# Lymm High School



March 2022

## Human Papillomavirus (HPV) Vaccination Programme

Dear Parent/Guardian,

We are offering the HPV vaccine to boys and girls in **Year 8** as part of the national school-aged vaccination programme.

The HPV vaccination programme can help to protect young people against some types of HPV related cancers. The HPV vaccination programme in the UK consists of two doses of the vaccine for young people who start the course before their 15th birthday. The first dose of the vaccine is routinely offered in schools to boys and girls in year 8. A second dose is offered a minimum of 26 weeks after dose 1, which may not be in the same academic year.

To consent for your child to have the 2 doses of HPV vaccine please follow the steps outlined below. Consent should be provided by a person with parental responsibility\*.

Please inform if there are any changes to your child's health, after you have completed the consent steps outlined below. Do not inform school staff of any changes. Our contact details are on the other side of this letter.

For more information regarding the HPV vaccination programme please read the following leaflet <u>The universal HPV immunisation programme (publishing.service.gov.uk)</u>

We will be visiting your child's school on WEDNESDAY 15<sup>TH</sup> & THURSDAY 16<sup>TH</sup> JUNE

Please complete the steps below, to consent for your child to have full HPV course (dose 1&2)

### Please complete the form by 11am on MONDAY 13<sup>TH</sup> JUNE

- 1. Click on the following link: <u>www.bwimmunisations.co.uk/Forms/HPV</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: BW138732
- 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 on 01925 946808

\* **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).



If you do not want your child to have the HPV vaccination course, please still complete the consent form where you will have the option to decline the vaccination course.

We hope that the information provided helps you to make a positive decision about helping protect your child against HPV-related cancers.

Yours sincerely

School-aged Immunisation team

**Contact details:** 

#### Halton Borough

Bridgewater Community Healthcare NHS Foundation Trust The Bridges Learning Centre 7-9 Crow Wood Lane Widnes, WA8 3NA Tel: 0151 495 5066 Email: BCHFT.haltonimmsteam@nhs.net

#### Warrington Borough

Bridgewater Community Healthcare NHS Foundation Trust 81a Dewhurst Road Spencer House Birchwood Warrington, WA3 7PG Tel: 01925 946808 Email: <u>BCHFT.warringtonimmsteam@nhs.net</u>