Title of Intervention: Computer-generated recall letters for underimmunized children

Intervention Strategies: Individual Education

Purpose of the Intervention: To evaluate the effectiveness and cost effectiveness of computer-generated recall letters to parents of children overdue for immunizations

Population: Parents of 20-month old children who were overdue for immunizations

Setting: Kaiser Permanente medical centers in Santa Clara and Santa Teresa in Northern California; health care facility-based, home-based

Partners: The Vaccine Safety Datalink Project of the Centers for Disease Control, Kaiser Permanente Division of Research

Intervention Description:
- Individual Education: Computer-generated personalized letters were sent out in both English and Spanish to families of children who were overdue for immunizations. The letters instructed the parent to call the clinic to make an appointment for a preventive visit. The letter included a brochure listing the recommended immunizations.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Trained multi-lingual staff for telephone follow up call, clerical staff
- Training: Not mentioned
- Technology: Regional computerized immunization tracking system
- Space: Not mentioned
- Budget: Recall letter policy would be $5031 annually, cost effectiveness ratio of the recall letter policy would be $4.04 per child appropriately immunized
- Intervention: Letters, postage, brochures
- Evaluation: Telephone follow-up survey, telephones

Evaluation:
- Design: Randomized controlled trial
- Methods and Measures:
  - Immunization rates were tracked via computerized tracking audits
  - Phone calls were completed for parents in both the control group and comparison group to find out reasons they did not get their children immunized.

Outcomes:
- Short Term Impact: Not mentioned
- Long Term Impact: There was a significant increase in immunization rates. Families of 20-month-olds who were sent letters were 1.5 times more likely than controls to have their children receive immunizations during the subsequent 4 months.

Maintenance: Not mentioned

Lessons Learned: The authors concluded that computer-generated recall letters improve immunization delivery even in a large, privately insured population with high baseline coverage rates; however the cost of $4 per additional child immunized is relatively high, and telephone reminder and recall messages should be evaluated as potentially more cost-effective alternatives.

Citation(s):