

# Higher Frequency of Acute OT Services Is Associated With Reduced Hospital Readmissions

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DOI: 10.5014/ajot.2022.76S1-RP13

Date presented: April 1, 2022

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**IMPORTANCE:** Hospital readmissions are associated with poor patient outcomes, including higher risk for mortality, nutritional concerns, deconditioning, and higher costs.

**OBJECTIVE:** To evaluate how acute occupational therapy (OT) service delivery factors impact readmission risk.

**DESIGN:** Cross-sectional, retrospective study Setting: Single academic medical center Participants: Medicare inpatients with a diagnosis included in the Hospital Readmission Reduction Program (HRRP) (n = 17,618). Data were collected from medical records at a large urban hospital in southeastern Wisconsin. Outcomes and Measures: Logistic regression models were estimated to examine the association between acute OT service delivery factors and odds of readmission. Also, the types of acute OT services for readmitted vs not-readmitted patients were compared.

**RESULTS:** Patients had significantly higher odds of readmission if they received OT services while hospitalized (OR = 1.18; 95% CI: 1.07-1.31). However, patients who received acute OT services had significantly lower odds of readmission if they received higher frequencies (OR = 0.93; 95% CI: 0.90-0.95) of acute OT services. A significantly higher proportion of not-readmitted patients, compared to readmitted patients, received activities of daily living (ADL)/self-care training (p < .01).

**CONCLUSIONS AND RELEVANCE:** For patients with HRRP-qualifying diagnoses who received acute OT services, higher frequency of acute OT services were linked with lower odds of readmission. Readmitted patients were less likely to have received ADL/self-care training while hospitalized.

**IMPACT STATEMENT:** Identifying factors of acute OT services that reduce the odds of readmission for Medicare patients may help to improve patient outcomes and further define OT's role in the United States quality-focused health care system.

## References

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