

Staff Seasonal Flu Vaccine 2020-21



All staff with patient contact should read the information below then complete the form overleaf.

All information on this form will be held in confidence by Occupational Health and you do not need to disclose its contents to your manager. Overall uptake of influenza vaccine is collated and reported at a Health Board and Clinical Board level*, but this information does not identify the individual, only the numbers and groups of staff who have been immunised.

*For Public Health Wales (PHW) employees, your receipt of this vaccination will be provided to the PHW vaccination surveillance team, however only aggregated figures at Directorate and Divisional levels will be reported by the surveillance team.

Why should I have the flu vaccine?

- The Chief Medical Officer for Wales recommends annual seasonal flu vaccination for all NHS staff with patient contact.
- Although flu can be a mild illness in some people, for others especially the most vulnerable patients in our care it can be a **serious and life-threatening disease**.
- Every year people die in the UK from seasonal flu.
- Healthcare workers are 3 to 5 times more likely to get flu compared with other people, and therefore more likely also to
 pass it on to others.
- Flu vaccination is a **safe and quick** way to help prevent flu infection, as part of wider infection control measures such as good hand and respiratory hygiene. The flu virus evolves every year so annual vaccination is necessary to protect against the most recent strain of the virus. In an average season the flu vaccine prevents over half (around 6 in 10) infections.
- Flu vaccine cannot give you flu.
- Flu vaccination is not mandatory, but is highly recommended for certain groups.

→ PLEASE NOW TURN OVER AND COMPLETE THE INFORMATION OVERLEAF

Additional information to help complete the consent form

Clinical Boards and Departments

Most clinical services fall under one of seven Clinical Boards within Cardiff and Vale UHB.

These are: Children & Women; Clinical Diagnostics & Therapeutics; Medicine; Mental Health; Primary, Community and Intermediate Care; Specialist Services and Surgery.

In addition, there are a few Corporate departments such as Estates and Finance.

Please indicate your Clinical Board or Corporate Department or ask your Flu Champion or manager if unsure.

For PHW staff, please confirm your directorate/division with your line manager if you are unsure.

Returning your completed consent form

If you have completed section 3 or 4 of this form, please return it to your Flu Champion.

Alternatively, please send the completed form by internal post or e-mail to Occupational Health using the details below.

First Floor Denbigh House, University Hospital of Wales, Heath Park, Cardiff, CF14 4XW Tel: 029 2074 3264 (internal 43264) | Occupational.Health3@wales.nhs.uk

Information for people having the flu vaccination. (Please read on the day of vaccination)

- Your body will take up to 14 days to produce antibodies after the vaccination.
- The incubation period for influenza is a few days, so if you are exposed to influenza immediately before or after vaccination, you can still develop the illness.
- The vaccine will **not** protect you against the common cold, although some of the symptoms are similar.
- We advise that you read and retain the patient information leaflet given to you.
- Some people will be advised to remain in the area for a few minutes following vaccination.
- Please be advised that if you have an underlying health condition you should inform your GP that you have received the
 influenza vaccine.
- If you are a doctor, nurse or other health professional who would like a certificate of vaccination to use as evidence for revalidation, please ask the person giving your vaccine.

SECTION 1. ALL STAFF (Please answer in block capitals)
Surname Previous Surname (if applicable)
First Name DOB DD MM YYYYY Contact Phone No:
Job Title:
Clinical Board / Employer: Dept. (see over) (if not C&V UHB)
All eligible staff should be aware of the Chief Medical Officer's recommendation for annual flu vaccination (overleaf), and related professional guidance. Please confirm you are aware of this guidance: Yes No
Do you: Consent to vaccination → GO TO SECTION 2
(tick only one) Confirm you have had the 2020/21 vaccination somewhere else already → GO TO SECTION 3
Not wish to receive the vaccination → GO TO SECTION 4
SECTION 2. CONSENT TO VACCINATION
To arrange vaccination get in touch with your local Flu Champion (ask your manager if you need help) or contact Occupational Health.
On the day of vaccination, read the information overleaf and fill in the questions below.
Yes No
Do you have any known allergies, e.g. eggs, antibiotics?
Are you fit and well today?
Are you taking antibiotics or steroids?
Have you had the flu vaccine in the past? If yes, have you ever had a reaction to the vaccine? Y / N
Do you have any existing medical conditions? If yes, please give details:
I have read the information overleaf
SECTION 3. CONFIRM HAD VACCINATION ELSEWHERE
I received the 2020/21 seasonal flu vaccine at: GP Community Pharmacy Other
Approximate date of vaccination: □□□
SECTION 4. DECLINE VACCINATION
I do not wish to receive flu vaccine this season. I realise I can change my mind at any point. Please help us improve our programme by
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Stating your reason for declining the vaccine GO TO SECTION 5
SECTION 5. ALL STAFF (Please sign and date)
Signature Date D M M Y
Please let your manager know you have completed this form. If you had the vaccine elsewhere or are declining vaccination, please ensure you return this form to Occupational Health (see information over on how to do this). Thank you.
Occupational Health / Flu Champion Use Only
Date D D M M Y Y Y Y Time H H: M M Dose: 0.5mL Batch No Expiry Date
Site/arm Route of administration i.m s.c. Remember GP letter & revalidation certificate
Nurse/Champion name Nurse/Champion signature Unique ID
Clinic Site: Comments: Staff Group