

Midwife Led Respiratory Syncytial Virus (RSV) Vaccination Standard Operating Procedure

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Powys Teaching Health Board is the operational name of Powys Teaching Local Health Board
Bwrdd Iechyd Addysgu Powys yw enw gweithredol Bwrdd Iechyd Lleol Addysgu Powys

To ensure that you are always using the latest version of this written control document, please refer to the version on the Corporate Governance SharePoint site

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Associated Policies and Written Control Documents

You may wish to list here other policies or written control documents that should be read in conjunction with this document or may be affected by material changes to this document.

Version Control:

Version	Summary of Changes/Amendments	Publication Date
1	Initial Issue	17/10/2024
2	Amendments due to introduction of EPR	04/09/2026

1.0 Scope

To outline the safe effective procedure for the offering, storage and giving of the Respiratory Syncytial Virus vaccine to protect babies from this virus to pregnant women from 28 weeks gestation.

2.0 Introduction

In September 2023 JCVI recommended a new universal vaccine campaign to protect infant and older adult populations against RSV, a disease which places significant burden on the NHS during winter months.

Respiratory Syncytial Virus

RSV is a common seasonal respiratory virus. Wales has historically seen a single peak of infection in late summer and autumn. Although COVID-19 restrictions disrupted the seasonal pattern of transmission, RSV has now returned to pre-pandemic patterns. There have been two RSV seasons post pandemic where incidence has risen consistently above low intensity levels between in September, peaked during November and returned to lower levels in early January. The RSV peak normally precedes the seasonal flu peak with the burden of mortality, morbidity and healthcare demand occurs between September and January.

Burden of RSV in Wales

RSV is best known for as a disease in children and young people and 90% of children will be infected with RSV by age 2. The risk of severe illness being highest in those under 6m old. During a normal RSV season infection in children aged under 2 years

old is estimated to be responsible for approximately 7,000-9,500 GP appointments, and 2,300-2,600 hospital admissions in Wales. This standard operating procedure applies to all midwives, maternity support workers and maternity administrators employed by Powys Teaching Health Board (PTHB) who are involved in the ordering, storage and administration of RSV vaccinations to pregnant women

3.0 Objective

Following this procedure will help PTHB to:

- This document sets out the guidance for the counselling, discussion, and delivery of the RSV Abrysvo® vaccination to all pregnant women, pregnant people and new mothers (hereafter referred to as women).
- To provide a standardised approach on the actions required to deliver RSV Abrysvo® vaccination in the maternity service.
- To promote a consistent and evidence-based approach to maternity immunisation.
- To ensure safe and effective administration of immunisation during clinic sessions and at routine antenatal appointments.
- To appropriately provide information and administer vaccination to women.
- To ensure good communication with Primary Care
- To state the process for inviting pregnant women
- To state the procedure for ordering, receiving, storing and maintaining the cold chain, when it is necessary to transport vaccine
- To provide suggested template for RSV Abrysvo® vaccination clinics
- To state consent procedures
- To state reporting and monitoring procedures

This procedure should be read in conjunction with:

- Green Book, Chapter 27a: Respiratory Syncytial Virus
- Public Health Wales. 'Immunisation and Vaccines'. Available at: [Immunisation and Vaccines - Public Health Wales \(nhs.wales\)](https://www.nhs.uk/public-health/wales/immunisation-and-vaccines/) Accessed: 24/10/2022
- PTHB/CDP 007 Management of Anaphylaxis Procedure.
- PTHB/MMP 001 – Medicines Policy
- PTHB/OHP 002 Needlestick & Body Fluids Contamination Injuries Policy.
- MMP 427 Safe and Secure Management of Refrigerated Meds and Vaccines. [MMP 427 Safe Secure Management of Refrigerated Medicines and Vaccines Standard Operating Procedure \(SOP\)](#)
- Welsh Health Circular WHC (2024)032 – The Introduction of new NHS Wales vaccination programmes against respiratory syncytial virus (RSV)
- PTHB Patient Group Directions (PGD) 0242 for RSV: Respiratory Syncytial Virus (RSV) vaccine (Abrysvo▼®) for prevention of lower respiratory tract disease caused by RSV: pthb.nhs.wales/services/pharmacy-and-medicines-

4.0 Definitions

- **PTHB** – Powys Teaching Health Board
- **MSW** – Maternity Support Worker
- **PGD** – Patient group directive
- **PTHB** – Powys Teaching Health Board
- **WPAS** – Welsh Patient Administration System
- **EPR** – Electronic Patient Record -
- **RSV** - Respiratory Syncytial Virus

5.0 Sections

5.1 Procedure for ordering, receiving and storing vaccines

- As part of daily drug checking, the midwife will check the number of RSV vaccines stored in the fridge. This will use the WIS for stock management e.g. temperature monitoring and stock checks (am and pm) when unit is operational.
- If stock is low (<10 vaccines left) then the midwife will order further vaccines. Midwife will check to ensure there are not already vaccines on order. Orders need to be placed a week in advance. The Pharmacy store staff will notify midwifery teams via email ahead of scheduled vaccinee deliveries to ensure that a member of staff is on site to receipt the goods. See **appendix B** for example email response. Please note that failure to comply with WIS recording eg. Recording temperatures etc may delay vaccine delivery.
- To order the RSV Vaccine you need to complete the order form in **appendix A** and email the completed form to PTHB.VaccPharmacyStoreOrders@wales.nhs.uk this email is checked once a day. Pharmacy Store staff should only be contacted via direct emails in an emergency. As most vaccines will now be transported via a **temperature-controlled van**, deliveries will arrive in **cardboard boxes / pharmacy bags** rather than vaccine porters. This means that a member of staff must be available to receipt deliveries and to transfer the vaccine to the fridge immediately on arrival. If no one is on site to receive the delivery then this will be classed as a 'failed delivery', and the driver will return the stock to the pharmacy store. This may cause disruption to service delivery.
- Orders to be placed based on predicted number of vaccines needed for the week up to a **maximum of 40** at a time.
- Fridges should not be more than 50% full overall. Eg. sufficient space must be maintained within the fridge to permit adequate air circulation. Ensure that excessive stockpiling of vaccines is avoided in case of fridge failure and to

reduce potential waste. Be mindful of available fridge space and check that you will have the storage capacity before placing an order. Storage of oxytocics and associated quantities must be considered. (including storage of cool packs, where necessary)

- Communication in planning ordering and receipt is paramount to ensure there is no vaccine wastage.
- Orders will be delivered in a vehicle fitted with temperature-controlled units) Midwives and Maternity Support Workers (MSW) or nominated designated person (who has completed the relevant training) can receive vaccines. **It is therefore, imperative that the delivery of vaccines is planned for when a designated person is available to receive the vaccines.** When there is not a designated member of staff available due to the midwife being called away in an emergency situation, arrangements will need to be made (by the midwife expecting to receive the vaccines) for a midwife to be available to receive the vaccines as soon as possible.
- Ensure the correct vaccines are received and immediately report any incorrect deliveries to PTHB.VaccPharmacyStoreOrders@wales.nhs.uk
- On delivery of the vaccines, check the order, put transfer the vaccines into the fridge and complete the order log (**appendix G**) where there is a discrepancy the number or type of vaccines received or any damaged stock this must be discussed with the pharmacy from which the order was generated within one working day.
- Check the stock against the delivery note for accuracy (e.g. Check that the vaccine type, brand, quantity, batch number and expiry match that of the delivery note)
- Ensure that the fridge temperature has been maintained between +2°C to +8°C and has been recorded onto WIS, then transfer the delivered stock to the fridge and record the stock balance onto WIS. entering temperatures on the system. [21.08-WIS APP 2.0 UPDATED WIS-App-UserGuide-2025](#) NB RSV stock will be supplied from internal stock, therefore do not receipt the vaccine on the delivery page on WIS eg. When stock is received it will only need to be added to the stock page on WIS.
- Rotate stock so that the oldest stock (shortest expiry) is at the front of the fridge to be used first. When checking the expiry date, in most cases the vaccine will expire on the last day of the month. I.e. 05/24 means the vaccine expires at 23:59 on the last day of May.
- Ensure that different vaccines/medicines are separated in the fridge eg. On different shelves.
- Ensure that fridges are cleaned and defrosted. MMP 430 Cleaning and Defrosting PTHB Medicines/Vaccines Refrigerators can be accessed here: [Cleaning / Defrosting SoP](#).

The medicines policy (MMP 001) must be adhered to at all times. For detailed guidance on cold-chain requirements, vaccine management, and (where applicable)

the transfer of vaccines into the community, refer to MMP 427 Safe and Secure Management of Refrigerated Medicines and Vaccines (see references)

Daily fridge temperature checks will be completed in line with Medicines Management policy 427 Safe and secure management of refrigerated medicines and vaccines. (link in references) Should excursions occur, data will be downloaded via data loggers (Appendix D) This will provide the Medicines Management Team with an accurate picture of the fridge temperature over time.

Procedure for reporting fridge excursion to MMT: Datix the incident, download the data logger data, complete the fridge temperature excursion form fully and send to MMT Info.MedicinesManagement.Powys@wales.nhs.uk

5.2 Inviting pregnant women and birthing people

- All pregnant women receiving care by Powys Midwives receive the Public Health Wales leaflet called 'How to protect you and your baby' which outlines the RSV immunization programme.
- The named midwife will discuss the vaccine with their clients at booking and from 16 weeks' gestation and inform them that they can access the vaccine from the maternity services from 28 weeks gestation.
- The offer of vaccines will be entered onto the EPR maternity system – see appendix E
- The RSV vaccine can be offered within the birth centres/hospital sites, GP clinics where these occur or at the home.
- Vaccination is to be administered from 28 weeks until 36 weeks. After 36 weeks this will be off label but will offer protection.
- The offer from 28 weeks is to ensure protection to the infant if the woman births early.
- The RSV vaccine can be given on the same day as the QIVc Influenza vaccine, in different arms. The RSV can be given at the same time as the ADACEL (Tdap) vaccine if after 28 weeks when offering the ADACEL. See chart 'Co-administration of Abrysvo® in pregnancy' Appendix A.
- This vaccine is indicated in each pregnancy and is to be offered to all pregnant women regardless of prior vaccination status.
- If there is a multiple pregnancy, only one dose of RSV needs to be administered.
- If the woman has not received the vaccine during her pregnancy and wishes to receive the vaccine, this can be given in the immediate postnatal period up to 28 days. This will not offer passive protection to the baby through transplacental antibody transfer but may protect the mother from contracting RSV, reducing the chance of transmission to

the infant, and may help increase levels of antibodies in breast milk, though neither of these is expected to be as protective a transplacental antibody transfer from vaccination earlier in pregnancy

5.3 Process for offering vaccine and administration of RSV

- The midwife must ensure the correct vaccine is administered in accordance with the PTHB RSV Vaccine Patient Group Direction.
- A single dose of the vaccine should ideally be administered at a routine appointment between 28 weeks and 36 weeks of pregnancy to maximise the likelihood that the baby will be protected from birth.
- Women can still be immunised after 36 weeks, but it may not offer as high a level of protection for the baby. Vaccination late in pregnancy or in the postnatal period may, however, directly protect the mother against disease and thereby reduce the risk of exposure to her infant.
- For midwives seeing women at home or in clinics in a GP surgery, one vaccine in an original box can be taken in a Helapet Porter® Carrier System. A data logger must be included in a Helapet Porter. These are tested to be appropriate for 18 hours. Larger vaccine porters are available but are only suitable for storage up to 8hrs. Midwives taking vaccines to these clinics should return any unused ones following the clinic and only take the number that is deemed necessary for the clinic. These boxes must be marked to indicate that they have been transported in a vaccine porter (date and length of time). These must be placed at the front of the RSV stock and, where necessary only be transported on one further occasion. If not administered on transportation on the second occasion, they must be discarded and reported as waste. Avoid waste wherever possible. Ensure they remain in the original box to protect from light etc. Staff that are transporting vaccines into the community must complete Good Distribution Practice training. (GDP) This must be completed annually. Certificates will be issued by Pharmacy See section 8.2 Role of Midwives for instructions on completing the training and informing the Medicines Management Team of completion of the training.
- Midwife to ensure there is adrenaline 1:1000, syringes and needles in the room where the vaccine is being administered.
- Midwife to ensure they have access to call for help should this be required in the event of an adverse reaction. If the midwife is on their own in the birth centre they must ensure colleagues elsewhere in the hospital eg. MIU are aware that a vaccine is being administered in case they should need assistance.
- Midwife to open up WIS (Welsh Immunisation Service) and locate woman on the system.
- Midwife to gain woman's consent and annotate on WIS.
- Preparation of the vaccination as per SPC.
 - <https://www.pfizerpro.co.uk/medicine/abrysvo/dosing/preparation>

- Midwife to administer vaccine. The needle supplied in the box must be used according to manufacturer's specific instructions and disposed of in a yellow sharps bin. Vaccines supplied without needles will require administration with a blue safety needle
- Midwife to complete the batch number and the site of administration on WIS
- In the case of anaphylaxis, administer adrenaline in line with relevant PTHB policy. Complete a Datix and Yellow card reportable incident. <http://yellowcard.mhra.gov.uk>
- Midwife to complete the date on the Tracer and in EPR.
- After administration of the vaccine the woman will be observed for adverse drug reactions (ADR) whilst the digital systems and notes are completed. [Green-Book-Chapter-4.pdf](#) (see references to ADRs)
- The woman will be provided with the Patient Information Leaflet for the specific vaccine given.

The woman will be provided with the information leaflet for the specific vaccine given.

6.0 Safeguarding

If any safeguarding concerns or significant risk factors are identified for an unborn baby or a vulnerable adult, practitioners must follow Wales Safeguarding Procedures (2019) and SGP036 Safeguarding Policy [Policies & Written Control Documents - SGP 036 Safeguarding Policy.pdf \(sharepoint.com\)](#). Advice and support concerning any safeguarding issue can be sought from PTHB Safeguarding Team via the Safeguarding Hub on 01686 252806 or email PowysTHB.Safeguarding@wales.nhs.uk (Monday-Friday 09:00-17:00, excluding Bank Holidays). Outside of office hours, Local Authority can be contacted on 0345 0544 847 or contact Silver on Call.

All registered practitioners should access appropriate safeguarding supervision and training as per guidance. [Safeguarding Supervision \(sharepoint.com\)](#)

7.0 Monitoring and Compliance

7.1 Reporting Via Electronic Patient Record (System C)

Recording of data via EPR and WIS will support accurate records for women and enable access to data electronically for statistics, which also has the potential to be reported to Welsh Government and Public Health Wales if required.

All women who consent to accepting the RSV vaccine needs to have this entered on EPR and WIS.

EPR – Woman's lists/search criteria/select woman/pregnancy summary/enter new note/vaccination (woman)/vaccinations offered and accepted.

WIS – (see [appendix F](#))

All women who decline to accept the vaccine [must](#) have this information entered onto EPR [and](#) WIS

EPR – see [appendix E](#))

WIS - If a woman declines to have the vaccine, this must be entered onto WIS under the consent page, saying 'no' they do not give their consent.

In ALL cases where the woman has received the RSV vaccine the date must be recorded as the date that the woman actually received it and not the date the information is added to EPR ([Appendix E](#)).

Data to provide numerical information will be gathered from EPR. This will collate numbers of vaccines given through Powys maternity services, number of vaccines received elsewhere and number of women who declined the vaccine.

7.2 Evaluation / Audit Framework

Completeness of data will be reviewed by the midwifery management team through data collated from the information team.

7.3 Governance

Any adverse outcomes or incidents must be reported via Datix. These will be reviewed initially by the Women & Children's Risk and Governance Lead and if required allocated for further review. Medicines management should be contacted if there are incorrect vaccines delivered or clinical incidents involving vaccines. Powys.Immunisations@wales.nhs.uk

Additional useful document for Vaccine Incidents is [Vaccine incident guidance: Responding to errors in vaccine storage, handling and administration](#)

Healthcare professionals and individuals/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme at <http://yellowcard.mhra.gov.uk> or search for MHRA Yellow Card in the Google Play or Apple App Store.

Any adverse reaction to a vaccine must be documented in the individual's record and the individual's GP should be informed.

8.0 Roles & Responsibilities

8.1 Head of Midwifery and Sexual Health

The Head of midwifery must:

- Ensure that robust procedures are in place in order that PTHB can discharge its organisational responsibilities in the provision of safe and effective vaccination and immunisation administration to the Powys population of pregnant women.
- Ensure the overall implementation of the SOP
- Ensure all staff read and understand this procedure
- Support allocation of resources to ensure compliance with this procedure

8.2 Midwives

To work within the SOP guidance

- Ensure scrutiny of any allergies and consent on WIS and clarify any issues.
- Ensuring that the consent is obtained and annotated on WIS.
- Ensuring all necessary digital pathways are completed appropriately – this forms your contemporaneous notes.
- Ensuring all incidents (e.g. Anaphylactic shock and breaches in the cold chain) are reported following the PTHB Datix incident reporting procedures.
- Completing or supporting the completion of Yellow Cards for any unexpected adverse reactions which are observed or reported.
- Maintain level of competence to be able to administer RSV immunisations by completing a self-assessment on an annual basis and escalating any concerns relating to competence to their line manager and the immunisation coordinator.
- Midwives will ensure the current PGD is signed.

Midwives must have completed:-

- Complete the Vaccination passport [Midwifery Immunisation Training Matrix 2026 27](#)
- A vaccination/immunisation PTHB recognised training day.
- Attended an annual basic life support training.
- Read the National Minimum Standards for immunisation training 2025
- Training for Good Delivery Practice found here [GDP Refresher Training PowerPoint 2026](#) and then complete [GDP Refresher Quiz 2026](#) and email Info.MedicinesManagement.Powys@wales.nhs.uk
- [UKHSA National Minimum Standards for immunisation training 2025](#)

8.3 Maternity Support Workers (clinical and non-clinical)

- To work within this SOP to support midwives at clinics

- To complete cold chain training on annual basis to support receipt of vaccines in the absence of a midwife.
- To assist with any requests for audit of uptake requested by members of the leadership team as necessary

8.4 Accountability

Clinical practice is underpinned by the principle that each practitioner remains accountable for their own practice and any actions.

This procedure does not replace the requirement of all staff in ensuring that they are appropriately trained and competent, and that practice is in line with current PTHB policies, procedures and protocols.

9.0 References / Bibliography

Green Book, Chapter 27a: Respiratory Syncytial Virus

[Respiratory syncytial virus \(RSV\) vaccination information - Public Health Wales \(nhs.wales\)](#)

PTHB/CDP007 Management of Anaphylaxis Procedure. [CDP 007 Management of Anaphylaxis Procedure](#)

PTHB/MMP 010 Safe and secure management of refrigerated medicines and vaccines. [MMP 427 - Safe and Secure Management of Refrigerated Medicines and Vaccines FINAL.docx](#)

PTHB/MMP001 – Medicines Policy [MMP 001 Medicines Policy](#)

PTHB/OHP002 Needlestick & Body Fluids Contamination Injuries Policy [OHP 002 Needlestick & Body Fluid Contamination Injuries Policy V5 Review Date July 2025](#)

Public Health Wales. - [Immunisation and Vaccines - Public Health Wales \(nhs.wales\)](#)

MMP 430 Cleaning Defrosting Medicines Vaccine Refrigerators FINAL [MMP 430 - Cleaning, Defrosting Refrigerators V2.docx](#)

MMP 432 – Use and Management of Helapet Vaccine Carrier Systems.FINAL.doc [MMP 432 - Use and Management of Helapet Vaccine Carrier Systems V2.docx](#)

[UKHSA National Minimum Standards for immunisation training 2025.pdf](#)

Engagement & Consultation

Key Individuals/Groups Involved in Developing this Document

(remove those not applicable)

Directorate	Date	Job Title
<i>Women & children's</i>	August 24	Interim Assistant Head of Midwifery
<i>Public Health</i>	August 24	<i>Immunisation Co-Ordinator</i>
<i>Medicines Managements</i>	August 24	Medicines Management Team
<i>Public Health</i>	April 26	<i>Immunisation Co-Ordinator</i>
<i>Medicines Managements</i>	April 26	Medicines Management Team

Task & Finish Group Members

(complete where applicable)

Name	Job Title

Procedure Approval Route

(include all stages of approval remove those not applicable)

Name	When	Outcome
Maternity Guidelines Group	03/09/2024	Approved
Women & Children's policies and procedures group	17/09/2024	Approved
Maternity Guidelines Group	05/05/2026	Approved
Women & Children's policies and procedures group	19/05/2026	Approved



Appendix A

Co-administration of Abrysvo in pregnancy

Co-administration of Abrysvo® in pregnancy

Vaccine/ medication given in pregnancy	Can they be administered together?
Abrysvo® and anti-D immunoglobulin	Yes
Abrysvo® and pertussis containing vaccine	Yes* (pertussis is offered from 16 weeks)
Abrysvo® and seasonal influenza vaccine	Yes (Influenza can be given at any stage of pregnancy)
Abrysvo® and seasonal COVID-19 vaccine	Yes (COVID-19 can be given at any stage of pregnancy)

*Pertussis-containing vaccine

- Some evidence suggests that coadministration of RSV and pertussis containing vaccines may reduce the response made to pertussis components. The clinical significance of this is unclear and any impact on protection is likely to be small; the key pertussis toxoid component is least affected
- Giving the vaccines separately at the usual scheduled times (from 16 weeks gestation for pertussis and from 28 weeks' gestation for RSV) will avoid any potential attenuation (weakening) of antibody response to the pertussis containing vaccine
- If a woman has not received a pertussis containing vaccine by the time she presents for an RSV vaccine, they can and **should** both be given at the same appointment to provide timely protection against both infections to the infant and to avoid the risk of the woman not returning for a later appointment

Appendix B

Midwives Vaccine order form 2026 27.xlsx

Vaccine order form**Midwives Vaccine ORDER FORM 2026/27**Date order placed: **NB: Pharmacy store is closed Tuesdays**

Flu vaccine CURRENT STOCK QUANTITY: Doses

RSV Abryvso® CURRENT STOCK QUANTITY: Doses

NB: Order will not be processed without the above information

Purpose for which the product is required: Delivery of PTHB Maternal Vaccination Programmes			
Requested by:			
Name & Designation			
Vaccine Name	Total Number of Doses	Date required	
Abryvso® (Respiratory Syncytial Virus Vaccine (RSV) MATERNAL (single dose)			
Influenza VACCINE (Adults)			
RSV: 1 DOSE PER PACK Flu vaccine: 10 doses per pack	Total No. of Doses:		RSV: Flu:
<u>Delivery Location</u>	Date Required	Delivery Contact	Contact No.

Orders for delivery will be dispatched at 7:45am. Orders for collection must be picked up between 8am - 9am**To be completed by PS Team**

Date Received		Time Received	
Received by		Order details added to spreadsheet?	
Medicines Management Contact details:			
Address:	Hafren Ward, Bronllys Hospital, Bronllys, Powys, LD3 0LU		
Telephone:	01874 712641		
Email this order to:	PTHB.VaccPharmacyStoreOrders@wales.nhs.uk		

Upcoming Vaccine Deliveries

XX/XX/20XX delivered via a temperature-controlled van

You will receive XX BOXES of INFLUENZA vaccine (prefilled syringes, 10 doses per box)

The above scheduled vaccine deliveries will be transported in a temperature-controlled van and will **NOT** be packed into a vaccine porter.

It is essential that **a member of staff is available to receive the delivery** and transfer the vaccines into the fridge **immediately on arrival**. **Any delay risks compromising the vaccine and contributing to avoidable waste, which is being closely monitored by PTHB and VPW.**

IMPORTANT

Stock Management Requirements.

- Please **add the vaccines to stock on WIS** upon receipt
- **Do not** receipt the delivery on WIS, as the Pharmacy Store Team has already receipted this stock into the organisation. The delivery to you is a site-to-site transfer only. The Pharmacy Store Team will enter the vaccine transfer on WIS.
- Ensure **fridge temperatures are monitored and are recorded on WIS twice daily, along with stock checks** (AM and PM).
- Please refer to **SOP MMP427: Safe and Secure Management of Refrigerated Medicines and Vaccines**
- Flu Vaccine orders can be submitted to this email account (PTHB.VaccPharmacyStoreOrders@wales.nhs.uk) Please be mindful of your fridge storage limitations and be certain that the have enough space to store the stock (including your cool packs) **before you place an order**.

Please could you confirm receipt of this email and that you have organised that a member of staff will be on site to receipt your vaccine delivery, failure to do so may result in delays in vaccine deliveries.

I would appreciate it if this email could be disseminated within your teams.

Thanks in advance for your cooperation and please don't hesitate to get in touch should you need to.

Appendix D

Log Tag Analyzer instructions **For downloading content at the end of Outreach clinic**

1. You should have a folder in One Drive – NHS Wales > Documents> My Log Tag data.
(If not, create a folder and name it with that title.)
2. Open Log tag Analyzer app on Desktop.
3. Put the Log tag into the USB port (where mouse usually goes) once icons across the top of the screen on Log Tag Analyzer have turned grey.
4. Once the information is all downloaded > File > Save As.
5. Give it a name - Location of visit and date e.g. Mach Hospital 1.1.24.
6. Under the name you have given it, there is a box which says 'save as type'. At the far right of that box is an arrow. Scroll down to PDF, click on it > Open > Save. Check it is in your My Log Tag data folder.
7. Put the Medicines Management Shared document in your favourites > Data loggers > Newtown VC Data Logger downloads > Upload > Files > click on your file you have just named (e.g. Mach Hospital 1.1.24) > Open.

[Medicines Management - Management of Refrigerated Medicines _ Vaccines - All Documents \(sharepoint.com\)](#)

8. It should be there in the folder. Click on it to check it opens, then close it.
9. Configure the Data logger by > LogTag > Configure.
Check 'Push button start' is selected.
Check 'Record a reading every 5 mins intervals' is selected.
Check 'record readings continuously, overwrite oldest when memory full' is selected. Press the 'Configure' button on the window to reset the data.
10. Once data logger has been configured, close the window and the app.
11. Remove LogTag from USB port and ensure that cover is placed back on.

N.B. When the Log Tag is next going to be used do not forget to Press Start, hold for 3 seconds, 'Rec' (i.e. Recording) will appear on the screen.

Appendix E

[Vaccinations on EPR screenshots](#)

EPR Details

Please click on the link for the screen shots of entering information onto EPR for vaccinations

Appendix F

[21.08-WIS APP 2.0 UPDATED WIS-App-UserGuide-2025](#)

Use of the Welsh Immunisation Service (WIS)

Please click on this link to watch the updated WIS user Guide.

Appendix G

[TEMPLATE Maternity Services Vaccine Ordering Log.docx](#)

Powys Teaching Health Board

Maternity Services Vaccine Ordering Log (log to be retained in team immunisation file)

Birth Centre/Team	
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Date & Quantity ordered	Vaccine ordered	Ordered by (print & sign name)	Date and time received	Batch numbers & expiry dates	Quantity received	Fridge Temp prior to opening	Fridge temp reset applied	Time placed in fridge	Fridge temp. within 1 hr	Received by (print & sign name)



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

Appendix H

Equality Impact Assessment

It is not mandatory to complete an Equality Impact Assessment (EIA) for a written control document. If you feel it would be of benefit, please complete the box below and attach an EIA as an appendix to this document.

Has an Equality Impact Assessment (EIA) been completed		NO
Name of the person giving this response	Sue Pardoe-Bouchard	
If NO:	N/A	
If YES:		