

Coventry and Warwickshire Partnership

Immunisation & Vaccination Service Community Health & Wellbeing Wayside House Wilsons Lane Coventry CV6 6NY

September 2022

Dear Parent / Guardian

ELECTRONIC CONSENT FOR YEARLY FLU VACCINATION



Your child's yearly flu vaccination is now due.

	School Name & URN: Temple Grafton C of E Primary - 145712 Date of vaccination: 06/10/2022 Unique consent link: https://iv.covwarkpt.nhs.uk/form?identifier=19904d4b-dea6-40e2- 95e1-878d99d83938
CLOSE	The above consent link will close on 18/09/2022
B	You will receive a unique submission number to confirm your e- consent form has been received. Please make a note of this number before closing your internet browser in case you have a query.
	If you have more than 1 child at the school you will need to <u>complete</u> <u>a separate form</u> for each child by clicking on the link again. Please make sure it is your child's name and date of birth recorded on the form. Before submitting the form, please check details are correct
OR OR	Vaccination is yearly so even if your child received the vaccine last year, they will need to have it again to be protected.

	It's a free, quick and simple spray up the nose. An injectable version is available if preferred, via clinic appointment
	Service Detail Coventry and Warwickshire Partnership NHS Trust (covwarkpt.nhs.uk) The link above will give you access to: INFORMATION OF WHO CAN GIVE CONSENT ADVICE FOLLOWING VACCINATION DATA SHARING – Our responsibility PORCINE GELATINE
	Information about the Flu vaccine in other languages can be found here Flu vaccination for children: leaflets and posters - GOV.UK (www.gov.uk)
	If you decide you do not want your child vaccinated against flu, please indicate this on the consent form, giving the reason. This will help us plan for and improve the Flu vaccination programme. We will not vaccinate your child without valid consent in place
	If your child becomes wheezy or has their asthma medication increased after you SUBMITTED the ELECTRONIC consent form, please contact your childs immunisation Team on the number below.
YES NO	 If you change your mind about consent after submitting a form, please DO NOT complete another form We ask that you instead email your childs immunisation team (email address below) with the following: Your child's full name / Your child's Date Of Birth / Your child's school. Consent decision/status that is already submitted and the reason for change
	Coventry schools: Tel: 024 76 961422 Email: Bewise.Immunise@covwarkpt.nhs.uk South Warwickshire schools: Tel: 01926 353899 Email: SOUTHIMMS@covwarkpt.nhs.uk North Warwickshire schools Tel: 02476 321550 Email: NORTHIMMS@covwarkpt.nhs.uk

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