HEAD LICE

About head lice

• Head lice (Pediculosis humanis capitis) have been around for more than 10,000 years
• Adult head lice are the size of tiny ants and range in colour from skin-tone to dark brown.
• Nits are the eggs laid by female lice and are the size and colour of a grain of sugar.
• Not everyone with head lice scratches and itches.

Staff responsibilities

Staff in preschools, schools and childcare centres are not responsible for the management of head lice infestation in the community, and are not expected to conduct mass head inspections or to treat children for head lice; they can, however, support the control and prevention of transmission of public health pests, through a prompt and consistent response to a detected or suspected case.

It is recommended that education and care staff (in line with site policy and or procedures):
• educate families and students about head lice and prevention and control
• send periodic reminders to families, during a detected head lice infestation and at other times, to check hair weekly as a preventative measure
• support parents with practical advice and a supportive approach particularly those families experiencing difficulties with control measures. Fact sheets on treatment strategies and products are available on http://www.health.sa.gov.au/pehs/branches/headlice/headlice-index.htm (SA Health)
• implement learning activities that minimise head to head contact during head lice out breaks
• regularly check own hair for head lice

If staff detect or suspect head lice in a child, they should:
• remove the child from direct head to head contact with others. The child does not need to be isolated. It is recommended that all children in the class participate in activities where head to head contact is unlikely to occur. The child does not need to be collected before home time.
• contact the parent/guardian to arrange for the child to be checked and treated as soon as possible and before the child returns to preschool, school or childcare.
• provide the parent of the infested child and parents of children in close contact with information about head lice treatments http://www.health.sa.gov.au/pehs/branches/headlice/headlice-index.htm
• advise parents of those who have had close contact with the person identified with head lice, (e.g. classmates) that they should check their child’s hair daily for at least the next three weeks.
• only request confirmation from the child’s general practitioner that effective treatment of head lice has occurred prior to the student returning to school if there has been ongoing infestation with an individual child and staff are concerned that treatment is ineffective or that the child’s wellbeing is at risk. This should also only occur after all efforts have been made to support the family.

DECD schools can seek reimbursement from the department for head lice shampoo provided to school card holders.

If numerous cases of head lice are detected or suspected, staff may arrange head inspections of children in close contact with others with head lice. These inspections should be conducted with discretion and parent/guardian and child/student consent.

Parent responsibilities

• Check their children’s and other family member’s hair regularly for head lice and nits
• Ensure their children do not attend education and/ or care with untreated head lice
• Inform the service (e.g. school) that their child has head lice and when treatment started
• Use appropriate head lice treatments to address infestation.

Additional Resources

DECD Health Support Planning: Infection and Infestation:

Department for Health and Ageing: Healthy Heads without Head Lice

You’ve got what? Infectious disease information (SA Health website)

Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th Edition) NHMRC website

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