

Guiding Principles for Early Rehabilitation (Children and Adults)

These excerpts and standards are drawn from British Society of Rehabilitation Medicine (BSRM), British Society of Physical and Rehabilitation Medicine (BSPRM), and NHS England documents. They summarise key guiding principles for early rehabilitation for both adults and children.

Core Guiding Principles (Summary)

1. Start early — as soon as clinically safe.

Early intervention and mobilisation (often within days, or the first week for ICU patients) speeds recovery and reduces complications. This is emphasised in BSRM/BSPRM standards and in recent UK studies on paediatric and adult early mobilisation.

2. Multidisciplinary team (MDT) approach.

Rehabilitation must be delivered by an MDT (doctors in rehab/physiatrists, nurses, PT/OT, speech & language, psychologists, social workers, family/caregivers) with clear roles and shared goals. BSRM standards repeatedly stress MDT working as essential for both adults and children.

3. Individualised, goal-directed rehabilitation prescription.

Use a written “rehabilitation prescription” that sets personalised, measurable goals, timeframes and responsibilities, and is reviewed frequently. This is core BSRM guidance for acute and specialist rehab pathways.

4. Family / carer involvement and education.

In both paediatric and adult pathways, involving family/carers in goal setting, therapy and discharge planning improves outcomes and continuity of care. BSRM and allied guidance highlight family involvement as a key principle.

5. Safety, clinical readiness and incremental mobilisation.

Early rehab is balanced with patient safety: assessment of medical stability, graded activity, and monitoring for adverse events. ICU and paediatric guidance describe stepwise protocols for safe mobilisation.

6. Seamless transitions and care coordination.

Clear pathways from acute care → specialist inpatient rehab → community / outpatient services, with timely handover, equipment provision and follow-up, are repeatedly recommended (BSRM/NHS England commissioning).

7. Access to specialist services when needed.

Clear criteria for escalating to specialist neuro/complex rehab services (for example after severe ABI or complex multi-system injury) are recommended so patients who need specialist input get it early.

8. Vocational and social reintegration.

Rehabilitation should include work/education and community reintegration planning where appropriate. BSRM guidance includes vocational rehab as a core element.

Statements from UK Rehabilitation Standards

BSRM Standards for Rehabilitation Services (2009):

“Rehabilitation services should be person-centered and integrated across services and agencies.”
— Headway.org.uk / BSRM, 2009

BSRM Specialist Community Standards (2021):

“Delivered by specialised Multidisciplinary professional teams with relevant knowledge, training and expertise who meet regularly to ensure shared discussion and coordinated patient care.” — BSRM 2021

BSRM Specialist Community Standards (2021):

“It is not only a critical part of the acute care pathway by enabling early discharge but is also essential for effective rehabilitation of people living in the community, either with long term conditions or following acute onset illness or injury.” — BSRM 2021

NHS England Commissioning Guidance for Rehabilitation (2016):

“It covers the whole life course – adults and children – as well as the full range of rehabilitation for both mental and physical health.” — NHS England 2016

NHS England Commissioning Guidance for Rehabilitation (2016):

“All public-facing communication should be culturally competent to audiences from all backgrounds to promote equity of access to services.” — NHS England 2016

Some services that offer Support and Advice:

Children's ABI:

[Brain Injury Hub | The Children's Trust](#)

[Home - Child Brain Injury Trust](#)

Special Education:

[NHS England » Special educational needs and disability \(SEND\)](#)

[\(IPSEA\) Independent Provider of Special Education Advice](#)

Specialised Augmentative and Alternative Communication Services:

[guid-comms-aac.pdf](#)

[UK Regional Specialised AAC Services - Royal Hospital for Neuro-disability](#)