

To pursue wisdom within a Christian ethos

Headlice Policy

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Parents

The primary responsibility for the identification, treatment and prevention of head lice in the family lies with the parent. Parents, however, need support from health professionals to recognise headlice and distinguish their findings from other conditions.

Primary Care Team

For all patients the primary professional responsibility for the diagnosis, management, treatment and prevention of disease lies with the General Practitioner (GP) with whom they are registered. GPs or other delegated members of the primary health team are knowledgeable and competent in the diagnosis and control of head lice; they can advise appropriate treatments and are able to teach parents the technique of detection combing.

Headteacher

The Headteacher should work with the School Nurses and Doctors and the Health Authority's Communicable Disease Control Team (CDC) guided by Buckinghamshire head lice policy and adhere to it. Where headlice have been detected in the school the headteacher will remind parents to be vigilant about checking their children's hair. Where a particular child has repeated outbreaks of headlice the headteacher will work with the parent and the school nurse to help to eradicate the problem.

Diagnosis/Detection

Only one way

Unless a living, moving louse is found a diagnosis of head louse infection cannot be made with certainty no matter how many nits are present, how many reported cases there are in school, how bad the itch is, or however dirty the pillows are.

Detection combing

The only reliable method of diagnosing current, active infection with head lice is detection combing, though there may be other clues to their presence such as dirty pillow. Misdiagnosis may occur if detection combing is not used.

Chemical Treatment

This is the only method supported by evidence of effectiveness. Therefore chemical treatments should be recommended as first line treatment when active lice are seen.

The three main groups of chemicals (pyrethroids, malathion and carbaryl) are still effective, even though some degree of resistance to each group has been reported around the country.

Malathion, carbaryl and the pyrethroids have good safety records when used correctly; the dose levels contained in a course of treatment, i.e. two application seven days apart, are well within the safety limits. Reported side effects are given due to the carrying vehicle, not the insecticide.

Lotion formulations have an alcoholic base. They are not suitable for asthma and eczema sufferers, or young children.

Liquid formulations have an aqueous base and are suitable for everyone.

Care must be taken that the chemical treatments are used in well-ventilated spaces, away from sources of flame and heat such as fires, stoves, cigarettes and hair dryers. Care should also be taken to prevent lotions/liquids from running over the face and eyes.

THE FACTS ABOUT HEAD LICE

- Head lice are small insects (about the size of a sesame seed when fully grown) that live very close to the scalp.
- Nits are not the same as lice. Nits are the empty egg cases which stick to the hair.

- You only have head lice if you find a living, moving louse (not a nit).
- Anybody can get head lice – adults and children, even grandparents.
- Head lice don't care if the hair is dirty or clean, long or short.
- A lot of infections are caught from close family and friends in the home and community, not school.
- Head lice can walk from one head to another, if the heads are pressed together for some time. They do not fly, jump or swim.
- Regular hair care may help to spot lice early.
- The best way to stop infection is for families to check their heads regularly using detection combing.

Detection Combing

You need: Plastic detection comb (from the chemist)
 Good lighting
 Ordinary comb
 Conditioner (optional)

1. Wash the hair well, towel dry until damp but not dripping.
2. First comb the hair with an ordinary comb (you may put some conditioner on hair first to make combing easier).
3. Then, using the detection comb, touching the skin of the scalp at the top of the head, slowly draw the comb towards the end of the hair.
4. Carefully check the teeth of the comb in good light.
5. Repeat steps 3 and 4 working your way around the head from the top of the scalp to the ends of the hair. This will probably take 10-15 minutes.
6. If there are head lice you will find one or more on the teeth of the comb. Clean the comb under running water – a nailbrush helps to do this.
7. If you find lice, or something which you are unsure about, stick it onto a piece of paper with clear sticky tape and show it to your school nurse, GP or local chemist.

The best way to stop infection is to do combing regularly (weekly including in school holidays). Never use insecticidal liquids, lotions or shampoos to PREVENT infection or just in case.