

Head Lice Policy

Head lice continue to cause concern and frustration for families, Educators and children. This policy is intended to outline roles, responsibilities and expectations of the Service to assist with treating and controlling head lice in a consistent and coordinated manner.

Whilst families have the primary responsibility for the detection and treatment of head lice our Service will work in a cooperative and collaborative manner to assist all families to manage head lice effectively.

National Quality Standards (NQS)

Quality Area 2: Children’s Health and Safety	
2.1	Each Child’s health is promoted
2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy eating and physical activity are promoted and appropriate for each child.
2.3	Each child is protected

Education and Care Services National Regulations

88	Infectious Diseases
----	---------------------

PURPOSE

To create and maintain well informed parents, teachers, council staff, childcare and healthcare workers to ensure confidence in their ability to manage head lice.

Our Service aims to

- Outline the roles and responsibilities of families, educators and management who are involved in detection, treatment and control of head lice.
- Educate participating agencies regarding the activities of other agencies in order to provide a framework for an effective way to deal with and control head lice.
- Document effective treatment and management strategies that are vital, as head lice cannot be exterminated. These guidelines represent the systematic community approach that is necessary, as head lice infections are as much a social issue as they are an educational or health issue.

SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

Head Lice

Head lice are insects that live in hair and suck blood from the scalp, causing itching of the scalp. Female head lice lay their eggs and glue them to the base of hair shafts. The eggs are pale cream to yellowish brown in colour and hatch after 7–10 days. The immature lice grow into adults over 6–10 days and start biting the scalp to feed on blood. Adult lice mate, the females lay more eggs, and the cycle continues.

People get head lice from direct head to head contact with another person who has head lice. This can happen when people play, cuddle or work closely together. Head lice do not have wings or jumping legs so they cannot fly or jump from head to head. They can only crawl.

Head lice do not live or breed on animals, bedding, furniture, carpets, clothes or soft toys. They cannot spread by sharing hats.

Finding Head lice

Many lice do not cause an itch, so you have to look carefully to find them. Head lice are found on hair itself and move to the scalp to feed. They have six legs which end in a claw and they rarely fall from the head. Louse eggs (also called nits) are laid within 1.5cm of the scalp and are firmly attached to the hair. They resemble dandruff, but can't be brushed off.

IMPLEMENTATION

Children do not have to be sent home immediately from the Service if head lice are detected. The child may return to the Service as soon as 'effective treatment' has started. An effective treatment is when a treatment is used and all the lice are dead.

Responsibilities of Management, Nominated Supervisor, Certified Supervisors and Educators:

- If one child at the Service has head lice, it is likely that several others also have them.
- The child or children with head lice is not to be isolated — it does not make sense and can be humiliating for the child.
- Exclude a child from the Service only if live head lice is detected and re-commence care once appropriate treatment has commenced.
- Reduce head-to-head contact between children when the Service is aware that someone has head lice.
- Keep families informed if there is someone at the Service with head lice.
- Support parents and children who have head lice by providing factual information, reducing parental anxiety and not singling out individual children with head lice.
- Record confidentially all cases so an outbreak can be avoided
- Encourage children to learn about head lice so as to help them understand the issue and how to prevent further outbreaks

Responsibilities of families

- Check your child's head once a week for head lice.
- If you find any lice or eggs, begin treatment immediately.
- Check for effectiveness of the treatment every 2 days until no lice are found for 10 consecutive days.
- Children are not to attend the Service with untreated head lice. Children with live lice will be sent home immediately. (Children with only eggs present will not be sent home immediately as only live lice are able to spread but must not return until treatment has commenced)
- You may send your child back to the service as soon as effective treatment has started.
- All household members will regularly check and treat if necessary. (Families will notify the Service if their child is found to have live lice so the Service can monitor the number of cases and act responsibly if a high number of cases are reported.)
- Children with long hair will attend the service with their hair tied back
- Families will only use safe and recommended practices to treat head lice
- Families will maintain a sympathetic attitude and avoid defaming/blaming families who are experiencing difficulty with control measures
- To contact and inform the Service as soon as lice are detected and treatment has started so the Service can monitor cases and act responsibly

Treatment

- Adult lice are difficult to see; look for eggs by shining a strong light on the hair near the scalp, or using the conditioner and combing technique:
 1. Untangle dry hair with an ordinary comb.
 2. Apply hair conditioner to dry hair (white conditioner makes it easier to see the eggs). Use enough conditioner to cover the whole scalp and all the hair from roots to tips.
 3. Use an ordinary comb to evenly distribute the conditioner, and divide the hair into four or more sections using hair clips.
 4. Starting with a section at the back of the head, place the teeth of a head lice comb flat against the scalp. Comb the hair from the roots through to the tips.
 5. Wipe the comb clean on a tissue after each stroke and check for head lice or eggs on the tissue.
 6. Comb each section twice until you have combed the whole head. if the comb becomes clogged, use an old toothbrush, dental floss or a safety pin to remove the head lice or eggs.
- The conditioner and combing technique is also an effective head lice treatment. Keep combing the whole head until all the conditioner is gone. Repeat the process daily until no lice or eggs have been found for 10 days.
- Chemical treatments are also available for head lice—your pharmacist can help you choose a product

Source

- Australian Children’s Education & Care Quality Authority. (2014).
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations
- ECA Code of Ethics.
- Guide to the National Quality Standard.
- National Privacy Principles
<https://www.oaic.gov.au/privacy-law/privacy-archive/privacy-resources-archive/national-privacy-principles>
- Privacy Victoria
www.privacy.vic.gov.au
- United Nations Convention of the Rights of a child
- Privacy Act 1988
- Staying Healthy in Child Care. 5th Edition
- Queensland Health – Head Lice Fact Sheet
- Head Lice Management Guidelines Fact Sheet
- NT Government – Healthy Territory Information for Parents, Schools and Child Care Centres
- Child Care Cooperative – Help! I don’t know what to do about Head Lice

Review

Policy Review Date
May 2018