

From: Information redacted- person A
Sent: Monday, August 5, 2024 10:08 AM
To: Information redacted- person B and C

Subject: Administration of Calpol in childcare settings

Good morning both,

I believe Information redacted updated you on the fact that we have been picking up with health professional colleagues on what guidance should be issued to providers about the administration of Calpol in childcare settings. As part of these discussions we have been asked to clarify in what circumstances childcare providers would be seeking to administer Calpol without parental permission especially following 111 advice. In particular we have been asked to clarify when and how often this happens.

Appreciate your thoughts and any help you can provide so that we can consider how best to reflect advice in guidance.

Information redacted

Many thanks

Information reacted- person A

From: Information redacted- person B
Sent: Thursday, August 8, 2024 2:13 PM
To: Information redacted- person A and C

Subject: RE: Administration of Calpol in childcare settings

Hi person A,

It is our understanding that providers have only set out scenarios where they may be asked to administer liquid paracetamol in an emergency without parental consent. E.g. where a medical professional is advising them to do so. We have been advised that 111 staff or staff at the ambulance call centre may give advice to administer liquid paracetamol where a child has a very high temperature.

To my knowledge we do not have a live example of where this has happened,

and we do not envisage it happening often.

Best Wishes,

Person B

From: Information redacted- person C

Sent: Tuesday, August 13, 2024 11:32 AM

To: Information redacted- person A and person B

Subject: RE: Administration of Calpol in childcare settings

Hi Person A

Just to add to this – and apologies for the delay in replying. I did have some historic examples, we chatted them through when we met previously but I know that was quite a while ago.

I can't locate my notes at the moment but from memory, the following has occurred or event similar (can't recall all details) ;

- Child parents were not reachable, child had very high temp – 111 advised giving liquid paracetamol. (Occurred more than once)
- Child (known to have febrile convulsions) taken unwell suddenly. Parent and emergency contact were over an hour away. Parent requests paracetamol given – none available.
- Child had first temperature related convulsion at setting. Ambulance called, paramedic queried why liquid paracetamol not given. Child care setting explained they had not got consent and no longer keep any at premises, paramedic noted that on the enrolment forms they have consent for emergency medical treatment. This is a regulatory requirement. The setting have a care plan for this child which involves an emergency supply but they asked if they should be keeping an emergency bottle anyway.
- Staff attending first aid training reported back they were told to keep supply of liquid paracetamol to administer if child had very high temp, seeking consent verbally from parents or from paramedic, if waiting for ambulance
- Umbrella org challenged CIW to explain why it is not appropriate for a setting to retain liquid paracetamol at the setting to be used if a child has a high temp and a parent is delayed in collecting. They say the policy clearly states it would obtain verbal consent from a parent but would administer if child's temp spikes to reduce the risk of convulsions.

I think for us, we have always said that the child should go home and it wasn't for staff to administer but we can see the sense in an emergency situation they may

need to administer and if they do they need to have a strong policy for these arrangements.

Hopefully we can resolve this soon. I have just been asked for an update by an inspector.

Person C