For the 2023 autumn booster programme, the following groups should be offered a COVID-19 vaccine:

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- residents and staff working in a care home for older adults
- all adults aged 65 years and over
- persons aged 6 months to 64 years in a clinical risk group, as defined in tables 3 and 4
- frontline health and social care workers
- persons aged 12 to 64 years who are household contacts of people with immunosuppression (as defined in table 3 and 4)
- persons aged 16 to 64 years who are carers (those who are eligible for a carer's allowance, or those who are the sole or primary carer of an elderly or disabled person who is at increased risk of COVID-19 mortality and therefore clinically vulnerable)
- see tables 3 and 4 below

Table 3: Clinical risk groups for individuals aged 16 years and over.

Table 3: elimear risk	groups for individuals aged to years and over.
Clinical risk groups	
Chronic respiratory disease	Individuals with a severe lung condition, including those with poorly controlled asthma¹ and chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema; bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD).
Chronic heart disease and vascular disease	Congenital heart disease, hypertension with cardiac complications, chronic heart failure, individuals requiring regular medication and/or follow-up for ischaemic heart disease. This includes individuals with atrial fibrillation, peripheral vascular disease or a history of venous thromboembolism.
Chronic kidney disease	Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation.
Chronic liver disease	Cirrhosis, biliary atresia, chronic hepatitis.
Chronic neurological disease	Stroke, transient ischaemic attack (TIA). Conditions in which respiratory function may be compromised due to neurological or neuromuscular disease (e.g. polio syndrome sufferers). This group also includes individuals with cerebral palsy, severe or profound and multiple learning disabilities (PMLD) including all those on the learning disability register, Down's syndrome, multiple sclerosis, epilepsy, dementia, Parkinson's disease, motor neurone disease and related or similar conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability.
Diabetes mellitus and other endocrine disorders	Any diabetes, including diet-controlled diabetes, current gestational diabetes, and Addison's disease.
Immunosuppression	Immunosuppression due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, patients undergoing radical radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement disorder, SCID). Individuals who are receiving immunosuppressive or immunomodulating biological therapy including, but not limited to, anti-TNF, alemtuzumab, ofatumumab, rituximab, patients receiving protein kinase inhibitors or PARP inhibitors, and individuals treated with steroid sparing agents such as cyclophosphamide and mycophenolate mofetil. Individuals treated with or likely to be treated with systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day for adults. Anyone with a history of haematological malignancy, including leukaemia, lymphoma, and myeloma. Those who require long term immunosuppressive treatment for conditions including, but not limited to, systemic lupus erythematosus, rheumatoid arthritis, inflammatory bowel disease, scleroderma and psoriasis.

https://www.brit-thoracic.org.uk/covid-19/covid-19-information-for-the-respiratory-community/#jcvi-advice-on-covid-19-booster-vaccination-for-adults-in-clinical-at-risk-groups-and-adults-with-asthma

	Some immunosuppressed patients may have a suboptimal immunological response to the vaccine (see Immunosuppression and HIV).
Asplenia or dysfunction of the spleen	This also includes conditions that may lead to splenic dysfunction, such as homozygous sickle cell disease, thalassemia major and coeliac syndrome.
Morbid obesity	Adults with a Body Mass Index (BMI) ≥40 kg/m².
Severe mental illness	Individuals with schizophrenia or bipolar disorder, or any mental illness that causes severe functional impairment.
Younger adults in long-stay nursing and residential care settings	Many younger adults in residential care settings will be eligible for vaccination because they fall into one of the clinical risk groups above (for example learning disabilities). Given the likely high risk of exposure in these settings, where a high proportion of the population would be considered eligible, vaccination of the whole resident population is recommended. Younger residents in care homes for the elderly will be at high risk of exposure, and although they may be at lower risk of mortality than older residents should not be excluded from vaccination programmes (see priority 1 above).
Pregnancy	All stages (first, second and third trimesters)

Including those with poorly controlled asthma! that requires continuous or repeated use of systemic steroids or with previous exacerbations requiring hospital admission, cystic fibrosis, ciliary dyskinesias and bronchopulmonary dysplasia admission, cystic fibrosis, ciliary dyskinesias and bronchopulmonary dysplasia dimission, cystic fibrosis, ciliary dyskinesias and bronchopulmonary dysplasia evere heart disease with other co-morbidity. This includes severe heart disease with other co-morbidity. This includes in those with chronic cyanosis (oxygen saturations <85% persistently) • patients with cardiomyopathy requiring medication • those with chronic cyanosis (oxygen saturations <85% persistently) • patients with cardiomyopathy requiring medication • patients with congenital heart disease on medication to improve heart function • patients with congenital heart disease on medication to improve heart function • patients with congenital heart disease on medication to improve heart function • patients with congenital heart disease on medication to improve heart function • patients with congenital heart disease on the long provide the organ, metabolic disorders and enoplasms, and conditions such as severe gastro-organized disease. • Including those associated with congenital malformations of the organ, metabolic disorders and enoplasms, and conditions such as severe gastro-organized disease. • In euro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy • hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation • severe or profound and multiple learning disability register • neoplasm of the brain Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression Immunosuppression due to disease or treatment, including: • those undergoing chemotherapy or radiotherapy, solid organ transplant recipients • genetic disorders affecting t	Table 4: Clinical risk gr	oups for individuals aged under 16 years
severe héart disease with other co-morbidity. This includes: single ventricle patients or those palliated with a Fontan (Total Cavopulmonary Connection) circulation those with chronic cyanosis (oxygen saturations <85% persistently) patients with cardiomyopathy requiring medication patients with congenital heart disease on medication to improve heart function patients with pulmonary hypertension (high blood pressure in the lungs) requiring medication Chronic conditions of the kidney, liver or digestive system Chronic neurological disease Chronic neurological disease Chronic neurological disease associated with congenital malformations of the organs, metabolic disorders and neoplasms, and conditions such as severe gastro-oesophageal reflux that may predispose to respiratory infection Conditions in which respiratory function may be compromised; this includes those with: neuro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation severe or profound and multiple learning disabilities (PMLD), Down's syndrome, including all those on the learning disability register neoplasm of the brain Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression Immunosuppression due to disease or treatment, including: those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) those with haematological malignancy, including leukaemia and lymphoma those receiving immunosuppressive or immunomodulating biological therapy those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate those receiving any dose of non-biological oral immu		repeated use of systemic steroids or with previous exacerbations requiring hospital
the kidney, liver or digestive system Chronic neurological conditions in which respiratory function may be compromised; this includes those with: • neuro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy • hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation • severe or profound and multiple learning disabilities (PMLD), Down's syndrome, including all those on the learning disability register • neoplasm of the brain Endocrine disorders Immunosuppression Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression of the brain Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression of the second or stem cell transplant recipients • genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) • those with haematological malignancy, including leukaemia and lymphoma • those receiving immunosuppressive or immunomodulating biological therapy • those treated with or likely to be treated with high or moderate dose corticosteroids • those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate • those with auto-immune diseases who may require long term immunosuppressive treatments Children who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy. Asplenia or dysfunction of the spleen Including hereditary spherocytosis, homozygous sickle cell disease and thalassemia major		severe héart disease with other co-morbidity. This includes: single ventricle patients or those palliated with a Fontan (Total Cavopulmonary Connection) circulation those with chronic cyanosis (oxygen saturations <85% persistently) patients with cardiomyopathy requiring medication patients with congenital heart disease on medication to improve heart function patients with pulmonary hypertension (high blood pressure in the lungs)
those with: • neuro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy • hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation • severe or profound and multiple learning disabilities (PMLD), Down's syndrome, including all those on the learning disability register • neoplasm of the brain Endocrine disorders Immunosuppression Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression due to disease or treatment, including: • those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients • genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) • those with haematological malignancy, including leukaemia and lymphoma • those receiving immunosuppressive or immunomodulating biological therapy • those treated with or likely to be treated with high or moderate dose corticosteroids • those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate • those with auto-immune diseases who may require long term immunosuppressive treatments Children who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy. Asplenia or dysfunction of the spleen Asplenia or dysfunction of the spleen Including hereditary spherocytosis, homozygous sickle cell disease and thalassemia major	the kidney, liver or	metabolic disorders and neoplasms, and conditions such as severe gastro-
Including diabetes mellitus, Addison's and hypopituitary syndrome Immunosuppression Immunosuppression due to disease or treatment, including: • those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients • genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) • those with haematological malignancy, including leukaemia and lymphoma • those receiving immunosuppressive or immunomodulating biological therapy • those treated with or likely to be treated with high or moderate dose corticosteroids • those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate • those with auto-immune diseases who may require long term immunosuppressive treatments Children who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy. Including hereditary spherocytosis, homozygous sickle cell disease and thalassemia major Including mitochondrial disease and chromosomal abnormalities		those with: • neuro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy • hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation • severe or profound and multiple learning disabilities (PMLD), Down's syndrome, including all those on the learning disability register
those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients egenetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) those with haematological malignancy, including leukaemia and lymphoma those receiving immunosuppressive or immunomodulating biological therapy those treated with or likely to be treated with high or moderate dose corticosteroids those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate those with auto-immune diseases who may require long term immunosuppressive treatments Children who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy. Asplenia or dysfunction of the spleen Asplenia or dysfunction disease and chromosomal abnormalities that affect a number of systems	Endocrine disorders	
be considered for vaccination prior to commencing therapy. Asplenia or dysfunction of the spleen Including hereditary spherocytosis, homozygous sickle cell disease and thalassemia major Serious genetic abnormalities that affect a number of systems	Immunosuppression	those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID) those with haematological malignancy, including leukaemia and lymphoma those receiving immunosuppressive or immunomodulating biological therapy those treated with or likely to be treated with high or moderate dose corticosteroids those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate those with auto-immune diseases who may require long term
of the spleen thalassemia major Serious genetic abnormalities that affect a number of systems Including mitochondrial disease and chromosomal abnormalities		
abnormalities that affect a number of systems		
Pregnancy All stages (first, second and third trimesters)	abnormalities that affect	Including mitochondrial disease and chromosomal abnormalities
	Pregnancy	All stages (first, second and third trimesters)

- 1 Poorly controlled asthma is defined as: