

2023



QUARTERLY MARKETING KIT





KEEP UP ON COMPANY NEWS WITH THE INSIDER NEWSLETTER

- Publishes the second and fourth Thursday of each month
- Contains important company news and time-sensitive updates
- Regular columns include recruiting,
 Shining Stars, and our DEIB initiative



SCAN TO READ THE LATEST ARTICLES

Check your inbox for the latest issue or visit the Insider website.





INFINITYREHAB.COM/INFINITY-INSIDER















Q3 OBSERVANCES

JULY-SEPTEMBER 2023

Here is what we are celebrating and observing over the next three months.

JULY

- Independence Day
 - -July 4
- Parents Day
 - July 28

AUGUST

- Purple Heart Day
 - August 7
- → Senior Citizens Day
 - August 21

SEPTEMBER

- Hispanic Heritage Month (Begins September 15)
- Healthy Aging Month
- National Recovery Month
- National Rehabilitation Awareness
 Week September 18-24
- Assisted Living Week
 - September 10-16
- Labor Day
 - September 4
- Environmental Services And
 Housekeeping Week September 10-16
- → Grandparents Day September 10
- → Patriots Day/9-11 Remembrance
 - September 11
- Patient Safety Day
 - September 17
- International Day Of Sign Languages
 - September 23

















PATIENT TESTIMONIALS

Have you had an amazing experience with a patient worth sharing?

We want to hear about it!

- Document the testimonial. It could be written down, recorded on your phone, or be a voice recording.
- Have the patient sign a release form (see separate document).
- If possible, take a photo of yourself or team with the patient.
- Submit all information to the link below.



SOCIAL MEDIA

Do you have a feel-good story about your team or a patient? It might make a great social media post.

- → Gather all the details about the story, including photos.
- If the story involves a patient, have them sign a release form (see separate document).
- Submit all information to the link below.

For more information, visit the marketing and communications section on Springboard.

Questions? Email communications@infinityrehab.com.







SCAN TO SUBMIT CONTENT

INFINITYREHAB.COM













AUTHORIZATION FOR USE OR DISCLOSURE OF PROTECTED HEALTH INFORMATION FOR PUBLIC RELEASE

This form must be signed by the subject of the information. If the subject is not legally competent to sign, the subject's legal representative may sign the authorization if the release is deemed consistent with the wishes of the resident/patient/client.

l,	$oldsymbol{\bot}$, hereby authorize
(Resident/Patient/Client)	
	(the "Provider")
and their legal representatives and assigns, the right and permission to use the information for the purpose specified below only.	ation specified below
I authorize "the Provider" to use or disclose the following protected health information	on:
☐ My name ☐ My statements ☐ My voice, included audiotaperecordings	
My photographs, likeness, videotape and related representations of me	
My medical history with this healthcare provider. Describe any limitations:	
☐ My personal history (non-medical information)	
Other:	
This personal and/or protected health information may be disclosed to:	
Local community newspapers or print media	
Company/facility social media (i.e., Facebook, company website, Twitter, etc.)	
Local news media (i.e., TV, radio, etc.)	
Software Application:	
All of the above	
Other:	

I further waive my right to inspect or approve the finished article or material and/or to lay claim to any benefits derived there from.

I, hereby irrevocably and forever release, discharge, waive and hold harmless the Provider, and its officers, directors, employees, sponsors and agents (collectively referred to as "the hosts") from any and all claims, losses, causes of action and liabilities of any kind (including attorneys' fees) arising out of or relating in any way to the use of my information.

I voluntarily waive any claims that I might have against the hosts, and I understand and agree that the hosts assume no responsibility or liability for any situation that may occur as a result of the use of my information as authorized herein.

I understand that, as set forth in the provider's Notice of Privacy Practices or Patient Privacy Information (as appropriate), I have the right to revoke this Authorization, in writing, at any time by sending written notification to:

Compliance Officer Infinity Rehab 8100 SW Nyberg Street, Suite 200 Tualatin, OR. 97062







HIPPA120F





Rev. 07/08/2019



I understand that a revocation is not effective to the extent that the Provider has relied on the use or disclosure of the protected health information.

I understandthat informationused or disclosed pursuant to this authorization may be subject to re-disclosure by the recipient andmay no longer be protected by federal and/or state law.

I further understand that the Provider will not condition mytreatment on whether I provide authorized for the requested use or disclosure.

I understand that I have the right to:

- → Inspect or copymy protected health information to be used or disclosed as permitted under federal lawand/or statelaw.
- → Refuse to sign thisauthorization.

I understand this authorization includes disclosures for the purposes of public relations, media, training, and/or community relations without restriction as to frequency, manner, and duration of use, without compensation to me.

For media stories, I understand Premere Rehab, LLC. DBA **Infinity Rehab** and its representatives bear no responsibility for the components of any news media coverage in which I am included as a result of these interviews, photographs, audio recordings or video tapings.

I certify that I am not a minor and am free and able to give consent for this authorization. I also acknowledge that this Authorization and release was willingly signed, and the request for it was conducted appropriately by this company.

Resident/Patient/Client Signature		Date
Legal Representative's Name and Relationship to Resident		Date
Legal Representative's Signature		Date
Facility Representative Name/Title	Signature	Date















Our marketing and communications team can assist you with all your promotional and branding needs. Do you have an event that you want to promote with a flyer? Or maybe you need to bring awareness to therapy services in your building? We can help.



FROM INFINITY REHAB



- → Flyers, brochures, and other collateral
- Awareness banners and posters
- Signage
- Printing and production
- TV monitor slides
- Social media posts, including welcoming new team members
- → PowerPoint presentations
- Video
- Press releases

For more information, visit the marketing and communications section on Springboard. Questions? Email communications@infinityrehab.com.













SCAN TO SUBMIT A MARKETING REQUEST



