Summary of groups recommended to receive influenza and COVID-19 vaccines in autumn/winter 2026/2027

Groups	Influenza vaccine	COVID-19 vaccine
≥60 years	Recommended for all	Recommended for all
2 to 17 years	Recommended for all	Recommended for those with immunocompromise or with an underlying medical condition
18 years and older living in long term care facilities for older adults	Recommended for all[1]	Recommended for all
6 months and older with immunocompromise[2]	Recommended for all	Recommended for all
6 months and older with an underlying medical risk factor[2]	Recommended for all	Recommended for all
Pregnancy	Recommended for all	Recommended if in another risk group[3] Available in each pregnancy for those who choose to receive a vaccine
Healthcare workers (HCWs)	Recommended for all	Recommended if in another risk group[4] Available in autumn/winter 2026/2027 for all HCWs who choose to receive a vaccine
Carers and household contacts of people with underlying chronic health conditions[5]	Recommended for all	Not recommended unless in another risk group[4]
People with close, regular contact with pigs, poultry or water fowl	Recommended for all	Not recommended unless in another risk group[4]
Adults aged 18-59 years without underlying medical risk factors	Not recommended	One dose should be available each year for those who choose to receive a vaccine following discussion with a healthcare provider

1 An influenza vaccine is also recommended for those aged 18 years and older living in other long stay facilities where rapid spread is likely to follow the introduction of infection

2 As defined in the NIAC chapters; COVID-19 Chapter 5a and influenza Chapter 11 (and outlined in the table below). Further information also in Chapter 3 of the NIAC guidelines

3 One COVID-19 vaccine dose is recommended in each pregnancy for those with immunocompromise or with medical conditions associated with severe COVID-19 infection as defined in the NIAC COVID-19 Chapter 5a and outlined in the table below). Please note that this recommendation is not just seasonal, a COVID-19 vaccine should be available at any time of the year. It can be given at any stage of pregnancy but ideally between 20 and 34 weeks' gestation

4 Risk groups as defined in Chapter 5a of the NIAC Guidelines (i.e. 60 years and older, those with immunocompromise and those with a medical risk factor/underlying medical condition are recommended to receive a COVID-19 vaccine in autumn/winter 2026/2027)

5 As defined in NIAC Influenza Chapter 11: A carer is someone who provides ongoing significant level of care to a person who is in need of care in the home due to illness or disability or frailty. Medical risk factors/Underlying health conditions are listed in the table below.

Medical risk factor/underlying medical condition

Medical risk factor influenza*	Medical risk factor COVID-19**
Cancer	Cancer
Chronic heart disease	Chronic heart disease
Chronic kidney disease	Chronic kidney disease
Chronic liver disease	Chronic liver disease
Chronic neurological disease	Chronic neurological disease
Chronic respiratory disease	Chronic respiratory disease
Diabetes and other metabolic disorders, including inherited metabolic disorders	Diabetes and other metabolic disorders included inherited metabolic disorders
Haemoglobinopathies	Haemoglobinopathies
Immunocompromise due to disease or treatment***	Immunocompromise due to disease or treatment***
Body mass index ≥ 40kg/m2	Body mass index ≥ 40kg/m2
Serious mental health conditions	Serious mental health conditions
Children and adults with Down syndrome	Children and adults with Down syndrome
Children with moderate to severe neurodevelopmental disorders	Children with moderate to severe neurodevelopmental disorders
Children on long term aspirin therapy	–

* This list is not exhaustive, and the medical practitioner should apply clinical judgment to consider the risk of influenza exacerbating any medical condition that a patient may have, as well as the risk of serious illness from influenza.

** This list is not exhaustive, and the medical practitioner should apply clinical judgment to consider the risk of COVID-19 infection exacerbating any medical condition that a patient may have as well as the risk of serious illness from COVID-19 infection.

*** See Chapter 3 of the NIAC guidelines

Useful links

https://www.hiqa.ie/sites/default/files/NIAC/Immunisation_Guidelines/Chapter_05a_COVID-19.pdf

https://www.hiqa.ie/sites/default/files/NIAC/Immunisation_Guidelines/Chapter_11_Influenza.pdf

https://www.hiqa.ie/sites/default/files/NIAC/Immunisation_Guidelines/Chapter_03_Immunisation_of_the_Immunocompromised.pdf