



Dear Colleagues,

RESPIRATORY SYNCYTIAL VIRUS (RSV) VACCINATION PROGRAMME 2026-27 – OLDER ADULTS & MATERNAL (PROTECTING INFANTS)

This letter provides updated information on the 2026-27 RSV vaccination programme.

The **key update** is that the older adults programme is expanding to include adults aged 65 to 74 years with immunosuppression or with chronic respiratory disease. This letter supersedes the previous version SGHD/CMO(2026) 03.

Background

- RSV is a common respiratory virus that may cause severe illness, in particular in infants and older adults. RSV infections occur year-round, but the largest number occur in a seasonal pattern of community transmission, typically starting in October, peaking in December, and declining by March.
- In infants, RSV can cause bronchiolitis which may require hospital admission. Older adults may also experience severe complications from RSV requiring hospitalisation. Underlying chronic health conditions such as immunosuppression and respiratory disorders increase the likelihood of severe RSV complications.

History of the RSV Programme

1. The RSV vaccination programme was introduced in August 2024 for:
 - those turning 75 years of age. An initial catch-up programme was also offered to those aged 75 to 80 years (i.e. 79+364 days) as of 01/08/24.
 - pregnant women from 28 weeks gestation. Vaccination of pregnant women provides passive

**From Chief Medical Officer
Chief Nursing Officer
Chief Pharmaceutical Officer**
Professor Sir Gregor Smith
Professor Aisha Holloway
Professor Alison Strath

16 July 2026

SGHD/CMO(2026)12

Addresses

For action

Chief Executives, NHS Boards
Medical Directors, NHS Boards
Nurse Directors, NHS Boards
Directors of Midwifery, NHS Boards
Primary Care Leads, NHS Boards
Chief Officers of Integration Authorities
Directors of Pharmacy
Directors of Public Health
Midwives
General practitioners
Immunisation Co-ordinators
CPHMs
Scottish Ambulance Service

For information

Chairs, NHS Boards
Consultant Physicians and Paediatricians
Chief Executive, Public Services Delivery Scotland
Public Health Scotland
Scottish General Practitioners Committee
Community Pharmacy Scotland

Further Enquiries

Policy Issues

Seasonal Vaccine & Strategy Team
ImmunisationPolicy@gov.scot

Medical Issues

Senior Medical Officers
St Andrew's House
ImmunisationPolicy@gov.scot

Pharmaceutical

Public Health Scotland
phs.immunisation@phs.scot

Vaccine Supply Issues

nss.vaccineenquiries@nhs.scot



protection to infants. This is delivered year-round. See Annex B.

2. From spring 2026, based on [Joint Committee on Vaccination and Immunisation \(JCVI\) advice](#), the RSV vaccination older adult programme was expanded further to include:
 - Adults aged 80 years and over
 - All residents in a care home for older adults

Key Update: New Joint Committee on Vaccination and Immunisation (JCVI) Advice

3. On 18 March 2026 the JCVI issued a further [statement of advice](#) recommending extending the older adult RSV immunisation programme to include all those aged 65 to 74 years with the following underlying health conditions:
 - chronic respiratory disease, including those with:
 - poorly controlled asthma
 - chronic obstructive pulmonary disease (COPD)
 - bronchiectasis
 - cystic fibrosis
 - interstitial lung fibrosis
 - pneumoconiosis
 - bronchopulmonary dysplasia
 - immunosuppression due to disease or treatment

See [Respiratory syncytial virus: the green book - GOV.UK](#) for full details of clinical risk groups for adults aged 65 to 74 years

2026-27 Older Adults Programme Eligibility

4. In 2026-27 vaccination will continue to be offered to those turning 75 years of age. This includes invitations for all those turning 75 years between 1 August 2026 and 31 July 2027.
5. From April 2026 the catch-up programme expanded to include all adults aged 80 years and over and all residents of care homes for older adults.
6. From August/September 2026 the older adults programme will be further extended to include those who have chronic respiratory disease (excluding well controlled asthma) or immunosuppression due to disease or treatment and are:
 - a. turning 65 years between 1 August 2026 and 31 July 2027
 - b. aged 65 to 74 (i.e. 74+364 days) years as of 1 August 2026

2026-27 Older Adults Programme Delivery

7. RSV vaccinations have been delivered to previously unvaccinated residents of care homes for older adults by 30 June 2026 as part of a co-administration strategy during the spring 2026 COVID-19 vaccination programme.
8. The remainder of the 80 years and over group, plus the routine turning 75 years programme (for those turning 75 years between 01/08/26 – 31/07/27), must be offered an appointment by 30 September 2026 as per the previous [CMO letter](#) (SGHD/CMO(2026) 03).
9. Delivery of RSV vaccinations to those aged 65-74 years in select clinical at-risk groups are to begin from August/September 2026 and conclude before the end of the spring 2027 COVID-19 vaccination programme (which is normally towards the end of June), with Boards attempting to offer vaccination at the earliest opportunity within this timeframe to ensure protection of as many individuals as possible prior to the usual expected seasonal rise in infections.
10. It is recognised that there are competing vaccination priorities and workforce pressures concurrently during this period.
11. Delivery of RSV vaccinations to those aged 65-74 years in select clinical at-risk groups will be a recurring programme, with those newly diagnosed, or previously diagnosed and entering this age group, being offered vaccination.
12. Those eligible in previous years of the programme, who did not come forward at the time, remain eligible indefinitely and can come forward at any point in the future should they request vaccination and still meet the eligibility criteria.

High-risk infants and young children programme

13. The protecting infants (maternal) programme does not replace the high-risk infants and young children programme which continues for those who are eligible. This RSV monoclonal antibody programme has been in place since 2010 for high-risk infants and the eligibility expanded in July 2025 to include infants born very or extremely prematurely (less than 32 weeks).
14. An updated CMO letter for the RSV monoclonal antibody programme is due to be issued separately in Summer 2026. More information on this programme can be found in previous CMO letters, which can be accessed via [NHS Scotland - Publications](#) by using the search terms 'Respiratory Syncytial Virus' or 'RSV'. Information is also available in [Respiratory syncytial virus: the green book- GOV.UK](#).

Inclusion & Equity

15. All vaccination programmes must include an element of proactive inclusion work in an effort to reduce health inequalities, with a particular focus on areas of highest deprivation and certain ethnicities who may have lower vaccination uptake.

Vaccination Programme

16. Further information on the older adult programme is included in **Annex A**, with detail on the protecting infants (maternal) programme in **Annex B**.

Impact of the programme

17. The impact of the introduction of the older adults programme can be seen in a [study](#) conducted by Public Health Scotland (PHS), in collaboration with the University of Strathclyde, and published in February 2025, which showed a 62% reduction in RSV-related hospitalisations among the eligible older adult age groups.
18. The impact of the RSV Protecting Infants (Maternal) programme can be seen in another [study](#) conducted by PHS, in collaboration with the Universities of Glasgow, Strathclyde, Edinburgh and Oxford, showing that infants under three months of age whose mothers received the RSV vaccination during pregnancy had around 80% reduced risk of hospitalisation due to an RSV infection compared to infants whose mothers were unvaccinated.

Action

19. Health Boards are requested to action this letter and ensure that their vaccination teams and primary and secondary care colleagues are aware of it.
20. We are very grateful for your continued support with the RSV vaccination programme, as well as all your hard work in delivering the entirety of the Scottish Vaccination and Immunisation Programme to the people of Scotland.

Yours sincerely,

Gregor Smith

Aisha Holloway

Alison Strath

Professor Sir Gregor Smith
Chief Medical Officer

Professor Aisha Holloway
Chief Nursing Officer

Professor Alison Strath
Chief Pharmaceutical Officer

Annex A: RSV vaccination – Older Adults Programme

Vaccine information

1. The older adult programme uses [Abrysvo®](#) as a one-dose schedule.
2. RSV vaccines can be co-administered with Shingrix® shingles vaccine, COVID-19 vaccines and pneumococcal vaccines. It is recommended that RSV vaccine is not routinely scheduled to be given to an older adult at the same appointment or on the same day as an influenza vaccine. No specific interval is required between administering the vaccines. See [Respiratory syncytial virus: the green book- GOV.UK](#) for details. If it is thought that the individual is unlikely to return for a second appointment or immediate protection is necessary, Abrysvo® can be administered at the same time as influenza vaccination. Reactogenicity for co-administered vaccines is expected to be consistent with the profiles of the individual products.
3. Abrysvo® is available to order through vaccine holding centres. The vaccine is the same for both the older adult and maternal (protecting infants) programmes.
4. The vaccine is supplied in single dose packs, and the presentation is a vial (containing active product) and a pre-filled syringe (containing sterile water solvent) for reconstitution.

Revaccination

5. Revaccination is not currently recommended within the older adult programme.

Patient Group Direction (PGD) / Vaccine Group Direction (VGD)

6. An updated national specimen Patient Group Direction (PGD) for administration of Abrysvo® for eligible cohorts will be produced by PHS. Relevant amendments to the extant Vaccine Group Direction (VGD) which supports the older persons and care home programmes are under consideration.

Communications Materials

7. PHS, in partnership with stakeholders, has developed communications materials and a marketing campaign in relation to the RSV vaccination programme. Resources (such as social media assets) are available on the [PHS Marketing Resource Centre](#) and will be available for the 65-74 years at risk groups in advance of the expansion going live. An updated information leaflet to support informed consent will be available in print and online at [RSV vaccine | NHS inform](#) in advance of the programme start date.

Workforce Education Resources for Healthcare Practitioners

8. Public Services Delivery Scotland (PSD Scotland), in partnership with PHS and stakeholders, has developed educational resources for healthcare practitioners in relation to the RSV vaccination programmes. Updated resources will be available on [Immunisation | Turas | Learn](#).

Medicines and Healthcare products Regulatory Agency (MHRA) alert

9. On the 07 July 2025 the [MHRA issued an alert](#) in relation to Abrysvo® (Pfizer RSV vaccine currently used in our programmes) and Arexvy® (GSK RSV vaccine), in relation to a small

risk of Guillain-Barré syndrome following vaccination in older adults. The [JCVI statement](#) issued on 18 March 2026 noted that the MHRA confirmed there were no new safety signals for adults with respect to RSV vaccines other than those already known. The risk of Guillain-Barré syndrome remained principally age-related and there was no evidence of a higher risk in those with underlying health conditions beyond that conferred by age. Ongoing observational studies will continue to inform on long-term safety. The risk-benefit balance of vaccination was considered clearly in favour of vaccination in the groups advised.

10. Healthcare professionals should advise all recipients of Abrysvo® that they should be alert to signs and symptoms of Guillain-Barré syndrome and, if they occur, to seek immediate medical attention as it requires urgent treatment in hospital.
11. The safety of the introduction of the older adults programme can be seen in a study conducted by PHS, in collaboration with the University of Edinburgh and the University of Strathclyde, and published in October 2025, which showed a good overall safety profile, but an increased risk of Guillain-Barre Syndrome, although this remained rare. The study can be found on PubMed: [RSV Vaccination Programme for Older Adults: A Scotland-Wide Study on RSVpreF Vaccine Safety - PubMed](#)

Section 47 Certificate of Incapacity

12. A Section 47 certificate is required to provide non-emergency medical treatment (including vaccinations) to an adult who lacks the decision-making ability to understand, retain, or weigh up information about the treatment being offered. GPs may receive requests to assess an adult's decision-making ability to consent in relation to medical treatment.
13. Where an adult is assessed as lacking the decision-making ability to make a decision about their vaccination, a Section 47 certificate under the [Adults with Incapacity \(Scotland\) Act 2000](#) must be completed by a prescribed medical practitioner.
 - If a welfare proxy has been legally appointed with powers to make a decision relating to medical treatment, they should be consulted where practicable and their decision regarding the proposed treatment must be sought. This may include a welfare attorney or guardian, or a person authorised under an intervention order.
 - The involvement of the welfare proxy does not remove the requirement for a Section 47 certificate. Both the certificate and the proxy's decision are required where the adult lacks capacity and a proxy with relevant powers exists.
14. More information can be found in these guidance documents:
 - [Treatment under section 47 of the AWI](#)
 - [Section 47 certificate of incapacity - gov.scot](#)
 - [Supported decision making good practice guide 2024](#)
15. Training is also available via TURAS: [Adults With Incapacity \(AWI\) | Turas | Learn](#)

Annex B: RSV vaccination – Protecting Infants (Maternal) Programme

Vaccine information

1. The maternal vaccination programme uses [Abrysvo®](#) as a one-dose schedule. A single dose will be required in each pregnancy.
2. Abrysvo® is available to order through vaccine holding centres. The vaccine is the same for both the older adult and protecting infants (maternal) programmes.
3. The vaccine is supplied in single dose packs, and the presentation is a vial (containing active product) and a pre-filled syringe (containing sterile water solvent) for reconstitution.

Patient Group Direction (PGD)

4. A national specimen PGD for administration of Abrysvo® for vaccination in pregnancy has been produced by PHS.

Communications Materials

5. PHS, in partnership with stakeholders, has developed communications materials and a marketing campaign in relation to the RSV vaccination programme. Resources (such as social media assets) will be available on the [PHS Marketing Resource Centre](#) in advance of the programme going live. An information leaflet to support informed consent is available for pregnant women or birthing people. This information is available on NHS inform at www.nhsinform.scot/rsv-baby
6. Information about the RSV vaccine for the maternal programme is available from [RSV vaccine during pregnancy | NHS inform](#).

Workforce Education Resources for Healthcare Practitioners

7. PSD Scotland, in partnership with PHS and stakeholders, has developed educational resources for healthcare practitioners in relation to the RSV vaccination programmes, including an eLearning dedicated to vaccination in pregnancy. These are available on [Immunisation | Turas | Learn](#).