

Effect of outreach reminders on adolescent well child visits and COVID-19 vaccination rates: A randomized clinical trial

April 22 2022

Figure 1. Example of Outreach Messages

	Thursday Message	Friday Message	
Standard Message - Text	Hi! [clinic name] misses you!	Hi! If you haven't already,	
Message	[patient first name] is due for a	please call [clinic phone	
	checkup. Please call [clinic	number], option 1 to schedule	
	phone number], option 1 to	[patient first name]'s upcoming	
	schedule a visit.	visit at [clinic name].	
COVID-19 Vaccine Message -	Hi! [clinic name] misses you!	Hi! If you haven't already,	
Text Message	[patient first name] is due for a	please call [clinic phone number], option 1 to schedule	
	checkup. Please call [clinic		
	phone number], option 1 to	[patient first name]'s upcoming	
	schedule a visit. COVID vaccine	visit at [clinic name]. COVID	
	is available if interested.	vaccine is available if interested.	
Standard Message - Phone	This is Cincinnati Children's	This is Cincinnati Children's	
Call	Hospital. [patient first name] is	Hospital. [patient first name] is	
	due for a checkup with [clinic	due for a checkup with [clinic	
	name]. Please call [clinic phone	name]. If you haven't already,	
	number], option 1 to schedule a	please call [clinic phone	
	visit.	number], option 1 to schedule a	
		visit.	
COVID-19 Vaccine Message –	This is Cincinnati Children's	This is Cincinnati Children's	
Phone Call	Hospital. [patient first name] is	Hospital. [patient first name] is	
	due for a checkup with [clinic	due for a checkup with [clinic	
	name]. Please call [clinic phone	name]. If you haven't already,	
	number], option 1 to schedule a	please call [clinic phone	
	visit. COVID vaccine is	number], option 1 to schedule a	
	available if interested.	visit. COVID vaccine is	
		available if interested.	

Example of Outreach Messages. Credit: Cincinnati Children's Hospital Medical Center



Researchers with Cincinnati Children's Hospital Medical Center conducted a randomized clinical trial to determine the effectiveness of outreach reminders on adolescent well child visits and COVID-19 vaccination rates. Findings from the trial will be presented during the Pediatric Academic Societies (PAS) 2022 Meeting, taking place April 21-25 in Denver.

Many adolescents delayed preventative services during the COVID-19 pandemic. Outreach is a proven strategy for increasing preventative services, but it was uncertain whether this would be effective amid the pandemic.

The trial determined that outreach messages were minimally effective at re-engaging adolescents in preventative services. Efforts are needed to address widening disparities.

"We provide a <u>primary care</u> medical home for a low income Black population that was profoundly impacted by the pandemic," said Mary Burkhardt, MD, MHA, associate division director of primary care at Cincinnati Children's Hospital Medical Center. "We conducted this trial to better understand the impact of reminders to adolescents about care that was overdue and the opportunity to receive the COVID-19 vaccine. We found that our interventions did promote scheduling of adolescent well care visits, but were minimally effective at improving the completion of visits. Higher intensity interventions may be needed to reengage patients and address widening disparities."



Table 1. Baseline Characteristics

Characteristic	Standard	COVID-19 Vaccine	Control Group,	TE-4-1 NT- (0/)
	Message, No. (%)	Message, No. (%)	No. (%)	Total, No. (%)
Unique patients, No.	412	411	412	1235
Age				
12	74 (18.0)	72 (17.5)	78 (18.9)	224 (18.1)
13	103 (25.0)	110 (26.8)	99 (24.0)	312 (25.3)
14	105 (25.5)	106 (25.8)	98 (23.8)	309 (25.0)
15	57 (13.8)	54 (13.1)	61 (14.8)	172 (13.9)
16	39 (9.5)	29 (7.1)	33 (8.0)	101 (8.2)
17	34 (8.3)	40 (9.7)	43 (10.4)	117 (9.5)
Sex		3 5		
Female	192 (46.6)	210 (51.1)	196 (47.6)	598 (48.4)
Male	220 (53.4)	201 (48.9)	216 (52.4)	637 (51.6)
Race				***************************************
Black or African American	313 (76.0)	319 (77.6)	315 (76.5)	947 (76.7)
White	69 (16.8)	60 (14.6)	65 (15.8)	194 (15.7)
Multiracial	10 (2.4)	17 (4.1)	13 (3.2)	40 (3.2)
Asian	3 (0.7)	2 (0.5)	6 (1.5)	11 (0.9)
American Indian and Alaska				
Native	1 (0.2)	0(0)	0 (0)	1 (0.1)
Missing Data	16 (3.9)	13 (3.2)	13 (3.2)	42 (3.4)
Ethnicity				
Non-Hispanic/Latinx	390 (94.7)	396 (96.4)	396 (96.1)	1182 (95.7)
Hispanic/Latinx	21 (5.1)	15 (3.6)	15 (3.6)	51 (4.1)
Not reported	1 (0.2)	0 (0)	1 (0.2)	2 (0.2)
Insurance	a 1			23 IS
Public (i.e., Medicaid)	375 (91.0)	357 (86.9)	358 (86.9)	1090 (88.3)
Private	30 (7.3)	47 (11.4)	44 (10.7)	121 (9.8)
Self-pay	7 (1.7)	7 (1.7)	10 (2.4)	24 (1.9)
Communication preference		50-00 * 00000 6	and Name	engraph & State & State
Text message	279 (67.7)	306 (74.5)	301 (73.1)	886 (71.7)
Phone call	133 (32.3)	105 (25.5)	111 (26.9)	349 (28.3)
Childhood vaccine refusal	, ,			
No past MMR or DTaP	3 (0.7)	4(1.0)	2 (0.5)	9 (0.7)
Patient lifetime historical no-	0.15 (0.3)	0.19 (0.4)	0.15 (0.3)	0.16 (0.3)
show rate, M (SD)	()	(0)	(0.5)	

Baseline Characteristics. Credit: Cincinnati Children's Hospital Medical Center



Table 2. Intention-to-treat analysis

Outcome	Comparison	OR (95% CI)	P Value
AWC visit scheduled within 2 weeks	Standard Message vs. Control Group	2.07 (1.21 - 3.52)	0.008
	COVID-19 Vaccine Message vs. Control Group	1.25 (0.70 - 2.23)	0.457
	Standard Message vs. COVID-19 Vaccine Message	1.66 (1.00 - 2.74)	0.049
AWC visit completed within 8 weeks	Standard Message vs. Control Group	1.35 (0.88 - 2.06)	0.165
	COVID-19 Vaccine Message vs. Control Group	1.33 (0.87 - 2.03)	0.193
	Standard Message vs. COVID-19 Vaccine Message	1.02 (0.68 - 1.52)	0.930
Receipt of Tdap within 8 weeks ^a	Standard Message vs. Control Group	6.50 (0.74 – 311.21)	0.117
	COVID-19 Vaccine Message vs. Control Group	8.66 (1.03 – 408.04)	0.045
	Standard Message vs. COVID-19 Vaccine Message	0.75 (0.19 – 2.89)	0.854
Receipt of HPV within 8 weeks ^b	Standard Message vs. Control Group	1.86 (0.94 – 3.70)	0.075
	COVID-19 Vaccine Message vs. Control Group	1.47 (0.72 – 3.03)	0.292
	Standard Message vs. COVID-19 Vaccine Message	1.27 (0.67 – 2.38)	0.465
Receipt of MCV4 within 8 weeks ^c	Standard Message vs. Control Group	5.44 (1.52 – 19.48)	0.009
	COVID-19 Vaccine Message vs. Control Group	4.59 (1.25 – 16.93)	0.022
	Standard Message vs. COVID-19 Vaccine Message	1.19 (0.51 – 2.74)	0.691
Receipt of COVID vaccination	Standard Message vs. Control Group	2.04 (0.86 - 4.82)	0.104
within 8 weeks	COVID-19 Vaccine Message vs. Control	638 28	0.631
	Group Standard Message vs. COVID-19 Vaccine Message	1.26 (0.49 - 3.22) 1.62 (0.73 - 3.61)	0.238

OR=Odds Ratio; 95% CI=95% Confidence Interval

Intention to Treat Analysis. Credit: Cincinnati Children's Hospital Medical Center

^a We only included patients eligible to receive the Tdap during the 8-week study period (Total, n = 130; Standard Message group, n = 45; COVID-19 Vaccine Message group, n = 41; Control Group, n = 44). Odds ratios estimated from exact logistic regression analysis, and wide 95%CI due to data with small cell counts.

^b We only included patients eligible to receive the HPV series during the 8-week study period (Total, n = 608; Standard Message group, n = 208; COVID-19 Vaccine Message group, n = 195; Control Group, n = 205).

⁶ We only included patients eligible to receive the MCV4 vaccine or booster during the 8-week study period (Total, n = 344; Standard Message group, n = 116; COVID-19 Vaccine Message group, n = 106; Control Group, n = 122).



The trial included text and telephone outreach messages, with and without information about COVID-19 vaccine availability, on the scheduling and completion of adolescent well-care visits among adolescents due for preventative services.

More information: Conference: www.pas-meeting.org/

Provided by American Pediatric Society

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