

Innovative Rehabilitation Services
Market Analysis Report

Prepared For:

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This report has been created to give potential clients an opportunity to review an example of the type of research report produced by Management Decisions Incorporated (MDI). For purposes of presentation, it represents a fictitious account of a market analysis. MDI conducts many other types of research.

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Executive Summary

Spellman Advertising requested the assistance of Management Decisions Inc. (MDI) in measuring market awareness and evaluations of *Innovative Rehabilitation Services*, a rehabilitation clinic in the Brookdale Metro Area. Separate samples of past, current and potential clients handling work rehabilitation cases were interviewed by telephone in November and December of 1996. They included rehabilitation nurses; insurance nurses and representatives; Visionary Industrial Park managers; and managers of other Lincoln County industrial firms with at least 50 employees.

In general, the work rehabilitation market is diverse and one's occupation determines referral patterns to clinics. Reliance on currently-used facilities appears strong as top-of-mind awareness of alternatives is generally lacking. The perceptions, evaluations and use of rehab clinics are strongly tied to the positions held by those handling clients and referrals. Clinics utilized by rehab nurses and insurance nurses / reps are significantly different from those used by Visionary Industrial Park managers and other Lincoln County industry managers.

Despite differences, almost all respondents consider the quality of care provided, the timeliness of communication with the facility, the speed of recovery, timeliness of appointments, and clinic hours to be important. Most of their clients or cases also need flexibility, strength and conditioning services and acute, physical and occupational therapy. Additionally, most require functional capacity evaluations and work hardening-conditioning programs.

Innovative Rehabilitation is neither prominent in the marketplace nor clearly-differentiated in respondents' minds. Few have used its services or mention it in unaided fashion as a work rehab center. However, given substantial aided awareness of the facility, over half of all respondents have a general impression of it. A very large proportion are not certain of *Innovative Rehabilitation's* qualities, given their cursory knowledge or minimal contact with the facility.

Awareness of *Innovative Rehabilitation* is tied to experience with rehab cases; client rehab needs; and practitioner perceptions of what are important in choosing a clinic. Those most involved in rehab cases---rehab nurses and insurance nurses / reps---are most aware of *Innovative Rehabilitation* and its affiliation with Chambers Memorial Hospital. Both groups also assign slightly higher assessments to *Innovative Rehabilitation* than to clinics as a whole. Those most aware are very pleased with its staff, quality of care, physical facility and location.

Project Objectives

Based on 125 interviews with past, current and potential clients, this study provides comprehensive information on awareness, use and evaluation of *Innovative Rehabilitation Services*. Additionally, information was collected, including awareness and usage data on competitors. In this way, this report provides helpful market information for future planning purposes.

The following objectives will be met through the research:

1. To measure clients' awareness and use of *Innovative Rehabilitation's* services
2. To determine which work rehabilitation clinics currently serve area employees and clients
3. To understand service needs and preferences in handling rehab cases
4. To uncover any difficulties that they have with *Innovative Rehabilitation's* image and services
5. To gauge the effectiveness of local rehab clinics, and those factors that best explain or predict effectiveness
6. To provide a benchmark for tracking changes in client perceptions, attitudes and behavior in the future

Findings at a Glance

1. Many clinics and facilities in the metro area are used for worker rehabilitation. There is no clear market leader among all respondents. The largest proportion of patients are sent to St. Benedict's Medical Center; Prosystems; OmniCare; Mercy Hospital; and Valley View Clinic.
2. A clear referral pattern exists by occupation. Three of every five rehab nurses and four-fifths of insurance nurses / reps sent their patients / clients to OmniCare or to St. Benedict's Medical Center over the past two years. On the other hand, three-fifths of Industrial Park managers have sent their cases to Prosystems or Valley View Clinic. Respondents differ in their experience with work rehabilitation, with rehab nurses and insurance nurses and reps the most familiar with such cases.
3. When asked about area clinics providing work rehab services other than those they use, more than half cannot mention another clinic or facility.
4. Respondents agree on those factors affecting where a client or patient is sent for treatment. When asked to evaluate 20 different items, almost all mention as important the quality of care provided, the timeliness of communication with the facility, the speed of recovery, timeliness of appointments, and clinic hours.
5. Fewer rehab nurses than other respondents feel that physicians' recommendations and the speed of recovery are as important in choosing a clinic; cost and a facility's accreditation are more important to insurance nurses or reps than to others; and convenience of hours and prevention programs are more important (and personal contact with staff less important) to industry managers than to other groups. Additionally, Industrial Park managers are six times more likely than insurance reps to consider one-on-one vocational services to be important, and almost all of them consider the quality of the physical facility to be important.
6. About three-quarters of rehab nurses; half of insurance nurses / reps; over two-fifths of Industrial Park managers; and one-third of other Lincoln County firms consider the provision of services "on site" to be important.
7. Most work rehab clients need flexibility, strength and conditioning services and acute, physical and occupational therapy. Most usually require functional capacity evaluations and work hardening and conditioning programs. Half need hand therapy, two-fifths require injury prevention and education programs, and one-quarter necessitate job site evaluations. Vocational and psychological services are not typically-needed services.

8. Few have ever used *Innovative Rehabilitation's* services and even fewer mention it in "top-of-mind," unaided fashion as a work rehab center. However, after including those aware of the facility in aided fashion, over half are aware of its existence.
9. The highest ratings assigned to *Innovative Rehabilitation* are personal attention by its staff; friendly, courteous employees; the quality of care; its physical facility; its location; and their past experience with them. However, a very large proportion are not certain of *Innovative Rehabilitation's* qualities, given their superficial knowledge or contact with the facility. As expected, the groups most aware of *Innovative Rehabilitation*---rehab nurses and insurance nurses and reps---give the highest proportion of positive ratings to its services.
10. Half of rehab nurses, two-fifths of insurance nurses/reps, one-in-seven Industrial Park managers, and one-in-seventeen Lincoln County industrial managers are aware of its affiliation with Chambers Memorial Hospital.
11. Five factors appear to significantly influence awareness of *Innovative Rehabilitation* in their order of significance: (a) The number of rehab cases one has in a given month; (b) The fact that their clients typically need acute, physical and occupational therapy; (c) The importance of location in choosing a clinic; (d) The importance of having personal staff contact in choosing a clinic; and (e) The importance of a physicians' recommendation in using a clinic.
12. Overall, respondents give an "average rating of effectiveness" to area rehab centers as a whole. Those aware of *Innovative Rehabilitation* assign it a higher but still average rating. Rehab nurses and insurance reps assign slightly higher assessments to *Innovative Rehabilitation* than to clinics as a whole. They also give a greater proportion of "high effectiveness ratings" to *Innovative Rehabilitation* than to all area clinics.

Conclusions and Recommendations

The data analysis in this report yields three major conclusions that hold implications for future marketing and communication efforts. They do not reflect the local rehabilitation market as a whole but only findings among those chosen as respondents for this study. *First, the work rehabilitation market is diverse with no dominant clinics, unless one examines usage patterns by occupation.* However, some rehab centers appear to benefit from their association with or from their inclusion in hospitals with specific reputations. Loyalty to currently-used centers appears strong, reflected in the lack of top-of-mind awareness of alternatives.

Second, perceptions, evaluations and use of clinics is strongly tied to the occupational positions of those handling rehab clients and referrals. Generally, rehabilitation nurses and insurance nurses / reps are most involved with rehab cases. They utilize clinics that are different from those used by Visionary Industrial Park managers and other Lincoln County industry managers.

Almost all respondent groups consider the quality of care provided, the timeliness of communication with the facility, the speed of recovery, timeliness of appointments, and clinic hours as important. Most work rehab clients need flexibility, strength and conditioning services as well as acute, physical and occupational therapy. Most usually require functional capacity evaluations and work hardening-conditioning programs. However, rehab nurses and insurance nurses / reps are more likely than industry managers to consider the provision of services "on site" to be important.

Third, Innovative Rehabilitation holds neither a prominent nor a clearly differentiated image in respondents' minds. Few have used its services or mention it in unaided fashion as a work rehab center. However, if one includes those aware of the facility in aided fashion, over half have a general and undifferentiated impression of it. That view is reflected in the similar ratings for *Innovative Rehabilitation* and for all area clinics as a whole. Awareness of *Innovative Rehabilitation* is tied to one's experience with rehab cases; one's client rehab needs; and with practitioner perceptions of what is important in choosing a clinic.

A very large proportion of respondents are not certain of *Innovative Rehabilitation's* qualities, given their casual knowledge and contact with the facility. However, those most aware of the facility appear to be very pleased with its staff; quality of care; physical facility; and location. Those respondents most involved in rehab cases are most aware of *Innovative Rehabilitation* and its affiliation with Chambers Memorial Hospital---rehab nurses and insurance nurses / reps. Both groups also assign slightly higher assessments to *Innovative Rehabilitation* than to clinics as a whole.

2) Target Marketing & Advertising Recommendations

The above conclusions about *Innovative Rehabilitation* are the basis for the following recommendations concerning future marketing and advertising efforts. Special attention is given to

developing a communications strategy that meets at least four objectives: (a) to increase "top-of-mind" name and brand awareness among both those actively involved in work rehab cases and those firms geographically close to a clinic site; (b) to build upon those qualities of *Innovative Rehabilitation* that differentiate it from its competitors; (c) to strengthen ties with existing referrals and to actively cultivate new ones, especially those in close proximity with a clinic site; and (d) to enhance internal record-keeping to chart or track changes in awareness, image and usage over time, including the effectiveness of future marketing or advertising campaigns. The success of these strategies depends largely on the availability of resources for such efforts.

Based on this project's findings, *Innovative Rehabilitation* might tailor its marketing messages to specific target groups' needs in a rehab clinic. Basic differences in perceptions, experience and need appear between nurses and industry managers. Direct or hands-on contact---e.g., through monthly meetings of AIRN, open houses for area industry managers, or presentations at meetings of state professional associations---is especially important for increasing personal contacts with relevant staff.

Personalizing mail contacts with targeted client groups may serve to increase awareness among physicians, rehab nurses, local safety managers and others handling cases and referring clients. However, *Innovative Rehabilitation's* current lists of work rehabilitation professionals should be updated and expanded to better reach their target population for marketing and advertising purposes. Difficulties in reaching the right contact person for this project's data collection reflect a rather serious problem with existing lists.

Differentiating *Innovative Rehabilitation* from other alternatives may demand greater and more consistent exposure to unique messages gleaned from project data. Billboards could draw upon both common themes in worker rehabilitation cases as well as the unique ways that *Innovative Rehabilitation* can meet client needs. Similarly, ads in trade magazines or newsletters as well as poster art and other graphic presentations can help reach targeted rehab workers and managers, offering another good way to distinguish *Innovative Rehabilitation* from area clinics.

The tracking of future marketing campaigns requires the thorough recording of all leads, requests for information, referrals, contacts, and responses over time. Each communication strategy might be assessed in terms of its effectiveness at soliciting new business. Additionally, replicating this research study, after new marketing strategies have been implemented, would give *Innovative Rehabilitation* a good indication of their relative success.

Methodology

This study examines the awareness, attitudes and behavior of four different groups concerning *Innovative Rehabilitation*. Data were collected among 125 past, current and potential clients in November and December of 1996. They include 43 metro area rehab nurses; 10 insurance representatives; 39 Visionary Industrial Park managers; and 33 Lincoln County (Huntwood and other Visionary) firms of at least 50 employees involving heavy manual labor. At all companies, the person most involved in work rehabilitation cases was asked to answer a series of questions about work rehab clinics, including *Innovative Rehabilitation* and its competitors.

Sample lists for telephone interviewing were provided by *Spellman Advertising* and *Innovative Rehabilitation*. The research process for this study included questionnaire construction, refinement and testing; data collection, data analysis; and report-writing.

Data Collection

This study collected data among the four respondent groups over a five-week period. The quality of the sampling frame or respondent lists determined the proportion that were eventually contacted and interviewed. Of 20 insurance nurses / representatives, 10 were contacted and interviewed. Of 101 non-duplicated rehab nurse listings, 43 were eventually interviewed. Thirty-nine of 68 Visionary Industrial Park managers were interviewed and 33 of 70 other Lincoln County (Huntwood and Visionary) industrial managers were interviewed. The first two groups are current members of Association of Insurance and Rehabilitation for Nurses (AIRN) located in the Brookdale Metro Area.

Data collection occurred two-to-three months after the September membership meeting of AIRN held at *Innovative Rehabilitation's* clinic in Visionary. *This meeting is likely to have affected awareness and evaluation ratings among these two groups.*

All telephone interviewing was conducted from *MDI's* central telephone facilities in Milwaukee, affording greater supervision and control over the data collection process. Interviewers were briefed in a training meeting prior to data collection. A practice session was held, with each interviewer conducting several interviews before the start of the study. This increased their comfort level with the research instrument. See Appendix B in this report for a copy of the project questionnaire.

During the actual interviewing, completed interviews were reviewed by a supervisor to guarantee completeness and accuracy. When necessary, interviewers were rebriefed to maintain consistency. Fifteen percent of each interviewer's work was monitored by staff to insure that the data collection took place in accordance with the instructions given. Monitoring took place by listening to actual on-line telephone conversations without the respondent or interviewer aware that anyone was on-line.

Data Analysis

The project involved the interviewing of a pre-selected census of all respondents who are members of professional organizations or are located in the same geographic area as the main clinic. Therefore, conventional statistical testing, which assumes data are drawn through random sampling, is not undertaken as the reported statistics reflect actual differences in the total population.

Data analysis for this report includes the evaluation of frequency distributions, and bivariate and trivariate tables. To uncover patterns in the data while examining many variables at the same time, multivariate techniques are used. For instance, regression analyses are conducted to predict those factors that account for evaluations of rehabilitation facilities in the local metro area. Factor analyses are used to reduce attitudinal and evaluation data to a series of manageable dimensions. Multiple discriminant analyses yield those factors that best differentiate between two or more groups, including aware and unaware respondents.

Random Sampling & Error

Sampling error is not a methodological issue in a study of total populations of clients. However, conducting any telephone survey introduces sources of potential error other than sampling error. For example, "response errors" can include such things as respondent quality (e.g., lack of interest, fatigue or honesty) and the consistency of meaning between the questions asked and answers received. In addition, "non-response error," or the extent to which the answers of those not interviewed on the sample list vary from those contacted and interviewed, is always an important issue.

Management Decisions Inc. deals with response error by pre-testing all questions for accuracy and consistency of meaning as well as by asking for better times to call respondents back, if they lack the time to answer questions. Non-response error is addressed by restricting the size of the sample list used for interviewing and conducting up to four callbacks to each number, thereby increasing the overall response rate. The response rate was 43% of all AIRN-member rehab nurses, 50% of all AIRN-member insurance nurses or representatives, 57% of all Visionary Industrial Park managers, and 47% of all managers of industrial firms in Huntwood and Visionary with 50 or more employees.

Interpretation of Tables

The reader should be aware of a number of important qualifications in reading and interpreting percentages that appear in this report. First, the small number of completed interviews for the various subgroups means that relatively small changes may make substantial differences in reported percentages (e.g., 7 of 10 vs. 9 of 10 insurance reps responding to a question in a certain way is represented as a 20% difference). Consequently, the subsample size (N=) is noted in charts appearing in this report to place these proportions in context. Second, when reading the data tables in Appendix A, the symbol "(%)" is used to refer to a subset of a preceding item. The symbol "((%))" refers to a subset of a preceding subset. Detailed banner tables were included under separate cover to provide more in-depth information on responses to specific questionnaire items.

Detailed Findings

Respondent Profiles

Four different groups of respondents were interviewed for this research project. They are metro area rehab nurses; insurance nurses and representatives; Visionary Industrial Park managers; and managers of other Lincoln County firms with at least 50 employees and involving heavy manual labor. They differ in their demographic and other background characteristics and hold many different job titles, even though all are involved at some level with work rehabilitation cases. Exhibit 1 on the next page presents the total distribution of project respondents.

As a whole, three-quarters are female and three-fifths are 40 years of age or older. Almost three-quarters work in Lincoln County communities. They hold 30 different job titles, although one-third are either case managers, human resource managers or personnel managers. About three-fifths have been in their current position for five years or less and over half have dealt with worker rehabilitation for more than five years.

The following chart provides a comparison of the four client groups on a set of demographic and other background characteristics:

	<i>Rehab Nurses</i> (N= 43)	<i>Insurance Nurses / Reps</i> (N=10)	<i>Visionary Ind. Park Mgrs.</i> (N= 39)	<i>Linc. Co. Firm Mgrs.</i> (N= 33)
-Female	86%	90%	56%	76%
<u>Age</u>				
-39 or Younger	47%	30%	41%	36%
-40-49 Years Old	33%	60%	41%	36%
-50 or Older	14%	10%	18%	24%
<u>Most Common Job Titles</u>				
-Case Manager	42%	50%	---	---
-Human Resource/Personnel Mgr.	2%	---	28%	27%
-Office manager	---	---	8%	15%
-Secretary	---	---	5%	12%
-Manager	2%	---	8%	6%
-Health/Safety Coordinator	2%	---	10%	3%
-Controller	---	---	3%	12%
-Payroll Mgr/Accounts Sup.	---	10%	3%	9%
-Nurse Consultant	7%	10%	---	---
-Occu. Health Consultant	7%	---	---	---

	<i>Rehab Nurses</i> (N= 43)	<i>Insurance Nurses/Reps</i> (N=10)	<i>Visionary Ind. Park Mgrs.</i> (N= 39)	<i>Linc. Co. Firm Mgrs.</i> (N= 33)
Average Years in Position	4	6	7	7
Have Influence on Where Rehab Services Are Received	88%	90%	90%	61%
Average Years in Work Rehab	8	9	8	9

All four groups are predominantly female, especially rehab and insurance nurses / reps. Rehab nurses are slightly younger than the other groups. A plurality of both rehab nurses and insurance nurses/reps are case managers; a plurality of industrial park and other firm representatives are human resource or personnel managers.

Rehab nurses have been in their present position the shortest period of time, although the four groups average 8-9 years of experience in worker rehabilitation. Nine of ten rehab nurses, insurance nurses / reps and Industrial Park managers have at least some influence on where rehab services are received; three-fifths of other Lincoln County firms' managers have at least some influence. Differences in influence partly reflect the fact that some respondents interpret their jobs as "processing cases and claims" while the actual choice of facility is left to others, including physicians and insurance companies.

Despite the similarity of years spent on cases, respondents have different degrees of experience with worker rehabilitation. Rehab nurses and insurance nurses / reps are the most familiar with such cases. The following chart depicts differences between groups in their working with rehab clinics, including the much greater experience of rehab nurses and insurance nurses / reps on a weekly, monthly and yearly basis:

	<i>Rehab Nurses</i> (N= 43)	<i>Insurance Nurses/Reps</i> (N=10)	<i>Visionary Ind. Park Mgrs.</i> (N= 39)	<i>Linc. Co. Firm Mgrs.</i> (N= 33)
Work on Cases At Least Once a Week	56%	60%	3%	---
Work on Cases At Least Once a Month	72%	80%	21%	6%
Work on Cases At Least Once a Year	86%	90%	90%	67%
Mean No. of Rehab Cases Handled in Past Month	21	47	1	1

See Table 1 in Appendix A for respondents' background characteristics.

Local Work Rehabilitation Centers

Organizations with work rehab cases have sent their claimants to a wide variety of clinics and facilities in the metro area over the past two years. Almost 50 separate centers are mentioned, or (on average) about 2 per respondent. As a result, no one center predominates in the market. Among all respondents' cases, the largest proportion are sent to St. Benedict's Medical Center (16%); Prosystems (15%); OmniCare (14%); Mercy Hospital (9%) and Valley View Clinic (9%).

The following chart provides comparisons of rehab center usage over the past two years among the four different respondent groups:

	<u>Rehab Nurses</u> (N= 43)	<u>Insurance Nurses/Reps</u> (N= 10)	<u>Visionary Ind. Park Mgrs.</u> (N= 39)	<u>Linc. Co. Firm Mgrs.</u> (N= 33)
-Innovative Rehabilitation	9%	20%	3%	---
-OmniCare	33%	20%	3%	---
-Prosystems	2%	---	36%	12%
-Oceanview (<i>Sports Med. Inst.</i>)				
-St. Benedict's Medical Center	28%	60%	5%	---
-Southwest Rehabilitation Services				
-St. James Hospital (<i>Sports Medicine & Knee Surg. Ctr.</i>)	12%	10%	---	---
-Chambers Memorial Hospital				
-Mercy Hospital	21%	10%	---	3%
-Valley View Clinic	---	---	23%	6%
-Simplicity Rehabilitation	16%	10%	---	3%
-Holy Cross	12%	20%	---	---
-Humphrey Hospital	5%	10%	---	9%
-Marshall Memorial	14%	---	---	---
-Not Sure	5%	10%	5%	21%
-None	---	---	23%	24%

Three of five rehab nurses and four-fifths of the insurance nurses / reps sent their patients or clients to OmniCare or to St Benedict's Medical Center over the past two years. Three-fifths of Industrial Park managers have sent their cases to Prosystems or Valley View Clinic. Reflecting their less influence in such cases, almost half of other Lincoln County firms' managers either have not had any cases over the past two years or do not know where employees are sent.

When asked about area clinics providing work rehab services that they have not used, over half (53%) cannot mention one. Greatest awareness is found for Simplicity Rehabilitation (8%), St. Benedict's Medical Center (6%), and Mercy Hospital (5%).

The following chart compares the unaided awareness of different work rehab centers among the four respondent groups, other than the one(s) they had used in the past two years:

	<u>Rehab Nurses</u> (N= 43)	<u>Insurance Nurses/Reps</u> (N=10)	<u>Visionary Ind. Park Mgrs.</u> (N= 39)	<u>Linc. Co. Firm Mgrs.</u> (N= 33)
- <i>Innovative Rehabilitation</i>	5%	----	3%	---
-OmniCare	5%	---	8%	---
-Prosystems	---	---	8%	3%
-Oceanview (Sports Med. Inst.)	5%	---	---	3%
-Lincoln Memorial Hospital	2%	10%	5%	---
-Simplicity Rehabilitation	9%	10%	10%	3%
-St. Benedict's Medical Center	9%	---	8%	---
-Mercy Hospital	9%	10%	3%	---
-Marshall Memorial Hospital	5%	10%	---	6%
-Lowry Hospital	9%	---	---	---
-None	53%	40%	54%	73%
Have Heard of <i>Innovative Rehabilitation</i>	84%	88%	38%	9%

The most striking findings are the large proportion of all four groups that cannot mention any other facilities than those they have used, and the great aided awareness of *Innovative Rehabilitation* among rehab nurses and insurance nurses/ reps (and lack of aided awareness among industrial park and other Lincoln County managers). As noted in the Methodology section above, awareness levels may reflect the recent AIRN meeting held at *Innovative Rehabilitation*. See Table 2 in Appendix A for a breakdown of client awareness and use of local rehab centers.

Exhibit 2 on the next page provides a *composite appraisal* of the awareness and usage of various facilities providing worker rehabilitation services. St. Benedict's, Prosystems and OmniCare are market leaders. Eight percent use or are aware of *Innovative Rehabilitation*.

Exhibit 3 on the succeeding pages compares the differences in awareness and use among nurses (both rehab and insurance ones) and industry managers (at Visionary Industrial Park and Lincoln County firms).

Factors In Choosing a Rehab Clinic

Despite important differences in experience, respondents express a strong consensus on those factors affecting where a client or patient is sent for treatment. When asked to evaluate 20 different items, almost all mention the quality of care provided and the timeliness of communication with the rehab facility as important. Seven of eight note the speed of recovery, timeliness of appointments, and clinic hours as important.

When considering only those items mentioned as "very important," the top-rated factors remain quality of care provided, the timeliness of communication, and the speed of patient recovery, with close consultation with the case manager and the timeliness of scheduled appointments rounding out the five highest-scoring items.

Least important factors in choosing a facility are their advertising or mailings (mentioned as important by 6%), their counseling services (mentioned by one-third), and vocational services (noted by two-fifths).

Exhibits 4 and 5 on the succeeding pages present the most and least important reasons for choosing a work rehab facility. Exhibits 6 and 7 compare nurses and industrial firm managers on these same reasons.

A multivariate statistical technique called "factor analysis" was performed on the 20 items to determine the underlying dimensions or factors in the data. Four separate dimensions emerge: *Professional Feedback*; *Cost and Convenience*; *Quality Care*; and *Secondary Services*. The following chart portrays the proportion of each groups' rating of a reason as important:

	<i>Rehab Nurses (N= 43)</i>	<i>Insurance Nurses/Reps (N=10)</i>	<i>Visionary Ind. Park Mgrs. (N= 39)</i>	<i>Linc. Co. Firm Mgrs. (N= 33)</i>
<i>A. Professional Feedback:</i>				
-Physician's recommendation	49%	80%	90%	82%
<i>B. Cost & Convenience:</i>				
-Timeliness of scheduled appointments	86%	80%	90%	91%
-Convenience of their location	65%	70%	82%	82%
-Cost of services	72%	100%	80%	76%
-Convenience of clinic hours	77%	70%	95%	94%

	<u>Rehab Nurses</u> (N= 43)	<u>Insurance Nurses/Reps</u> (N=10)	<u>Visionary Ind. Park Mgrs.</u> (N= 39)	<u>Linc. Co. Firm Mgrs.</u> (N= 33)
<i>C. Quality Care:</i>				
-Friendly, courteous employees	79%	90%	82%	85%
-Quality of care provided	93%	100%	100%	94%
-The speed of patient recovery	74%	100%	95%	94%
-Your past experience with them	79%	90%	77%	70%
-Personal contact with their staff	84%	90%	77%	61%
-The range of services & specialists	74%	80%	85%	85%
-Timeliness of communication	93%	100%	97%	88%
-Their accreditation by the national Commission for the Accreditation of Rehab Facilities (CARF)	63%	90%	59%	70%
-Quality of the physical facility	63%	60%	95%	70%
-Close consultation with the case manager	79%	90%	90%	70%
<i>D. Secondary Services:</i>				
-Their mailings & advertising	5%	---	10%	6%
-Their injury prevention programs	47%	30%	59%	76%
-Availability of psych. counseling services	26%	30%	39%	42%
-Availability of one-on-one voc. services	30%	10%	59%	34%
-Quality of the job site evaluations	63%	50%	72%	61%
Important to Provide Service on Site	72%	50%	44%	33%

The data suggest that fewer rehab nurses than other respondents feel that physicians' recommendations or the speed of recovery are important; cost and a facility's accreditation is more important to insurance nurses / reps than others; and the convenience of clinic hours and prevention programs are more important (and personal contact with staff less important) to industry managers than to other groups. In addition, Industrial Park managers are six times more likely than insurance reps to consider one-on-one vocational services to be important, and almost all of them consider the quality of the physical facility to be salient.

Differences are especially evident when considering the importance of providing services "on site": about three-quarters of rehab nurses; half of insurance nurses / reps; over two-fifths of Industrial Park managers; and one-third of other Lincoln County firms' managers consider it important to do so.

Table 3 in Appendix A provide information on the reasons for choosing a center for client rehab cases.

Needed & Preferred Clinic Services

On average, most respondents report that their work rehab clients need flexibility, strength and conditioning services (81%) and acute, physical and occupational therapy (69%). Most usually require functional capacity evaluations (57%) and work hardening-conditioning programs (54%). Half need hand therapy, two-fifths require injury prevention and education programs, and one-quarter demand job site evaluations. Vocational and psychological services are not typically-needed services (only 16% say they are usually needed).

The following chart compares the relative similarity of services required by most groups' cases:

	<u>Rehab Nurses</u> (N= 43)	<u>Insurance Nurses/Reps</u> (N=10)	<u>Visionary Ind. Park Mgrs.</u> (N= 39)	<u>Linc. Co. Firm Mgrs.</u> (N= 33)
Services Usually Needed:				
-Acute, physical & occupational therapy	88%	80%	69%	39%
-Flexibility, strength & conditioning services	91%	90%	80%	67%
-Injury prevention & education programs	40%	20%	44%	49%
-Hand therapy	54%	50%	51%	46%
-Functional capacity evaluations	70%	50%	51%	49%
-Work hardening & conditioning programs	70%	70%	51%	33%
-Vocational rehabilitation	16%	10%	23%	9%
-Job site evaluations	33%	30%	18%	21%
-Psychological services	19%	40%	10%	12%

Overwhelmingly, those with the greatest experience with such cases (rehab nurses and insurance nurses and reps) are more likely than industry-type workers to report that acute, physical & occupational therapy; flexibility, strength & conditioning; and work hardening and conditioning services are typically needed. Table 4 in Appendix A provide a list of services required for client rehab cases.

Awareness and Evaluation of Innovative Rehabilitation Services

Innovative Rehabilitation Services was established in 1992 by Chambers Memorial Hospital to promote quick and complete recovery from work and sports injuries. A team of health professionals deliver individualized quality care. Services include acute physical and occupational therapy; flexibility, strength and conditioning; work hardening; hand therapy; massage therapy; functional capacity evaluations; job site evaluations; biochemical video analyses; prevention and education; and psychological services.

With four locations in the west-central part of the 4-county Brookdale Metro Area, *Innovative Rehabilitation* seeks to become an important contributor for Chambers Memorial. It has been fully-

accredited by the Commission for the Accreditation of Rehabilitation Facilities, which only 1% of U.S. rehabilitation providers have earned.

Of the 125 respondents, 7 had used Innovative Rehabilitation's services and 3 mentioned it in unaided fashion as a metro area work rehab center. Among the remaining 115, 84% of rehab nurses, 88% of insurance nurses/ reps, 38% of Industrial Park managers and 9% of other Lincoln County industrial managers had heard of the center. This represents 55 respondents who had heard of the facility when asked in aided fashion.

All 65 respondents aware of or having used *Innovative Rehabilitation* were asked to rate the facility on 17 qualities or characteristics. The highest ratings assigned to the facility are personal attention by its staff; friendly, courteous employees; the quality of care; its physical facility; its location; and their past experience with them. However, a very large proportion are not certain of *Innovative Rehabilitation's* qualities, given their cursory knowledge or contact with the facility.

Exhibits 8 - 10 on the succeeding pages delineate the most highly-rated, lowly-rated, and unrated ("not sure") characteristics.

Despite the large proportion of the 65 respondents who are uncertain about *Innovative Rehabilitation*, important differences remain between the four groups. The following chart compares the groups on their awareness and evaluations of *Innovative Rehabilitation* services (note the small size of the base for evaluations):

	<i>Rehab Nurses</i> (N= 37)	<i>Insurance Nurses/Reps</i> (N= 9)	<i>Visionary Ind. Park Mgrs.</i> (N= 16)	<i>Linc. Co. Firm Mgrs.</i> (N= 3)
<u>Rate Innovative Rehab. As Excellent / Good:</u>				
-Friendly, courteous employees	54%	44%	25%	---
-Convenience of their location	43%	22%	19%	---
-Cost of their services	14%	---	6%	---
-Quality of care provided	51%	44%	19%	33%
-Its mailings & advertising	27%	11%	25%	33%
-Speed of patient recovery	38%	33%	19%	---
-Convenience of work hours	43%	22%	19%	---
-Your past experience with them	49%	44%	19%	---
-Personal attention provided by staff	54%	44%	25%	---
-Their range of services & specialists	43%	33%	25%	---
-Their national accreditation	30%	22%	12%	33%
-Quality of the physical facility	49%	33%	31%	---
-Close consultation with case manager	51%	33%	6%	---
-Their injury prevention programs	16%	11%	6%	33%
-Quality of job site evaluations	11%	---	19%	---
-Availability of psych. counseling services	27%	11%	6%	---
-Availability of one-on-one voc. services	14%	11%	---	---

As expected, the groups most aware of *Innovative Rehabilitation*---rehab nurses and insurance nurses and reps---give the highest proportion of positive ratings to its services. As noted, they are more likely to have had direct contact with the facility as members of AIRN.

This pattern of awareness remains when asking respondents whether they are aware that *Innovative Rehabilitation* is affiliated with Chambers Memorial Hospital. Among all respondents, half of rehab nurses, two-fifths of insurance nurses / reps, 15% of Industrial Park managers, and 6% of other Lincoln County industrial managers are aware of the affiliation.

Awareness of *Innovative Rehabilitation*, and of its hospital affiliation, is greater among those with more than 5 years of work rehab experience as well as 5 or more years in their current position, than those with less experience or job stability.

Those Aware & Unaware of Innovative Rehabilitation

Many factors or variables can be taken into consideration simultaneously to account for awareness of *Innovative Rehabilitation*. A multivariate statistical technique---stepwise multiple discriminant analysis---was used to differentiate between those aware and those unaware of *Innovative Rehabilitation*.

Five factors significantly distinguish the aware from the unaware, in their order of significance:

- (1) The *number of rehab cases* one has in a given month
- (2) The fact that their *clients typically need acute, physical and occupational therapy*
- (3) The importance of *location* in choosing a clinic
- (4) The importance of *having personal staff contact* in choosing a clinic
- (5) The importance of a *physicians' recommendation* in choosing a clinic

These factors imply that greater experience with rehabilitation cases (reflected in the number of clients handled) as well as a set of typical client needs (specific treatment) and desired conditions (the perceived import to managers and nurses of location convenience, staff contact, and physician recommendations in clinic selection) are the major determiners of awareness of *Innovative Rehabilitation* (Wilks' lambda = .525, Equiv. F = 13.91, Chi Sq. = 50.524, df = 5, p < .0001). Ideally, they provide some strategic information for increasing awareness in the future.

Overall Rehab Effectiveness

The above sets of findings remind us that *Innovative Rehabilitation* works within a larger marketplace where many facilities vie for business and relatively few use or are fully aware of what the clinic has to offer them. The 125 respondents were asked to rate local rehab clinics in the metro area at meeting health care needs of area employers on a 10-point scale. Overall, they give area rehab centers an average rating of 6.9. The 65 people aware of *Innovative Rehabilitation* assign it a slightly higher rating of 7.1, also an average assessment. Furthermore, while 34% give all clinics a "high rating" (8-10 rating), only 26% give *Innovative Rehabilitation* a high rating.

A multivariate technique was used to simultaneously assess the effects of many variables or factors on rehab clinic effectiveness. Multiple regression models were constructed to isolate those factors that best predict the effectiveness of area rehabilitation clinics. The resulting models accounted for only 7-11% of variation in rated effectiveness. Therefore, they do not include effective predictors and are not formally presented in this report (The length of time spent in one's present job was the only predictor of local area clinics' effectiveness). The regression analyses suggested that other factors not measured in this study best account for ratings assigned to local rehab clinics' effectiveness.

The following chart provides comparisons of the four groups' evaluations of area clinics and of *Innovative Rehabilitation*:

	<u>Rehab Nurses</u> (N= 37)	<u>Insurance Nurses/Reps</u> (N= 9)	<u>Visionary Ind. Park Mgrs.</u> (N= 16)	<u>Linc. Co. Firm Mgrs.</u> (N= 3)
Avg. of Local Rehab Clinics' Avg. Effectiveness (Based on 1-10 Pt. Scale)	6.5	7.1	7.2	7.2
-Give High Effectiveness Ratings (8-10)	19%	30%	46%	39%
<i>Avg. of Innovative Rehabilitation's</i>				
Avg. Effectiveness (Based 1-10 Pt. Scale)	7.0	8.0	7.3	---
-Give High Effectiveness Ratings (8-10)	27%	33%	25%	---%
Overall Diff. in Avg. Effectiveness	+0.5	+0.9	+0.1	---
-Overall Diff. in High Effectiveness Ratings	+8%	+3%	-21%	---

The data suggest that those most familiar with *Innovative Rehabilitation*---rehab nurses and insurance nurses / reps---assign higher ratings to it than to clinics as a whole. They also give a greater proportion of "high effectiveness ratings" to the center. The latter receives considerably lower effectiveness ratings from Visionary Industrial Park managers. They generally consider it the same in effectiveness as other clinics but are much less likely to give it a high rating. Ultimately, the reasons for this finding are unknown. Other Lincoln County firms, unaware of *Innovative Rehabilitation*, do not feel confident in assessing it. See Table 5 in Appendix A for a presentation of *Innovative Rehabilitation's* ratings and effectiveness.

Appendix A

TABLE 1. CLIENT PROFILE

Type of Respondent:

-Rehabilitation Nurses	34%
-Insurance Agents	8%
-Visionary Industrial Park Managers	31%
-Metro Manufacturing Managers	26%

Gender:

-Male	26%
-Female	74%

Age:

-25-34	2%
-35-44	13%
-45-54	37%
-55-64	33%
-65 & Older	15%

Common Job Titles:

-Case Manager	18%
-Human Resource/Personnel Manager	17%
-Office Manager	6%
-Secretary	5%
-Manager	5%
-Health & Safety Coordinator	5%
-Rehab Consultant	4%
-Vice President	4%
-Controller	4%

Zip Code of Work Location:

- 68005-68072	32%
- 68130-68188	42%
- 68201-68228	19%
- 68402-68481	2%
- All Others	4%
- Refused	1%

TABLE 1 (CONT.)*Number of Years in Current Position:*

-One Year or Less	16%
-1-5 Years	31%
-6-10 Years	21%
-11-15 Years	12%
-16-20 Years	13%
-More Than 20 Years	6%

TABLE 2. AWARENESS & USE OF WORK REHAB CENTERS

Have Influence on Where Rehab Services Are Received 82%

Common Work Rehab Centers Used Over Past 2 Years:

-St. Benedict's Medical Center	16%
-Prosystems	15%
-OmniCare	14%
-Mercy Hospital	9%
-Valley View Clinic	9%
-Simplicity Rehabilitation/Workshop	8%
<i>-Innovative Rehabilitation</i>	6%
-Holy Cross	6%
-Humphrey Hospital	5%
-Marshall Memorial Hospital	5%
-St. James Hosp.'s Sports Medicine & Knee Surgery Center	5%
-Brookdale Work Rehabilitation	4%
-Association of Occupational Medicine Specialists	4%
-Lincoln Memorial Hospital	3%
-Oceanview(Sports Medicine Institute)	2%
-Chambers Memorial Hospital	1%

Aware of Work Rehab Centers Other Than Those Used:

-Simplicity Rehabilitation	8%
-St. Benedict's Medical Center	6%
-Mercy Hospital	5%
-Marshall Memorial Hospital	4%
-OmniCare	4%
-Prosystems	3%
-Lincoln Memorial Hospital	3%
-Lowry Hospital	3%
<i>-Innovative Rehabilitation</i>	2%

TABLE 3. CHOOSING A REHAB CENTER

Frequency of Working on Rehab-Referred Cases:

-Once a Week or More Often	25%
-Two or Three Times a Month	10%
-Once a Month	4%
-Once Every 1-3 Months	9%
-Once Every 4-6 Months	16%
-Once Every 7-12 Months	6%
-Once a Year	13%
-Less Often Than Once a Year	11%

Median No. of Rehab Cases Handled in Past Month 1

Important If Choosing Work Rehab Clinic:

-Quality of care provided	96%
-Timeliness of communication	94%
-The speed of patient recovery	88%
-Timeliness of scheduled appointments	88%
-Convenience of clinic hours	86%
-Friendly, courteous employees	82%
-The range of services & specialists	81%
-Close consultation with the case manager	81%
-Cost of services	78%
-Your past experience with them	77%
-Personal contact with their staff	76%
-Convenience of their location	75%
-Quality of the physical facility	74%
-Physician's recommendation	73%
-Their accreditation by the national Commission for the Accreditation of Rehab Facilities (CARF)	66%
-Quality of the job site evaluations	64%
-Their injury prevention programs	57%
-Availability of one-on-one vocational services	40%
-Availability of psychological counseling services	34%
-Their mailings & advertising	6%

TABLE 3 (CONT.)*Importance of Providing Rehab Service at Work Site*

-Very Important	10%
-Somewhat Important	41%
-Not Very Important	29%
-Not at all Important	17%

TABLE 4. TYPICAL SERVICES NEEDED ON REHAB CASES*Rehab Services Usually Needed from a Clinic*

-Acute, physical & occupational therapy	69%
-Flexibility, strength & conditioning services	81%
-Injury prevention & education programs	42%
-Hand therapy	50%
-Functional capacity evaluations	57%
-Work hardening & conditioning programs	54%
-Vocational rehabilitation	16%
-Job site evaluations	25%
-Psychological services	16%

**TABLE 5. AWARENESS & EVALUATION OF
INNOVATIVE REHABILITATION**

Had Heard of or Used Innovative Rehabilitation	52%
<u>Rated Innovative Rehabilitation As Excellent or Good: (N= 65)</u>	
-Personal attention provided by staff	(43%)
-Friendly, courteous employees	(43%)
-Quality of care provided	(42%)
-Quality of the physical facility	(40%)
-Convenience of their location	(39%)
-Your past experience with them	(39%)
-Their range of services & specialists	(35%)
-Close consultation with the case manager	(35%)
-Convenience of work hours	(32%)
-Speed of patient recovery	(31%)
-Its mailings & advertising	(25%)
-Their national accreditation	(25%)
-Availability of psychological counseling services	(19%)
-Their injury prevention programs	(14%)
-Quality of job site evaluations	(11%)
-Availability of one-on-one vocational services	(9%)
-Cost of their services	(9%)
Aware that <i>Innovative Rehabilitation</i> is Affiliated with Chambers Memorial Hospital	26%
Local Rehab Clinics' Avg. Effectiveness (1-10 Pt. Scale)	7
<i>Innovative Rehabilitation's</i> Avg. Effectiveness (1-10 Pt. Scale)---N=65	(7)

Appendix B

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Sample List:

- | | |
|---------------------------------|-------------------------------------|
| 1. Rehab Nurses | 3. Visionary Ind. Park Safety Mgrs. |
| 2. Independent Insurance Agents | 4. Metro Manufacturing Safety Mgrs. |

INNOVATIVE REHABILITATION IMAGE & MARKET STUDY

Hello, may I please speak to the person in charge of work rehab cases at your firm?

Hello, I am _____ of Management Decisions Incorporated, a national market research firm. We are conducting a survey for a work rehabilitation and sports therapy center in the Brookdale Area and would like to include your opinions. We are not selling anything, and this study will only take about 5 minutes. Are you the person who is in charge of work rehab cases at your firm? (yes) May I ask you a few questions? **IF RESPONDENT IS NOT AVAILABLE, ASK FOR CALLBACK DAY & TIME; REPEAT INTRODUCTION IF NECESSARY**

IF RESP. REQUESTS SPONSOR NAME, SAY:

"To maintain objectivity, I will tell you the study's sponsor at the end of this short interview"

First, do you, or does a household member or close friend, work for a work rehab or sports therapy center in the Metro Brookdale Area? **IF "YES," THANK & TERMINATE; IF NO/NOT SURE, CONTINUE; POPULATE ALL NON-RESPONSES AS "0s"**

- Over the past 2 years, to which work rehab centers have your patients, clients or employees turned to recover from injuries?...**PROBE:** any others? **RECORD ALL IN COLUMN BELOW**
- What other centers can you think of that provide work rehab services in the area? **PROBE:** any others? **DO NOT READ LIST---RECORD ALL THAT APPLY;**

	<i>Q 1</i>	<i>Q 2</i>
Innovative Rehabilitation	1	1
OmniCare	1	1
Lakewest Surgical Care	1	1
Prosystems	1	1
Oceanview (Sports Medicine Institute)	1	1
Lincoln Memorial Hospital	1	1
Simplicity Rehabilitation	1	1
St. Benedict's Medical Center	1	1
Southwest Rehabilitation Services	1	1
St. James Hosp.'s Sports Medicine & Knee Surgery Center	1	1
Association of Occupational Medicine Specialists	1	1
Chambers Memorial Hospital	1	1
Other (RECORD UP TO 3: _____)	1	1

3. Are you one of the people at your place of employment who has some influence on where a patient, client or employee will receive work rehabilitation services?

YES 1
NO 2

Please tell me *how important is each* of the following if *choosing a work rehab clinic* for a patient, client or employee? Would you say it is Very Important, Important, Somewhat Important, Not Very Important or Not At All Important? **ROTATE START (NOT SURE=9)**

	<i>Very Import.</i>	<i>Somewhat Import.</i>	<i>Not Very Import.</i>	<i>Not At All Import.</i>	
4. Physician's recommendation	5	4	3	2	1
5. Timeliness of scheduled appointments	5	4	3	2	1
6. Friendly, courteous employees	5	4	3	2	1
7. Convenience of their location	5	4	3	2	1
8. Cost of services	5	4	3	2	1
9. Quality of care provided	5	4	3	2	1
10. The speed of patient recovery	5	4	3	2	1
11. Convenience of clinic hours	5	4	3	2	1
12. Your past experience with them	5	4	3	2	1
13. Personal contact with their staff	5	4	3	2	1
14. The range of services & specialists	5	4	3	2	1
15. Timeliness of communication	5	4	3	2	1
16. Their accreditation by the national Commission for the Accreditation of Rehab Facilities	5	4	3	2	1
17. Quality of the physical facility	5	4	3	2	1
18. Their mailings & advertising	5	4	3	2	1

	<i>Very Important</i>	<i>Somewhat Important</i>	<i>Not Very Important</i>	<i>Not At All Important</i>	
19. Close consultation with the case manager	5	4	3	2	1
20. Their injury prevention programs	5	4	3	2	1
21. Quality of the job site evaluations	5	4	3	2	1
22. Availability of psychological counseling services	5	4	3	2	1
23. Availability of one-on-one vocational services	5	4	3	2	1
24. How important is it for a work rehab clinic to provide service at the work site? Do you consider it Very Important, Somewhat Important, Not Very Important or Not at all Important?					

VERY IMPORTANT	4
SOMEWHAT IMPORTANT	3
NOT VERY IMPORTANT	2
NOT AT ALL IMPORTANT	1

25. How often do you work on cases in which a patient, client or worker has been referred to a work rehab or sport therapy center for rehabilitation of an injury? **DO NOT READ LIST**
(NOT SURE=9)

Once a week or more often	1	Once every 4-6 months	5
Two or three times a month	2	Once every 7-12 months	6
Once a month	3	Once a year	7
Once every 1-3 months	4	Less often than once a year	8

26. Within the past month, how many rehab cases have you handled? Make your best guess.

— — —

On average, what services do your rehab patients, clients or employees *usually need* from a clinic?
Just answer with a "yes" or "no" **ROTATE & READ LIST; CODE NOT SURE AS "9"**

	<i>YES</i>	<i>NO</i>	<i>NOTSURE</i>
27. Acute, physical & occupational therapy	1	0	9
28. Flexibility, strength & conditioning services	1	0	9
29. Injury prevention & education programs	1	0	9
30. Hand therapy	1	0	9
31. Functional capacity evaluations	1	0	9

32. Work hardening & conditioning programs	1	0	9
33. Vocational rehabilitation	1	0	9
34. Job site evaluations	1	0	9
35. Psychological services	1	0	9

SKIP Q 36 IF MENTIONED IN Q 1 OR Q 2

36. Had you ever heard of *Innovative Rehabilitation, a work rehab clinic*?

YES	CONTINUE	1
NO	SKIP TO Q 54	2
NOT SURE	SKIP TO Q 54	3

IF AWARE OF OR USED *INNOVATIVE REHABILITATION* (Q 1, 2 OR 36), ASK Q 37-53;

OTHERWISE, SKIP TO Q 54

Now I would like you to rate *Innovative Rehabilitation* on some qualities or characteristics. The first is... **(FILL IN PHRASE BELOW)** Would you say they are Excellent, Good, Average, Poor or Very Poor? **ROTATE START (NOT SURE=9)**

TO CLARIFY: "If you feel you can't rate them on an item, just let me know"

	<i>Excellent</i>	<i>Good</i>	<i>Average</i>	<i>Poor</i>	<i>Very Poor</i>	N/S
37. Friendly, courteous employees	5	4	3	2	1	9
38. Convenience of their location	5	4	3	2	1	9
39. Cost of their services	5	4	3	2	1	9
40. Quality of care provided	5	4	3	2	1	9
41. Its mailings & advertising	5	4	3	2	1	9
42. Speed of patient recovery	5	4	3	2	1	9
43. Convenience of work hours	5	4	3	2	1	9
44. Your past experience with them	5	4	3	2	1	9
45. Personal attention provided by staff	5	4	3	2	1	9
46. Their range of services & specialists	5	4	3	2	1	9
47. Their national accreditation	5	4	3	2	1	9

48. Quality of the physical facility	5	4	3	2	1	9
49. Close consultation with the case manager	5	4	3	2	1	9
50. Their injury prevention programs	5	4	3	2	1	9
51. Quality of job site evaluations	5	4	3	2	1	9
52. Availability of psychological counseling services	5	4	3	2	1	9
53. Availability of one-on-one vocational services	5	4	3	2	1	9

54. Were you aware that *Innovative Rehabilitation* is affiliated with Chambers Memorial Hospital?

YES	1
NO	2
NOT SURE	3

ROTATE Qs. 55 & 56

55. In general, how effective are local work rehab clinics at meeting the health care needs of area employers? If a "10" means "Very Effective" and a "1" Means "Not At All Effective," what number would you give area clinics? You can choose any number from "1" to "10."
 _____ (NOT SURE=99)

IF AWARE OF INNOVATIVE REHABILITATION SERVICES (Q 1, 2 OR 36), ASK Q 56; OTHERWISE, SKIP TO Q 57:

56. How effective are *Innovative Rehabilitation's* work rehab services at meeting the health care needs of area employers? If a "10" means "Very Effective" and a "1" Means "Not At All Effective," what number would you give *Innovative Rehabilitation* clinics? (NOT SURE=99)

The last few questions are for statistical purposes only.

57. What is your job title? _____

58. What is the zip code of your work location? 6 8 _____

59. How long have you been in your current position? _____ Yrs. (LESS THAN YEAR=0)

60. How long have you been involved with work rehab cases? _____ Yrs.
(LESS THAN YEAR=0)

61. In what year were you born? 19_____

Well, that completes our study. Thank you for your time and help. Have a nice day / evening.

62. RECORD GENDER OF RESPONDENT . . . Male 1 Female 2

CODE TELEPHONE NO. _____

Interviewer _____ Date _____