

February 2022

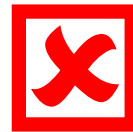
Dear Young Person and Parent / Carer,

Teenage booster and meningitis vaccinations programme for young people

As part of the national vaccination programme, our Community Immunisation Service are offering all young people in school year 9 (aged 13 to 14 years) the 3-in-1 teenage booster and the meningitis vaccinations. These routine vaccinations ensure continued protection against tetanus, diphtheria, polio (Td/IPV) and provide protection against meningitis types ACW and Y. It is important to receive the vaccinations at this age as it gives the best protection during the teenage years and beyond.



YES, I want to have the vaccinations



NO, I do not want to have the vaccinations

You can consent to one or both the vaccinations.

WHICHEVER YOU DECIDE, YOU MUST LET US KNOW.

- Complete a consent form ONLINE by visiting:
www.leicsandrutlandimms.co.uk
- Select Diphtheria, Tetanus & Polio (Td/IPV), Meningococcal ACWY (Year 9 only)
- You will need the code for your school.
- For **Tudor Grange Samworth Academy, A Church of England School** the school code is **LE144479** – you may want to make a note of the code.
- You will receive a confirmation email when the form is submitted.

Or you can scan this QR code using your smartphone camera to go straight to our consent form



Top tip: Ensure that the email addresses match and that there are no spaces or punctuation before or after the email address and the school code.

You will need to fully complete the consent form as soon as you receive this letter.

You can change your mind at any time.

We may temporarily close the system the day before the session to allow us to prepare.
The system will be reopened soon after the session.

If you are unable to complete this online, please ring us on 0300 300 0007 to request support. One of our team may need to call you back in order to complete the form.

The vaccinations are given as two separate injections in the upper arm. The vaccines used in the teenage booster and meningitis vaccination programme **do NOT contain gelatine or alcohol**.

To read the patient information leaflet about the teenage booster and meningitis vaccinations, visit: www.tiny.cc/boosterleaflet For information about the national vaccination programme, visit: www.nhs.uk/conditions/vaccinations

Young people can find out more about these vaccinations and other health issues by visiting: www.healthforteens.co.uk/health/immunisation

The team offer the vaccination in schools. We are working closely with all schools to ensure that all appropriate Covid safety measures are in place to ensure the safe delivery of the vaccine.

If a family member you live with is self-isolating or if you are experiencing any of the symptoms listed below on the day of the session then **please do not attend**.

- **High temperature – you feel hot to the touch on your chest or back**
- **A new continuous cough – this means you have started coughing repeatedly.**
- **A loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.**

If you are absent on the day, an additional opportunity will be made available for the vaccination. Please note this vaccine will not be routinely offered by your GP.

We recognise that an alternative venue may need to be offered if we are unable to fully complete the vaccination session in school. The service will ensure that you are kept fully informed should this be the case.

If you have had a tetanus, diphtheria and polio (Td/IPV) vaccination in the past 5 years you may not need this vaccination until a later date but may still need to have the meningitis vaccination. Each young person will be assessed to confirm their suitability. If you are also due to have a HPV vaccine this may be offered at the same time and it is not harmful to have all three.

Following the vaccination some post vaccination information will be emailed to you from the Community Immunisations Service and the information will be updated on the young person's NHS health record.

Should you have any questions or wish to discuss any additional support that may be required during the vaccination you can contact the team by telephone: 0300 300 0007 or by e-mail: communityimmunisations.service@nhs.net Call volumes are high during the period we offer vaccinations and you may have to wait at peak times for your call to be answered. You will have the option to leave a voicemail message for the team and we will return your call.

Yours faithfully,

Dr Tim Davies
Consultant Lead
Screening and Immunisation
NHS England and NHS Improvement – Midlands

Marie Butterworth
Clinical Lead
School Aged Immunisation Service
Leicestershire Partnership NHS Trust

If you would like to read this letter in another language go to our website

www.leicspart.nhs.uk/communityimms

Arabic إذا كنت ترغب في قراءة هذه الرسالة بلغة أخرى، قم بزيارة موقعنا على الإنترنت

Gujarati જો તમે આ પત્ર ગુજરાતીમાં વાંચવા માંગતા હો તો અમારી વેબસાઇટ પર જાઓ

Polish Jeśli chcesz przeczytać ten list w innym języku, przejdź na naszą stronę.

Punjabi ਜੇ ਤੁਸੀਂ ਇਸ ਪੱਤਰ ਨੂੰ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿੱਚ ਪੜ੍ਹਨਾ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਸਾਡੀ ਵੈੱਬਸਾਈਟ 'ਤੇ ਜਾਓ

Somali Haddii aad jeclaan lahayd inaad ku akhrido warqadan luuqad kale, booqo boggayaga internetka

Urdu اگر آپ اردو میں یہ خط پڑھنا چاہتے ہیں تو ہماری ویب سائٹ پر جائیں۔

NOTES ON COMPLETING THE ONLINE CONSENT FORM

Visit: www.leicsandrutlandimms.co.uk

Enter and confirm your email address

Enter your school code: LE144479 and click find school. Your school name should appear.

Top tips:

- To find our page you can also search online for search for “Leicester imms”
- Ensure that the email addresses match and that there are no spaces or punctuation before or after the email address and school code.

PART 1: Patient Information and Contact Details

Please include your child's NHS number, if available

If you are registered with a GP practice you will already have this number. It is a 10 digit number which is unique to every individual and can be found on their medical card. It can also be found on any letter from the NHS, any prescription and in every child's red book – “my personal child health record”.

PART 2: Consent Declaration

Complete this to give consent to the flu vaccination.

PART 3: Medical History

Complete the questions regarding vaccination history and any support required during vaccination.

The young person may be able to consent for themselves to have this vaccination without your agreement and health professionals will assess their ability to make an informed decision.

Sharing information: After the vaccination at school, a notification will be provided and the information will be added to your child's NHS health record.

For support with health information in other languages, please visit:
<https://www.nhs.uk/about-us/health-information-in-other-languages/>