

Seasonal Influenza Vaccination School Outreach (Free of Charge) Scheme

Dear Parents/ Guardians,

In Hong Kong, seasonal influenza is usually more common in periods from January to March/April and from July to August. Influenza can be a serious illness to children or weak and frail people. This may lead to bronchitis, chest infection or even death. Seasonal influenza vaccination (SIV) is one of the effective means to prevent seasonal influenza. Our school is always concerned with students' health and will participate in this service this school year in order to encourage eligible children to receive SIV. The outreach influenza vaccination service will be provided by the assigned medical organization doctor which is matched by the Department of Health (DH). The enrolled doctor, Dr. Lo Ying Keung of Hong Kong (Asian) Medical Centre Limited, will arrange a vaccination team to provide free quadrivalent inactivated seasonal influenza vaccination for our students at our school. For reducing school absenteeism and influenza transmission in the community, we recommend students to have early vaccination for early protection. The details are as follows:

The date for the 1 st vaccination:	25 th November, 2022 (Friday)
The date for the 2 nd vaccination:	13 th January, 2023 (Friday)
The Venue :	School Hall
Fee :	Free of charge
Note : If the student is sick on the date for the vaccination, parents can contact the Hong Kong Sheng Kung Hui Welfare Council Limited to make an arrangement for the vaccination after recovery.	

Please read the attached brochure for the information and fill in the "Consent to Use Vaccination Subsidy" Form. Please return the reply slip and the form along with a copy of your child's identity document for showing Hong Kong resident status (e.g. Hong Kong Identity Card, Hong Kong Birth Certificate, Passport etc.) to the class teacher on 13th September (Tuesday). For more information about children receiving SIV, please visit the CHP website (<https://www.chp.gov.hk/tc/features/100764.html>). For further enquiry, please contact Miss Ip Wai Wing at 2712 1543.

We are all responsible for preventing communicable diseases and maintaining a clean learning environment. The cooperation between the school and the parents is necessary. Please refer to the following for campus and personal hygiene:

1. Outbreak of communicable diseases such as swine flu, influenza, chickenpox, norovirus and hand, foot and mouth disease is common at schools according to the Centre for Health Protection.
2. There was thorough cleansing and disinfection of the campus before the beginning of the school year. All students and teaching staff are required to be aware of personal and campus hygiene.
3. For the health and safety of our students, please keep the living environment clean and remind your child to be aware of personal hygiene. Please note the following:
 - If your child has symptoms of diarrhea, vomiting or rash, he/she should seek medical advice promptly. If symptoms of flu such as fever, sore throat and cough are found, your child should wear a mask and seek medical advice promptly. Please inform the school if your child is ill. He/She should stay at home and refrain from attending class at school according to the doctor's advice until fully recovered.
 - If your child feels unwell or is hospitalized, please inform the school immediately.
 - Please seek medical advice and treatment promptly if your child is ill.
 - Please provide handkerchief or tissue for your child and remind them not to share it with others.
 - Please remind your child to cover their mouth and nose while sneezing or coughing. Wash hands thoroughly afterwards and dispose of soiled tissue paper properly.
 - Parents are recommended to measure the body temperature of their children before coming to school daily.



Yours faithfully,
Miss. W. Y. Yick
Headmistress

Reply Slip

Our Ref: 2022N16

Dear Headmistress Yick,

This is to acknowledge receipt of the school notice 2022N16. I have read the notice of Seasonal Influenza Vaccination School Outreach (free of charge) Scheme.

Parent's signature: _____

Name of student: _____

Class: _____ ()

Date: _____