

Patient information

I am ready to leave hospital under pathway 1 discharge – what does this mean?

What is Pathway 1?

Pathway 1 is a different way of working for health and social care professionals that brings people out of hospital once they are no longer acutely unwell.

Understanding and assessing the type of support you may benefit from, is completed in the comfort and safety of your own home. We will support you to make sure you can recover safely at home.

Why will I recover faster at home?

When you are really sick, our hospitals are the place you need to be. But once you no longer need hospital care, you recover much better and faster at home, if you have the right support around you.

If you are bed-ridden for long periods, you lose muscle tone. Studies show 10 days in bed leads to 14% loss of muscle strength. (This is equal to 10 years in life.) It affects your ability to move around, slowing down your recovery and your ability to carry out normal, everyday tasks.

Why am I being offered this service?

The hospital teams know you are medically stable and well enough for this service. They believe you may avoid a potentially lengthy stay in hospital by being supported in this way.

Source: Discharge Planning Team

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What are the benefits to me?

We know going home improves an individual's health and wellbeing. It removes the risk of hospital acquired infections. It also reduces the chances of developing confusion, further loss of mobility and independence.

What will happen when I get home?

On leaving hospital, extra support may be required. A free short term service to promote independence can be offered to you to help you regain the skills and confidence needed to complete everyday tasks safely at home.

You will be visited by a Community Health therapist and a Home First risk assessor within a couple of hours of arriving at home. They will complete an assessment, supply equipment if required and identify if reablement support is required. They will identify if there are any short term goals to help you towards living as independently as possible. The aim is to enable you to live as close to how you were before you became unwell.

What is reablement?

We use a reablement approach to provide assessments and interventions aiming to help you recover daily living skills and maximise independence. This means instead of us doing the tasks you can no longer do, we work with you to help you re-learn how to do them. We work with you to regain some of the independent living skills that matter to you, things you could do in the past. We may also refer you on to voluntary organisations if you would like support from your local community

Who is 'Home First'?

Home First is Suffolk County Council's in-home reablement service. They will help you to stay as independent as possible by working with you to re-learn skills that may have been lost following illness, an accident or from a disability. Their goal is to keep you living in your own home for longer.

You will be visited by teams of Reablement Support Workers who will help you along the journey of recovery. The teams are supported by a range of professionals such as Occupational Therapists and Team Leaders who may have involvement in your reablement journey.

You will not be asked to pay Home First whilst you are receiving reablement. At the end of the six weeks, or when you have reached your goals (whichever is sooner), you may be asked to pay towards the cost of your care if more support is needed. How much you pay will be worked out in your financial assessment.

Who is 'Support To Go Home'?

Support To Go Home is a free service hosted by West Suffolk Hospital. Support To Go Home provides interim care until the care agency, (Home First) can start and take over.

Information sharing

We all have a legal duty to keep information about you confidential and you have the right to say 'no' if you do not want information about you given to others. In order to ensure you receive the right care at the right time sharing your information saves time and reduces your need to repeat information. We can only share your information with your consent. Even with your consent we would only share what is necessary for your needs to be met.

Contact details — Discharge to Optimise and Assess

Pathway 1 Co-ordinator 01284 712934

Support To Go Home 01284 713568

Home First 01284 758567

Care Coordination Centre 03001232425

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust



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