

Title of Intervention: Educational outreach visit to improve flu and pneumonia immunization rates in primary care

Intervention Strategies: Campaigns and Promotions, Provider Education, Environments and Policies, Individual Education

Purpose of the Intervention: To improve immunization rates in high-risk patients

Population: General physicians, high-risk patients

Setting: General practices in the Trent region, United Kingdom; health care facility-based

Partners: Lincolnshire Primary Care Audit Group, West Lincolnshire Primary Care Trust, Trent Focus Collaborative Research Network

Intervention Description:

- Campaigns and Promotions: Campaign materials included posters, leaflets and television advertisements.
- Provider Education: An educational outreach visit was made to health care facilities. The educational visit focused on overcoming individual, team and organizational barriers to change. The educators provided evidence-based information about controversial issues, encouraged active learning, used simple overheads and graphs and emphasized the essential messages. There was a discussion concerning perceived barriers to vaccination within the organization.
- Environments and Policies: The outreach team encouraged health care facilities to implement provider reminder systems, supply and storage policies, special immunization-only clinics and home immunizations.
- Individual Education: The outreach team encouraged health care facilities to provide patients with reminders for immunizations.

Theory: Transtheoretical Model

Resources Required:

- Staff/Volunteers: Outreach team
- Training: Not mentioned
- Technology: Presentation equipment
- Space: Space for educational intervention meeting
- Budget: Travel funds for outreach team
- Intervention: Training, presentation materials, graphs
- Evaluation: Egret and SPSS statistical software packages, pre- and post-questionnaires, postage

Evaluation:

- Design: Cluster randomized controlled trial
- Methods and Measures:
 - Vaccination rates were measured through chart audits.

Outcomes:

- Short Term Impact: Not measured
- Long Term Impact: Improvements in pneumococcal vaccination rates in the intervention practices were significantly greater compared with controls. Improvements for influenza vaccination were also usually greater in intervention practices but did not reach statistical significance.

Maintenance: Not mentioned

Lessons Learned: This study demonstrates that education delivered to practice teams addressing areas relevant to practice and using audit, feedback and discussion of barriers may lead to improved outcomes for patients.

Citation(s):

Siriwardena, A. N., A. Rashid, et al. (2002). "Cluster randomised controlled trial of an educational outreach visit to improve influenza and pneumococcal immunisation rates in primary care." *Br J Gen Pract* 52(482): 735-40.