

WELSH GOVERNMENT INTEGRATED IMPACT ASSESSMENT:

SECTION 1 AND 8

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| Title of proposal: | Respiratory syncytial virus (RSV) vaccination programme for older adults (75-79 years) and infants for implementation in 2024-25. |
| Official(s) completing the Integrated Impact Assessment (name(s) and name of team): | Joanne Davies / Sharron Richards Vaccination policy team |
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| Cabinet Secretary/Minister responsible: | Minister for Health and Social Services |
| Start Date: | From autumn 2024 |

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SECTION 1. WHAT ACTION IS THE WELSH GOVERNMENT CONSIDERING AND WHY?

Respiratory syncytial virus (RSV) is an enveloped RNA virus, in the same family as the human parainfluenza viruses and mumps and measles viruses. RSV is one of the common viruses that cause coughs and colds in winter.

Globally, RSV infects up to 90% of children within the first two years of life and frequently reinfects older children and adults. For most people, RSV infection causes a mild respiratory illness. Babies under one year of age, and the elderly are at the greatest risk. The clinical significance of RSV in infants is that it can cause bronchiolitis which leads to the inflammation of the small airways and significant breathing difficulties. In older adults, RSV is an important cause of acute respiratory illness, particularly those living with frailty and co-morbidities.

The Joint Committee for Vaccination & Immunisation (JCVI) have recommended an RSV maternal vaccine programme (MV) or change to the Monoclonal Antibody treatment (MAb) for the protection of infants and a RSV vaccination programme for the protection of older adults aged 75 -79 subject to products being procured at a cost effective price. <https://www.gov.uk/government/publications/rsv-immunisation-programme-jcvi-advice-7-june-2023>

Welsh Government, along with the other 4 nations, propose to introduce an RSV vaccination programme/s from 2024-25, if the products are deemed cost effective (following a procurement exercise).

This policy relates to four of the goals under the Well-being of Future Generations (Wales) Act namely:

- a more prosperous Wales – a highly vaccinated population is healthier, which in turn leads to higher employment and greater productivity.
- a healthier Wales - through contributing to people's physical and mental well-being.
- A more equal Wales – where healthier children go on to reach their potential regardless of their background/ circumstances.

A globally responsible Wales – where vaccination is key to global health security, in an interconnected world where disease outbreak can spread very quickly. A highly vaccinated country can respond better to public health outbreaks and emergencies.

In terms of the five ways of working, this policy considers:

Long term

- The vaccination programme would limit the infection rate and reduce the number of severe cases in those immunised. This will have a positive health effect for those vaccinated and will reduce the impact of RSV on public health services in 2024 and in future years. Also, lessons can be learnt from the initial rollout in 2024 to inform the most efficient and effective deployment model moving forward.
- Vaccination programmes provide a degree of social mobility, as poverty and the associated ill-health and mortality from infectious diseases are no longer the determinants of one's life chances. Vaccine recipients have the potential for improved life-expectancy largely demonstrated by, but not confined to, infants and children.

Prevention

- Vaccination is one of the most important actions we can take for our own health, and it's the most important preventative action NHS Wales can offer to people in Wales. RSV vaccination of vulnerable groups aims to prevent death, hospitalisation/ illness and reduce the burden on NHS Wales. It would limit the infection rate and reduce the number of severe cases in those immunised. This will have a positive health effect for those vaccinated and will reduce the impact of RSV on public health services.

Integration

- The impact of this programme on other routine vaccination programmes in 2024 is being fully considered. Welsh Government officials will continue to work closely with Vaccine Programme Wales (VPW) and Public Health Wales (PHW) to minimise disruption to the NHS delivery. VPW project managers for the adult and maternal/infant programmes have been appointed to evaluate options to plan for an efficient and effective rollout in Wales.

Collaboration

- Welsh Government will continue to act in collaboration with VPW and PHW in planning the implementation of the vaccination programme through regular on-line meetings and correspondence.

Involvement

- Relevant stakeholders (children and older adult representatives) were asked for their views to inform this integrated impact assessment and will be kept up to date as the policy develops. Welsh Government will use these stakeholders' insights to inform decisions on how such a programme is stood up in Wales for autumn 2024.

Impact

Positive

- the purpose of establishing this RSV vaccination (like all vaccination) is as a preventative measure to provide protection against the RSV virus – with the aim of keeping individuals safe from severe disease, hospitalisation and death.
- the vaccination programme would limit the infection rate and reduce the number of severe cases in those immunised. This will have a positive health effect for those vaccinated and will reduce the impact of RSV on public health services, especially in the winter months when RSV is most prevalent.
- potential to learn from the Covid-19 vaccination programme, which was promptly stood up in response to the pandemic, to inform deployment. Health boards would be expected to share innovation, learning and best practice with each other, to improve service provision and boost uptake, in line with the National Immunisation Framework.

Negative

- There is a risk in terms of acceptability and take up. Public awareness of the risks of RSV is low. There is evidence that the take up of pregnant women for all vaccines is on the decline (flu/ pertussis).
- There are significant risks to the ability of NHS Wales to deliver this programme, not least in terms of the workforce required and the extremely tight window for vaccination to be completed. The outcome of the procurement exercise will be known in March but we will be unable to inform the NHS until the contract awarded in June. Producing all the necessary patient literature and guidance for vaccinators from a PHW perspective is also a challenge, as is standing up the necessary digital systems necessary to invite those eligible for appointments and record vaccinations.

Costs and Savings

- The Welsh Government's SEA team have not modelled the cost effectiveness of vaccines specifically for Wales but believe that the JCVI-commissioned models look reasonably robust. As part of their analysis, they concluded that the RSV burden of disease from early death is much higher in older people, whereas the opportunity from reducing admissions is much higher in 0-4s. RSV vaccines are highly likely to be cost effective for both groups, but the financial cost savings from reduced hospital activity will be much greater in 0-4s who will benefit from the infant protection programme.
- These costs do not include ICU, ambulance conveyances, social care, informal care, or productivity costs (e.g. parents taking time off work for sick children), so the true benefits are likely to be higher. Preventing RSV may have additional benefits for the NHS by reducing pressure during the busiest winter period.

Mechanism

- No new legislation is required to introduce this vaccination programme in Wales.
- The [National Immunisation framework](#) was published in October 2022 and sets out our plans to inform people to know what vaccinations they are eligible for and how to receive them.
- The deployment will be the responsibility of NHS Wales, with health boards in Wales developing local plans and impact assessing these plans.
- Any decision to proceed with a RSV vaccination programme will be communicated at the appropriate time to NHS via a Wales Health Circular and a written statement will be published to inform members of the Senedd.
- PHW will develop a communications strategy to raise awareness of RSV, inform eligible individuals of the benefits of having the vaccination and how those offered can access vaccination.

SECTION 8. CONCLUSION

8.1 How have people most likely to be affected by the proposal been involved in developing it?

The Joint Committee for Vaccination & Immunisation (JCVI) has recommended an RSV maternal vaccine programme (MV) or change to the Monoclonal Antibody treatment (MAb) for the protection of infants and a RSV vaccination programme for the protection of older adults aged 75 -79 subject to products being procured at a cost effective price. <https://www.gov.uk/government/publications/rsv-immunisation-programme-jcvi-advice-7-june-2023>

There is a significant burden of RSV illness in the UK population which has a considerable impact on NHS services during winter months. The JCVI advice refers to data suggesting RSV accounts for approximately 33,500 hospitalisations annually in children aged under 5 years old. It is a leading cause of infant mortality globally, resulting in 20 to 30 deaths per year in the UK. RSV-related mortality in low-income countries is considerably higher, and in some analyses is the second commonest cause of death (after malaria) in infancy.

The burden of RSV in older adults is less well understood and considered to be underestimated by existing routine surveillance. Sharp¹ estimated the average annual hospital admission rate in England related to RSV infection to be 251 per 100,000 for those over 75 years. Hardelid² estimated in each winter season there are 4,000 deaths in those aged over 75 years.

A 2015 [study](#) found that high-risk elderly people were twice as likely to have an RSV-related GP episode or to die from RSV-related causes than low-risk elderly people.

A 2016 [study](#) looking at RSV in 0–17 year-olds between 1995 and 2009 found that in the UK, RSV accounted for approximately 450,000 GP appointments, 29,000 hospitalisations and 83 deaths per year in children and adolescents, the majority in infants.

Both studies found the burden of RSV in both children and older adults in the UK exceeds that of influenza.

Public Health Wales (PHW) has a role in engaging with the public and a range of statutory and third sector organisations to gain behavioural insights on the barriers, perceptions and experiences of the vaccine programmes in Wales. The organisation uses various tools and methods to engage directly with groups to inform and influence national strategies and service improvements. The aim is to actively

¹ Sharp A and others. Estimating the burden of adult hospital admissions due to RSV and other respiratory pathogens in England.

² Mortality caused by influenza and respiratory syncytial virus by age group In England and Wales 1999 to 2010.

involve the different sections of the public, such as ethnic minority groups³ in the development of resources and interventions, with the aim of informing and building trust. As part of a [Study Report Evaluation of information resources](#) published in 2023) PHW used focus groups and in depth interviews with service users, to explore attitudes towards vaccinations, as well as awareness and views of information on vaccinations. RSV questions have also been loaded into the next 'Time to Talk survey' which will report in May 2024. The survey captures the views of nationally representative panel of 2,500 residents across Wales. By sharing their experiences and views each month, panel members will help to shape public health policy and decision making, and contribute to improving health and well-being across Wales.

More recently PHW is currently working with the National Centre for Population Health and Wellbeing Research team to produce two surveys which will go out via their already established surveys. An RSV pregnancy survey will go out alongside their 'antenatal survey' and the pre-school survey will go out alongside their 'Born in Wales' survey. This work is designed to gather perception of risk etc amongst a variety of vaccine preventable diseases including RSV and using behaviour science approach through COM-B.

Further work is planned by PHW communications on a strategy which sets out the benefits of receiving RSV vaccination, including tailored information/ leaflets for specific groups.

These messages will be taken forward at local level by health board communication teams to reach their resident populations.

8.2 What are the most significant impacts, positive and negative?

The implementation of the RSV vaccination programme would have a positive impact by limiting the infection rate and reducing the number of severe cases in those immunised. It will reduce the impact of RSV on public health services, especially in the winter months when RSV is most prevalent.

Vaccination would be offered to all eligible individuals regardless of gender, sexual orientation, race, language preference, disability, religion or beliefs, socio-economic status or political affiliation. If the vaccination programme is implemented, then people eligible in Wales would receive the same protection as in other nations of the UK.

There are risks to the ability of NHS Wales to deliver this programme, not least in terms of the workforce required and the extremely tight window for vaccination to be completed. Producing all the necessary patient literature and guidance for vaccinators from a PHW perspective is also a challenge, as is standing up the necessary digital systems necessary to invite those eligible for appointments and record vaccinations.

³ <https://phw.nhs.wales/topics/immunisation-and-vaccines/engagement-insights/evaluation-of-information-resources-ethnic-minorities-summary-report-2023/>

8.3 In light of the impacts identified, how will the proposal:

- **maximise contribution to our well-being objectives and the seven well-being goals; and/or,**
- **avoid, reduce or mitigate any negative impacts?**

Due consideration has been given to how the policy relates to the goals under the Well-being of Future Generations (Wales) Act and the five ways of working. A highly vaccinated population is healthier, physically and mentally, which contributes to the healthier Wales goal, and healthier people mean a more productive workforce and higher productivity which lends itself to a more prosperous Wales. Healthier children go on to reach their potential regardless of their background/ circumstances which will mean a more equal Wales. Vaccination is key to global health security, in an interconnected world where disease outbreak can spread very quickly. A highly vaccinated country can respond better to public health outbreaks and emergencies, which results in a more globally responsible Wales.

In terms of the five ways of working, this policy considers:

Vaccination programmes in the **long term** provide a degree of social mobility, as poverty and the associated ill-health and mortality from infectious diseases are no longer the determinants of one's life chances. Vaccine recipients have the potential for improved life-expectancy largely demonstrated by, but not confined to, infants and children. Vaccination is one of the most important actions we can take for our own health, and it's the most important **preventative** action NHS Wales can offer to people in Wales. This vaccination programme will integrate and align with planned changes to the childhood vaccination schedule. Welsh Government officials will continue to work closely with Vaccine Programme Wales (VPW) and Public Health Wales (PHW) to minimise disruption to the NHS delivery. The Welsh Government has and will continue to act in **collaboration** with VPW and PHW in planning the implementation of the vaccination programme and monitoring its success, through regular engagement. Relevant stakeholders were **involved** to inform this integrated impact assessment and will be kept up to date as the policy develops. Subject to Ministerial agreement, the Welsh Government will work with clinical and operational colleagues to inform decisions on how an RSV programme would be delivered from autumn 2024.

In order to maximise the benefits described, vaccination must be accessible to all.

To maximise uptake for the RSV programme in hard-to-reach groups, NHS Wales will be implementing the principles of the National Immunisation Framework, published by the Welsh Government in 2022⁴, which aims to transform and improve the delivery of vaccination and immunisation programmes for the people of Wales, with an emphasis on increased uptake and with equity at its core.

⁴ <https://www.gov.wales/sites/default/files/publications/2022-10/national-immunisation-framework-for-wales.pdf>

In delivering this vaccination programme, health boards will be expected to offer tailored support to enable and encourage under-served groups to take-up the offer of the vaccination. This requires a proactive approach to ensure that:

- Everyone eligible for a vaccination is appropriately offered an appointment (and recalled when necessary) and can access a vaccination.
- Everyone is supported with the information that they need to make an informed decision on vaccination based upon reliable sources.

There should be locally-led action to engage and empower communities to understand the benefits of vaccination and support and motivate others in their communities to be vaccinated, in particular, in areas of low uptake. Health boards are expected to develop a Vaccine Equity Strategy and programme of work with dedicated public health input.

Person centred, accessible deployment options are critical to maximising uptake and so there is the expectation on health boards have this at the centre of their deployment planning and delivery. Bringing vaccines as close to individuals as possible improves uptake – delivery by GPs through primary care is one of the most accessible ways to obtain vaccination due to the general proximity of GP surgeries to where people live.

8.4 How will the impact of the proposal be monitored and evaluated as it progresses and when it concludes?

The implementation of the RSV vaccination /treatment programmes will be monitored by VPW who will report back to Welsh Government via the Vaccine Oversight Board as part of the national governance arrangements.

A four-nation project board has been set up to discuss implementation and align deployment to ensure consistency across the UK and NI. These meetings will continue to monitor progress along with meetings at official level. A surveillance system will also be created to gather uptake data from GPs and midwifery services in Wales in line with other vaccination programmes.

Welsh Government will continue to liaise with all relevant stakeholders beyond the implementation phase to monitor progress and evaluate the initial rollout. Officials will continue to attend JCVI vaccination meetings, as observers, to monitor any future discussion on RSV and any changes they might advise.

