



Dear Parent/Carer

Year 8 HPV Vaccination – CHILTERN EDGE

Main session date: 2nd February 2024

Catch-up date: 8th March 2024

Students in Year 8 will be offered their HPV Vaccination in school on the date above. We will return to school to vaccinate any child for whom we have consent and who missed the Main Session on the Catch-up date above.

These immunisations are given by a team of immunisation nurses who will come to your child's school. Please be aware that this date may be subject to change due to circumstances outside of our control. In this event, please be assured that we will work with your child's school to ensure your child still receives this important vaccination.

For information about this important vaccine please read the Information leaflet [here](#)

If you agree for your child to receive this important vaccine at school, you must complete the online consent form following the link on the following page.

Please note, if you believe your child may have already received this vaccination, please check with the local Child Health Information Service on 0300 561 1851 or contact your GP in the usual way **BEFORE** submitting your consent form.

HPV VACCINATION CONSENT FORM

To access the Consent Form please click on the following link

<https://www.oxfordhealthimms.co.uk/Forms/HPV>

You will need the unique code for your child's school, which is: OX146103

Due to the checking process' required please complete the form at least two full school days before the session to ensure your child can be vaccinated at school. Community clinics will be available across the county if your child has not been vaccinated in the school session.

Important additional information for parents and carers

Please read the following information carefully

Information leaflet - Please read the leaflet available [here](#) which explains the vaccination programme. If you require a hard copy, please contact the Immunisation Team Office.

This leaflet is also available in the following languages:-

[Albanian](#), [Arabic](#), [Bengali](#), [BrazilianPortuguese](#), [Bulgarian](#), [Chinese\(Simplified\)](#), [Chinese\(Traditional\)](#), [Spanish](#), [Estonian](#), [Farsi](#), [Fijian](#), [Greek](#), [Gujarati](#), [Hindi](#), [KurdishSorani](#), [Latvian](#), [Lithuanian](#), [Nepali](#), [Panjabi](#), [Pashto](#), [Polish](#), [Romanian](#), [Russian](#), [Somali](#), [Tagalog](#), [Turkish](#), [Twi](#), [Tigrinya](#), [Ukrainian](#), [Urdu](#), [Yiddish](#), and [Yoruba](#).

Accessible versions are also available to order and download: [audio](#), [BSL](#), [Braille](#), [easy read](#), and [large print](#).

Declining the offer of HPV vaccination

If you do not want your child to receive the HPV Vaccination, please complete and submit the consent form, refusing vaccination. If you submit a Consent Form refusing vaccination we will not contact you again regarding the HPV Vaccination until the next academic year when you will be given a further opportunity to Consent.

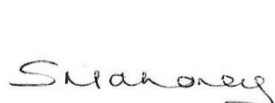
Withdrawing Consent – If, after submitting the consent form you, no longer wish your child to be vaccinated, please email withdrawconsentSAIS@oxfordhealth.nhs.uk at least one full school day before the session **and** on the day of the vaccination session provide a written note to your child's School Reception for the urgent attention of the Immunisation Team. Please state in the letter and in email subject heading, your child's school, name, year group and date of birth.

Immunisation Team Contact details

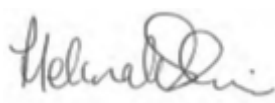
Tel: 0792 025 4400 or Email: Immunisationteam@oxfordhealth.nhs.uk

If you have any questions, please don't hesitate to contact us at immunisationteam@oxfordhealth.nhs.uk

Yours faithfully,



Susan Mahoney
County Team Leads,
School Aged Immunisation Service
Oxford Health NHS Foundation Trust



Helena Uddin