



# HEAD LICE MANAGEMENT POLICY

## Rationale:

To inform and educate parents and teachers on the correct process of reporting and treating head lice.

## Purpose:

1. To promote a spirit of cooperation and provide a management plan for the treatment of head lice in the school.
2. To outline the roles and responsibilities of parents/teachers/school community in the management of head lice.
3. To respond to reports of head lice quickly and effectively.
4. To ensure that an effective process for treating head lice is well known and consistently followed.
5. To ensure that parents/carers are well informed about head lice treatment.
6. To minimise cases of head lice and the spread of head lice.

## Guidelines for Implementation:

1. The school will be an avenue for the relay of current information on the treatment of head lice. All families and the school community will be informed about the implications of existing guidelines.
  - a) Periodically material regarding infestation and treatment of head lice will be circulated to the whole school community via the school newsletter.
  - b) As outbreaks occur in a class each family involved in that class will be informed via letter. Parents/carers will be asked to self-report cases of head lice.
  - c) Parents and carers will be provided with appropriate information and/or support regarding safe practice in the treatment of head lice.
2. Parents/carers will be asked to regularly (preferably once a week) inspect their child's hair to look for lice or lice eggs.
3. Programmed head lice detection in the school will be as follows:
  - Teachers or staff members suspecting recurrent episodes of head lice will report their concerns to the Principal/Assistant Principal or Wellbeing Coordinator who will alert the parents/carers to the possibility of head lice infestation in their child. An authorised person will check the hair of the child prior to contacting parents/carers.
  - Systematic hair checks will be undertaken by a team of volunteers or qualified staff member, led by the designated school Coordinator of the Head lice Program when students or families report cases to us principles of confidentiality will be observed.
  - A carefully selected team of volunteers will be in place to undertake hair checks.
  - Upon positive identification of head lice, the principal or delegate will ensure that the parents/carers of any infected child are contacted as soon as possible and informed that their child is to be excluded from attending school in accordance with the Health (Infectious Diseases) Regulations 1990 until the day after the child has been treated.

- Parents/carers will be advised to ensure that their child does not attend the school with untreated head lice. Hair will be checked upon return of students to school.
  - Proformas and letters are in place to ensure that good communication occurs at all stages. This is managed by the designated coordinator and the team of volunteers.
4. As part of the enrolment package, the school will provide documentation requesting parents to sign a permission form allowing their children to be screened by our trained personnel for the presence of headlice.

### **Evaluation:**

This policy will be reviewed as part of the school's three-year review cycle.

### **Resources:**

[www.dhs.vic.gov.au/phd/headlice/index.htm](http://www.dhs.vic.gov.au/phd/headlice/index.htm)

[www.jcu.edu.au/school/phtm/PHTM/hlice/hlinfo1.htm](http://www.jcu.edu.au/school/phtm/PHTM/hlice/hlinfo1.htm)

[www.nitpickers.com.au](http://www.nitpickers.com.au)

[www.headlice.org](http://www.headlice.org)



**CONSENT FORM - HEAD LICE INSPECTIONS**

Dear Parent,

**Within our school a program of periodic head lice inspections** operates. This program, approved by School Council, conforms to Education Department policy and is proving very successful in minimizing the incidence of head lice across the school. Parents and children have become used to the process and strongly support our efforts. The management of head lice infestation works best when all children are involved in our screening program.

**We are fortunate** in having a very efficient team of well-regarded parents undertaking checks for us. Our team of ladies operate under the direction of School Nurse Denise Watson with full endorsement of School Council.

**Before any inspections are conducted** staff will explain to all students what is being done and why, and it will be emphasised to students that the presence of head lice in their hair does not mean that their hair is less clean or well kept than anyone else's. It will also be pointed out that head lice can be itchy and annoying and if you know you have got them, you can do something about it.

**The people conducting the inspections** will check through each student's hair to see if any lice or eggs are present. In cases where head lice are found, the person inspecting the student will inform the student's class teacher and the Principal. The school will make appropriate contact with the parents/guardians. At no time are children with headlice identified to other students. Skills of confidentiality and tact were paramount in selection of parents for this role.

**Please note that health regulation requires** that where a child has head lice, that child should not return to school until appropriate treatment has commenced.

**If you have not provided approval** therefore, it is your responsibility to ensure regular screening is undertaken.

**The Department of Education and Early Childhood Development** has revised its policy to allow for consent provided to last the period of the child's enrolment at our school.

Thanking you in anticipation  
**Craig Burnett**  
**Principal**

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Parent's/guardian's full name: ..... Phone No. ....

Name(s) of child/children attending the school: ..... Year level: .....

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I hereby give consent for the above-named child/children to participate in the school's head lice inspection program for the duration of their schooling at this school.

OR

I **do not** wish my child to be involved in the screening program and will undertake arrangement for regular checks

Signature of parent/guardian: .....Date: .....