

[Guidance Notes on Abrysvo® Respiratory Syncytial Virus \(RSV\) Vaccination Delivery 2024](#)

There have been lots of queries about the delivery of the RSV vaccination programme. These have mostly centred around who can administer the vaccine and when and how should the programme be delivered. We have consulted with our expert colleagues across North East London and London-wide to provide you with a factsheet that we hope provides some much-needed clarity at what we know is an incredibly busy time of the year.

RSV Programme Delivery

- ◆ The RSV programme was commissioned to start from the 1st September 2024 to the following cohorts:
 1. **Pregnant individuals:**
 - a. from week 28 of pregnancy, vaccination should occur in week 28 or soon after to ensure sufficient time for the mother to make high levels of antibodies and for these to transfer across the placenta, to provide maximum protection to infants, including those born prematurely (see dose and frequency of administration section for operational recommendations) 2.
 2. **Older adults:**
 - a. Prospective programme - aged 75 years of age on or after 1 September 2024 (that is, with a date of birth (DOB) on or after 1 September 1949). These individuals should be vaccinated on or after (but not before) their 75th birthday
 - b. Catch-up campaign - adults who are aged between 75 and 79 years of age on or before 1 September 2024 (DOB between 1 September 1945 and 31 August 1949). Such individuals remain eligible up to the age of 79 years and 364 days (in other words, up to and including the day before the individual's 80th birthday)
 - c. Adults who turn 80 years of age between 2 September 2024 and 31 August 2025 (DOB between 2 September 1944 and 31 August 1945) remain eligible up to and including 31 August 2025
- ◆ Vaccines are available to order from national stock on [Immform](#). You must order separate supplies for the older adult programme and the programme for pregnant individuals.

RSV vaccine - Abrysvo maternal vaccine for infant protection

Manufacturer: Pfizer
Links: Green Book, SPC
Pack List Price: £158.00
Items/Doses per Pack: 1
Quantity (Packs): 1
[Add to Order](#)

Abrysvo can be ordered via ImmForm for the prenatal vaccination of pregnant women. Abrysvo cannot be ordered via ImmForm for administering to older adults.

Please be aware packs are large and take up more room than usual. Do not over order

RSV vaccine - Abrysvo vaccine for older adult protection

Manufacturer: Pfizer
Links: Green Book, SPC
Pack List Price: £158.00
Items/Doses per Pack: 1
Quantity (Packs): 1
[Add to Order](#)

Co-administration of the RSV vaccine with other vaccinations in the older adult programme

The guidance on this is in the Green book, UKHSA training and the Patient Group Direction (PGD) are very clear, the RSV vaccine **MUST NOT** be routinely co-administered with neither the seasonal influenza vaccine nor the covid vaccine in the older adult population. As a PGD is a legal framework for the administration of vaccinations and the [green book](#) forms part this guidance forms part of the RSV vaccine PGD, following the green book guidance is a statutory requirement of giving this vaccine. The reasons for this are:

Timing

- ◆ The RSV vaccine programme is scheduled to start on 1/9/2024 because RSV infection is a winter virus, RSV season in the UK starts from October, peaking in December and then declining in March. Delaying RSV vaccination until the scheduled start of the influenza and Covid programme on 3/10/2024 would put eligible patients at unnecessary risk of contracting RSV

Reduced Immune Response

- ◆ there is some data which shows that in older adults administering Abrysvo® at the same time as seasonal influenza vaccine may reduce the immune response to the RSV vaccine
- ◆ there is also data that suggests that the response to the influenza A(H3N2) component of seasonal influenza vaccine (the influenza subtype which most severely affects older adults) may be diminished when RSV and seasonal influenza vaccine are co-administered to older adults
- ◆ there is some data which shows co-administration with COVID-19 vaccination and RSV vaccination may reduce the immune response to the RSV vaccine
- ◆ no specific interval is required between administering the vaccines

Other Vaccines

- ◆ In line with general advice about co-administration of inactivated and non-live vaccines, Abrysvo® can be safely given concomitantly with pneumococcal and/or the Shingrix shingles vaccines. Abrysvo® can be given at any interval before or after these vaccines or other inactivated or non-live vaccines
- ◆ although live vaccines are not commonly indicated in older adults, Abrysvo® is an inactivated or non-live vaccine so can be given at the same time as any live vaccines

The guidance for the maternal vaccination programme for infant protection has different guidance, please refer to the [PGD](#) for further details.

Please Note - if it is thought that the individual is unlikely to return for a second appointment or immediate protection is necessary, the RSV vaccine can be administered at the same time as the influenza vaccine.

RSV Vaccine Administration

The UKHSA has set clear guidance on the prerequisites for administering the RSV vaccine (these can be found on the training slide sets which can be accessed [here](#))

Before administering the RSV vaccine, you should have:

- undertaken training in the management of anaphylaxis and Basic Life Support (BLS) (adult) as specified by the policy for your local area
- undertaken any additional statutory and mandatory training as required by your employer
- ◆ undertaken theoretical and practical vaccination training and been assessed as competent in line with the [National Minimum Standards and Core Curriculum for immunisation training](#) with competence being assessed using [Immunisation Knowledge and Skills Competence Assessment Tool](#)
- undertaken specific training on the RSV vaccination programme and familiarised yourself with the process for [preparation of Abrysvo®](#)
- accessed and familiarised yourself with the following key documents: [Green Book RSV Chapter 27a](#), [RSV vaccination programme for older adults information for healthcare practitioners](#) and the vaccine product information in the Summary of Product Characteristics ([Electronic Medicines Compendium](#) website)
- an appropriate legal framework to supply and administer RSV vaccine in place for example patient specific prescription, Patient Specific Direction (PSD), Patient Group Direction (PGD)

Administration under a PGD

ONLY the following staffing groups can administer the RSV vaccine under a PGD:

- ◆ nurses and midwives currently registered with the Nursing and Midwifery Council (NMC)
- ◆ pharmacists and pharmacy technicians currently registered with the General Pharmaceutical Council (GPhC) (Note: This PGD is not relevant to privately provided community pharmacy services)
- ◆ paramedics, physiotherapists and radiographers currently registered with the Health and Care Professions Council (HCPC)

Administration under a PSD

Ultimately it is the employing organisations decision as to what vaccines their staff can administer. It is legal for Healthcare Assistant's (HCA's) and Nursing Associates (NA's) who have been sufficiently trained and meet the prerequisites set out above, to administer the RSV vaccine. However, given the nature of this programme, and that this is a new vaccine, our expert colleagues have provided us with some guidance on what must be in place, and some notes of caution around administration via a PSD. Together these will help everyone to ensure that the delivery of this programme is safe for both staff and patients:

Prerequisites

- ◆ A PSD **MUST** be written by a prescriber, and has to be constructed, and implemented properly, and in line with legal requirements. Details on the legal requirements for a PSD can be found [here](#)
- ◆ A PSD does not cover preparing/reconstituting the vaccine. As the same person who administers *must* first of all prepare the vaccine, competency assessment for the preparation/reconstitution of the vaccine must be completed for each person planning to administer the vaccine.
- ◆ Once trained and assessed as competent, clinical governance requires that all staff providing the service have the necessary support and supervision. Robust processes, structures and routes of escalation must be in place, so that staff can proficiently and safely carry out their role, within both their scope of practice and assessed degree of knowledge and competence.
- ◆ Clear processes and procedures for delegation and supervision must be documented in local medicines policies and governance arrangements.
- ◆ Comprehensive training and competency assessment must be in place, so that all vaccines are given safely and effectively to those who are eligible to receive them. Training should have been completed in line with the [National Minimum Standards and Core Curriculum for immunisation training](#) and competence should be assessed using [Immunisation Knowledge and Skills Competence Assessment Tool](#)
- ◆ It must not be assumed that having received training for and been signed-off as competent to deliver one vaccine product, staff of any grade are capable of administering another vaccine product to a different subset of the population. Anyone advising about, assessing suitability for, or administering any vaccine, must have received specific training for that vaccine, and sufficient preparation to ensure that they are competent and confident to carry out their role.
- ◆ Indemnity insurance must be in place for the HCA/NA to perform this intervention

Notes of Caution

- ◆ Registered HCPs are still trying to familiarise themselves with e.g. schedule/prescribing/product characteristics etc. This may make it difficult for them to write a PSD or sign off an HCA as competent before they have the knowledge and experience in practice themselves.
- ◆ Careful consideration should be given regarding the most appropriate delegation and role of staff in delivering the vaccination service. For example, due to its complex nature, delegation of the vaccinator role to non-registered staff does not necessarily result in operational efficiencies as they are not able to assess suitability for vaccination, take informed consent or work to Patient Group Directions (PGDs) (instead, a PSD or individual patient prescription, written by a prescriber who has undertaken an assessment of each intended recipient would be required).
- ◆ This vaccination programme has some additional aspects to consider with regard to the appropriateness of delegating RSV vaccination:
 - this is a new programme so individuals may have a lot of questions or concerns
 - there are specific (and different) eligibility, timing and co-administration requirements for each programme
 - the mechanism for drawing up the dose is different to that of other vaccines.

Key Message

Those with a role in delivering the RSV vaccine programme need to be knowledgeable, confident and competent in order to promote confidence in the vaccination programme and deliver the vaccine safely

Acknowledgements

This guidance was created with thanks to the following expert colleagues:

Dr Raliat Onatade - Chief Pharmacist and Director of Medicines and Pharmacy NHS North East London

Child Health Services and Immunisations NHS England - London Region

Hannah Taylor - Immunisation Specialist Nurse and Trainer Immunisations UK Ltd

Helen Beynon - Clinical Advisor Immunisation Clinical Advice Response Service (ICARS)

NHS England - London Region

Resources

<https://www.bma.org.uk/media/1592/bma-patient-group-and-patient-specific-directions-jan-2016.pdf>

<https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-19-patient-group-directions-pgdspatient-specific-directions>

<https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-57-health-care-assistants-general-practice>

[Abrysvo powder and solvent for solution for injection - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)

[RSV Green Book Chapter Respiratory syncytial virus: the green book, chapter 27a - GOV.UK \(www.gov.uk\)](#)

[Respiratory syncytial virus \(RSV\) programme: information for healthcare professionals - GOV.UK \(www.gov.uk\)](#)

[Health Care Support Workers Administering Inactivated Influenza, Shingles and Pneumococcal Vaccines for Adults and Live Attenuated Influenza Vaccine \(LAIV\) for Children](#)

[NHSE-UKHSA-RSV-PGD-v1.00.pdf \(england.nhs.uk\)](#)

[PHE \(2015\) National Minimum Standards and Core Curriculum for Immunisation Training of Healthcare Support Workers](#)

[What vaccines can your HCA undertake? \(practiceindex.co.uk\)](#)

HCA Vaccine Administration Guidance [Publications | Royal College of Nursing \(rcn.org.uk\)](#)

[Immunisation Knowledge and Skills Competence Assessment Tool](#)

[Specialist Pharmacy Service: Patient Specific Directions](#)

