

Covid vaccination programme for 12 to 15 year olds

January 2022

Dear Parent

On January 10th, the 12 to 15 school-based vaccination programme resumed, with the aim of teams visiting every secondary school in North West London to offer children first and second doses of the vaccine during school hours. The vaccination is still the best protection for your family against Coronavirus.

If your child still needs their first dose of the vaccine, this is an excellent opportunity for them to have it done in school. If they have already had their first dose of the vaccine more than 8 weeks ago, then they will be able to have a second dose, to give them the best possible protection against Coronavirus.

As part of phase 1, our teams visited over 230 schools and vaccinated over 36,000 pupils. There is still a long way to go however. Here is what you can do to get your child vaccinated.

Complete the consent form to get the vaccination (accompanying this letter)

First doses - If your child is yet to have their first dose of the vaccine, they will need to complete the attached consent form and return it to your schools as soon as possible so that the vaccination teams can plan their visit.

Second Doses - If your child wants to have their second dose of the vaccine you will need to resubmit this form again to the school.

Please note: We are unable to vaccinate any child within 12 weeks of having COVID-19. Therefore, if your child has had COVID then please indicate this on the consent form accompanying this letter along with the date when the isolation period ended and we will then ensure that we vaccinate them in line with current guidance.

Where else can my child be vaccinated?

If your child can't be vaccinated for whatever reason on the day of the school visit they can:

Book a space through the **National Booking Service** at any of the dedicated vaccination sites in NW London. Visit the National Booking Service at

https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination where you can find your nearest centre and book a vaccination there.

Go to a **Walk-in Site** - There are a number of sites across North West London offering walk-in services for 12 to 15 year olds. Find your nearest at the Grab a Jab site:

<u>www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/find-a-walk-in-coronavirus-covid-19-vaccination-site</u>

More information about the vaccine

A leaflet explaining the vaccine for children and answers to any questions can be found at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1 023484/UKHSA_12073_COVID-19_Guide_for_all_CYP_12_to_17_leaflet.pdf

Getting the vaccine is still the best protection you can have against Coronavirus for your children and family.

NWL vaccination team



Vaccination consent form



for children and young people

COVID 19

The COVID-19 vaccine is being offered to your child either as a 1st or 2nd dose. If your child has already received a 1st dose then you will need to use this form for your child's 2nd dose. If your child has not yet received their 1st dose then you can also use this form to provide consent. Further information can be found on the DfE website:

https://www.gov.uk/government/publications/covid-19-vaccination-resources-for-children-andyoung-people

Please discuss the vaccination with your child, then complete this form and return to the school office by: Friday 4th February 2022.

Information about the vaccinations will be put on your child's health records.

Child's full name (first name and surname):	Date of birth:
Home address:	Daytime contact telephone number for parent/carer:
NHS number (if known):	Ethnicity:
School (if relevant):	Year group/class:
GP name and address:	

Ask ALL patients ALL questions below and tick if any apply

EXCLUSION CHECKLIST – tick any that apply

Has your child tested positive for COVID-19 in the last 12 weeks (by a lateral flow test or a PCR test)? If so, please provide the date on which your child tested positive:
Has the individual experienced major venous and/or arterial thrombosis occurring with thrombocytopenia following vaccination with any COVID-19 vaccine?
Has the individual had any vaccination in the last 7 days?
Is the individual currently unwell with fever?
Does the individual have an allergy to any medications?
Has the individual ever had an anaphylactic reaction?
Does the individual take any regular mediation if so what? Please list:
Does the individual have a history of heparin-induced thrombocytopenia and thrombosis (HITT or HIT type 2)?
Does the individual have a history of capillary leak syndrome?
None of the above

 □ Has the individual indicated they are, or could be pregnant? □ Has the individual informed you they are currently or have been in a trial of a potential coronavirus vaccine? □ Is the individual taking anticoagulant medication, or do they have a bleeding disorder? □ Does the individual currently have any symptoms of Covid-19 infection? □ None of the above 					
I want my child to receive the COVID-19 vaccination	I do not want my child to have the COVID-19 vaccine				
Name:	Name:				
Signature: Parent/Guardian	Signature: Parent/Guardian				
Date:	Date:				

If after discussion, you and your child decide that you do not want them to have the vaccine, it would be helpful if you would give the reasons for this on the back of this form.

Ask for the What to expect after your COVID-19 vaccination leaflet at gov.uk/government/publications/covid-19-vaccination-resources-for-children-and-young-people. It will tell you about the side effects and how to report them to the Yellowcard scheme at yellowcard.mhra.gov.uk.

OFFICE USE ONLY							
Date of COVID-19 vaccination	Site of injection (please circle)		Batch number/ expiry date	Immuniser (please print)	Where administered (hub, PCN, GP etc)		
First	L arm	R arm					
Second	L arm	R arm					