

Increasing Appropriate Vaccination: Client-Held Paper Immunization Records (2010 Archived Review)

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Review Summary

Intervention Definition

Client-held paper immunization records provide members of a target population or their families with documentation of their vaccination history. These records can be used by clients to improve their awareness of vaccinations needed or due and by providers to assess client vaccination status. Client-held paper immunization records may be presented alone or as part of a more comprehensive health record.

Summary of Task Force Finding

The Community Preventive Services Task Force finds insufficient evidence to determine the effectiveness of client-held paper immunization records in increasing vaccination rates or reducing rates of vaccine preventable illness. Evidence is considered insufficient because of inconsistent findings and variability in the interventions evaluated.

About the Systematic Review

The Task Force finding is based on evidence from a Community Guide systematic review published in 2000 (Briss et al., 5 studies, search period 1980-1997) combined with more recent evidence (2 studies, search period 1997-2009). The systematic review was conducted on behalf of the Task Force by a team of specialists in systematic review methods, and in research, practice, and policy related to increasing appropriate vaccination. This finding updates the previous Task Force finding on Client-Held Medical Records.

Results from the Systematic Review

- Vaccination rates: median increase of 3.8 percentage points (interquartile interval [IQI]: -1.5 to 14.3 percentage points; 5 studies, 8 study arms)
 - It was difficult to determine unique effects of client-held immunization records because studies evaluated multi-component interventions and comparison groups received one or more interventions.
- All but one study evaluated client-held paper records that included information about immunization history as well as other preventive services (such as cancer screening).
 - Three studies documented an increase in the receipt of some preventive services in association with client-held paper records.

Considerations for Implementation

- Client-held paper immunization records retained by parents and updated by providers can be an important tool for reducing missed opportunities and over-vaccination among children, especially in nontraditional immunization settings, such as emergency departments.
- This intervention may be especially useful with children because of the complexity of the vaccination schedule and the fragmentation of care among low-income families.

Economic Evidence

An economic review was not conducted because the Task Force found insufficient evidence to determine the intervention's effectiveness.

Task Force Finding and Rationale Statement

Intervention Definition

Client-held paper immunization records provide members of a target population or their families with documentation of their vaccination history. These records can be used by clients to improve their awareness of vaccinations needed or due and by providers to assess client vaccination status. Client-held paper immunization records may be presented alone or as part of a more comprehensive health record.

Task Force Finding (March 2010)

The Community Preventive Services Task Force finds insufficient evidence to determine the effectiveness of client-held paper immunization records in increasing vaccination rates or reducing rates of vaccine preventable illness. Evidence was considered insufficient because of inconsistent findings and variability in the interventions evaluated.

Rationale

In 1997, the Task Force found insufficient evidence to determine the effectiveness of client-held paper immunization records in increasing vaccination rates. Based on the results of this systematic review update, completed in 2010, the Task Force finding remains unchanged. The Task Force considered seven studies with 10 measurements of change in vaccination rates. Five studies (eight measurements) provided a common measure and observed an overall median absolute percent change in vaccination rates of 3.8 percentage points (interquartile interval [IQI]: -1.5 to +14.3 percentage points).

These inconsistent results come from studies in which client-held paper immunization records were just one activity in a multicomponent effort, and were compared to clients who also received one or more interventions. Only three of the included studies focused on vaccination rates in children, an important population regarding the potential usefulness of client-held immunization records because of the complexity of the recommended child vaccination schedule and the fragmentation of care among low-income or mobile families.

The Task Force identified specific evidence from several studies documenting an increase in the receipt of some preventive services in association with client-held paper immunization records that include those services. It remains unclear, however, whether client-held paper immunization records focused only on immunizations lead to greater use of other preventive services. The Task Force also considers that, in situations where other records of immunization history are not readily available, such as the emergency room, client-held paper immunization records may confer additional benefit, by reducing unnecessary vaccinations and its associated costs and personal discomfort.

The Task Force identified no specific evidence on harms of client-held paper immunization records. Potential barriers identified in the included studies and overall literature included declining interest and low card retention among clients, and, among providers, concerns about time management when using a preventive services checklist.

With the expansion of population-based Immunization Information Systems and the development of on-line and electronic personal health care records, the Task Force calls for careful evaluation of their effectiveness in achieving high levels of vaccination rates in the US population. However, until issues of privacy, security, and quality of electronic records have been resolved, and for clients on the other side of the “digital divide,” the traditional client-held paper immunization record will continue to be useful for some populations, such as clients with limited computer access and adults whose change in employment status is accompanied by change in providers. If paper immunization records are

retained by parents and updated by providers, they can be an important tool for reducing missed opportunities and over-vaccination in children, especially in nontraditional immunization settings, such as emergency departments. Therefore, the Task Force considers as an important area for investigation population-based strategies that support the retention and use of client-held paper immunization records for children by their parents or other caregivers.

Disclaimer

The findings and conclusions on this page are those of the Community Preventive Services Task Force and do not necessarily represent those of CDC. Task Force evidence-based recommendations are not mandates for compliance or spending. Instead, they provide information and options for decision makers and stakeholders to consider when determining which programs, services, and policies best meet the needs, preferences, available resources, and constraints of their constituents.

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