

Parent/Carer to complete

Flu Immunisation Consent Form

CONFIDENTIAL

From October 2015 all children in years 1 and 2 will be offered flu vaccination through a nasal spray.

Your child will be offered a flu vaccine that is given as a simple spray up the nose. It is painless, very quick, and serious side effects are uncommon. This vaccination programme is designed to protect your child against flu which can be an unpleasant illness and, although rarely, sometimes cause serious complications. By having the flu vaccination, children are also less likely to pass the virus on to friends and family. This will help to protect those who are at greater risk from flu including infants, older people and those with an underlying health condition. The flu vaccine provides protection against the strains that are predicted to circulate in the coming season. These strains may change from year to year which is why we recommend vaccination every year.

Surname		First name	
Date of birth	Girl <input type="checkbox"/> Boy <input type="checkbox"/>	School and class	
Home address and contact phone number		GP Name and address	
<p>Has your child been diagnosed with asthma?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes and your child is currently taking inhaled steroids (i.e. uses a preventer inhaler) please enter the medication name and daily dose (e.g. <i>Budesonide 100 micrograms, four puffs per day</i>)</p>		<p>You should inform the school nursing immunisation team if any of the following applies to your child:</p> <ul style="list-style-type: none"> • High temperature on the day of vaccination • Previous life threatening reaction to the vaccine or any component of it including gelatin and gentamicin . • Any known life threatening allergies to latex or eggs. • Antivirals in the previous 48 hours, e.g. Zovirax® • Unrepaired craniofacial malformations e.g. cleft palate • Your child has already received a flu vaccination in autumn 2015 • Your child has a condition or is currently receiving treatment that severely affects their immune system (e.g. receiving treatment for leukaemia or taking high dose oral steroids) • If anyone in your immediate family currently having treatment that severely affects their immune system • If your child is receiving long term therapy with salicylates (e.g. aspirin) 	
<p>If Yes and your child has taken steroid tablets because of their asthma in the past two weeks, please give details below:</p>		<p>If any of the above applies to your child, please give more details below:</p>	
<p>Please let the immunisation team know if your child has to increase his or her asthma medication after you have returned this form</p>		<p>On the day of vaccination, please let the team know if your child has been wheezy in the past 3 days</p>	
<p>NB. The nasal flu vaccine contains products derived from pigs (porcine gelatin). There is no suitable alternative flu vaccine available for otherwise healthy children. For more information on the flu vaccination programme, go to: www.gov.uk/government/collections/annual-flu-programme or https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/386842/2902998_PHE_FluPorcine_QA_forParents_FINAL_CT.pdf</p>			
<p>CONSENT FOR IMMUNISATION (PLEASE TICK YES or NO) AND DON'T FORGET TO SIGN THE FORM</p>			
<input type="checkbox"/> YES , I DO CONSENT for my child to receive the flu immunisation.		<input type="checkbox"/> NO , I DO NOT consent to my child receiving the flu immunisation	
<p>If 'NO' please give reason(s) below:</p>			
<p>Signature of parent/carer (with parental responsibility)</p>			

Please turn over and read the additional information. The form should be returned to the school as soon as possible

Watch this video with your son or daughter

<http://www.nhs.uk/video/pages/flu-heroes-nasal-flu-spray-for-kids.aspx>

Additional information about the **childhood flu programme** can be found at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/430140/9312_PHE_Protecting_Child_Flu_DL_07.pdf

Frequently asked questions:

1. *Can my child have this at the GP surgery?* No, the Berkshire school nursing service has been commissioned to deliver this and will inform your GP surgery that this has been given.
2. *My child received this last year at the GP surgery, does he need another one?* Yes; the flu vaccine for each winter helps provide protection against strains of flu that may be different from last year. For this reason we recommend that even if vaccinated last year, your child should be vaccinated again this year.
3. *What ingredients are in the vaccine?* See the website at: <http://xpil.medicines.org.uk> and enter Fluenz Tetra or Fluarix in the search box
4. *If my child is not able to have the nasal spray, will the nurses give him/her an injection at school?* No, if for medical reasons, a child is not able to receive the nasal spray at school, parents will be invited to bring their child to a "catch up" clinic in the community, and the injection can be given there with the parent present.
5. *Does the nasal vaccine contain gelatine derived from pigs (porcine gelatine)?* Yes. The nasal vaccine contains a highly processed form of gelatine (porcine gelatine), which is used in a range of many essential medicines. The gelatine helps to keep the vaccine viruses stable so that the vaccine provides the best protection against flu.
6. *Can't my child have the injected vaccine that doesn't contain gelatine?* The nasal vaccine provides the best protection against flu, particularly in young children. It also reduces the risk to, for example, a baby brother or sister who is too young to be vaccinated, as well as other family members (for example, grandparents) who may be more vulnerable to the complications of flu. The injected vaccine is not thought to reduce spread so effectively and so is not being offered to healthy children as part of this programme. However, if your child is at high risk from flu due to one or more medical conditions or treatments and can't have the nasal flu vaccine they should have the flu vaccine by injection. Some faith groups accept the use of porcine gelatine in medical products – the decision is, of course, up to you.

Further information on consent can be found at:

www.gov.uk/government/uploads/system/uploads/attachment_data/file/138296/dh_103653_1_.pdf

For further information please go to: www.nhs.uk/Conditions/vaccinations

✉ bks-tr.SchoolImmunisationTeam@nhs.net

BHFT has policies in place to ensure that all vaccines are stored at the correct temperature prior to administration to your child. In the very rare event that these storage requirements have not been fully met our staff may still give the vaccine provided certain precautions have been taken to ensure that it remains suitable for use.

FOR OFFICE USE ONLY	
Is the child eligible to receive Fluenz nasal spray? Yes <input type="checkbox"/> No <input type="checkbox"/>	If No, has parent been offered follow up with Fluarix injection at clinic? Yes <input type="checkbox"/> No <input type="checkbox"/>
Vaccine details: FLUENZ NASAL SPRAY <input type="checkbox"/> FLUARIX INJECTION <input type="checkbox"/>	Asthmatic children not eligible on the day of the session due to deterioration in their asthma control, should be offered inactivated vaccine if their condition doesn't improve within 72 hours to avoid delay in vaccinating "at risk" groups.
Date of immunisation:	Time:
Batch number:	Expiry date:
Name of immuniser:	Designation:
Signature:	

Data Protection: This data is being collected solely for the purpose of consent/non-consent. A copy of this form will be sent to your child's GP to update their records. It will be held by the NHS Trust and the information provided by you will not be used for mailing purposes or passed on to third parties.

September 2015