaptive driving technology             | <input type="checkbox"/> Oxygen/other breathing assist device |
| <input type="checkbox"/> Ramp  | <input type="checkbox"/> Orthotics                               | <input type="checkbox"/> Exercise equipment                   |
|  | <input type="checkbox"/> Hearing assistance                      | <input type="checkbox"/> Adjustable bed/hospital bed          |
|  |  | <input type="checkbox"/> Don't know                           |
|  |  | <input type="checkbox"/> Other; please explain _____          |

71. Thinking about the equipment and devices you need but do not have, what explains your lack of access or ownership of them? **Please check all that apply.**

- |  |   |
|--|---|
| <input type="checkbox"/> I don't know where to get it.                   | <input type="checkbox"/> I don't know how to use it.                          |
| <input type="checkbox"/> I can't afford it.                              | <input type="checkbox"/> I am not comfortable using it.                       |
| <input type="checkbox"/> I have it, but it's broken/doesn't work.        | <input type="checkbox"/> I used it for a while, but it didn't really help me. |
| <input type="checkbox"/> Insurance declined it.                          | <input type="checkbox"/> I never tried to get it.                             |
| <input type="checkbox"/> I have one on order, but it hasn't arrived yet. | <input type="checkbox"/> My doctor says I don't need it.                      |
| <input type="checkbox"/> I am on a waiting list for it.                  | <input type="checkbox"/> Don't know.  |
|  | <input type="checkbox"/> Other; please explain _____                          |

**Part 6. Community and Political Participation.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

*For the following, please indicate how frequently you participate in each activity in an AVERAGE MONTH:*

	More than 4 times a month	2 to 4 times a month	Once a month	Less than once a month	Never
72. Socialized with close friends, relatives, or neighbors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. Gone to restaurants, out to eat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Gone to church, synagogue, or another place of worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. Gone to a show, movie, sports event, club meeting, class or other group event	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*For following, please indicate how often you have had these feelings in the PAST MONTH:*

	Very Often	Often	Somewhat Often	Not Often	Never
76. Felt there were people you were close to	<input type="checkbox"/>				
77. Felt your daily life has been full of things that were interesting to you	<input type="checkbox"/>				
78. Felt loved and wanted	<input type="checkbox"/>				
79. Felt isolated from others	<input type="checkbox"/>				
80. Experienced your physical health or emotional problems interfering with your social activities (like visiting with friends, relatives, etc.)	<input type="checkbox"/>				

81. What are the PRIMARY ways that you participate in your community? Please explain in your own words.

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82. In what ways would you like to be MORE involved in your community? Please explain in your own words.

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83. Did you vote in the 2008 Presidential Election?

- YES                                       NO                                       Not Sure

84. If you did not vote in the 2008 Presidential Election, what is the reason why?

- |  |   |
|--|---|
| <input type="checkbox"/> Just didn't vote                                | <input type="checkbox"/> My polling place was inaccessible.                       |
| <input type="checkbox"/> I was ineligible to vote.                       | <input type="checkbox"/> The candidates did not address issues that I care about. |
| <input type="checkbox"/> I was not registered to vote.                   | <input type="checkbox"/> I did not like the candidates.                           |
| <input type="checkbox"/> I need an absentee ballot and didn't get one.   | <input type="checkbox"/> I was unable to understand the issues.                   |
| <input type="checkbox"/> I got an absentee ballot but didn't send it in. | <input type="checkbox"/> Other: _____   |

**Part 7. Perceptions & Attitudes.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

*For the following statements please indicate how much you agree or disagree with each statement:*

	Strongly Agree	Agree	Disagree	Strongly Disagree
85. Most people would willingly accept a person with a disability as a close friend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86. Most people believe that a person who has a disability is just as intelligent as the average person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87. Most people believe that a person with a disability is just as trustworthy as the average citizen.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. Most people think less of a person who has a disability.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89. Most people in my community would treat someone with a disability just as they would treat an average person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 8. Information & Referral.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

*For the following, please indicate how strongly you agree or disagree with each statement:*

	Strongly Agree	Agree	Disagree	Strongly Disagree
90. I have enough information to make good choices about my housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91. I get enough support in planning for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92. I know where to get information about disability services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93. I know how to obtain transportation when I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
94. I know how to contact my medical professional when I need him/her.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
95. I know whether or not I am eligible for disability benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96. I know how to find out if I am eligible for disability benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
97. I know how to get involved in my community when I want to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 9. Emergency Preparedness.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

98. Are you able to evacuate your residence independently if an evacuation order is issued by the health department or government?

YES

NO

Not Sure



113. What school district do you live in? \_\_\_\_\_

**If you are a CURRENT STUDENT, or a caregiver or parent of a current student, please complete the following section.** If not, please skip to next section.

**School Resources:** *Please indicate how strongly you agree or disagree with the statement. In thinking about each question, consider the school that you/your dependent currently attend and check the appropriate box.*

<i>In my school...</i>	Strongly Agree	Agree	Disagree	Strongly Disagree
114. There are enough tutors for students with special needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
115. There are enough counselors for students with special needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
116. The administration makes every effort to understand the needs of those with disabilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
117. There is a strong effort to implement programs that foster awareness of disabilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
118. There is a strong effort to obtain assistive technology devices for students who need them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
119. The administration and teachers are knowledgeable about referral services or community programs for the disabled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
120. The administration and teachers are helpful in providing alternative assignments and access materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
121. There are enough opportunities for students with disabilities to be involved in extracurricular activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
122. There are enough programs that focus on job placement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
123. There is enough support from the school towards planning for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Experiences of Discrimination:</b> <i>Please indicate how often you/your dependent, has dealt with these experiences because of being disabled.</i>				
124. Received a lower grade.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
125. Received less support from teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
126. Been denied acceptance into an educational program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
127. Been denied access to an accommodation program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
128. Been bothered by teachers or peers for having an accommodation plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 12. Individual Information.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

129. In what year were you born? \_\_\_\_\_

130. Are you

MALE

FEMALE

131. Which of the following **best** describes your race/ethnicity?

White/Caucasian (non-Hispanic)

Asian American

Black/African American

Other, please specify: \_\_\_\_\_

Latino/Hispanic

132. What is your first, or native, language (e.g., English, Spanish, Vietnamese)? \_\_\_\_\_

133. What is your home zip code? \_\_\_\_\_

134. What municipality/town do you live in? \_\_\_\_\_

135. Please indicate whether you are

Married

Widowed

Single/never been married

Partnered/Long-term relationship

Divorced/separated

136. How many children do you have? \_\_\_\_\_ (write in the number of children)

137. What was your FAMILY income before taxes in 2007? Please include income from all sources, including yourself and all other persons living in your household.

Less than \$14,999

Between \$60,000 and \$99,999

Between \$15,000 and \$24,999

More than \$100,000

Between \$25,000 and \$39,999

Don't know

Between \$40,000 and \$59,999

138. What was your PERSONAL income before taxes in 2007, excluding anyone but yourself?

Less than \$14,999

Between \$60,000 and \$99,999

Between \$15,000 and \$24,999

More than \$100,000

Between \$25,000 and \$39,999

Don't know

Between \$40,000 and \$59,999

139. Which of the following sources of income support your personal total income? **Please check all that apply.**

- |  |  |
|--|--|
| <input type="checkbox"/> Employment income (wages and earnings from paid employment)<br><input type="checkbox"/> Social Security Disability Insurance (SSDI)<br><input type="checkbox"/> Private disability insurance<br><input type="checkbox"/> Supplemental Security Income (SSI) | <input type="checkbox"/> Workers' Compensation<br><input type="checkbox"/> Pension Program<br><input type="checkbox"/> Social Security Income<br><input type="checkbox"/> Other. Please describe: _____<br><input type="checkbox"/> Don't know |
|--|--|

**Part 13. Living Fully & Independently.** *If you are a parent or caregiver, please answer questions from the point of view of the person for whom you provide care.*

140. Are there other things (not covered in this survey) that you would like to do in your life but are prevented from doing or are unable to do?

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141. What are the primary obstacles preventing you from doing what you would like to do in your life?

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142. What would be necessary to enable you to do more fully the things you would like to do in your life?

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**If you are a CAREGIVER or PARENT of a person with a disability please complete the following section from your OWN POINT OF VIEW.**

*If you are not a caregiver or parent, you have finished the survey. THANK YOU!!!  
 Please return survey in pre-paid envelope provided.*

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	Major Problem	Minor Problem	Not a Problem	N/A
150. Having enough money to pay for care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
151. Understanding government programs such as Medicare or SSI.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
152. Finding out about legal options.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
153. Getting cooperation and assistance from other family members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
154. Dealing with break downs in care arrangements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
155. Getting information about the illness/disability of the person I care for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
156. Ensuring the safety of the person I care for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
157. Identifying available transportation options.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
158. Finding culturally-sensitive resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
159. Communicating with professional resource providers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
160. Doing end-of-life planning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
161. Balancing other family responsibilities—e.g., children, marriage, housework.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
162. Dealing with dangerous, unwanted, or difficult behaviors of the person that I care for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
163. Involvement in decisions about the medical treatment of the person I care for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
164. Modifying my home to meet care requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
165. Adjusting my work schedule, meeting my work responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
166. Meeting my personal needs such as personal time, exercise, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*For each of the following, please indicate how often you experience these feelings as a CAREGIVER or PARENT of a person with a disability.*

	Not at All	Some	Quite a Bit	A Great Deal
167. Physical strain/fatigue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
168. Financial strain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
169. Emotional upset, guilt.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
170. Interference with work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
171. Reluctance to ask for help.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
172. Feelings of being underappreciated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To what extent do you agree/disagree with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
173. I have more care giving responsibilities than I can handle comfortably.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
174. I don't have enough time for myself due to my caregiving responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
175. I cannot get a restful night's sleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
176. I have a good balance between work, family, and personal relationships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
177. I am doing a good job of meeting work, family, and personal responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
178. I feel in control of the important things in my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

179. What other issues, not addressed above, concern you when it comes to your role in providing care or a person with a disability?

---



---



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180. Are you

Female

Male

181. What year were you born? \_\_\_\_\_

182. What is your home zip code? \_\_\_\_\_

183. What municipality/town do you live in? \_\_\_\_\_

184. Which of the following **best** describes your race/ethnicity?

White/Caucasian (non-Hispanic)

Asian American

Black/African American

Other; please specify: \_\_\_\_\_

Latino/Hispanic

185. Please indicate whether you are

Married

Widowed

Single/never been married

Partnered/Long-term relationship

Divorced/separated

186. What was your FAMILY income before taxes in 2007? Please include income from all sources, including yourself and all other persons living in your household.

- |  |  |
|--|--|
| <input type="checkbox"/> Less than \$14,999            | <input type="checkbox"/> Between \$60,000 and \$99,999 |
| <input type="checkbox"/> Between \$15,000 and \$24,999 | <input type="checkbox"/> More than \$100,000           |
| <input type="checkbox"/> Between \$25,000 and \$39,999 | <input type="checkbox"/> Don't know                    |
| <input type="checkbox"/> Between \$40,000 and \$59,999 |  |

187. What was your PERSONAL income before taxes in 2007, excluding anyone but yourself?

- |  |  |
|--|--|
| <input type="checkbox"/> Less than \$14,999            | <input type="checkbox"/> Between \$60,000 and \$99,999 |
| <input type="checkbox"/> Between \$15,000 and \$24,999 | <input type="checkbox"/> More than \$100,000           |
| <input type="checkbox"/> Between \$25,000 and \$39,999 | <input type="checkbox"/> Don't know                    |
| <input type="checkbox"/> Between \$40,000 and \$59,999 |  |

188. What is the highest level of education that you have completed?

- |  |   |
|--|---|
| <input type="checkbox"/> Some high school                              | <input type="checkbox"/> 4 year college degree<br>(Bachelor's degree) |
| <input type="checkbox"/> High school degree                            | <input type="checkbox"/> Post-college or graduate degree              |
| <input type="checkbox"/> Some college                                  |   |
| <input type="checkbox"/> 2 year college degree<br>(Associate's degree) |   |

---

## RETURN SURVEY IN PRE-PAID ENVELOPE PROVIDED

*Thank you for completing this survey!  
If you are interested in participating in a focus group,  
please fill out and return the enclosed postcard separately.*



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**Figure 2B**



THE BURKE REHABILITATION HOSPITAL

**Community Service Plan**  
**Comprehensive 3-Year Plan Report Format**

**I. Mission Statement**

**A. Mission Statement for Burke Rehabilitation Hospital**

\* To provide the most effective rehabilitative care for patients of any race, religion, age sex, sexual orientation, marital status, creed, national origin, or color and/or veteran status, regardless of ability to pay, to lessen disability and dependence resulting from diseases of the nervous system, the musculoskeletal system, the cardiovascular system and the pulmonary system and other diseases or conditions where rehabilitation efforts may be useful.

\* To engage in research, development, and teaching programs to improve medical care, to reduce disability and dependency and to further knowledge and understanding of disease mechanisms and causes.

\* To offer the highest quality rehabilitation health care services appropriate to the needs of the community.

**B. Changes to the Mission Statement**

The mission statement is reviewed by the board of directors at its annual meeting each May. No changes were made.

**II. Service Area**

**A. Hospital Service Area**

Burke Rehabilitation Hospital defines the county of Westchester for community/local health planning for the purposes of the Community Service Plan.

**B. Description of Service Area**

Burke Rehabilitation Hospital is not an acute care community hospital but a specialty, free-standing medical rehabilitation hospital. The service area was developed using historical data including referral patterns, census information and zip codes. We treat approximately 3,500 inpatients referred to us from acute care hospitals in Westchester, Putnam and Rockland counties, New York City, and the tri-state area.

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*Service area continued from previous page:*

In 2008, of 12,093 inpatients and outpatients, 8,052 were from Westchester County, 314 from Putnam County, 130 from Dutchess County, 98 from Rockland County and 2,108 from New York City; 450 were from Connecticut and 115 from New Jersey.

Burke is an integral part of the Cornell Medical School community and an affiliate of New York Presbyterian network.

### **III. Public Participation**

#### **A. Participants**

The Westchester County Department of Health held several meetings during 2009 at which the 16 hospitals in the county were asked to join a partnership to “help people live healthier lives,” in accordance with the New York State’s *Prevention Agenda Toward the Healthiest State*. Burke staff actively participated in these meetings as well as other planning meetings with community agencies.

The community relations committee and the hospital board of directors review the community service plan each year. The report was also emailed to senior administrators and department heads. The report was sent to local agencies including area schools, government offices and service providers, and, nearly 200 residents, and is available on the hospital web site [www.burke.org](http://www.burke.org) and in public areas, etc. Recipients are asked to comment on the report and offer suggestions via email to [tboelsen@burke.org](mailto:tboelsen@burke.org) or [shuck@burke.org](mailto:shuck@burke.org). The Community Service Report is also available upon request by calling (914) 597-2848.

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### **B. Outcomes**

1. Increasing physical activity and reducing sodium intake were the two health priorities that the prevention agenda group identified. Both priorities are instrumental in reducing coronary heart disease, congestive heart failure and cerebrovascular disease (stroke) which are all prevention agenda goals for 2013. Meetings were held at the Westchester County Department of Health (WCDOH) on January 29, April 3, and June 1, 2009. The hospitals were asked by the WCDOH to offer programs to their own employees and patients and to collaborate with community groups. A news conference announcing the health priorities was held by the WCDOH on May 20. Later in the year, a greening initiative was announced by the Westchester County executive and the Department of Health, and a press conference was held on August 12, 2009.
2. Since many of the programs are offered free of charge or at a discount, there were no barriers to entry.
3. Emails were sent and flyers were distributed. Articles on fitness were published in the summer edition of the Burke Voice (29,000 circulation) and in the Auxiliary newsletter (150 circulation). Press alerts were sent regarding the August 12 press conference. The local daily newspaper and Westchester News 12 covered the event.

### **IV. Assessment of Public Health Priorities**

#### **A. Criteria of Public Health Priorities**

In collaboration with the Westchester County Department of Health and 15 other Westchester hospitals, Burke Rehabilitation Hospital joined the partnership to “help people live healthier lives,” in accordance with the New York state’s *Prevention Agenda Toward the Healthiest State*. Burke Rehabilitation Hospital focused on its areas of expertise to avoid duplication of services with the 13 acute care hospitals in Westchester County.

#### **B. Selected Prevention Agenda Priorities**

Burke Rehabilitation Hospital chose three public health priorities which relate to the hospital’s mission: increase physical activity, decrease sodium intake and reduce unintentional injuries. These three priorities are important strategies in reducing strokes and brain and spinal cord injuries, three of the illnesses and injuries the hospital treats. Several activities were planned with community partners.



## THE BURKE REHABILITATION HOSPITAL

### **Prevention Agenda Priority: Increase Physical Activity**

Burke Rehabilitation Hospital offers many programs that address the physical activity initiative for both the community and its more than 600 employees:

#### Community Health Initiatives:

In collaboration with White Plains Hospital Center's Division of Geriatric Services, the City of White Plains Senior Center, and the Westchester County Department of Senior Programs and Services, a senior health and fitness day was held in May free of charge. It was such a success, that the partnership will continue to offer fitness classes, education and self-improvement activities. (New initiative.)

The Burke Smart Fitness Center is the only fitness program in Westchester County to serve an older population. In 2009 in response to many requests from community members, the age limit was lowered to 40 from 45. Burke added adaptive yoga classes and therapeutic yoga for individuals who are unable to participate in traditional yoga. (Existing program; yoga additions are new.)

Burke offers exercise programs for individuals who have had a stroke, who have pulmonary disease and for those with Parkinson's disease (Fit-4-Life). An outpatient cardiac exercise program was started in 2007 and continues to grow. (Existing program.)

Burke participates in several community health fairs every year offering suggestions on exercise and fall prevention, screening and demonstrations, and healthy nutrition.

Burke has hosted the Wheelchair Games, an invitational track, field and table tennis meet for parathletes, for 30 years. It is the only one of its kind offered in the community. (Existing program.)

Burke Rehabilitation Hospital is one of 15 hospitals collaborating together with the Northern Metropolitan Hospital Association to promote healthy hearts through exercise at the Westchester Heart Association's Heart Walk on Oct. 4, 2009. (New initiative.)

The track and grounds are open to the community and employees for running, jogging and power walking at no charge.



## THE BURKE REHABILITATION HOSPITAL

### Employee Health Initiatives:

Current activities include:

- An employee weight loss challenge is offered annually.
- Physical fitness is encouraged for all employees through a low-cost gym membership (\$10 a year); through a discount membership in Burke's Smart Fitness Center; through an annual wellness week, a family fun day, and discounted exercise classes.
- Employee Wellness Week, held every autumn, includes blood pressure screening, blood sugar checks, nutrition education and free exercise classes.

New activity: One of the activities discussed by the partnership was the creation of a walking club. A survey was taken of employees and a lunch-time walking club was created.

### **Prevention Agenda Priority: Decrease Sodium Intake**

Based on the direction of the Westchester Department of Health prevention agenda group, this priority is geared toward patients, staff and the public.

Burke Rehabilitation Hospital offers the following low sodium dietary choices:

- For patients, staff and the public, we offer a Wellness and You program in the cafeteria which includes, at a minimum, a heart-healthy soup, a healthy choice entrée, a healthy choice deli station item, a fresh fruit, vegetable and whole grain salad choice on the salad bar daily in the cafeteria.
- For patients, staff and the community, we offer nutrition guidance, healthy cooking demonstrations and recipes throughout the year.
- For the community we offer a six-week nutrition education program during the year.
- For inpatients, a monthly festival is held for them and their guests with a menu geared toward healthy nutrition, specialty food sampling, food fact presentation and a mini quiz.
- The following menu modifications are in place in the hospital: No trans fats are used. The menu offers whole wheat bread, low salt saltines, and low fat mayonnaise. Patients, staff and guests are offered more fish choices, low fat meat alternatives, veggie burgers, and egg whites. All cooking is done with a trans fat free spread, and Smart Balance is offered as a non-butter option. Low fat cream cheese and low fat/no fat frozen yogurt is readily available.
- Nutrition information regarding sodium usage is published in the employee and auxiliary newsletters. (New initiative.)



## THE BURKE REHABILITATION HOSPITAL

### **Prevention Agenda Priority: Decrease Unintentional Injury**

Burke Rehabilitation Hospital serves as White Plains' ThinkFirst National Injury Prevention Foundation chapter. Its mission is to "prevent brain, spinal cord and other traumatic injuries through the education of individuals, community leaders, and creators of public policy." It addresses the *Prevention Agenda toward the Healthiest State 2013* goal to reduce unintentional injury, mortality and hospitalizations. It also focuses on increasing physical activity while preventing injuries.

#### Burke's ThinkFirst Program

- Offers educational and outreach programs completely funded by the hospital.
- Has reached 17, 543 of its targeted audience members: the very young, youths and teens, and young adults.
- Increases awareness and knowledge of safety practices.
- Burke's physical therapists, who are ThinkFirst volunteers, provide injury prevention education programs to children, young adults, school officials, the community, and local organizations.
- The ThinkFirst program is presented in schools, to scouting organizations, at health fairs, and to athletic and sports departments and organizations.
- Burke's ThinkFirst Volunteer Program serves Westchester and Putnam counties and the five boroughs comprising New York City.
- ThinkFirst will partner with the White Plains Youth Bureau to present its program to at risk youth. (New initiative.)

### **C. Status of Priorities**

Burke's three community initiative priorities—to increase physical activity, to reduce sodium intake, and to prevent unintentional injury—are existing programs that will be supplemented by input and support from the Westchester Department of Health, the other 15 hospitals in Westchester County who have joined Burke in the Westchester Prevention Agenda, the ThinkFirst National Injury Prevention Foundation, the White Plains Youth Bureau, and the American Heart Association as well as other collaborators.

In addition, Burke's programs supplement the prevention agenda of its partners, most notably the Westchester County Department of Health. At the quarterly meeting of the Westchester County Prevention Agenda on April 3, 2009, Burke was cited for "not needing to invent any new programs and providing us (Westchester County Department of Health and Hospital partners) with a wealth of information."

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### **D. Non-Prevention Priorities Considered in Assessment Process**

Burke Rehabilitation Hospital provides a variety of community service activities for the community and the patients we serve. These include screenings and demonstrations, education and support groups.

We believe physical activity is important for all people including the disabled. A free golf clinic for the disabled is held yearly. This program teaches physically challenged adults the basics of golf. The Burke Wheelchair Games, held every September, provide a day of competition and fun for wheelchair athletes and their families. The Games give people with physical disabilities an opportunity to stay fit, enjoy sports, and compete. Table tennis games are held each weekend for both able-bodied and disabled players.

We partner with community groups to offer information and advice on balance and fall prevention. Through August 2009 we presented lectures and demonstrations as part of the Scarsdale Vital Aging Series, at the Westchester County Salute to Seniors event, at the senior health day held at Burke with several other organizations, at our Bronx Sports Medicine & Rehabilitation Clinic, and on the Burke campus for the community, volunteers and auxiliary members.

Healthy environment: Westchester County Executive Andy Spano introduced a climate change initiative to reduce greenhouse gases emitted by the county by 20 percent by 2015. Westchester County Department of Health Commissioner Dr. Joshua Lipsman asked all 16 hospitals in Westchester to partner together to promote efforts to reduce their carbon footprints and be more environmentally friendly. A joint news conference held August 12, 2009 showcased all the hospitals' greening efforts and focused on Burke's new co-generation plant, which uses thermal energy to reduce the rehabilitation center's demand on the energy grid by more than half. The co-generation plant uses waste heat given off by eight natural-gas powered engines, each about the size of a car engine, captures it and transfers it to the heating system. This produces 60 to 65 percent of the electricity and 50 to 90 percent of the hot water and heat needed for the entire 360,000 square-foot physical plant and will save Burke more than \$360,000 a year.

Community Preparedness: Over the last five years Burke Rehabilitation Hospital has increased its partnerships with local agencies to prepare for disasters. Burke participates with Hudson Valley Regional Resource Center, the local Red Cross chapter, the City of White Plains, the White Plains Unified Operations Command, New York Presbyterian Hospital and White Plains Hospital in community preparedness activities for natural and human-created disasters by conducting mock disaster drill activities. In May 2008 the scenario began with a mock shooting in a high rise building in White Plains and expanded to a simulated explosion and accompanying fire causing multiple injuries. In June 2009 the scenario was a dirty bomb explosion affecting the residents and businesses

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in White Plains. Burke conducted a mock campus lockdown, provided community assistance, and took patients from White Plains Hospital. This training exercise was observed by an independent emergency medical technician from another hospital. Recommendations for improvements included making the schedule of updates known to all staff.

### **V. Three Year Plan of Action**

Burke Rehabilitation Hospital is one of 16 hospitals in Westchester County participating in a seven-county local health department collaborative planning effort aimed at promoting healthy communities by identifying community health care needs and examining how the health care delivery system may be aligned to serve those needs. The project is funded through the Healthcare Efficiency and Affordability Law for New Yorkers (HEAL NY 9), and includes the counties of Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester. Results from a provider survey and a consumer survey (ongoing until February 2010) will be used by the health departments to assess ways for increasing access to care and improving health care services for the residents in our communities. We expect to be involved in these efforts. This is a new initiative.

### **A. Strategies for Selected Priorities**

#### **Prevention Agenda Priority: Increase Physical Activity**

This is an existing priority. According to the Westchester County Department of Health, over 100,000 adults are overweight or obese, and 140,000 do not participate in exercise programs.

Burke's Community Wellness program offers a variety of exercise programs from fitness center membership to warm water exercise to yoga and Tai Chi classes. We will continue to add programs if community needs are identified through our survey process. Evaluation is measured by the number of participants in any program and the increase in goals.

2009: The age restriction was lowered to 40 in the Smart Fitness Center. Three exercise programs were added. A survey was conducted and a lunch-time walking program was instituted. (New) A fitness activity week is planned for October. We will explore partnering with the American Heart Association to increase fitness among employees. (New)

2010: A fitness needs assessment survey will be conducted and program changes made if identified. One of the areas to be explored is providing exercise programs to the elderly in their homes. (New) A survey of employees will be completed.

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2011: A fitness needs assessment survey will be conducted and program changes made if needed.

Burke Rehabilitation Hospital, the White Plains Youth Bureau and the YWCA began meeting in 2009 to discuss developing physical activity programs for middle school youth. The goal is to increase physical activity in middle school students and to instill the importance of exercise as part of good health. This is a new initiative.

2010: Funding to start a joint program will be sought.

2011: Program to be designed and implemented if funded.

2012: Program is evaluated for possible expansion to other school districts.

**Prevention Agenda Priority: Decrease Sodium Intake**

This is an existing priority and will continue to be addressed both for patients, employees and the community. It is part of the Physical Activity & Nutrition public health priorities identified by the New York State Department of Health and the Westchester County Department of Health.

2009: Nutrition lectures are offered multiple times during the year. Articles on nutrition appear in the employee and auxiliary newsletters. Healthy snacks were added to vending machines. A stroke prevention fair—planned and implemented with community partners - was held and included nutritional information. (New) We will explore partnering with the American Heart Association to offer nutrition information to employees. (New)

2010: An education program will be instituted in the hospital and then offered to the community. Stroke prevention fair will be held. (New)

2011: Education efforts will continue. Stroke prevention fair will be held.

**Prevention Agenda Priority: Decrease Unintentional Injury**

The ThinkFirst Program is an existing program. It will continue to be offered to all school districts in Westchester and beyond. Its goal is to get kids to think before they act. As it is an injury prevention awareness program, it is not possible to measure its effectiveness. Goals are set on the numbers of youth who participate in the program.

Burke Rehabilitation Hospital will continue to offer balance screenings and fall prevention lectures on site and in the community. (Reduce fall-related hospitalizations indicator.)

2009: Partner with the White Plains Youth bureau to offer program to at risk youth. Offer fall reduction education.

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2010-2011: Explore partnerships with other school districts in Westchester. Continue to reach out to senior groups to offer balance screenings and fall prevention information.

### **Greening initiative:**

The second phase of the co-generation project is the installation of a supplemental chiller to provide air conditioning. The intent and overall goal are to improve the economic and environmental production of chilled water by utilizing hot water, which is available from the existing 600 kilowatts co-generation system. The estimated cost for the overall project is \$600,000 with a 6.6 year rate of return based on a \$94,244.00 annual savings projection.

2009 -2010 Burke is seeking funding through the American Recovery and Reinvestment Act through the New York State Energy Research and Development Authority.

2010 -2011 Second phase construction begins.

### **Community Preparedness:**

2009 to 2011: Burke Rehabilitation Hospital is a member of the Northern Metropolitan Hospital Association Mutual Aid Agreement wherein all the members will assist each other in the event of an actual disaster or mass casualty incident. Disaster planning will continue with a minimum of two drills a year. All drills are held in conjunction with city, state and local agencies. Employees will continue to be educated about planning for a disaster through these drills, safety week exercises and quarterly safety bulletins.

## **VI. Financial Aid Program**

### **A. Successes and Challenges**

The Burke Rehabilitation Hospital is committed to providing quality rehabilitation to all who demonstrate a need and who can benefit from our services regardless of their ability to pay. Burke provides care to patients who meet certain criteria under our charity care policy without charge or at amounts less than established charges. Charity care provided January 1 through August 31, 2009 is \$169,775. The amounts of charity care provided during the years ended December 31, 2008 and 2007, was approximately \$58,000 and \$199,000, respectively.

We provide in-services to key departments including admitting, screening, scheduling and registration staffs to advise them about the availability of charity care. In addition, the policy is posted in the admitting office and is publicized annually in the employee newsletter. In addition, financial assistance information is on our website—[www.burke.org](http://www.burke.org)-- under the tab, “Resources.”

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We also assist patients who may not be eligible for charity care due to family composition or income level. We offer interest-free sliding scale payment plans.

From January through August 2009 we have had 41 uninsured patients referred to Burke for acute medical rehabilitation after a disabling injury or illness. This presents a challenge when planning for a charity care patient's discharge since few if any sub-acute facilities provide charity care. We coordinate approaches with the referring hospitals to share information while jointly planning for patients' discharge when they have reached a satisfactory level of functioning. Another challenge is getting patients and families to submit the necessary documentation.

Burke also offers scholarships for individuals who participate in the Community Wellness Programs including the Fitness Center, Fit-4-Life, and the Aquatics Program. Each year 15 to 25 scholarships are given to athletes participating in the Burke Wheelchair Games.

The Winifred Masterson Burke Rehabilitation Hospital is the parent organization of the Winifred Masterson Burke Medical Research Institute (WMBRI) and the Winifred Masterson Burke Foundation. Via these two entities the hospital supports non-clinical research in the areas of neurological and pulmonary medicine. The 64 full-time staff members, including 14 principal investigators, conduct studies on degenerative and inflammatory diseases; stroke and spinal cord injury prevention and recovery; ophthalmic diseases and stem cell research.

In 2009 Burke's contribution to research is \$4.5 million to a total budget of \$14 million. In 2008 Burke's contribution to research was \$3.3 million towards expenses of \$11.4 million.

### **VII. Changes Impacting Community Health/ Provision of Charity Care/Access to Services**

#### **A. Potential Impacts**

Over 60% of the patients Burke Rehabilitation Hospital sees are on Medicare. Medicare payment rates have been frozen since September 2007 while the cost of living has increased by 3% and our expenses increased by 9%. Increasing financial constraints, including frozen Medicare rates and a decline in the patient census earlier this year, will cause Burke to have a \$2 million loss in 2009.

Rather than deny access to rehabilitation care to patients who have had a single joint replacement, cardiac or pulmonary disease or other diagnoses not included in the Centers for Medicare and Medicaid Services' 60% Rule, we created, with the New York State Department of Health's approval, a 30-bed medical surgical unit to care for a specific group of post-operative patients. It is a challenge to consistently meet the rule

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requirements and not ration health care. Our participation in a national database of patient outcomes and efficiency measures clearly identifies Burke's level of care as consistently above the national average.

As economic challenges intensify, we anticipate an increase in the number of requests for financial assistance. The federal government's potential overhaul of the health care system will result in significant changes which are uncertain at this time.

### **VIII. Dissemination of the Report to the Public**

#### **A. Public Information**

The Community Service Plan is posted on the hospital's website: [www.burke.org](http://www.burke.org).

It is available in various locations within the hospital. The attached chart, outlining the availability of charity care and income guidelines is posted on the website and is available in key locations including admitting, registration, and scheduling.

The Burke Rehabilitation Hospital is committed to providing quality rehabilitation to all who demonstrate a need and who can benefit from our services regardless of their ability to pay. As this is part of the hospital mission, we do not expect it to change.

### **IX. Financial statement**

**A. Financial Information Notes:** The Institutional Cost Report was filed with the New York State Department of Health on June 1, 2009.

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785 MAMARONECK AVENUE WHITE PLAINS, NEW YORK 10605  
914-597-2500 [www.burke.org](http://www.burke.org)  
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Magee Rehabilitation Hospital  
1513 Race Street • Philadelphia, PA • 19102  
800-96-MAGEE • MageeRehab.org

**Burke Rehabilitation Hospital**  
**NOTICE OF AVAILABILITY OF CHARITY CARE**

As part of its Charity Care Program, Burke Rehabilitation Hospital offers free or discounted inpatient and outpatient medical care services to eligible people. To qualify for this program, you must be uninsured or have exhausted your current insurance benefits. Charity Care will not be given on financial obligations dictated by insurance plan deductible and co-payment requirements. In addition, your family income, as evidenced by Internal Revenue Service income tax returns, and, when applicable, completed Medicaid eligibility applications, must be equal to or less than three times the current Federal Poverty Guidelines.

The following table summarizes Burke Rehabilitation Hospital's Charity Care Program family income eligibility requirements for FREE MEDICAL CARE SERVICES:

Size of Family Unit	Family Income Equal To or Less Than
1	\$ 20,420
2	27,380
3	34,340
4	41,300
5	48,260
6	55,220
7	62,180
8	69,140
For family units with more than 8 members, add \$6,800 for each additional member	

For family incomes greater than the Free Care requirements, the following table summarizes Burke Rehabilitation Hospital's Charity Care Program family income eligibility requirements for 80 % DISCOUNTED MEDICAL CARE SERVICES:

Size of Family Unit	Family Income Equal To or Less Than
1	\$22,050
2	29,700
3	37,350
4	45,000
5	52,650
6	60,300
7	67,950
8	75,600
For family units with more than 8 members, add \$7,650 for each additional member	

For family incomes greater than the 80 % Discounted requirements, the following table summarizes Burke Rehabilitation Hospital's Charity Care Program family income eligibility requirements for 60 % DISCOUNTED MEDICAL CARE SERVICES:

Size of Family Unit	Family Income Equal To or Less Than
1	\$24,500
2	33,000
3	41,500
4	50,000
5	58,500
6	67,000
7	75,500
8	84,000
For family units with more than 8 members, add \$8,500 for each additional member	

For family incomes greater than the 60 % Discounted requirements, the following table summarizes Burke Rehabilitation Hospital's Charity Care Program family income eligibility requirements for 40 % DISCOUNTED MEDICAL CARE SERVICES:

Size of Family Unit	Family Income Equal To or Less Than
1	\$26,950
2	36,300
3	45,650
4	55,000
5	64,350
6	73,700
7	83,050
8	92,400
For family units with more than 8 members, add \$9,350 for each additional member	

For family incomes greater than the 40 % discounted requirements, the following table summarizes Burke Rehabilitation Hospital's Charity Care Program family income eligibility requirements for 20 % DISCOUNTED MEDICAL CARE SERVICES:

Size of Family Unit	Family Income Equal To or Less Than
1	\$29,400
2	39,600
3	49,800
4	60,000
5	70,200
6	80,400
7	90,600
8	100,800
For family units with more than 8 members, add \$10,200 for each additional member	

People with family incomes greater than the 20 % discounted requirements are not eligible for our Charity Care Program.

PLEASE NOTE: BEFORE BEING ACCEPTED INTO BURKE REHABILITATION HOSPITAL'S CHARITY CARE PROGRAM, YOU MUST, IF APPLICABLE, ATTEMPT TO APPLY FOR ACCEPTANCE INTO THE MEDICAID INSURANCE PROGRAM OR WORKERS COMPENSATION / NO FAULT INSURANCE PROGRAMS.

Figure 2C

## **ABOUT THE COMMUNITY HEALTH NEEDS ASSESSMENT**

Magee Rehabilitation Hospital would like to thank you in advance for taking the time to help us better understand the needs of people with disabilities in our region. Magee Rehabilitation Hospital, a founding member of the Jefferson Health System, is nationally recognized for its outstanding programs in physical and cognitive rehabilitation, with comprehensive services for spinal cord injury, brain injury, stroke, amputation, and orthopedic injuries.

We are conducting this Community Health Needs Assessment (CHNA) in order to evaluate the health needs of our community and in accordance with The Patient Protection and Affordable Care Act enacted in March 2010. This act requires all non-profit U.S. hospitals to conduct a Community Health Needs Assessment (CHNA) every three years beginning this year, and to report on the findings. **Magee hopes to use the information from this community-wide survey to identify key issues for people with disabilities.**

This survey should be completed by the individual with the disability. However, if you are filling out this form on behalf of someone else, please answer ALL questions from the perspective of the individual with the disability. All responses are completely anonymous and confidential and will remain that way unless you choose to identify yourself at the end of the survey. Thank you again for your time!

**Please return COMPLETED survey to:**

**Mail: Community Programs**

Magee Rehabilitation Hospital

1513 Race Street

Philadelphia, PA 19102

**Fax: (215) 568-3736**

**Email: [Survey@mageerehab.org](mailto:Survey@mageerehab.org)**

**Part 1. Disability**

1) Have you been told by a doctor or other health professional that your disability is permanent?

- YES  No

2) What is your disability or health condition? **Please check all that apply.**

- Amputation  
 Brain Injury  
 Neurological (e.g., MS, Parkinson's, Guillain-Barre)  
 Orthopedic (e.g. hip replacement, multiple fractures, etc.)  
 Spinal Cord Injury  
 Stroke  
 Other \_\_\_\_\_

3) How long have you had your primary disability or health condition?

- One year or less  
 1-2 years  
 3-5 years  
 I was born with my disability  
 5 or more years since my disability (but not at birth)

4) Which of the following categories best describes this health condition, disability, or functional limitation? **Please check all that apply.**

- Mobility or physical disability limiting use of the legs, arms, or hands  
 Cognitive disability (e.g., brain injury, stroke)  
 Psychological, psychiatric, or emotional disability (e.g., bipolar disorder, schizophrenia, depression)  
 Chronic pain  
 Blindness, severe vision impairment, color blind  
 Auditory disability, deafness, or severe hearing impairment  
 Speech disability, oral motor disability, speech impairment, or muteness  
 Chronic illness or other health-related disability (e.g., diabetes, cerebral palsy, respiratory disease, lupus, etc.)  
 Other: \_\_\_\_\_

5) Which of the following major life activities are currently affected by this health condition, disability, or functional limitation? **Please check all that apply.**

- Self-care, such as bathing, dressing, preparing meals, or eating
- Communicating, such as talking with or listening to other people
- Learning any new skills or activities
- Remembering and/or concentrating
- Interacting socially, such as developing friendships
- Mobility, such as walking or climbing stairs
- Mobility, such as bending or carrying something
- Other: \_\_\_\_\_

6) If you DO NOT REQUIRE personal assistance for self-care, please continue to question 7.

If you REQUIRE personal assistance for self-care, who generally provides this care? **Please check all that apply.**

- Family members or friends (paid)
- Family members or friends (unpaid)
- Others paid for providing this help
- Home health aides
- Other: \_\_\_\_\_

## **Part 2. Health & Social Services**

7) What type of health coverage do you have?

- Private health insurance through myself or a family member (including workmen's comp and auto)
- Medicare (the government plan that pays healthcare bills for people ages 65 and older and for some younger individuals with disabilities)
- Medicaid, Medical Assistance, or a state program that pays health care for people with low income
- No health insurance
- Other: \_\_\_\_\_



- 12) I have access to a medical professional for issues related to sexuality and/or reproduction services.
- Yes
  - No
  - I do not have a need for these services.
- 13) I have access to a medical professional for gynecology and/or urology services.
- Yes
  - No
  - I do not have a need for these services.
- 14) In general, I am able to get my necessary medications.
- Never
  - Sometimes
  - Usually
  - Always
- 15) If you generally are ABLE to get your necessary medications, please continue to question 16.  
If you generally are NOT ABLE to get your necessary medications, please tell us why not. **Please check all that apply.**
- Some or all of my medications are too costly.
  - It is difficult for me to go out and pick up my medications.
  - Some of my medications are not available at my local pharmacy either because of my insurance requirements or because the medication itself is not stocked there.
  - I am confused by the number of medications I need to take and am sometimes too overwhelmed.
  - Other: \_\_\_\_\_
- 16) I regularly participate in exercise or fitness activities (excluding physical therapy).
- Yes
  - No

- 17) If you REGULARLY PARTICIPATE in exercise or fitness activities, continue to question 18.  
If you DO NOT REGULARLY PARTICIPATE in exercise or fitness activities, why not? **Please check all that apply.**
- The facilities near my home are not accessible or do not have specialized equipment to meet my needs.
  - I do not have the physical capability to participate in ANY exercise program.
  - I have no interest in participating in any regular fitness program.
  - I have no transportation to a gym or other fitness facility.
  - I cannot afford membership to a gym or other fitness facility.
  - I do not know what types of exercises or activities are appropriate for me.
  - There are no places in my community to exercise or be physically active.
  - Other: \_\_\_\_\_
- 18) Have you participated in an adaptive sports program in the past three years?
- Yes
  - No
- 19) If you have participated in any complimentary therapy program in the past three years, please check the box next to those you found beneficial to your physical, emotional, or social well-being.
- I have not participated in any complimentary therapy program in the past three years.
  - Art therapy
  - Dance therapy
  - Horticultural therapy
  - Music therapy
  - Pet therapy
  - I did not find any of these programs beneficial.
- 20) Do you feel as though drug or alcohol issues impact your daily life?
- Yes
  - No
  - Don't Know

21) In the past year, have you needed the services of an attorney and could not afford one?

- Yes  No

22) If you DID NOT NEED the services of an attorney or could afford one on your own, continue to question 23.

If you NEEDED legal assistance and could not afford to pay for it, what was the legal issue(s) you needed to address?

- Planning Documents (incl. power of attorney, living will, etc.)  
 Mortgage Foreclosure  
 Domestic Relations (incl. divorce, custody, and support)  
 Domestic Violence  
 Public Benefits (SSI/SSDI, Medicare, Medicaid, food stamps and cash assistance)  
 Landlord/Tenant  
 Other: \_\_\_\_\_

### **Part 3. Income & Employment**

23) What is your current source of income? **Please check all that apply.**

- Wages and earnings  
 Social Security Disability Insurance (SSDI)  
 Social Security Income (federal SSI)  
 Disability Insurance (privately funded or state issued)  
 Supplemental Security Income (state issued SSI)  
 Workers' Compensation  
 Pension Program  
 Unemployment Compensation  
 My significant other is the primary wage earner  
 Other: \_\_\_\_\_

24) What is your current employment/life status? **Please check all that apply.**

- Working full-time
- Working part-time
- Retired
- Volunteer
- Unemployed and looking for work
- Unemployed and not looking for work
- Full-time student
- Part-time student
- Full-time homemaker
- Other: \_\_\_\_\_

25) If you ARE working full-time or in school full-time, please continue to question 26.

If you ARE NEITHER working full-time nor a full-time student, please explain.

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#### **Part 4. Housing & Transportation**

26) What is your primary mode(s) of transportation? **Please select those transportation options that you use on a regular basis.**

- I drive my own personal vehicle.
- A friend/family member usually gives me a ride.
- I take public transportation (bus, train, trolley).
- I use Para transit services.
- It varies, I take a ride any way I can get it.
- I usually do not leave the house.
- I usually pay for a car service or taxi.
- Other: \_\_\_\_\_

27) Does your current means of transportation meet your needs?

- Yes
- No

28) If your primary means of transportation generally **MEETS** your needs, continue to question 29. If your primary means of transportation generally **DOES NOT MEET** your needs, why not?

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29) What type of housing do you have?

- |  |  |
|--|--|
| <input type="checkbox"/> Own a home              | <input type="checkbox"/> Residential/long-term care            |
| <input type="checkbox"/> Rent a home             | <input type="checkbox"/> I live with a family member or friend |
| <input type="checkbox"/> Own an apartment/condo  | <input type="checkbox"/> Other: _____                          |
| <input type="checkbox"/> Rent an apartment/condo |  |
| <input type="checkbox"/> Group home              |  |

30) Does your current housing meet your needs?

- Yes  No

31) If your housing **MEETS** your needs, continue to question 32. If your housing **DOES NOT MEET** your needs, please explain.

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**Part 5. Technology & Assistive Devices**

32) Is there any special equipment or type of assistive devices (e.g. ramp, hearing aid, computer/software) that you currently *need but do not have*?

- Yes  No  Don't Know

33) If you DO NOT NEED any additional special equipment or assistive device, please continue to question 34.  
 If you DO NEED more assistance, what kind of special equipment or assistive devices *do you need but do not have*? **Please check all that apply.**

- |   |   |
|---|---|
| <input type="checkbox"/> Motorized wheelchair/carts/scooter<br><input type="checkbox"/> Wheelchair (manual)<br><input type="checkbox"/> Walker/cane<br><input type="checkbox"/> Lift/carrier to handle wheelchair/ scooter<br><input type="checkbox"/> Vehicle big enough to handle wheelchair/scooter<br><input type="checkbox"/> Ramp at home/apartment<br><input type="checkbox"/> Lifts/chairs/other mechanized assists | <input type="checkbox"/> Artificial limb<br><input type="checkbox"/> Railing/bar/other non-mechanized assists<br><input type="checkbox"/> Brace/Orthotic<br><input type="checkbox"/> Voice activated control device<br><input type="checkbox"/> Hearing aid device<br><input type="checkbox"/> Computer/software<br><input type="checkbox"/> Vision assistance<br><input type="checkbox"/> Guide dog<br><input type="checkbox"/> Other: _____ |
|---|---|

**Part 6. Community Participation**

**For each of the following, please circle YES or NO to indicate if you typically:**

- |   |     |    |
|---|-----|----|
| 34) Socialize with close friends, relatives, or neighbors                       | Yes | No |
| 35) Feel there are people you are close to                                      | Yes | No |
| 36) Go to restaurants, out to eat   | Yes | No |
| 37) Go to church, synagogue, mosque, or other place of worship                  | Yes | No |
| 38) Go to a show, movie, sports event, club meeting, class or other group event | Yes | No |
| 39) Feel your daily life is full of things that are interesting to you          | Yes | No |

Questions about the survey? Contact Survey@mageerehab.org or 215-587-3140 v1 Page 10 of 12

40) What are the PRIMARY ways that you participate in your community?

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41) In what ways would you like to be MORE involved in your community?

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42) Are there other things (not covered in this survey) that you would like to do in your life but are prevented from doing or are unable to do due to your disability?

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**Part 7. Individual Information**

43) I am a:

- Male  Female

44) Which age group do you fall into?

- under 18  
 18-39  
 40-59  
 60-70  
 over 70

45) What zip code do you live in? \_\_\_\_\_

46) Have you ever been a patient at Magee?

- Yes  No

If Yes, check all that apply:

- In-patient  
 Out-patient

47) *Optional*: If you would like to receive information about any of our services, be added to our mailing list, or become more involved with Magee Rehabilitation, please provide your contact information below. We value your privacy and will not share or sell this information to any outside organizations.

Contact Information:

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Today's Date: \_\_\_\_\_

Thank you for taking the time to complete this important survey. If you are interested in learning about the results of the survey please visit us online at [mageerehab.org](http://mageerehab.org). We expect to post our findings by Fall 2013.

Rev. 9/26/2012

**Figure 2D**

**Magee Rehabilitation**  
 *Jefferson Health System*

Magee Rehabilitation Hospital is conducting a Community Health Needs Assessment (CHNA) Survey to identify and assess key issues related to the physical, emotional, and social well-being of individuals with disabilities in the greater Philadelphia area.

The survey will take no more than 15 minutes of your time and should be completed by the person with the disability or from the perspective of the person with the disability. ALL responses remain anonymous unless one chooses to identify him/herself.

We would like to thank you in advance for your time. Please use this link below to access the survey:

<https://www.surveymonkey.com/s/SurveyCHNA>

or call 215-587-3140 for further information.

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 *Jefferson Health System*

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We would like to thank you in advance for your time. Please use this link below to access the survey:

<https://www.surveymonkey.com/s/SurveyCHNA>

or call 215-587-3140 for further information.

**Figure 3A**

**Magee Rehabilitation Hospital  
 2012 Community Health Needs Assessment Survey Results**

<b>1. Have you been told by a doctor or other healthcare professional that your disability is permanent?</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Yes	70.7%	282
No	29.3%	117
<i>answered question</i>		<b>399</b>
<i>skipped question</i>		<b>32</b>

<b>2. What is your disability or health condition? Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Amputation	4.13%	17
Brain Injury	12.38%	51
Neurological (e.g., MS, Parkinson's, Guillain-Barre)	10.68%	44
Orthopedic (e.g., hip replacement, multiple fractures, etc.)	18.44%	76
Spinal Cord Injury	46.11%	190
Stroke	16.02%	66
Other Health Comorbidity	1.21%	5
Chronic Pain	0.24%	1
Physical Disability from Birth (CP, etc)	1.21%	5
Speech and Hearing Disability	0.48%	2
Blindness	0.24%	1
Developmental/Intellectual Disability (Autism)	0.24%	1
Mental Health	0.24%	1
<i>total responses</i>		<b>461</b>
<i>answered question</i>		<b>413</b>
<i>skipped question</i>		<b>18</b>

<b>3. How long have you had your primary disability or health condition?</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
One year or less	19.4%	80
1-2 years	16.2%	67
3-5 years	18.9%	78
I was born with my disability	5.8%	24
5 or more years since my disability (but not at birth)	41.2%	170
<i>answered question</i>		<b>413</b>
<i>skipped question</i>		<b>18</b>

<b>4. Which of the following categories best describe your health condition, impairment, disability, or functional limitation? Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Mobility or physical disability limiting the use of arms, legs, or	78.21%	323
Cognitive disability (e.g., brain injury, stroke)	21.31%	88
Psychological, psychiatric, or emotional disability (e.g., bipolar disorder, schizophrenia, depression)	13.08%	54
Chronic pain	39.47%	163
Blindness, severe vision impairment, color blind	4.84%	20
Auditory disability, deafness, or severe hearing impairment	3.39%	14

Speech disability, oral motor disability, speech impairment, or muteness	11.14%	46
Chronic illness or other health-related disability (e.g., diabetes, cerebral palsy, respiratory disease, lupus, etc.)	15.98%	66
<b>total responses</b>		<b>774</b>
<b>answered question</b>		<b>413</b>
<b>skipped question</b>		<b>18</b>

**5. Which of the following major life activities are currently affected by this health condition, disability, or functional limitation? Please check all that apply.**

Answer Options	Response Percent	Response Count
Self care, such as bathing, dressing, preparing meals, or	51.58%	212
Communicating, such as talking with or listening to other	18.73%	77
Learning any new skills or activities	18.25%	75
Remembering and/or concentrating	35.28%	145
Interacting socially, such as developing friendships	19.22%	79
Mobility, such as walking or climbing	75.91%	312
Mobility, such as bending or carrying something	69.59%	286
Driving	0.49%	2
Exercise/athletics	0.49%	2
Daily activities/chores/work	0.73%	3
Sitting Upright	0.49%	2
<b>total responses</b>		<b>1195</b>
<b>answered question</b>		<b>411</b>
<b>skipped question</b>		<b>20</b>

**6. If you REQUIRE personal assistance for self-care, who generally provides this care? Please check all that apply.**

Answer Options	Response Percent	Response Count
Family members or friends (unpaid)	72.35%	123
Family members or friends (paid)	20.59%	35
Home health aides (paid)	28.82%	49
Nursing Care facility	1.18%	2
Others paid for assistance	10.59%	18
<b>total responses</b>		<b>227</b>
<b>answered question</b>		<b>170</b>
<b>skipped question</b>		<b>261</b>

**7. What type of health coverage do you have?**

Answer Options	Response Percent	Response Count
Private health insurance through myself or a family member	57.00%	236
Medicare (the government plan that pays healthcare bills for Medicaid, Medical Assistance, or other state program that	45.17%	187
No health insurance	27.05%	112
Supplemental (AARP, etc.)	1.45%	6
Long-term care	2.42%	10
Worker's comp	0.24%	1
	0.72%	3
<b>total responses</b>		<b>555</b>
<b>answered question</b>		<b>414</b>
<b>skipped question</b>		<b>17</b>

8. If you DO NOT have health insurance, what is the primary reason you do not have coverage? Please check all that apply.		
Answer Options	Response Percent	Response Count
It is too expensive	20.0%	1
I was refused coverage due to poor health, illness, age, or	40.0%	2
I don't know how to get it	0.0%	0
My employer does not offer it	0.0%	0
I am not eligible for employer coverage	0.0%	0
I do not have the proper documentation to obtain insurance	20.0%	1
I am waiting for my new insurance plan to begin	0.0%	0
Other (please specify)	40.0%	2
<i>answered question</i>		<b>5</b>
<i>skipped question</i>		<b>426</b>

9. If there was a time in the past year when you needed medical care but did not get it, please tell us why. Please check all that apply.		
Answer Options	Response Percent	Response Count
I couldn't get an appointment.	5.63%	18
I did not know a good doctor/clinic.	5.63%	18
It was too difficult to get to the doctor's office.	6.56%	21
The problem or treatment was not covered by insurance.	10.00%	32
I couldn't find a doctor or healthcare provide that understands my condition.	6.88%	22
I couldn't find a doctor or healthcare provider that would accept	4.38%	14
I have not had this problem in the past year.	52.50%	168
N/A	19.38%	62
No health insurance	0.94%	3
Did not want to miss work.	0.31%	1
Too expensive	0.94%	3
<i>total responses</i>		<b>362</b>
<i>answered question</i>		<b>320</b>
<i>skipped question</i>		<b>111</b>

10. I see a dentist at least once a year.		
Answer Options	Response Percent	Response Count
Yes	71.3%	295
No	28.7%	119
<i>answered question</i>		<b>414</b>
<i>skipped question</i>		<b>17</b>

11. I have access to psychological and/or counseling services, if I need them.		
Answer Options	Response Percent	Response Count
Yes	83.3%	334
No	16.7%	67
<i>answered question</i>		<b>401</b>
<i>skipped question</i>		<b>30</b>

12. I have access to a medical professional for issues related to sexuality and/or reproduction services.		
Answer Options	Response Percent	Response Count

Yes	35.6%	146
No	11.2%	46
I do not have a need for these services	53.2%	218
<i>answered question</i>		<b>410</b>
<i>skipped question</i>		<b>21</b>

<b>13. I have access to a medical professional for gynecology and/or urology services.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Yes	69.0%	280
No	6.9%	28
I do not have a need for these services	24.1%	98
<i>answered question</i>		<b>406</b>
<i>skipped question</i>		<b>25</b>

<b>14. In general, I am able to get my necessary medications.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Never	1.4%	6
Sometimes	4.3%	18
Usually	24.3%	101
Always	70.0%	291
<i>answered question</i>		<b>416</b>
<i>skipped question</i>		<b>15</b>

<b>15. If you generally are NOT ABLE to get your necessary medications, please tell us why not. Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Some or all my medications are too costly.	47.22%	17
It is difficult for me to go out and pick up my medications.	22.22%	8
Some of my medications are not available at my local pharmacy either because of my medical insurance requirements or because the medication itself is not stocked	22.22%	8
I am confused by the number of medications I need to take	19.44%	7
Denied by insurance.	11.11%	4
<i>total responses</i>		<b>44</b>
<i>answered question</i>		<b>36</b>
<i>skipped question</i>		<b>395</b>

<b>16. I regularly participate in exercise or fitness activities (excluding physical therapy).</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Yes	51.7%	214
No	48.3%	200
<i>answered question</i>		<b>414</b>
<i>skipped question</i>		<b>17</b>

<b>17. If you DO NOT regularly participate in exercise or fitness activities, why not? Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>

The facilities near my home are not accessible or do not have specialized equipment to meet my needs	17.16%	29
I do not have the physical capability to participate in ANY exercise program	24.26%	41
I have no interest in participating in any regular fitness	20.12%	34
I have no transportation to a gym or other fitness facility	17.16%	29
I do not know what type of exercises are appropriate for my condition	34.32%	58
There are no places in my community to exercise	8.88%	15
Too expensive for membership/equipment.	20.12%	34
Not enough time	2.37%	4
Too much pain	1.18%	2
<b>total responses</b>		<b>246</b>
<b>answered question</b>		<b>169</b>
<b>skipped question</b>		<b>262</b>

18. Have you participated in an adaptive sports program in the past three years?		
Answer Options	Response Percent	Response Count
Yes	13.4%	53
No	86.6%	344
<b>answered question</b>		<b>397</b>
<b>skipped question</b>		<b>34</b>

19. If you have participated in any complimentary therapy program in the past three years, please check the box next to those you found beneficial to your physical, emotional, or social well-being.		
Answer Options	Response Percent	Response Count
I have not participated in any complimentary therapy program	69.8%	227
Art therapy	11.1%	36
Dance therapy	3.1%	10
Horticulture therapy	6.5%	21
Music therapy	5.2%	17
Pot therapy	5.5%	18
I did not find any of these programs beneficial.	14.2%	46
<b>answered question</b>		<b>325</b>
<b>skipped question</b>		<b>106</b>

20. Do you feel as though drug or alcohol issues impact your daily life?		
Answer Options	Response Percent	Response Count
Yes	6.1%	25
No	90.3%	372
Don't know	3.6%	15
<b>answered question</b>		<b>412</b>
<b>skipped question</b>		<b>19</b>

21. In the past year, have you needed the services of an attorney and could not afford one?		
Answer Options	Response Percent	Response Count
Yes	14.1%	57
No	85.9%	347

<i>answered question</i>	<b>404</b>
<i>skipped question</i>	<b>27</b>

<b>22. If you NEEDED legal assistance and could not afford to pay for it, what was the legal issue(s)?</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Planning Documents (including: power of attorney, living will,	35.85%	19
Mortgage Foreclosure	9.43%	5
Domestic Relations (including; divorce, custody, or support)	7.55%	4
Domestic Violence	1.89%	1
Public Benefits (SSI/SSDI, Medicare, Medicaid, food stamps, or cash assistance)	33.96%	18
Landlord/tenant	15.09%	8
Accident/injury	5.66%	3
Bankruptcy/Debt/Bills	9.43%	5
Lawsuits (malpractice, etc.)	9.43%	5
Work benefits	1.89%	1
Housing	7.55%	4
MVA	3.77%	2
<i>total responses</i>		<b>75</b>
<i>answered question</i>		<b>53</b>
<i>skipped question</i>		<b>378</b>

<b>23. What is your current source of income? Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Wages and Earnings	19.24%	76
Social Security Disability Insurance (SSDI)	41.52%	164
Social Security Income (federal SSI)	26.84%	106
Disability Insurance (privately funded or state issued)	8.61%	34
Supplemental Security Income (state issued SSI)	4.56%	18
Workers' Compensation	9.62%	38
Pension Program	14.43%	57
Unemployment Compensation	1.27%	5
My significant other is the sole provider	7.85%	31
Dependent (minor, college student, receiving parental support)	3.04%	12
Other Sources (trust funds, investments, inheritance, family,	3.29%	13
None	2.03%	8
Welfare	0.25%	1
Military care (VA)	0.25%	1
<i>total responses</i>		<b>564</b>
<i>answered question</i>		<b>395</b>
<i>skipped question</i>		<b>36</b>

<b>24. What is your current employment/life status? Please check all that apply.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Working full-time	14.21%	56
Working part-time	7.11%	28
Retired	28.43%	112
Unemployed	23.60%	93
Looking for work	7.61%	30
Full-time student	6.35%	25
Part-time student	5.08%	20
Full-time homemaker	3.05%	12
Volunteer	8.12%	32
Disability/medical leave/Worker's Comp	15.74%	62

Not looking for work	2.28%	9
Minor	0.25%	1
<b>total responses</b>		<b>480</b>
<b>answered question</b>		<b>394</b>
<b>skipped question</b>		<b>37</b>

25. If you NEITHER working nor attending school full-time, please explain.		
Answer Options	Response Percentage	Response Count
Unable to work/attend school due to disability/injury/illness.	63.00%	63
No interest in working or attending school.	2.00%	2
Trying to find work/apply to schools.	9.00%	9
Retired	4.00%	4
Home tutoring/part time schooling	2.00%	2
Chronic pain/exhaustion	3.00%	3
Caregiver/parent	2.00%	2
Currently in rehab/therapy	4.00%	4
Working part-time	5.00%	5
Unable to get to work/school (ex. Need new equipment, no transportation, etc.)	4.00%	4
Cannot work for financial reasons (loss of govt assistance,	2.00%	2
<b>total responses</b>		<b>100</b>
<b>*answered question</b>		<b>100</b>
<b>skipped question</b>		<b>324</b>

*While 107 people answered the question, 7 gave responses that indicated the question was not applicable to them or were inappropriate, which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to 100 to reflect this.*

26. What is your primary mode(s) of transportation? Please select those transportation options that you use on a regular basis.		
Answer Options	Response Percent	Response Count
I drive my own vehicle.	36.97%	149
A friend/family member usually gives me a ride.	42.68%	172
I take public transportation (bus, train, trolley).	22.83%	92
I use Para-Transit or a similar service.	14.89%	60
It varies, I take a ride any way I can get it.	5.46%	22
I usually do not leave the house.	1.99%	8
I usually pay for a car service or taxi.	4.71%	19
Workman's comp provided transport	0.25%	1
Walk/Powerchair/Scooter	0.74%	3
<b>total responses</b>		<b>526</b>
<b>answered question</b>		<b>403</b>
<b>skipped question</b>		<b>28</b>

27. Does your current means of transportation meet your needs?		
Answer Options	Response Percent	Response Count
Yes	82.5%	335
No	18.7%	76
<b>answered question</b>		<b>406</b>
<b>skipped question</b>		<b>25</b>

28. If your primary means of transportation DOES NOT meet your needs, please explain.		
Answer Options	Response Percent	Response Count
Makes me late to appointments/cannot follow own schedule.	18.75%	9
Physically difficult to use.	16.67%	8
Vehicle is not wheelchair accessible/needs repairs.	18.75%	9
Too expensive.	6.25%	3
Cannot get to where I need to go due to restrictions/stops.	27.08%	13
I want to be able to drive myself.	12.50%	6
<b>total responses</b>		<b>48</b>
<b>*answered question</b>		<b>48</b>
<b>skipped question</b>		<b>381</b>
<i>While 50 people answered the question, 2 gave responses that indicated the question was not applicable to them or were inappropriate, which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to</i>		

29. What type of housing do you currently have?		
Answer Options	Response Percent	Response Count
Own a home	51.72%	210
Rent a home	9.36%	38
Own an apartment/condo	3.94%	16
Rent an apartment/condo	16.01%	65
Group home	0.74%	3
Residential/long-term care	2.46%	10
Live with a family member or friend	18.23%	74
Rent a room	0.49%	2
<b>total responses</b>		<b>418</b>
<b>answered question</b>		<b>406</b>
<b>skipped question</b>		<b>25</b>

30. Does your current housing meet your needs?		
Answer Options	Response Percent	Response Count
Yes	81.8%	327
No	18.3%	73
<b>answered question</b>		<b>400</b>
<b>skipped question</b>		<b>31</b>

31. If your housing DOES NOT meet your needs, please explain.		
Answer Options	Response Percentage	Response Count
Not accessible/needs to be better equipped.	78.69%	48
Too expensive.	6.56%	4
Needs repairs/ work done.	3.28%	2
Too large for needs.	3.28%	2
Too small for needs.	3.28%	2
Would like to be closer to family.	3.28%	2
Problems with landlord.	1.64%	1
<b>total responses</b>		<b>61</b>
<b>*answered question</b>		<b>61</b>
<b>skipped question</b>		<b>366</b>
<i>While 65 people answered the question, 4 answered with "none" or something inappropriate to the question, which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to 61 to reflect this.</i>		

32. Is there any special equipment or type of assistive devices (e.g. ramp, hearing aid, computer/software) that you currently need but do not have?		
Answer Options	Response Percent	Response Count
Yes	30.6%	123
No	60.4%	243
Don't Know	9.0%	36
<b>answered question</b>		<b>402</b>
<b>skipped question</b>		<b>29</b>

33. If you do NEED more assistance, what kind of special equipment or assistive devices do you need but do not have? Please check all that apply.		
Answer Options	Response Percent	Response Count
Motorized wheelchair/cart/scooter	21.05%	28
Walker/cane	16.54%	22
Wheelchair	16.54%	22
Lift/carrier to handle wheelchair/scooter in cars	13.53%	18
Vehicle big enough to handle wheelchair/scooter	25.56%	34
Ramp at home/apartment	30.83%	41
Lifts/chairs/other mechanized assists	24.06%	32
Railing/bar/other non-mechanized assists	21.05%	28
Artificial limb	3.01%	4
Brace/orthotic	8.27%	11
Voice activated control device	2.26%	3
Hearing aid device	9.02%	12
Computer/software	24.06%	32
Vision assistance	3.76%	5
Guide dog	1.50%	2
New Furniture	1.50%	2
Renovations	1.50%	2
Permit for parking	0.75%	1
Breathing assistance	0.75%	1
<b>total responses</b>		<b>300</b>
<b>answered question</b>		<b>133</b>
<b>skipped question</b>		<b>298</b>

34. For each of the following, please indicate if you typically:					
Answer Options	Yes Percentage	Yes Count	No Percentage	No Count	Response Count
Socialize with close friends, relatives, or neighbors	89.03%	349	10.97%	43	392
Feel there are people you are close to	93.13%	366	6.87%	27	393
Go to restaurants, out to eat	72.89%	285	27.11%	106	391
Go to church, synagogue, mosque or other place of worship	43.93%	170	56.07%	217	387
Go to a show, movie, sports event, club meeting, class or other group event	61.89%	242	38.11%	149	391
Feel your daily life is full of things that are interesting to you	66.67%	258	33.33%	129	387
<b>answered question</b>					<b>398</b>
<b>skipped question</b>					<b>33</b>

35. What are the primary ways that you participate in your community?		
Answer Options	Response Percentage	Response Count
Attend church/religious insitutions.	22.60%	40
Participate in sports/athletics/fitness.	10.17%	18
Community service & volunteering (environmental, etc.)	32.77%	58

Work	4.52%	8
Civic engagement/community leadership	9.60%	17
Peer mentoring	3.95%	7
Family/childrens' activities	5.08%	9
Social activities (dinner, movie, dances, etc.)	34.46%	61
Educational pursuits.	5.65%	10
Hobbies (gardening, etc.)	3.95%	7
The arts (dance, painting, docent, etc.)	1.69%	3
I do not participate.	51.41%	91
Clubs/organizations.	9.04%	16
Day Rehab	2.26%	4
<b>total responses</b>		<b>349</b>
<b>*answered question</b>		<b>177</b>
<b>skipped question</b>		<b>155</b>

*While 276 answered the question, 99 answered with "none" or something inappropriate to the question, which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to 177 to reflect this.*

**36. In what ways would you like to be MORE involved in your community?**

Answer Options	Response Percentage	Response Count
Attend church/religious insitutions.	9.00%	9
Participate in sports/athletics/fitness.	13.00%	13
Community service & volunteering (environmental, etc.)	40.00%	40
Work	7.00%	7
Travel	7.00%	7
Politics, community leadership	7.00%	7
Peer mentoring	6.00%	6
Play with children/participate in their activities	2.00%	2
More social interaction with peers (group outings, clubs, etc.)	15.00%	15
Educational pursuits.	3.00%	3
Hobbies (gardening, etc.)	5.00%	5
The arts (dance, painting, docent, etc.)	3.00%	3
<b>total responses</b>		<b>117</b>
<b>*answered question</b>		<b>100</b>
<b>skipped question</b>		<b>220</b>

*While 211 answered the question, 111 answered with "I don't know," "none," "yes," or something inappropriate to the question, which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to 100 to reflect this.*

**37. Are there other things (not covered in this survey) that you would like to do in your life but are prevented from doing or are unable to do due to your disability?**

Answer Options	Response Percentage	Response Count
Employment	17.02%	24
Travel	16.31%	23
Walking	8.51%	12
Driving	6.38%	9
Exercise/Sports/Fitness (running, biking, golf, etc.)	24.82%	35
Community Involvement/Service	7.09%	10
Civic Engagement	0.71%	1
Family Issues (family planning, participating in family events)	6.38%	9
Romance/sex/relationships	2.84%	4
Living Independently (eating, dressing, etc.)	4.26%	6
Social events (dining out, movies, attending sporting events, etc.)	14.89%	21
Emotional Support	1.42%	2
Hobbies (photography, gardening, cooking, etc.)	4.26%	6
Outdoor Activities (hiking, hunting, fishing, etc.)	4.96%	7
Overcoming physical/mobility limitations.	5.67%	8

Overcoming other health issues (speech, pain, etc.)	4.96%	7
Adaptive housework/chores	2.84%	4
Financial issues (insurance, etc.)	2.84%	4
Education	3.55%	5
Transportation	1.42%	2
Adaptive Dance	2.13%	3
Technology	0.49%	1
<b>total responses</b>		<b>203</b>
<b>*answered question</b>		<b>141</b>
<b>skipped question</b>		<b>78</b>

*While 353 answered the question, 212 answered with "none" or "yes," which did not add to the data and was therefore not counted. The total number of people that answered the question was updated to 141 to reflect this.*

**38. I am a**

Answer Options	Response Percent	Response Count
Male	55.9%	222
Female	44.1%	175
<b>answered question</b>		<b>397</b>
<b>skipped question</b>		<b>34</b>

**39. Which age group do you fall into?**

Answer Options	Response Percent	Response Count
under 18	1.3%	5
18-39	25.1%	99
40-59	44.8%	177
60-70	17.2%	68
over 70	11.6%	46
<b>answered question</b>		<b>395</b>
<b>skipped question</b>		<b>36</b>

**40. What zip code do you live in?**

Answer Options	Response Percentage	Response Count
070 New Jersey	0.26%	1
080 New Jersey	21.67%	83
081 New Jersey	0.52%	2
082 New Jersey	1.04%	4
083 New Jersey	1.57%	6
085 New Jersey	0.26%	1
086 New Jersey	0.26%	1
088 New Jersey	0.26%	1
091 Massachusetts	0.26%	1
021 Massachusetts	0.26%	1
170 Pennsylvania	0.26%	1
173 Pennsylvania	0.26%	1
175 Pennsylvania	0.78%	3
177 Pennsylvania	0.26%	1
180 Pennsylvania	0.26%	1
182 Pennsylvania	0.26%	1
186 Pennsylvania	0.52%	2
189 Pennsylvania	1.83%	7
190 Pennsylvania	15.67%	60
191 Pennsylvania	42.56%	163
193 Pennsylvania	2.61%	10
194 Pennsylvania	4.18%	16

195 Pennsylvania	1.31%	5
196 Pennsylvania	0.26%	1
197 Delaware	0.78%	3
198 Delaware	0.78%	3
199 Delaware	0.26%	1
207 Maryland	0.26%	1
299 South Carolina	0.26%	1
926 California	0.26%	1
<i>total responses</i>		<b>383</b>
<i>answered question (2 were N/A)</i>		<b>385</b>
<i>skipped question</i>		<b>46</b>

41. Have you ever been a patient at Magee?		
Answer Options	Response Percent	Response Count
Yes	76.8%	302
No	23.2%	91
<i>answered question</i>		<b>393</b>
<i>skipped question</i>		<b>38</b>

42. If yes, check all that apply		
Answer Options	Response Percent	Response Count
In-patient	66.3%	53
Out-patient	71.3%	57
<i>answered question</i>		<b>80</b>
<i>skipped question</i>		<b>351</b>

43. Optional: If you would like to receive information about any of our services, be added to		
Answer Options	Response Percent	Response Count
Name:	98.5%	191
Email Address:	57.2%	111
Street Address:	93.8%	182
City/Town	95.4%	185
State:	95.4%	185
Zip	92.3%	179
Home Phone:	69.1%	134
Cell Phone:	49.5%	96
Work Number:	7.7%	15
<i>answered question</i>		<b>194</b>
<i>skipped question</i>		<b>237</b>