

Healthy heads – without headlice
SUGGESTED HEADLICE MANAGEMENT PROTOCOL
FOR SCHOOLS & EARLY CHILDHOOD CENTRES



Department
of Health



Accurate and up-to-date headlice information and school headlice policy is circulated to all families at the commencement of the school year. Where applicable, a headlice check consent form (see sample, below) is circulated with the support information.

Children return consent forms and a staff member is nominated from the school's OHS&W committee to monitor and report to the committee the effectiveness of the school's policy

Teacher, support staff or student notices symptoms (frequent scratching, live lice)

Teacher notifies the nominated staff member

OHS&W committee nominee records number of suspected and confirmed cases and method of treatment, and organises a mailout (including staff) of the DH headlice pamphlet in the event of an outbreak (>5 cases within 2 weeks).

Sample of return slip to be completed and signed by parent/caregiver



I, _____, checked my child _____'s head for headlice
on / / and found that she / he had / does not have live lice.

I, _____, treated my child, _____, for headlice using
_____, beginning on / / .

Signed _____ Date / /

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PARENTAL CONSENT

Teacher, support staff or student notices symptoms (frequent scratching, live lice)

Teacher notifies the nominated staff member or the school office

Nominated staff member explains to student what will happen next

Staff member asks the child's consent to check their head, explaining to the child why they want to check for headlice to ensure informed consent

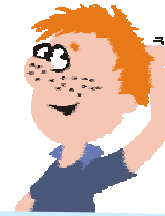
If **YES**, staff member conducts head check, following **CONSENT** procedure

If **NO**, staff member follows **NO CONSENT** procedure

CHECKING FOR HEADLICE:

- First explain to the child why you are checking their head, and ensure that the child has consented to having their head checked
- Work in good light, preferably daylight
- Search entire head, especially back of head and behind ears
- Part hair section by section, and check the full length of hair, working back towards the scalp
- Using a lice comb is faster and more reliable than visual inspection alone
- Examine the comb after each stroke
- It usually takes around 1 minute to find the first louse on an infested person
- Be careful not to spread lice to others while inspecting

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CONSENT

IF NO LIVE LICE OR NITS

Back to class with a letter to parents/caregivers explaining that the child has been checked for headlice and appears to be clear of headlice. The letter should also include some information on the importance of weekly checking for headlice (see sample letter).

**IF NO LIVE LICE, FEW NITS
BUT REPORTED
TREATMENT**

Back to class with a letter to parents/caregivers explaining that the child has been checked for headlice and appears to be clear of headlice but that there are signs of recent infestation. The letter should advise on the importance of follow-up treatment and weekly checking for headlice (see sample letter).

IF LIVE LICE or NITS

Nominated staff member contacts parents/caregivers and notifies of case. Arranges to meet with parents at the school at the end of day or as soon as possible.

Child returns to class and stays in class until parent/caregiver meets with nominated staff member and collects child. Class teacher undertakes to conduct non-group activities where possible.

Parent/caregiver meets with nominated staff member at the end of the day or as soon as possible and is advised on inspection and treatment techniques and the importance of weekly inspections of all household members for the four weeks (excluding pets!). Parent/caregiver should then advise which treatment they will use. Child leaves school with parent/caregiver.

Child may return to school the day after treatment has begun with a note indicating that the child's head has been checked and treatment begun if necessary, indicating which treatment. If the wet-combing technique has been chosen, class teachers are to minimise group activity for at least one week. Children should be encouraged to wear hair tied back or slicked down with gel and avoid sharing brushes, hats and hair accessories.

Nominated staff member ensures that a retreatment reminder letter is sent to parents/caregivers in 7-10 days. Parent/caregiver ensures that retreatment occurs in 7-10 days.

If a child experiences recurring itching or further observations of headlice are made, the relevant staff member may need to meet the parent/caregiver again and offer support with treatment/checking. A local council Environmental Health Officer, or a nurse/officer from Child and Youth Health or Family and Youth Services may be arranged sensitively to assist the family in this situation.

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NO CONSENT (PARENT AND/OR CHILD)

Teacher or support staff notices symptoms (frequent scratching, live lice)

Teacher notifies the nominated staff member or the school office

Nominated staff member or school office contacts parents/caregivers and notifies of suspected case. Arranges to meet with parents at the school as soon as possible, or at end of day.

Parent/caregiver meets with nominated staff member at end of day or as soon as possible and is informed that they are concerned that the child may have headlice. The parent/caregiver may be advised on inspection and treatment techniques and the importance of frequent inspection of all household members (excluding pets!).

The parent/caregiver may elect to check the child's head in the presence of the headlice officer, or allow the nominated staff member to check the child's head in their presence.

Child leaves school with parent/caregiver.

Child may return to school the day after treatment has begun with a note indicating that the child's head has been checked and treatment begun if necessary, indicating which treatment. If the wet-combing technique has been chosen, class teachers are to minimise group activity for at least two weeks. Children should be encouraged to wear hair tied back or slicked down with gel and avoid sharing brushes, hats and hair accessories.

If the parent/caregiver have identified headlice in the child's hair, the headlice officer ensures that a retreatment reminder letter is sent to parents/caregivers in 7-10 days.

Parent/caregiver ensures that retreatment occurs in 7-10 days.

If a child experiences recurring itching or further observations of headlice are made, the relevant staff member may need to meet the parent/caregiver again and offer support with treatment/checking. A local council Environmental Health Officer, or a nurse/officer from Child and Youth Health or Family and Youth Services may be arranged sensitively to assist the family in this situation.

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Sample of consent form to be completed and signed by parent/caregiver

Please complete this form and return it to your child's school or preschool.

Name of school _____

The Department of Health recommends that everyone has their hair checked every week for headlice.

Checking and treating children's hair is by law a parent's/caregiver's responsibility.

Sometimes schools and preschools offer to arrange head checks if there is a community outbreak of headlice.

This form seeks consent for your child's head to be inspected if the need arises.

I understand and accept that any children found to be infested may be withdrawn from close contact with other children until collected from school or preschool for treatment by parents or caregivers. I understand that I will need to collect my child promptly if headlice are evident as a result of this check.

[✓] Please tick one box

I give permission for the preschool or school staff to arrange for a health professional or staff member to check my child's hair for eggs and headlice. I understand any such check will be conducted sensitively.

I do not give permission for the preschool or school staff to check my child's hair for headlice. **I will do this.** I understand it is my responsibility to arrange collection of my child from pre/school when notified. I understand that I may have to provide a letter from a general practitioner to say my child is free of headlice.

Child's name: _____

Class/group: _____

Parent's name: _____

Parent's signature: _____

Date: _____