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| [Provider letterhead plus NHS logo]  Template letter for at risk patients |  | |
| [GP Surgery]  [1st address line]  [2nd address line]  [Town/city]  [County Postcode] | T [000 000 0000]  F [000 000 0000] |
| [Date] |  | |
|  |  | |

Dear [Name]

**It is time to book your annual flu vaccine.**

**Some people with a learning disability are more likely to get very ill if they catch flu.**

**The vaccine can help protect you from flu and from becoming very unwell.**

**The vaccine can help stop flu being passed onto others.**

**The vaccine is an injection which goes in your arm.**

**The vaccine is given by a trained person.**

**It only takes a few seconds and feels like a pin prick.**

**Side effects of the vaccine can be feeling hot or pain in the arm.**

**You may have side effects, but you should feel better after a few days.**

**If someone looks after you, they may be able to get a vaccine too.**

**If you are worried about having an injection, please speak to your GP who can help.**

**To make your vaccine appointment please call …**