

THE INSTITUTE FOR REHABILITATION AND RESEARCH

TIRR JOURNAL

Vol. 2, Summer 2026

**"GAME-CHANGING"
LIMB LOSS PROGRAM**

**FAREWELL, DR.
FRANCISCO**

**REELCOMMUNITY
BRINGS INCLUSIVE
RECREATION TO
GREATER HOUSTON**

Photo by Hagit Bibi Photography

TIRR
MEMORIAL
HERMANN
Rehabilitation &
Research



Redefining Rehabilitation Across the Nation and in Texas

At TIRR Memorial Hermann, we are redefining rehabilitation and reimagining recovery. It’s why for over 35 years we have been recognized as one of the top four medical rehabilitation hospitals in America by *U.S. News & World Report*. It’s also why we’re ranked #1 in Texas this year.

After spinal cord injury, brain trauma, stroke, limb loss or other serious illness, adults and children from around the world turn to us for personalized rehabilitation care. With robotic-assisted walking devices to advanced communication systems to groundbreaking research and innovative, one-of-a-kind programs, we are proud to help patients get back to the lives they love.



TIRR Journal

Vol. 2, Summer 2026

- 4 A Message from the CEO
- 5 Limb Loss Program
TIRR Memorial Hermann Offers “Game-Changing” Procedure for Bilateral Limb Loss
- 7 Changing of the Guard
TIRR Memorial Hermann CMO Message
- 8 Clinical Excellence
TIRR Memorial Hermann Achieves Magnet Recognition with Distinction™
- 9 Research in Action
Groundbreaking Advancements in TBI treatments
- 10 Community
ReelCommunity Brings Inclusive Recreation to Greater Houston
- 11 Advocacy
Advocating For Equity: Bridging The Gap In Inpatient Rehabilitation Access

A Message from the CEO



At TIRR Memorial Hermann, we continue to move from strength to strength, positioning our organization as a leader in rehabilitation medicine, today and for generations to come.

Part of this process involves a transition in leadership, where we are celebrating prior leaders in their roles and welcoming a new chief medical officer (CMO) and chief nursing officer (CNO) this summer.

After 18 years of dedicated service as CMO for TIRR Memorial Hermann in the Texas Medical Center, Dr. Gerard Francisco will step down from this role, effective August 31. This transition reflects his desire to focus more fully on his academic and clinical leadership responsibilities with UTHouston, where he will continue to serve as chair of the Department of Physical Medicine and Rehabilitation and maintain his distinguished academic roles. Importantly, Dr. Francisco will also remain an active member of our medical staff, continuing to care for patients and contribute to our clinical community.

Dr. Francisco’s impact on TIRR Memorial Hermann has been profound: During his tenure, he helped shape the organization into a national leader in rehabilitation medicine. Personally, I feel privileged to have worked alongside Dr. Francisco, as my own role at TIRR Memorial Hermann evolved over the years. I have had the honor of seeing him in action, as an exceptional spasticity expert in the clinic and at the bedside, caring for patients and families. I have watched him serve as a dedicated teacher, not only to residents and fellows, but to our full interdisciplinary teams. I have stood beside him at conferences as he championed our physicians, and all that TIRR Memorial Hermann represents, in his role as CMO. I am so grateful that his care will continue for the patients we serve.

On September 1, we will welcome Dr. P. Jacob Joseph as the new CMO. Dr. Joseph joined our TIRR Memorial Hermann team nearly 20 years ago as a volunteer for the

Challenge Program, a rehabilitation group for those with traumatic brain injury. We are thrilled to welcome Dr. Joseph to begin the next phase of his TIRR Memorial Hermann journey and look forward to the future together.

Additionally, our TIRR Memorial Hermann team is also pleased to welcome Janelle Headley as our new CNO. Janelle has been a valued member of the Memorial Hermann family for 17 years, most recently providing steady leadership as interim CNO for Memorial Hermann-Texas Medical Center. She brings a strong track

record of leading complex nursing operations, advancing patient safety and building high-performing teams across multiple Service Lines. We are thrilled to welcome her and appreciate her interdisciplinary collaboration and deep commitment to our professional nursing practice.

As you’ll see in this issue of the TIRR Journal, this excellence is corroborated by our incredible team accomplishment of earning Magnet Recognition with Distinction™ from the American Nurses Credentialing Center (ANCC). For TIRR Memorial Hermann, this designation highlights how we continue to listen to the voices of our transdisciplinary care teams, including our nurses, to enhance patient care and the health of the community of people with disabilities.

This issue also profiles our role as a founding partner of the ReelAbilities film and arts festival in Houston, one of my favorite things to participate in, which includes a newly launched ReelCommunity Expo, held in May. Reaching further than awareness campaigns, ReelCommunity engaged with community organizations alongside founding partners Walk & Roll for SCI foundation and the Joan and Stanford Alexander Jewish Family Service to open its doors in 2025 as a pilot Expo concept, and expanded to reach even more of the community this year. The Expo event brought together over 200 people and partners, showcasing activities and resources available year-round to people of all ages, stages and abilities in our Houston neighborhoods and beyond. Free of charge, this accessible-in-all-ways and impactful experience clearly supports our mission at TIRR Memorial Hermann—to redefine rehabilitation, champion inclusion and offer hope as we improve health for generations to come.

With our strong new leaders on board and these meaningful recent accomplishments in motion, I can’t wait to see what TIRR Memorial Hermann redefines next!

Rhonda Abbott, PT, FACHE
Senior Vice President and CEO
TIRR Memorial Hermann

Limb Loss Program

TIRR Memorial Hermann Offers “Game-Changing” Procedure for Bilateral Limb Loss

TIRR Memorial Hermann has become a national leader in the use of osseointegration (OI), a novel approach that offers patients with limb loss an alternative to traditional, socket-based prosthetics, which can cause discomfort and be difficult to use.

The surgical procedure, in which patients are fitted with a bone-anchored prosthesis, is particularly beneficial for those with bilateral above-knee amputations.

“Osseointegration is an innovative technique that optimizes prosthetic fit and function, and it is a real game changer for some patients with limb loss,” says Vinay Vanodia, MD, medical director of the Amputee and Limb Loss Rehabilitation Program at TIRR Memorial Hermann. “It’s a bone-anchored prosthesis, which provides a more secure attachment to the body compared to traditional socket fits, eliminating the risk of it slipping off. Beyond improved comfort, bone-anchored prosthetics also enhance range of motion and allow for more natural gait and movement.”

Osseointegration, or direct percutaneous skeletal attachment, directly connects the prosthetic component to the patient’s skeleton, eliminating the need for a socket, which is one of the most challenging parts of fitting a prosthesis, according to Dr. Vanodia, who previously worked as a board-certified prosthetist, fabricating prosthetic limbs. Because the prosthesis is directly attached to the bone, patients also have osseoperception, meaning they can perceive, or “feel,” the surface they’re walking on, something they can’t do with standard prosthetics, he adds.

Although the technology used in socket-based prosthetic limbs has improved significantly in recent years, the socket still presents challenges for patients. “For example, in patients who have lost the lower portion of their leg, the remaining muscle and soft tissue or the residual limb is fitted into a hard carbon fiber shell known as the prosthetic socket,” Dr. Vanodia says. “If the patient experiences weight gain or loss, changes in volume or size of the limb can affect the fit and comfort of the prosthesis.”

Socket-based prosthetics can also be associated with skin breakdown, pain, instability and falls due to lack of user confidence, he adds. “These issues can lead to poor prosthesis compliance and a reduced quality of life,” Dr. Vanodia says.

As a result, a high percentage of patients with bilateral lower-extremity amputations rely on wheelchairs.¹

To date, surgeons affiliated with Memorial Hermann have performed more than 50 of these OI procedures, the majority in patients with single, above-knee limb loss or with transfemoral amputation. Although the benefits of OI are significant for these patients, according to Dr. Vanodia, those who undergo bilateral transfemoral amputations can see an even greater impact with the procedure.

“For bilateral transfemoral amputations, socket-based prosthetics present significant challenges,” he says. “These patients would require two rigid sockets extending into the groin region, which can place pressure on sensitive anatomical structures. Additionally, the sockets typically cover a significant portion of the skin, increasing the risk of skin irritation, rashes and wound development. As a result, this type of prosthetic design can be quite uncomfortable and may limit long-term tolerance and wear time.”

Houston real estate attorney Alex Weatherford, who was in his early 30s when he lost both legs above the knee in a 2014 plane crash, was one patient at TIRR Memorial Hermann who decided to forgo standard socket fit prosthetics—even after months of rehabilitation—and to use a wheelchair instead.



“The carbon fiber shells (sockets) that fit over your legs are big and bulky,” Weatherford recalls. “They’re hot on the skin and when you sweat, they lose suction and come off. I tried for a year and a half with the prostheses, but they weren’t for me.” However, after OI received U.S. Food and Drug Administration (FDA) approval in 2021, Weatherford and his care team at TIRR Memorial Hermann decided to give the novel approach a try in April 2021.

(continued on page 6)

OI procedures are performed in two stages. During Stage 1, a titanium implant is surgically inserted into the residual bone and allowed to heal as the bone integrates with the implant (osseointegration). After adequate healing has occurred, Stage 2 involves connecting another metal segment to the integrated implant that will pass through the skin, allowing direct attachment of the prosthesis to the skeletal implant. The surgeries are only the beginning of the OI process. Patients who opt for this approach typically undergo months of physical therapy and training, with the goal of gradually increasing weight-bearing through the osseointegrated implant.



For the first month of the training process, Weatherford used short training prostheses that lower the center of gravity to load the bone and muscles in a static position. At this stage, he would stand for 30 minutes on the short prostheses, beginning with 40 pounds of weight and moving up from there. The weight was adjusted with a mechanical patient lift, according to Dr. Vanodia.

After a month of training, Weatherford was able to switch to full-length prosthetics, but with the knee locked to assist with balance and stability. Subsequently, he began training on functional activities, including walking. Gradually, he

moved into traditional gait training on level surfaces, before adding stairs, ramps and more higher-level activities.

Now, five years later, Alex Weatherford is living life and is active, particularly with his four children. "It is such an amazing surgery," he says. "The first time I stood and straightened to my height, it was surreal."

The rehabilitation protocol used in Weatherford's case was developed at TIRR Memorial Hermann and is now used with all OI patients at the hospital: It has also been adopted by other centers across the country. In a study evaluating its efficacy, authored by Dr. Vanodia and the OI team, patients underwent an average of 16 rehabilitation sessions over a six-month period and showed significant improvements in Amputee Mobility Predictor (a measure of range of motion and function), Six-Minute Walk Tests and 10-meter fast-walk scores. All patients were walking after OI surgery.²

However, there are potential adverse events associated with OI, including an increased risk for infection. The devices also are not designed for high-impact scenarios, as this can lead



to bone fracture in the integrated limb. To date, Weatherford hasn't experienced any complications.

"Not many hospitals have a comprehensive limb loss program like we do at TIRR Memorial Hermann," Dr. Vanodia says. "Being able to offer OI surgery and rehabilitation through a continuum of care at Memorial Hermann is significant, particularly given the intense process of surgery and rehab, along with the psychosocial impacts of limb loss. The OI procedure has made such a big difference in the lives of many patients."

At Memorial Hermann Health System, we are on the forefront of the revolutionary osseointegration procedure. We are one of the only programs in the nation to combine this highly specialized amputee implant surgery with a nationally recognized, long-term rehabilitation program. Learn more at [memorialhermann.org/services/treatments/osseointegration-implant](https://www.memorialhermann.org/services/treatments/osseointegration-implant)

References

1. Leijendekkers RA, van Hinte G, Frölke JP, et al. Functional performance and safety of bone-anchored prostheses in persons with a transfemoral or transtibial amputation: a prospective one-year follow-up cohort study. *Clin Rehabil.* 2019;33(3):450-464.
2. Reeves K, Han S, Cao M, et al. A goal-directed rehabilitation protocol for people with transfemoral amputation receiving osseointegration prostheses. *PM R.* 2025;17(9):1026-1033.

Changing of the Guard - TIRR Memorial Hermann CMO Message



Throughout its nearly 70-year history, TIRR Memorial Hermann has had only four chief medical officers (CMOs) or medical directors. In September, when I officially transition from this role, which I have held for the past 18 years, P. Jacob Joseph, MD, currently our medical director for the international program, will become the hospital's fifth CMO.

This continuity, which is unique for any organization, particularly in health care, speaks to both the people serving in this leadership role and TIRR Memorial Hermann as an institution. All of the CMOs throughout our history have had one characteristic in common: They all were fully committed to the long-term future of TIRR Memorial Hermann.

Dr. Joseph has been with us since the beginning of his career in medicine. He is well acquainted with the "TIRR Memorial Hermann Way" and the important services our care teams provide for patients.

Although I am moving on from my role as CMO, I will remain committed to TIRR Memorial Hermann and our unique approach to care. This transition will allow me to have more clinic time, helping our patients recover, but—first and foremost—it will enable me to devote more energy toward research, which as one of the "Four Pillars" of our organization remains a key component of what we do here.

Thanks to a generous \$2.35 million grant from Houston's Mary H. Cain Foundation, I will be working with our Mission Connect research program for traumatic brain and spinal cord injury to explore innovative treatments for patients with stroke. Our hope is that this work will yield interventions that can be used here at TIRR Memorial Hermann sooner rather than later, changing the lives of patients affected by stroke.

This kind of potentially groundbreaking research epitomizes what everyone here is focused on—finding the best way forward for TIRR Memorial Hermann and our patients.

Dr. Joseph shares that focus, which is why I believe he is the perfect person to be our next CMO.

Thank you for the memories, collaboration and support over the years.

Sincerely,

Gerard E. Francisco, MD
Outgoing CMO
TIRR Memorial Hermann



I am excited to begin my new role as chief medical officer (CMO) at TIRR Memorial Hermann, following in the footsteps of my predecessor, Gerard Francisco, MD, an outstanding leader and clinician. It's important to note that Dr. Francisco will remain very much a part of the work we do here at TIRR

Memorial Hermann, as this transition will enable him to spend more time on groundbreaking research and vital patient care.

Indeed, as I take over Dr. Francisco's position, his are enormous shoes to fill; and I know this because my own history with TIRR Memorial Hermann dates back to the beginning of his tenure as CMO.

Back in 2006, as a recent graduate of McGovern Medical School at UTHealth Houston, I began working as a volunteer with TIRR Memorial Hermann's Strength Unlimited® program, an adaptive health and wellness initiative designed to provide an enriched environment for individuals to optimize their recovery and create a path for lifelong health.

I continued to volunteer with this program, even as I started studying at McGovern Medical School at UTHealth Houston, with plans to become a primary care physician. However, that volunteer work ultimately changed the course of my career, exposing me to the important work of physical and rehabilitation medicine specialists.

Seeing firsthand the critical, impactful work these specialists do gave me a new vocation and brought me to where I am today, serving in a leadership position at this incredible place.

Becoming the new CMO is a significant change, both for me and TIRR Memorial Hermann.

There are undoubtedly many challenges and opportunities ahead. Still, the future is bright. I am excited to be a part of what promises to be a time of continued growth and development, one that will see us continue to enhance the services we provide for our patients and their caregivers.

Thank you,

P. Jacob Joseph, MD
Incoming CMO
TIRR Memorial Hermann

Clinical Excellence



TIRR Memorial Hermann Achieves Magnet Recognition with Distinction™

TIRR Memorial Hermann has earned Magnet Recognition with Distinction™, a designation introduced in 2023 by the American Nurses Credentialing Center (ANCC) to identify the highest-performing Magnet organizations in the country. The ANCC is the largest nursing credentialing entity in the United States, and its Magnet Recognition Program identifies health care organizations around the world where nursing leadership has successfully connected strategic goals to measurable improvements in patient care. More than an accreditation, the program serves as a framework for building nursing excellence throughout an institution, with benefits that extend across every dimension of organizational performance.

To earn Magnet status, hospitals must demonstrate strong nursing practice, measurable patient outcomes and effective leadership. The Distinction tier sets a still higher bar, reserved for hospitals that exceed those standards. Of the thousands of hospitals that hold Magnet status, fewer than 1% have achieved this Distinction designation. This recognition places TIRR Memorial Hermann among an exceptionally small cohort of recognized institutions.

Earning Magnet status takes years of preparation and consistent excellence in care delivery. The ANCC evaluates hospitals through site visits, documentation reviews and surveys of staff and patients; recognition must be renewed every four years through the same rigorous process. It is a credential hospitals must continually re-earn to maintain their standing.

To attain Distinction, a hospital must sustain outstanding results across every measure over the full four-year period. It must also have an exemplar in Registered Nurse Engagement (demonstrating how bedside nurses, through shared governance, initiatives or leadership support, achieved measurable improvements in workplace culture, retention or patient care) or two exemplars in Patient Experience (documented, real-life stories and practices that demonstrate exceptional, compassionate care) based on composite scores, and two or more exemplars in Nursing-Sensitive Indicators (metrics reflecting the structure, process and outcomes of nursing care, directly influenced by nursing interventions). TIRR Memorial Hermann accomplished all of these, an achievement that highlights the consistent, exceptional care provided by its nurses.

For TIRR Memorial Hermann, this award represents more than an external honor: It is evidence of a culture built on collaboration, continuous improvement and an unwavering commitment to ensuring that nurses thrive and patients receive the highest quality of care. Innovation in nursing is essential for Magnet status, and there are many examples of nursing innovation being implemented at TIRR Memorial Hermann. For example, nurses and leaders have been testing artificial intelligence (AI) programs to enhance screening of patient referrals. Previously, nurse liaisons had to manually review and process extensive volumes of faxed medical records, often spanning hundreds of pages per case.

Now, the program that was developed at Memorial Hermann can create case summaries so nurses can quickly determine whether a patient qualifies for admission. The team has been assessing this tool for accurate performance, and its integration is now being evaluated to spot risk factors—such as likelihood of readmission to an acute care facility—so staff can prepare for a patient's needs before they arrive. The goal is to help patients start recovery as smoothly as possible.

The hospital also piloted virtual nursing technology using a robot interface for direct patient interaction. While the results were not a fit for TIRR Memorial Hermann's unique patient population, leadership considered the experiment a meaningful contribution to the field. Understanding which approaches do not work for a specialized rehabilitation population is itself valuable knowledge, both for the hospital and for the broader health care community.

For many staff, nursing at TIRR Memorial Hermann is not simply a career—it is a mission. As a rehabilitation hospital, our patient population is complex: Individuals recovering from severe injuries, neurologic events and major trauma all come to the institution seeking to improve their well-being. Many arrive facing some of the most difficult circumstances



of their lives. The nurses who choose to work with these patients often do so for deeply personal reasons, with some having had family members treated at the hospital and others bringing their own lived experience with rehabilitation to their work with patients. Long-tenured nurses, many with 10 or more years at the institution, had been working toward Magnet Recognition with Distinction™ for years. When the designation was announced, the team felt proud, moved and gratified to know that their compassion and dedication are recognized.

TIRR Memorial Hermann's path to Distinction has also been shaped by a deepening commitment to interdisciplinary collaboration. Unlike most acute care hospitals, roughly half of TIRR Memorial Hermann's clinical workforce consists of therapists who work alongside nurses. Hospital leadership has restructured councils, including the Professional Development Council and the evidence-based Practice and Quality Improvement Council, to bring nurses, therapists, pharmacists, neuropsychologists and others together in shared governance. The result is a care environment where every discipline has a voice in shaping quality and outcomes.

TIRR Memorial Hermann is the fourth hospital in the Memorial Hermann Health System to earn Magnet Recognition with Distinction™, along with Memorial Hermann The Woodlands Medical Center, Memorial Hermann Memorial City Medical Center and Memorial Hermann Cypress Hospital. The Magnet Recognition with Distinction™ formally documents what many TIRR Memorial Hermann nurses have known for years—that the care they provide is among the best in the nation.

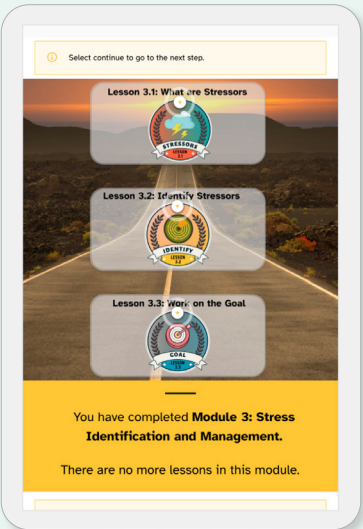


Research in Action

Groundbreaking Advancements in TBI treatments

An innovative digital support program for patients with traumatic brain injury (TBI), called Electronic Problem-Solving Training (ePST), represents a groundbreaking advancement in traumatic brain injury in TBI rehabilitation, offering accessible, evidence-based support for individuals navigating the cognitive, emotional and social challenges following brain injury. Developed through a community-based participatory research approach led by Shannon Juengst, PhD, CRC, at TIRR Memorial Hermann's Brain Health and Rehabilitation Research Center (BHRRC) in collaboration with Dr. Matthew Schmidt at the University of Georgia, ePST transforms traditional problem-solving training into a flexible digital format that can be accessed anytime, anywhere. The development process, which meaningfully engaged TBI survivors, care partners and clinicians through a 33-member Community Participatory Board, is detailed in a recent publication in the *Journal of Medical Internet Research*. Pilot study data demonstrate remarkable results: 94% of participants reported improved goal-setting and problem-solving abilities, with 88% experiencing enhanced mood after completing the intervention. Participants completed all online modules, rating the platform exceptionally high for usability and satisfaction. Whether used independently through self-guided modules or combined with coaching sessions in a hybrid approach, ePST breaks down traditional barriers to care by eliminating scheduling conflicts, reducing costs and providing stigma-free support when and where it's needed most.

Learn more about ePST at discoverePST.com or by emailing shannon.juengst@memorialhermann.org.





Photos by Hagit Bibi Photography

ReelCommunity Brings Inclusive Recreation to Greater Houston

TIRR Memorial Hermann joined the ReelAbilities Houston Film and Arts Festival and the Walk & Roll for SCI foundation in May to host the second annual ReelCommunity Expo, an event designed to connect people with disabilities and their families with inclusive recreation, arts and leisure opportunities that are available year-round across Greater Houston. More than 35 exhibitors were onsite and more than 200 people attended, surpassing the turnout from the 2025 inaugural event.

ReelAbilities Houston is a citywide festival celebrating the lives, talents and stories of people with disabilities through film, art and music, and TIRR Memorial Hermann served as its lead sponsor. ReelCommunity was developed as a hands-on companion event at the festival, enabling attendees to discover activities and resources in their communities. The Walk & Roll for SCI foundation, the sponsor of ReelCommunity, was founded by Jeffrey Feinstein, a former TIRR Memorial Hermann patient who had sustained a spinal cord injury in 2018, and his wife Alli. They identified a need for greater community inclusion for people with disabilities. Catherine Murray, rehabilitation director at TIRR Memorial Hermann, and Adele Henry, quality manager at TIRR Memorial Hermann, served as co-chairs of the event alongside Feinstein.

An Expo for Everyone

ReelCommunity is open to everyone, regardless of ability, and welcomes attendees with physical, cognitive and sensory disabilities along with their families, friends and caregivers. The Expo format sets it apart from a traditional resource fair; in addition to informational booths, the event brings together community partners, nonprofits and recreational organizations in one space where people can physically engage with activities and try out new equipment. For the 2026 event, the organizers engaged The Zone, a facility with three full-size basketball courts. One court hosted the community partners, and the others were dedicated to hands-on activities, including inclusive pickleball, lacrosse and fencing, with sports chairs available so able-bodied attendees could participate from a wheelchair.

"The intent is to allow people to learn about what all these opportunities are, so that they can go do things with their loved ones, their family, their friends, and not feel like they have to go to a special place with special equipment to do an activity," Murray said.

Community partners at the 2026 event represented a wide range of interests. For example, the Texas Parks and Wildlife Department brought a live baby alligator and shared information about the agency's adaptive wheelchairs, which are available free of charge at Brazos Bend State Park and other Texas state parks. Ability Skateboarding offered an inclusive skateboard for attendees to try. The Houston Railroad Museum provided a tactile play experience accessible to children with visual impairments. The Hobby Center for the Performing Arts showcased its sensory-friendly performance offerings, and the Lincoln Leaders Foundation presented its structured career development cohorts for individuals with disabilities. Several participating organizations were founded by former TIRR Memorial Hermann patients, including foundations focused on spinal cord and brain injuries. James Coney Island donated food for the event, and Rita's Italian Ice contributed a portion of its proceeds.

"One of my favorite stories from this event is about Angel Ponce, the director for the Houston Office for People with Disabilities," Adele Henry recalled. "He has used a wheelchair since sustaining a spinal cord injury, and last year came to our event. He had never played pickleball in his life, and we volunteered him to play pickleball, so he played with his fiancée. Then this year, he served at a table for the Office for People with Disabilities, and he was leaving early. I said, 'Angel, where are you going?' And his fiancée said, 'We've got to go; we're meeting our friends at Chicken N Pickle in Webster to play pickleball!' It was a very full-circle moment—just 100% the purpose of the event."

Year-Over-Year Growth

In its first year, ReelCommunity was co-located with another ReelAbilities event in a more constrained space. Moving to The Zone facility this year enabled the organizers to significantly expand programming.

The 2026 event drew a greater proportion of individuals with disabilities and their family members and friends who came

to learn alongside them. Patients being treated at TIRR Memorial Hermann also went on an outing to visit the event.

Connections That Continue

Some of the most meaningful outcomes of ReelCommunity have extended beyond the event. For example, after meeting at the 2026 Expo, Walk & Roll for SCI foundation and Bee Abled, a local peer connection group, began collaborating, leading

Walk & Roll for SCI to fund a portion of Bee Abled's summer programming.

The ReelCommunity organizers plan to return to The Zone for a third Expo and hope to expand educational programming on topics such as accessible travel and job readiness.

Their goal remains the same as when the event was first conceived—to help people discover that their city has more to offer than they may have realized, and to make community participation feel not just possible, but routine.

Advocacy

Advocating for Equity: Bridging the Gap in Inpatient Rehabilitation Access

A new study published in *Neurology® Open Access*, led by Farhaan S. Vahidy, PhD, MBBS, chief scientific officer at TIRR Memorial Hermann, shines a critical light on the inconsistent and often inequitable landscape of access to care at inpatient rehabilitation facilities (IRFs). The findings reveal significant barriers to recovery for brain injury and stroke patients, with fewer than one in four stroke survivors and fewer than one in seven traumatic brain injury survivors being discharged to inpatient rehabilitation facilities.

"Receiving intensive rehabilitation after stroke, traumatic brain injury and spinal cord injury can improve a person's recovery, yet access to inpatient rehabilitation care remains inconsistent and may not be equitable," said Dr. Vahidy.

The analysis of 444,908 people in five states with stroke, traumatic brain injury or spinal cord injury found:

- 22% were sent to inpatient rehabilitation
- 26% went to skilled nursing facilities
- 54% were discharged home

After adjusting for factors such as insurance, a person's home residence and health factors like high blood pressure and diabetes, researchers found the following differences in being discharged to an inpatient rehabilitation facility versus discharged to home:

- Older people (average age of 75) had a 4% higher rate than younger people (average age of 63)
- Female participants had a 19% higher rate than male participants



- Black people had a 29% higher rate than white people
- Hispanic people had a 22% lower rate compared to white individuals

Beyond the overall low admission rates for inpatient rehabilitation care, the study uncovered stark disparities in access based on sex, race, insurance coverage and income level. Furthermore, systemic barriers tied to insurance types and neighborhood income levels further dictate who receives this intensive level of care. To improve long-term outcomes and establish more consistent care, the authors advocate for more equitable access to inpatient rehabilitation and call for future research specifically designed to identify and eliminate these systemic disparities.

These findings serve as a powerful reminder that clinical excellence alone is not enough. At TIRR Memorial Hermann, this research directly fuels our enduring commitment to patient advocacy and equitable health care delivery. Because many individuals face systemic barriers that prevent them from ever reaching our facilities, we recognize a deep responsibility to provide care, education and support beyond our hospital boundaries through research, advocacy and strong inclusive community programs.

Our vision is to change lives by redefining rehabilitation, championing inclusion and offering hope to all who need our care.



1333 Moursund
Houston, TX 77030
memorialhermann.org/TIRR

Nonprofit Org.
U.S. POSTAGE
PAID Permit
No. 3156
Houston, TX

TIRR Memorial Hermann Journal is published throughout the year by TIRR Memorial Hermann. Please direct your comments or suggestions to:

Editor,

TIRR Memorial Hermann Journal
TIRR Memorial Hermann
1333 Moursund, Houston, TX 77030
tirrcommunications@memorialhermann.org

Rhonda Abbott, PT, FTPTA
Senior Vice President, CEO

Gerard E. Francisco, MD
Chief Medical Officer

Farhaan S. Vahidy, PhD, MBBS, MPH, FAHA
Associate Vice President for Research and Chief Scientific Officer

Elisa Lange, MBA
Editor

McMahon Custom Healthcare Marketing
Writer

Material in this publication may not be reproduced in whole or part without permission from TIRR Memorial Hermann.

Vol. 2, Summer 2026

About TIRR Memorial Hermann

Founded in 1959, TIRR Memorial Hermann is a not-for-profit rehabilitation hospital serving the needs of adults and pediatric patients who have sustained life-altering injuries or illnesses. TIRR Memorial Hermann is located in Houston, Texas, in the Texas Medical Center and is known for its excellence in research and treatment for traumatic brain injury, stroke, spinal cord injury, amputations, cancer rehabilitation and other neurological diseases and disorders. The highly trained rehabilitation teams see the potential in every person they work with and develop that potential to the fullest by offering advanced treatments and personalized care. Additionally, the Memorial Hermann Rehabilitation Network, affiliated with TIRR Memorial Hermann, includes two inpatient rehabilitation hospitals, five inpatient rehabilitation units within the Memorial Hermann Health System, 10 outpatient rehabilitation centers and one outpatient medical clinic. For more than 36 years, TIRR Memorial Hermann has been recognized among America's best rehabilitation hospitals according to *U.S. News and World Report*.

Learn more at memorialhermann.org/TIRR.

To make referrals or schedule an appointment, call 800.44REHAB (800.447.3422) toll-free or 713.797.5942, or fax 713.797.5988.

TIRR is a registered trademark of TIRR Foundation.