

Protecting Cornwalls Children and Young People

## **Grampound with Creed CofE School** EE140467

Kernow Health CIC

School Immunisation Programme I<sup>st</sup> Floor, Cudmore House Oak Lane Truro Cornwall TRI 3LP

Main Office Tel: 01872 221105/221106 Email: Kernowhealth.schoolimmunisation@nhs.net

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## September 2019

Dear Parent/Guardian

## Your child's annual nasal flu vaccination is now due

Kernow Health is delivering the flu immunisation programme in Cornwall's schools on behalf of NHS England. Flu can be an unpleasant illness and sometimes causes serious complications. Vaccinating your child will also help protect more vulnerable friends and family by preventing the spread of flu.

In 2019/2020 all children in Primary Schools from Reception to year 6 (inclusive) will be offered the vaccine. The vaccination is free and recommended for young children; it is administered by a quick and simple spray up the nose. Please click on the following link to access information explaining the vaccination programme which also includes details about the small number of children for whom the nasal vaccine is not appropriate.

We are due to visit your child's school on Tuesday 19th November. In order to access the online consent form please click on the following link:

https://www.kernowimmunisations.co.uk/forms/flu PLEASE ENSURE YOU QUOTE THE FULL UNIQUE SCHOOL REFERENCE CODE. The code for your school is: EE140467

Please submit your consent form by Tuesday 12th November to ensure your child receives their vaccination. If you experience any problems accessing the form please telephone 01872 221105/06 and the team will be happy to help. Please note that as in previous years you must opt in to the programme. If a consent form is not submitted your child will not be vaccinated.

If your child becomes wheezy or has their asthma medication increased after you submit this form, please contact Kernow Health on one of the numbers above.

If you decide you do not want to vaccinate your child against flu, please complete and submit the consent form giving the reason. This will help us to plan and improve the service. Please tell us if you need this information in a different format.

Yours faithfully

Dr Jonathan Katz

**Medical Director**