

# Peer support may cut acute psychiatric care readmissions

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(HealthDay)—A self-management intervention facilitated by peer

support workers may reduce the rate of readmissions to acute care for people discharged from mental health crisis resolution teams, according to a study published in the Aug. 4 issue of *The Lancet*.

Sonia Johnson, D.M., from University College London, and colleagues conducted a randomized controlled superiority trial with participants recruited from six crisis resolution teams. Participants were randomized to either an [intervention](#) group (221 participants) or a [control group](#) (220 participants). Those in the intervention group were offered up to 10 sessions with a peer support worker who provided support completing a personal recovery workbook, including formulation of personal recovery goals and crisis plans. Those in the control group received the personal recovery workbook by mail to complete independently if they so wished.

Primary outcome data were obtained for 218 and 216 participants in the intervention and control groups, respectively. The researchers found that 29 percent of participants in the [intervention group](#) and 38 percent in the control group were readmitted to acute care within one year (odds ratio, 0.66; 95 percent confidence interval, 0.43 to 0.99;  $P = 0.0438$ ). Within the trial, there were 71 serious adverse events (29 in the treatment group versus 42 in the [control](#)).

"Our findings suggest that peer-delivered self-management reduces readmission to acute care, although admission rates were lower than anticipated and confidence intervals were relatively wide," the authors write. "The complexity of the study intervention limits interpretability, but assessment is warranted of whether implementing this intervention in routine settings reduces acute care readmission."

**More information:** [Abstract/Full Text](#)  
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