

## SUMMARY FOR HEALTHCARE SERVICES

# The Post-Acute Trauma Support (PATs) Model™

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## 1. Why the PATs Model™ Was Created

Every year, thousands of Road Traffic Accident (RTA) survivors are discharged from hospital and early rehabilitation having survived the trauma, but without a structured long-term recovery pathway.

Global and national frameworks (WHO, NICE, NHS) emphasise that trauma care must include continuity and rehabilitation, yet many survivors continue to fall into a predictable gap after discharge. Trauma Pain Support (TPS) describes this as the:

### Post-Acute Trauma Continuity Gap (PATCG)

The missing layer of structured, trauma-informed support in the months after discharge, when biomechanical, emotional and functional deterioration often emerge. The PATs Model™ was developed specifically to close this gap.

## 2. Alignment with Global & National Guidance

The PATs Model™ is designed to sit within, not outside of, existing expectations for rehabilitation and continuity of care. It aligns with:

- **WHO Rehabilitation 2030:** rehabilitation as an essential health service.
- **NICE NG211** (Rehabilitation after traumatic injury): continuity from hospital to community.
- **NHS Major Trauma Network standards:** pathways extending beyond discharge and early rehab.

The model does not replace clinical treatment. It provides the continuity structure that helps services put these frameworks into practice.

## 3. What the PATs Model™ Delivers

The PATs Model™ is a post-discharge continuity framework for RTA survivors and other trauma-affected patients. At a high level, it delivers:

- A standardised long-term pathway after initial rehabilitation.
- A timeline-based structure that reflects predictable post-trauma patterns.
- A multi-domain framework (physical, functional, emotional, cognitive).
- A bridge between early rehab, community services and self-management.
- A compliance-aware model that aligns with WHO / NICE / NHS principles.

The detailed methodology, tools and implementation steps are available to licensed organisations and TPS partners.

## 4. Who the PATS Model™ Supports

The PATS Model™ is suitable for services supporting trauma survivors beyond discharge, including:

- NHS and independent rehabilitation centres
- Major trauma networks and associated services
- Pain management clinics and services
- Community MDT teams and integrated care systems
- Primary care networks involved in long-term follow-up
- Independent physiotherapy, OT and psychology practices
- Insurance, medico-legal and case management organisations

## 5. What the PATS Model™ Helps Improve

Adopted as a continuity framework, the PATS Model™ is designed to support:

- Functional recovery and maintenance of rehab gains
- Biomechanical resilience and stability over time
- Emotional resilience and reduced unaddressed distress
- Self-management confidence and engagement in recovery
- Return-to-life outcomes, including roles, relationships and daily activity
- Continuity of care quality and alignment with guidelines

## 6. How Services Use the PATS Model™ (High-Level)

Services typically use the PATS Model™ to:

- Structure planned follow-up after discharge and early rehab
- Provide a clear roadmap for survivors over the first year post-injury
- Coordinate efforts across hospital, community and primary care
- Demonstrate a trauma-specific continuity model to commissioners and regulators

The model is designed to integrate into existing pathways with minimal disruption.

## 7. Next Steps

To explore the PATS Model™ further:

- **Review the full PATS Model™ page** on the TPS website.
- **Use the Continuity & Compliance Checker** to assess your current pathway.
- **Arrange a Pathway Integration Call** to discuss how the PATS Model™ can be adapted to your service.

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**Disclaimer:** This document is a high-level summary provided for information only and does not constitute clinical, medical, or legal advice. The PATS Model™ is a structured continuity framework that supports, and does not replace, professional clinical judgement, assessment, treatment, or existing care pathways.