1. **Introduction**

Anyone can have headlice infestation. Given the chance, headlice move from head to head without discrimination. Headlice have been around for many thousands of years. Headlice continue to cause concern and frustration for some parents, teachers and children. Whilst parents have the primary responsibility for the detection and treatment of headlice, the control and management of headlice infestation is a shared responsibility amongst a number of agencies including schools.

2. **The School’s Management Plan**

**Parent / Carer Responsibilities**

Parental and carer responsibilities include:

- ensuring their child does not attend school with untreated headlice
- the use of safe treatment practices which do not place their child’s health at risk. Unsafe practices include:
  - a. treating hair with a product that contains an insecticide more often than once per week, or using it as a preventative measure
  - b. using pet flea or tick treatments, fly spray or insecticidal surface sprays and dangerous products such as kerosene.
- children with long hair attend school with hair tied back
- sign an agreement accepting the terms of the school headlice policy

To achieve this, it is reasonable to expect parents and carers will:

- regularly (preferably once a week) inspect their child’s hair to look for lice or lice eggs
- regularly inspect all household members and then treat them if necessary
- notify the school if their child is affected, and advise the school in writing when the treatment was started and what product / method was used
- notify the parents or carers of their child’s friends so they too have the opportunity to detect and treat their children if necessary.

Exclusion under the Health (Infectious Disease) Regulations 2001 refers to exclusion of children from school until after appropriate treatment has started. If a child re-attends school with live lice they can again be excluded until the live insects have been treated and removed.
**School Responsibilities**

The school will be responsible for:

- the distribution of policies and information on the detection, treatment and control of head lice to parents and staff at the beginning of the year or more frequently if required

The school will provide support to parents through:

- practical advice and a sympathetic attitude, so as to avoid stigmatising families who are experiencing difficulty with the control measures
- encouraging parents to continue to regularly (preferably once per week) check their child/ren for head lice.
- being aware that the responsibility to exclude a child from a school rests with the principal or person in charge of the school
- being aware that the exclusion of children from a school refers only to those children who have live insects and does not refer to head lice eggs
- educating all the staff at the school about head lice
- encouraging children to learn about head lice so as to help remove any stigma or ‘bullying’ associated with the issue
- notifying parents that they are not to send their child/ren to school with untreated head lice. They are not to return to school until the ‘Notification of Treatment’ form has been signed and returned.

3. **Headlice Support/Resource Person**

The principal shall be the point of contact for parents regarding head lice advice and reporting.

4. **School Support**

The school will conduct a head lice inspection at least once per term, with a follow-up inspection a week later to check students with infestation and their treatment. Additional inspections to be organised at the principal’s discretion.

5. **Protocol For School Inspection Program**

- Inspections of students’ hair will be undertaken by a trained team of parent volunteers at least once per term. A follow up inspection will be conducted a week later for those children who had head lice infestation. Additional inspections to be organised at the principal’s discretion.
- Each family will be notified via the newsletter at the beginning of the school year of the head lice inspection program. Parents may opt out of the program, however these parents will be required to check their child’s hair on the same day as the school inspection and advise the school in writing of the outcome and if treatment has commenced.
- A proforma notification letter will be sent to all parents, providing results of inspections. This proforma will include a detachable slip for parents to notify the school that appropriate treatment has commenced.
- All forms, guidelines and information are included in Appendix 1 of this policy.
Conditioner stuns headlice! The stunning effect lasts approximately 20 minutes, after which they become active again. Conditioner also makes it hard for lice to grip the hair shafts, thus increasing the likelihood of dislodging them during fine combing.

**EQUIPMENT**

- Conditioner – white conditioner is best since the lice and eggs are easier to see
- A fine tooth (lice) comb – to remove lice and eggs
- A normal comb – to remove tangles
- Tissues – white tissues are best since the lice and eggs are easier to see
- Towel or disposable bluey – placed around child’s shoulders to protect clothing

**PROCEDURE**

1. Ensure child is part of the program.
2. Introduce yourself to the child and explain the procedure simply.
3. Ensure adequate lighting. Natural light is best.
4. Place the towel/bluey around the child’s shoulders.
5. Detangle the hair (older children can do this themselves to save time).
6. Apply conditioner to dry hair aiming to cover each hair from root to tip with a layer of conditioner.
7. Detangle the hair using an ordinary comb.
8. Immediately comb the hair with a fine tooth (lice) comb starting at the nape.
9. Wipe the conditioner off the fine toothcomb onto a paper tissue and look for lice and eggs.
10. Repeat the process for every part of the head at least five times.
11. Most of the conditioner is combed out, thus there is no need to rinse the child’s hair. Tie long hair back.
12. Follow ‘Infection Control Guidelines’ for cleaning of equipment.
13. Ensure the appropriate confidential notification procedure occurs as per school policy.

**OUTCOME**

Each child will be assessed for headlice in an effective and confidential manner. Parents/guardians of those infected are notified as per school policy.
Head lice move very quickly when disturbed, and are therefore often difficult to locate when checking. Whilst ‘dry checking’ is not as effective as the ‘conditioner method’, it is however more practical when screening large numbers of children. It is therefore important to remember that the results from this method of checking will not be as accurate.

**PROCEDURE**

1. Ensure child is part of the program.
2. Ensure adequate lighting. Natural light is best.
3. Introduce yourself to the child and explain the procedure simply.
4. Randomly check areas of the scalp. Check the full length of the hair.
5. Work your way towards the scalp. Louse eggs are usually laid 1.5cm from the scalp and are firmly attached to the hair. Often looks like dandruff, but cannot be brushed off. Pay particular attention to areas of warmth (eg. behind ears).
6. Ensure the appropriate confidential notification procedure occurs as per school policy.

**OUTCOME**

Each child will be assessed for head lice in an effective and confidential manner. Parents/guardians of those infected are notified as per school policy.
WHITE HILLS PRIMARY SCHOOL
HEADLICE PROGRAM

INFECTION CONTROL GUIDELINES

EQUIPMENT

- Alcohol-based solution – to disinfect hands between children (eg. Hibiclens).
- Hot soapy water (>60C) – to disinfect combs.

PROCEDURE

1. Ensure that the person conducting inspections has jewellery removed and nails are short to prevent injury to the child. Ensure any open wounds/abrasions are covered.
2. Hair should be tied back.
3. Hands do not need to be washed in between children, except when headlice have been identified.
4. All lice combs used during the ‘conditioner method’ should be soaked in hot soapy water after use. (Lice die in 60C hot water after 30 seconds.)
5. Lice combs will also need to be scrubbed with an old hard toothbrush and perhaps a pin, tooth pick or dental floss to remove eggs caught in the base of the comb.

OUTCOME

Headlice screening procedures will be conducted with no cross contamination occurring between children.