**Title of Intervention:** A telephone pneumococcal vaccination outreach program

**Intervention Strategies:** Campaigns and Promotions, Supportive Relationships

**Purpose of the Intervention:** To determine the effectiveness of a telephone reminder to increase pneumococcal immunizations in a population that had received mailed reminders; to evaluate whether the intervention effect is similar for clinics serving primarily non-Hispanic black or non-Hispanic white patient populations

**Population:** Unvaccinated clinic patients age 18 or older with chronic medical conditions or age 65 and older without chronic medical conditions

**Setting:** Managed care network general medicine clinics in Atlanta, Georgia; health care facility-based

**Partners:** None mentioned

**Intervention Description:**
- Campaigns and Promotions: Preventive services reminders were posted in all medical offices.
- Supportive Relationships: During the intervention telephone call, health care providers explained the study and asked permission from each patient to speak briefly about pneumococcal immunizations. The health care providers asked the participants questions and explained that the immunization is recommended and is a covered benefit of their managed care insurance with no required co-payment. Participants who were not immunized were asked if they would like to receive the vaccine and could schedule a clinic visit during the same telephone call. Mailed reminders were sent to both chronic disease and elderly groups.

**Theory:** Not mentioned

**Resources Required:**
- Staff/Volunteers: Health care providers
- Training: Training in pneumococcal vaccine indications for nurses
- Technology: Telephone
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Materials for mailed reminders and respond postcards
- Evaluation: Materials needed to confirm vaccination status

**Evaluation:**
- Design: Randomized trial
- Methods and Measures:
  - Vaccination status was assessed at follow-up
  - Primary reason for non-vaccination and vaccination interest was assessed during phone interviews.

**Outcomes:**
- Short Term Impact: Participants reported that their primary reason for not being immunized was that they did not know the pneumococcal vaccination was needed.
- Long Term Impact: Immunization rates were increased among those who received telephone reminders.

**Maintenance:** Not mentioned

**Lessons Learned:** Patients who reported prior immunization by telephone may reduce future intervention costs if the intervention database is updated properly, so that those patients reporting prior immunization are not targeted for future vaccination interventions.