

- To:
- Integrated care boards:
 - maternity leads
 - chief nurses
 - Local maternity and neonatal systems:
 - maternity leads
 - NHS trusts and foundation trusts:
 - chief nurses
 - directors/heads of midwifery
 - medical directors
 - Primary care networks
 - All community pharmacies
 - Directors of public health and primary care

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16 August 2024

- cc.
- Integrated care boards:
 - chief executive officers
 - NHS trusts and foundation trusts:
 - chief executive officers
 - Regions:
 - regional directors
 - regional directors of commissioning
 - chief nurses
 - chief midwifery officers

Dear colleagues,

Maximising uptake of antenatal vaccinations and the introduction of a maternal vaccine against respiratory syncytial virus (RSV) for infant protection this autumn and winter

As we approach autumn, the introduction of a new maternal vaccine against RSV for infant protection, and with an ongoing national incident in newborn pertussis infections and mortality, we write to set out the essential role of maternity, community pharmacy and

primary care services in advising pregnant women of their eligibility for vaccination against pertussis, flu, covid-19, and RSV; providing evidence-based advice on the safety and effectiveness of these vaccines in pregnancy; and facilitating easy access to vaccination. We also summarise the support and guidance available to services to do this.

Respiratory syncytial virus (RSV) – year-round programme

Following advice from the Joint Committee on Vaccination and Immunisation (JCVI), NHS England and the UK Health Security Agency (UKHSA) [wrote to NHS systems on 24 June 2024](#) setting out next steps for the delivery of a new, year-round maternal RSV vaccination programme to protect newborns from **Sunday 1 September 2024**.

RSV is a common respiratory virus that usually causes mild, cold-like symptoms during the winter months. Babies under 1 year of age and older adults are at the greatest risk of hospitalisation with respiratory disease.

For these babies in particular, [the JCVI estimates that RSV causes 108,000 GP consultations, 74,000 visits to A&E, 20,000 paediatric admissions, 900 intensive care unit \(ICU\) admissions and 22 deaths each year](#).

Evidence suggests that [achieving just 60% coverage year-round for infants under 6 months old could prevent 20,000 GP consultations, 15,000 A&E visits, 5,000 paediatric admissions, and 200 ICU admissions every year](#).

All women who are at least 28 weeks pregnant on 1 September 2024 should be offered a single dose of the RSV vaccine through commissioned services. From this time, pregnant women will become eligible as they reach 28 weeks gestation and will remain eligible up to birth.

Most vaccinations will be delivered by commissioned provider trusts. General practices will also be commissioned through the GP contract, as an essential service, to offer and provide RSV vaccination in pregnancy on an opportunistic or on-request basis from 28 weeks of pregnancy. It will be important that all pregnant women are aware of their eligibility and are offered vaccination against RSV as part of their routine care.

NHS England regional teams have worked with provider trusts to agree the contracting arrangements for this service, including providing additional funding for delivery, and the implementation of local delivery plans.

Given the RSV vaccine has significant potential to reduce the burden of hospital admissions on families and paediatric units this winter, maternity services should be receiving support from their trusts to help realise this potential from 1 September. RSV vaccination services should be delivered in a way that does not impact on safe staffing for core maternity care.

Pertussis (whooping cough) – year-round programme

Whooping cough cases in infants have risen significantly since December 2023. Alongside this, recent UK Health Security Agency (UKHSA) data shows that pertussis vaccination uptake in pregnancy is declining. 58.9% of mothers had received the vaccine in March 2024, compared to 72.6% in March 2017.

The latest data for England shows cases of whooping cough peaked in May but continue at high levels, with 2,427 cases reported in June. This compares with 858 cases reported throughout 2023. There have been 10 reported deaths in infants since the current outbreak began in November last year (1 in December 2023, and 9 between January to end June 2024).

The key priorities for the NHS are to prevent infant hospitalisations and deaths, and to highlight the importance of timely and complete vaccination in pregnancy, infants and children under 10 years. Vaccination in pregnancy remains key to passively protecting babies before they can be directly protected by the infant vaccine programme.

Pregnant women become eligible for their pertussis vaccination (which also provides protection against other illnesses) from 16 weeks. Receiving vaccination between 20-32 weeks provides optimal protection, and women can receive the vaccine up until they go into labour. Analysis of data from England indicates that maternal vaccination offers very high levels of protection against disease, hospitalisation and death from pertussis in infants under 3 months of age (UKHSA).

Local systems should continue to work in partnership to strengthen the offer of vaccination amongst pregnant women and ensure that the vaccine is given at the optimal time to maximise protection.

Flu – seasonal programme

The [National Flu Immunisation Programme guidance for 2024 to 2025](#) (gov.uk) advises that from 1 September, pregnant women should be offered a flu vaccination over the autumn/winter seasonal vaccination programme to:

- protect pregnant women, who are at higher risk from complications from flu
- protect babies during pregnancy and in the first few months of life

Flu infection increases the risks of babies being premature or stillborn, and babies aged under 6 months are at high risk of complications. Women can receive vaccination at any time in pregnancy. Commencement of vaccination early will ensure that as many newborn babies as possible are protected during the flu season.

Covid-19 – seasonal programme

In [line with Joint Committee on Vaccination and Immunisation advice](#), all pregnant women are eligible for covid-19 vaccination at any stage of their pregnancy during the autumn/winter seasonal vaccination programme. This is in recognition of pregnancy as a risk factor for severe covid-19 infection and poor pregnancy outcomes.

Vaccination appointments will be available from Thursday 3 October 2024. From Monday 23 September 2024, pregnant women across England will be able to book a covid-19 vaccine appointment through their GPs and community pharmacies, and by using [the National Booking System](#). There will be no requirement to prove pregnancy status.

To support uptake of these vaccine offers, we therefore ask the following:

1. Maternity, community pharmacy and primary care services should ensure all pregnant women are encouraged, at every opportunity, to take up the offer of vaccination against flu, covid-19, pertussis and respiratory syncytial virus (RSV).

For maternity services in particular, this should include:

- Providing UK Health Security Agency (UKHSA) leaflets on all antenatal vaccines in the pre-booking pack sent to all pregnant women
 - alternatively, these can be provided during the booking appointment
 - leaflets can be ordered in hard copy via UKHSA
 - links to all vaccine-related resources can be found below.
 - Making Every Contact Count (MECC) to initiate a vaccine confidence discussion antenatally
 - Information such as leaflets and posters, in languages and formats appropriate for the local population, should be made available across all antenatal settings for all antenatal vaccines.
2. Maternity and vaccine services should collaborate so that women are signposted locally to receive all antenatal vaccines. Vaccination and maternity services should be brought together wherever feasible, so that it is as easy as possible to get vaccinated at any point in the maternity pathway.
 - The RSV and pertussis vaccines are not routinely scheduled at the same time during pregnancy. However, if a woman has not received a pertussis containing vaccine by the time she presents for an RSV vaccine, both vaccines can and should be given at the same appointment to provide timely protection against both infections to the infant.

- The covid-19 and seasonal influenza vaccines can be given at any time in pregnancy when the campaigns are running, and at the same time as the pertussis and RSV vaccines.
- Dependent on local services' participation in the vaccination programmes, women may be able to receive some vaccinations offered in pregnancy together from their local GP, pharmacist or maternity service. This should be supported wherever requested.

Further information and guidance for each of the antenatal vaccination programmes can be found in appendix A.

Vaccination is a vital means of protecting babies, women and families, as well as NHS capacity this winter. We would like to thank everyone working in maternity services, in general practice, and in community pharmacies for all that you are doing to facilitate vaccinations in pregnancy.

Yours sincerely,



Kate Brintworth

Chief Midwifery Officer for
England



Donald Peebles

National Clinical Director for
Maternity



Steve Russell

Chief Delivery Officer and
National Director for
Vaccination and Screening

Appendix A: further information and guidance on antenatal vaccinations

Respiratory syncytial virus:

- [UK Health Security Agency \(UKHSA\) service user guide, leaflet and poster](#)
- [UKHSA guidance documents and training slide set for health care professionals](#)
- Green book: [respiratory syncytial virus: the green book, chapter 27a](#)
- [Communications toolkit including further posters, digital screens, web banners and translated material - Department of Health and Social Care](#)
- [NHS England/UKHSA: letter introducing the Respiratory Syncytial Virus Programme](#)

Whooping cough

- There is no whooping cough-only vaccine. Women will normally be offered the ADACEL vaccine that protects against whooping cough, diphtheria and tetanus. The Boostrix IPV vaccine protects against whooping cough, diphtheria, tetanus and polio.
- [UKHSA guidance on pertussis vaccination programme for pregnant women](#)
- [UKHSA whooping cough leaflet and poster](#)
- Green Book: [Green Book Chapter 24 - Pertussis \(publishing.service.gov.uk\)](#)
- [NHS England whooping cough vaccination in pregnancy communications resources](#)
- [UKHSA data on confirmed cases in England by month - gov.uk](#)

Flu

- Green Book: [influenza: the green book, chapter 19 – gov.uk](#)
- [Flu 2024/25 season resources - gov.uk](#)

Covid-19

- Green Book: [covid-19: the green book, chapter 14a - gov.uk](#)
- [Latest covid-19 resources - gov.uk](#)