

**HAYLE**  
**EE145211**

**Kernow Health CIC**  
School Immunisation Programme

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**September 2020**

Dear Parent/Guardian

## **YEAR 7 NASAL FLU VACCINATION**

As the autumn term begins it is highly likely that COVID-19 will be in circulation at the same time as flu therefore it is even more important than ever that we do all we can to protect against flu. We are delivering the flu immunisation programme in Cornwall's schools on behalf of NHS England. Flu can be a very 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 2020/2021, as well as all children in Primary Schools being offered the vaccine, **all children in year 7 will be eligible**. 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 **Wednesday 16<sup>th</sup> September**. In order to access the online consent form, please enter or click on the following <https://www.kernowimmunisations.co.uk/Forms/Flu> **PLEASE ENSURE YOU QUOTE THE FULL CODE. The code for your school is: EE145211**

Please submit your consent by **Monday 14<sup>th</sup> September** to ensure your child receives their vaccination. If you experience any problems accessing the form please **telephone 01872 221105** 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 01872 221105.**

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

Yours faithfully



**Dr Jonathan Katz**  
**Medical Director**

Chair: Dr Adam Ellery

Chief Executive: Carolyn Andrews

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