Introduction
Early mobilization in the intensive care unit has an emerging role in alleviating the adverse consequence seen in the survivors of critical illness such as impaired exercise capacity, persistent weakness, suboptimal quality of life and high costs of health care utilization. The commencement of the Phase I - early mobilization program in High Dependency Unit (HDU) in February 2014 and the Phase II – enhanced mobilization program in Neurosurgical Unit in June 2014, are directed to combat these adverse consequences. Phase I program entailed early mobilization of patients out of bed whenever condition allowed in HDU. Phase II program incorporate an extra physiotherapy exercise session every weekdays for the patients in neurosurgical ward to strengthen the existing rehabilitation service provided.

Objectives
This program aims to i) improve the functional capacity of patients; ii) shorten the length of stay (LOS) in HDU and Hospital; iii) enhance patients to direct home discharge.

Methodology
A pre- and post-test design was adopted. Patients admitted to HDU of KWH that referred for physiotherapy were enrolled into the program. Outcome measures used were Barthel Index (BI), LOS in HDU and KWH respectively and discharge destination of patients.

Result
From February 2014 to January 2015, a total of 195 patients were referred for physiotherapy service in HDU. For those survivors, there was a significant improvement in the functional capacity in Phase I and Phase II (BI : 39 and 48.4
points increment respectively; P<0.00, t-test). The LOS of patients in HDU and hospital in Phase II was significantly decreased compare with Phase I (4.55 and 20.22 days versus 9.66 and 40 days; p=0.008 and 0.003 respectively; t-test). There were an increased in percentage of patients that could be discharged home directly in Phase II than Phase I (52.4% versus 37.5% respectively). Conclusion: Both the Early and Enhanced mobilization program are effective in improving functional capacity. With the addition of Phase II- Enhanced mobilization program on top of the Phase I Early mobilization program, shortening in LOS and early return home for neurosurgical patients is further enhanced.