



11th October 2019

Dear Parents & Carers

Nasal Flu vaccination at Haytor View Primary School – Wednesday 4th December 2019

The Immunisation Team at Virgin Care will be offering the Flu vaccination to all Primary Children from Reception to Year 6. Delivery of the vaccine will take place at our school via a nasal spray.

This vaccination programme is recommended to help protect your child against flu. 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. Even if your child had it last year, it is recommended to have the flu vaccine again this year.

This year the Immunisation Team are adopting electronic consent only. In order to provide electronic consent for your child's Flu vaccination, please can we request that you access the consent portal via the following link: <https://schoolimms.virgincare.co.uk/flu/2019/devon> and follow the online instructions. This link is secure, please carefully select your child's school from the drop down menu and this will ensure that the consent is in the right place.

Full details and information to assist you in completing the electronic consent is detailed on the portal including full FAQ's, patient information and contact details should you wish to speak to a Nurse regarding the nasal vaccination.

We would like to request that consent is provided electronically **before Sunday 24th November 2019**. This is to ensure the nurses have sufficient time to clinically process the information prior to the visit to school.

If you have any difficulty completing the form or do not have electronic access, please contact a member of the Immunisation Team on **0300 247 0082**, who will be happy to assist.

Please complete the slip below and return to school by Friday 15th November at the latest.

Many thanks for your co-operation.

Kind regards
Haytor View Community Primary School

Flu Immunisation Clinic at Haytor View – Wednesday 4th December 2019

Childs Name: Class:

Please tick: I have completed electronic consent

Signed: Name:

Please return this slip to the School Office by: Friday 15th November at the latest