



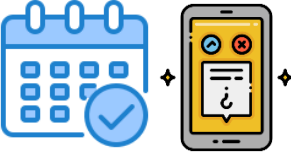




Immunisation & Vaccination Service  
Community Health & Wellbeing  
Wayside House  
Wilsons Lane  
Coventry  
CV6 6NY






December 2023

Dear Parent / Guardian

## ELECTRONIC CONSENT FOR HPV



	<p>School Name &amp; URN: <b>HARTSHILL</b> <b>138644</b></p> <p>Date of vaccination: <b>23/01/2024 &amp; 18/03/2024</b></p> <p>Unique consent link: <a href="https://iv.covwarkpt.nhs.uk/form?identifier=da3cc37b-4ae4-4584-aa1c-7c1079bb99a4">https://iv.covwarkpt.nhs.uk/form?identifier=da3cc37b-4ae4-4584-aa1c-7c1079bb99a4</a></p> 
	<p>The above consent link will close on <b>14/01/2023</b></p>
	<p><b>You will receive a unique submission number to confirm your e-consent form has been received.</b> Please make a note of this number before closing your internet browser in case you have a query.</p>
	<p>If you have more than 1 child at the school you will need to <b><u>complete a separate form</u></b> for each child by clicking on the link again.</p> <p>Please make sure it is your child's name and date of birth recorded on the form. Before submitting the form, please check details are correct</p>

	<p>This vaccine helps protect against cancers caused by HPV, including cervical cancer, some mouth and throat (head and neck) cancers and some cancers of the anal and genital areas. It also helps protect against genital warts.</p>
	<p><a href="https://www.covwarkpt.nhs.uk">Service Detail   Coventry and Warwickshire Partnership NHS Trust (covwarkpt.nhs.uk)</a></p> <p>The link above will give you access to:</p> <ul style="list-style-type: none"> <li>• INFORMATION OF WHO CAN GIVE CONSENT</li> <li>• ADVICE FOLLOWING VACCINATION</li> <li>• DATA SHARING – Our responsibility</li> <li>• HPV information leaflet</li> </ul>
	<p>Information about the HPV vaccine in other languages can be found here</p> <p><a href="https://www.gov.uk">HPV universal vaccination: leaflet - GOV.UK (www.gov.uk)</a></p>
	<p>If you decide you <b>do not</b> want your child vaccinated against HPV, please indicate this on the consent form, giving the reason. This will help us plan for and improve the HPV vaccination programme. We will not vaccinate your child without valid consent in place</p>
	<p>If you change your mind about consent after submitting a form, please <b>DO NOT</b> complete another form We ask that you instead email your child's immunisation team (email address below) with the following:</p> <ul style="list-style-type: none"> <li>• Your child's full name / Your child's Date Of Birth / Your child's school.</li> <li>• Consent decision/status that is already submitted and the reason for change</li> </ul>

Jagtar Singh OBE - Chair  
Melanie Coombes MBE - Chief Executive



Coventry schools: Tel: 024 76 961422 Email:  
[Bewise.Immunise@covwarkpt.nhs.uk](mailto:Bewise.Immunise@covwarkpt.nhs.uk)

South Warwickshire schools: Tel: 01926 353899 Email:  
[SOUTHIMMS@covwarkpt.nhs.uk](mailto:SOUTHIMMS@covwarkpt.nhs.uk)

North Warwickshire schools Tel: 02476 321550 Email:  
[NORTHIMMS@covwarkpt.nhs.uk](mailto:NORTHIMMS@covwarkpt.nhs.uk)

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