

Children and Families Directorate

School-aged Immunisation Team

March 2025

Tetanus, Diphtheria and Polio (Td/IPV) and Meningitis ACWY (MenACWY) Vaccinations

Dear parent/guardian,

The School-Aged Immunisation Team are offering the Tetanus, Diphtheria and Polio (Td/IPV) vaccination and Meningitis ACWY (MenACWY) vaccination in school, to all pupils in Year 9, as part of the routine national school-aged vaccination programme.

These two vaccinations are given, on the same day, one in each arm.

For more information regarding the vaccination programmes and why vaccination is important, please read the information in the following links:

Teenage 3 in 1 booster - Td/IPV (publishing.service.gov.uk)

Protect yourself against meningitis and septicaemia with the MenACWY vaccine

Why vaccination is safe and important - NHS (www.nhs.uk)

Please discuss the vaccinations with your child and then follow the steps overleaf to complete the consent form. You will have the option to say 'Yes' or 'No' to the vaccination.

Consent should be provided by a person with parental responsibility*.

Important: If you do not indicate whether you want your child to be vaccinated or not and your child requests the vaccinations, it may be appropriate for your child to give their own consent. For a child to give their own consent, the immunisation nurse will assess your child's competency to consent considering what having the vaccination involves, their understanding of the benefits of receiving the vaccination and the risks of not having it.

We will be visiting your child's school on 23-Apr-2025, 07-May-2025.

If we receive consent for your child to be vaccinated, your child will be offered vaccination at one of the planned sessions.

To consent for your child to have Td/IPV and / or MenACWY vaccinations, please complete the steps overleaf.

For information about how we look after your personal information please read our Privacy Notice on our website at <u>www.bridgewater.nhs.uk</u>.



Headquarters: Spencer House, Birchwood, Warrington, Cheshire, WA3 7PG

Please complete the form by 11am two working days before the first session.

- 1. Click on the following link: <u>www.bit.ly/econdtp</u>
- 2. Enter and confirm your preferred email address you will receive a confirmation email following submission of the consent form.
- 3. Enter your school code: BW144799
- 4. **Complete and submit the consent form**, indicating your choice of consent Please ensure you provide the child's registered address and GP
- 5. If you are unable to complete the online consent form, please contact your local immunisation team using the contact details below.

When you have submitted consent, please contact the School-Aged Immunisation Team, using the contact details below, if any of the following apply:

- Your child is prescribed any new medication
- Your child receives their vaccination elsewhere (such as GP or chemist etc.)
- You change your mind about your child receiving/not receiving the vaccination

On the day of your child's vaccination in school, you will receive an email to confirm the vaccination was administered. Details about your child's vaccination will also be put on their health record and shared with their GP.

If your child is absent, unwell or refuses their vaccination at one of the planned school session`s, you will receive an e-mail to inform you with details about what happens next.

Further information about the School-Aged Immunisation Team can be found on our Bridgewater NHS website, using this address: <u>www.tiny.cc/imm</u>. You can also visit the website by scanning the QR code below with your smartphone or tablet.



Thank you for taking the time to read this important information. We look forward to receiving your child's completed consent form. If you have any questions, please contact your local school-aged immunisation team.

Yours sincerely **School-Aged Immunisation team**

Contact details:

<u>Halton Borough</u>

Tel: 0151 495 5066 Email: <u>BCHFT.haltonimmsteam@nhs.net</u> Warrington Borough

Tel: 01925 946808 Email: <u>BCHFT.warringtonimmsteam@nhs.net</u>

* **Parental responsibility includes** mother; a father named on the birth certificate or married to the mother; adult granted parental responsibility by the courts; adult with delegated authority consent (given by the Local Authority when children are on a care order).