

An exploration of the Discharge to Access (D2A) pathway 1 service from a patient perspective

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Introduction

When a patient in hospital no longer meets the Criteria to Reside, they must, when clinically safe, be discharged as soon as possible. Discharge to Assess (D2A) is the default option for every patient who requires their care needs to be assessed. The aim is to support patients so that they can be safely discharged, with rapid assessments and quick access, if needed, to care and support. D2A is defined as "where people who are clinically optimised and do not require an acute bed, but may still require care services are provided with short term, funded support to be discharged to their own home (where appropriate) or another community setting". Several terms are used for what is often referred to as D2A, for example "home first", "safely home" and "step down". The purpose of the research proposal is to explore the views of patients on their experiences of the Discharge to Assess pathways 1 service. The D2A model is used within hospitals across the United Kingdom, but there is little research around patient experiences of it. There is a gap in research in relation to the D2A model as a whole, but this study is focused on Pathway 1.

Aim

To gain an understanding of the patient's experiences and views of the D2A pathway 1 service.



Background

Setting: A North West of England NHS Trust.
Challenge: To address health inequalities between the Trust's three sites.

Objectives

- To explore aspects of the D2A pathway 1 service that patients perceive as valuable.
- To highlight any possible areas of improvement to the service, according to patients.
- To identify similarities and differences between reported patient experiences, between the three sites within the Trust.
- To reflect upon any differences identified and consider potential reasons for the differences.

Method

- Qualitative research approach
- Semi-structured interviews (telephone or video)
- Sample size will be 15 participants in total, 5 from each of the three main hospitals within the Trust.
- Data collection & analysis



Progress to date

- Completed research and learning agreement.
- Create research materials such as interview guide, PIS, consent form.
- Public/patient and staff involvement
- IRAS form completed



Next steps

- Gain ethical approval and work on revision
- Recruit to the study
- Complete interviews
- Transcribe interviews
- Analyse data and share with research team
- Present findings to ARC and colleagues
- Write up the findings for publication
- Conference presentation



References

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