

# HEAD LICE

## POLICY –TAWONGA PRIMARY SCHOOL

### Rationale:

Head lice (pediculosis) are tiny insects that live on the human scalp where they feed and breed. Probably between 2-3% of primary school children are infested at any one time. They do not carry or transmit disease, but are the most common cause of head itch and scratching, which may lead to infection and swollen lymph glands; therefore, they need to be controlled.

### Aims:

- To respond to reports of head lice quickly and effectively as parents/guardians have primary responsibility for treatment of head lice.
- To ensure that an effective protocol is followed when head lice are detected at school.
- To ensure that parents and guardians are well informed about head lice treatment.

### Implementation:

- Head lice checks will occur on a needs basis by approved adults.
- While it is parents who have the primary responsibility for the detection and treatment of head lice on their children, the school will assist by offering up-to-date information, by offering a screening process, and by alerting parents of lice when detected.
- The Principal will organise approved adults to carry out head lice checks on all students who have signed parental permission (see Form 1 below). Any students who do not have parental permission will be given a note requesting parents to carry out a head lice check on their child's hair that day.
- All children screened will be provided with a confidential report indicating to parents the results of the screening (see Form 2 below), as well as advice on the latest information regarding head lice.
- Upon positive identification of head lice, the principal will ensure that the parents of any infected child are contacted as soon as possible and informed that their child is to be immediately excluded from attending school in accordance with the Health Regulations 2001 (Infectious Diseases) until the day after the child's hair has been treated.
- Upon return to school, parents of excluded children must confirm that appropriate treatment has commenced.
- If head lice are found a follow-up head lice check will occur within 10 days.
- The parents will be provided with information about head lice treatment and prevention.
- Staff may visually check students' hair for the presence of head lice. No physical contact with the student is to occur during visual checks. In this case parents can be notified if their child has head lice regardless of whether the Head Lice Inspection Consent Form has been completed.
- The school newsletter will be used to publish information relating to the prevention and eradication of head lice at regular intervals throughout the year.

### Evaluation:

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

This policy was last ratified by School Council in...

**July 2016**

## CONSENT FORM TO CONDUCT HEAD LICE INSPECTIONS

**Permission to cover the duration of the student's school at:**

### Tawonga Primary School

Throughout your child's schooling, the school will be arranging head lice inspections of students.

The management of head lice infection works best when all children are involved in our screening program.

The school is aware that this can be a sensitive issue and is committed to maintaining student confidentiality and avoiding stigmatisation.

The inspections of students will be conducted by a staff member or someone approved by the principal and school council.

Before any inspections are conducted the person conducting the inspections 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 person 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 teacher and the principal. The school will make appropriate contact with the parents/guardians/carers.

Please note that health regulations requires that where a child has head lice, that child should not return to school until appropriate treatment has commenced. The school may request the completion of an 'action taken form', which requires parents/guardians/carers to nominate if and when the treatment has started.

Parent's/guardian's/carer's full name: .....

Address:..... Post code:.....

Name of child/children attending the school:.....

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

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

*Please inform the school if guardianship/custody changes for your child, as this form will need to be re-signed to reflect these changes. Please also inform the school in writing if you no longer wish to provide consent for the school to undertake head lice inspections for your child.*

## HEAD LICE CHECK REPORT

Your child was checked today by our trained personnel at school for the presence of head lice.

The results of the check are:

- No lice or eggs detected.
- Dead eggs were found.
- Live eggs were found.
- Live lice were found.

Therefore the following action is required:-

- No action required.
- Child's hair must be treated with a method that has killed or removed live lice before the child is returned to school.

**Please Note:** All children who are found to have live eggs will be re-checked by trained staff within 10 days after returning to school to ensure the infestation has been effectively treated.

Regards

Kim Franzke  
Principal

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### HEAD LICE TREATMENT REPLY SLIP

**Child's name** \_\_\_\_\_ **Grade** \_\_\_\_\_

**My child was screened on \_\_\_/\_\_\_/\_\_\_ by the trained personnel head lice program and was found to have live lice and/or eggs.**

I have treated my child with \_\_\_\_\_ and they will be returning to school today.

Parents name (Please print) \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_