



Parent-managed head lice program

A community-based option for
head lice management in schools

Department of Human Services
School Nursing Program



WHAT'S IN THIS PACKAGE?

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- Parent notification form*
- Sample head lice school policy*

Monitoring progress – To provide feedback to the school community on the program outcomes

- Data collection table*

* The items with an asterisk are available as Microsoft Word files that schools can customise for their own use. These files can be downloaded from the Department of Human Services head lice website (see below).

FURTHER INFORMATION

For further information on the program, or head lice in general:

Contact the DHS office in your area or the Melbourne head office on 1300 651 160

Department of Human Services head lice website:

www.health.vic.gov.au/headlice

Other information websites:

www.jcu.edu.au/school/phtm/PHTM/hlice/hlinfo1.htm

www.nitpickers.com.au

www.headlice.org

Head lice do not differentiate between schools, homes, business, or socio-economic status. It is a health and social concern that effects the whole community, thus there needs to be a community approach to its management.

TAKE A PROACTIVE ROLE IN HEAD LICE MANAGEMENT!

PARENT-MANAGED HEAD LICE PROGRAM

Introduction

The 'Parent-managed head lice program' is a concept that has been utilised extensively in Queensland, and piloted in a number of schools within Victoria. The program aims to involve all members of the local community, rather than relying on a single service provider. This includes parents, the school, local council and community health centres, local business and the Department of Human Services.

This package is available for use in your school, local council's and regional community health agencies in an attempt to address the ongoing issue of head lice control within our community. The following is an outline of who is involved, what their role is, and information on how to develop and implement such a program.

THE ROLE OF PARENTS

The program involves parents donating some time to help screen children for head lice. This can vary from weekly (when high prevalence of infections are present) to once or twice a term (when the prevalence is low). The greater number of parents involved, the smaller number of contributions required. Also, the greater number of parents screening at any one time, decreases the time taken to screen all consented children.

For children to be checked by volunteer parents, a consent form must be signed and returned to the school. Volunteer parents must also sign a **confidentiality agreement** with the school to ensure privacy is maintained for the child and their families. Some schools may also require a police check to be performed on all volunteers.

THE ROLE OF THE SCHOOL

The introduction of a 'Parent-managed head lice program' must be passed through individual school council's. The school must also provide guidelines and policies for performing head lice screening within school grounds (eg. infection control and confidentiality), managing infected students when identified, and notifying parents of screening results.

It is also encouraged that schools take an active role in education and increased awareness of head lice. This can include regular coverage in the school newsletter, such as information sharing and program successes, and activities such as colouring-in competitions, to help decrease the stigma that still exists with head lice infection. Examples of these can be found on the DHS website at www.health.vic.gov.au/headlice

THE ROLE OF LOCAL COUNCIL & COMMUNITY HEALTH AGENCIES

Until 1992, local councils were funded to provide a head lice program to schools. When the funding for this service ceased, some councils were able to absorb these costs and continue to provide these services. However, many others found themselves having to charge for the service, or not provide the service at all. The Department of Human Services recommends that parental consent is granted prior to the inspection of children for head lice.

This program aims to involve local councils, and community health agencies on an education and 'referral' type basis. This may include educating parents on the process of checking, infection identification and infection control; provide parent and staff groups with the latest treatment and management advice; or develop individual management strategies with specific families. This allows for local community nurses to take on a more focussed service to individual families, rather than just mass screening. Contact your local council and/or community health agency to find out what level of contribution they can provide.

THE ROLE OF THE DHS SCHOOL NURSING PROGRAM

The School Nursing Program in your Region may be able to provide a health education and health promotion role. Your local visiting school nurse may educate the volunteer parents on the process of checking, infection identification and infection control, and provide parent and staff groups with the latest treatment and management advice.

Depending upon the work demands of the local school nurse, they may also be available to provide the volunteer parents with support on their screening procedures and infection identification.

THE ROLE OF LOCAL BUSINESS

There are many businesses empathetic to the head lice problem and are happy to make donations of supplies or prizes. Chemists may provide discounts when bulk buying lice combs, or purchasing disinfectant. Supermarkets may be willing to donate conditioner and tissues. And ask your local hospital, or linen service, for any old towels.

Also your local cinema and food outlets may donate movie tickets and meal vouchers to offer as prizes for competitions held as part of increasing awareness.

Parent-managed head lice program

PROGRAM IMPLEMENTATION CHECKLIST

- ❑ Approach **School Council** to consider support for program implementation
- ❑ Inform **school community** of the intent to set up the program
- ❑ Develop **school policies** to ensure best interests of students, families and school staff.
- ❑ Approach **Local Council/community health agencies** to determine their level of involvement.
- ❑ **Invite parents** to participate as volunteer inspectors
- ❑ Ensure parents have signed a **confidentiality agreement** (and police check if deemed appropriate)
- ❑ Provide parents with an **education session** for management and treatment information, and inspection techniques and guidelines. Can be provided by contacting your regional DHS School Nursing Program or Local Council/community health agency.
- ❑ Distribute **consent forms** to all students, with a letter of explanation. Consider this at the beginning of each school year as a part of enrolment.
- ❑ Only those children whose parents/guardians have consented can be inspected.
- ❑ **Document results** of inspection on data collection form.
- ❑ Ensure all **policies** regarding infection control and confidentiality are met.
- ❑ Provide each child screened with a completed **parent notification form** at the end of the day.
- ❑ Provide information regularly in the **school newsletter**. Develop **competitions** to help reduce the stigma associated with the issue.
- ❑ Ensure head lice management and treatment **pamphlets/information** are readily available at the school office.
- ❑ Include numerical **results** of past screenings in the school newsletter to inform parents of the programs outcomes. This generates an increase in participation when factual results can be observed.
- ❑ For those families who have an ongoing issue with head lice, a **referral** to the local council or community health agency, may be appropriate to help with ongoing management strategies.

[NAME OF SCHOOL]

Parent-managed head lice program (example)

INVITATION TO PARENTS

Head lice is often associated with school children, thus frequently considered a school issue. However head lice do not differentiate between schools, homes, business, hygiene or socio-economic status. It is a health concern that effects the whole community, thus there needs to be a community approach to its' management. The basis of the 'Parent-managed head lice program' is a community approach.

The 'Parent-managed head lice program' is a concept that has been utilised extensively in Queensland, and piloted in a number of schools within Victoria. The program aims to involve all members of the local community, rather than relying on a single service provider. This includes parents, the school, local council, local business and the Department of Human Services.

The parents are able to provide regular screenings of children at school and support other parents with their management and treatment. The school provides support for the program by ensuring guidelines and policies are in place to promote best management. The local council, where applicable, can provide individual management strategies with specific families, or check those children whose parents have not consented to be checked by the volunteer parents. The Department of Human Services, through the School Nursing Program, can provide the latest information, and education on the process and technique of screening for head lice. Finally local businesses can be involved through donating supplies for screening and prizes for awareness competitions.

The principal, parents and school council at [Insert name of school] have decided to undertake this program to help support parents and decrease the incidence of head lice within the school. The program goals include:

- Reduce the frustration and misinformation associated with head lice.
- Decrease the concerns regarding head lice within the school community
- Protect families from misusing potentially harmful insecticide treatments.
- Promoting regular home based screening using a conditioner and comb method.

The program involves parents donating some time to help screen children for head lice. This can vary from weekly (when high incidences of infection are present) to twice a term (when incidences are low). The greater number of parents involved, the smaller number of contributions required. Also, the greater number of parents screening at any one time, decreases the time taken to screen all consented children.

For children to be checked by volunteer parents, a consent form must be signed and returned to the school. Volunteer parents must also sign a Confidentiality Agreement with the school to ensure privacy is maintained for the child and their families.

If you wish to be a part of this innovative program, please contact [eg. President of Parents Club, phone number] or the school office. We look forward to your involvement in helping manage this community health issue.

[Principal of School or President of Parents Club]

[NAME OF SCHOOL]

Parent-managed head lice program (example)

CONFIDENTIALITY AGREEMENT

As a volunteer parent head lice inspector at [Insert name of school], I acknowledge that in the course of my work, I will be privileged to personal and confidential information about children and their families.

I agree to not discuss such personal and confidential matters with any persons, except where necessary that I inform the Principal.

I understand that breach of confidentiality would result in my dismissal from the program.

(optional) I also agree to have a Police Check performed, at my own cost, prior to commencing any screening duties.

Volunteer parent's name (Please print)

Volunteer parents signature

Date: ___/___/___

Principals' signature

Date: ___/___/___

(optional)

Police Check completed [date: ___/___/___]

[NAME OF SCHOOL]

Parent-managed head lice program (example)

CONSENT FORM

For the many families and teachers of school-aged children, head lice continue to create concerns. While it is known that head lice do not carry any infectious disease, the principal, teaching staff and school council at [Insert name of school] have developed a parent-managed head lice program to help parents manage head lice. A group of volunteer parents at the school have coordinated the program and it is fully supported by the school. All volunteer parents sign a confidentiality agreement to ensure information privacy for all children and their families.

Program goals include:

- Reduce the frustration and misinformation associated with head lice.
- Decrease the concerns regarding head lice within the school community
- Protect families from misusing potentially harmful insecticide treatments.
- Promoting regular home based screening using a conditioner and comb method.

We invite you to include your child in our screening program, which runs [insert how often you plan to conduct screenings] per term.

There are two options used by the volunteer parents to check your child's hair

1. Ordinary hair conditioner and a head lice comb or
2. 'Dry' checking without conditioner.

**There are no toxic chemicals used in either method and no treatment is undertaken at the school.

If you would like to include your child/ren in our screening program, please complete the permission slip below and return to the school.

If you would prefer to screen your child/ren yourself, information on the best techniques is available from the school office.

Regular updates about our program will appear in [Insert name of school newsletter]. Interested parents are welcome to participate in the screening program. For further details and information please feel free to contact the school.

Thankyou

[Name of School Principal]

[NAME OF SCHOOL]

Parent-managed head lice program

CONSENT FORM

I **give/do not give** permission for my child/ren to participate in the Parent-managed head lice program at [Insert name of school].

| | |
|----------------------------|--------|
| Child: | Grade: |
| Child: | Grade: |
| Child: | Grade: |
| Parent/guardian signature: | Date: |

Parent-managed head lice program

CHILD SCREENING GUIDELINES Conditioner method

Conditioner stuns head lice! The stunning effect lasts approximately 20 minutes, after which they become active again. Conditioner also makes it hard for lice to grip the hair shafts, thus increasing the likelihood of dislodging them during fine combing.

EQUIPMENT

Conditioner – white or light coloured conditioner is best since the lice and eggs are easier to see

A fine tooth (lice) comb – to remove lice and eggs

A normal comb – to remove tangles

Tissues – white tissues are best since the lice and eggs are easier to see

Towel or disposable bluey – placed around child's shoulders to protect clothing

PROCEDURE

1. Ensure child has returned the signed consent form
2. Introduce yourself to the child and explain the procedure simply
3. Ensure adequate lighting. Natural light is best
4. Place the towel/bluey around the child's shoulders
5. Detangle the hair (older children can do this themselves to save time)
6. Apply conditioner to dry hair aiming to cover each hair from root to tip with a layer of conditioner
7. Detangle the hair using an ordinary comb
8. Immediately comb the hair with a fine tooth (lice) comb
9. Wipe the conditioner off the fine toothcomb onto a paper tissue and look for lice and eggs
10. Repeat the process for every part of the head at least five times.
11. Most of the conditioner is combed out, thus there is no need to rinse the child's hair. Tie long hair back
12. Follow 'infection control guidelines' for cleaning of equipment
13. Ensure the appropriate confidential notification procedure occurs as per school policy

OUTCOME

Each child will be assessed for head lice in an accurate and confidential manner, and parents/guardians of those infected are notified as per school policy.

Parent-managed head lice program

CHILD SCREENING GUIDELINES **Dry checking**

Head lice move very quickly when disturbed, and are therefore often difficult to locate when checking. Whilst 'dry checking' is not as effective as the 'conditioner method' it is, however, more practical when screening large numbers of children. It is therefore important to remember that the results from this method of checking will not be as accurate.

PROCEDURE

14. Ensure child has returned the signed consent form.
15. Ensure adequate lighting. Natural light is best.
16. Introduce yourself to the child and explain the procedure simply.
17. Randomly check areas of the scalp. Check the full length of the hair.
18. Work your way towards the scalp. Louse eggs are usually laid 1.5cm from the scalp and are firmly attached to the hair. Often looks like dandruff, but cannot be brushed off. Pay particular attention to areas of warmth (eg. behind ears).
19. Ensure the appropriate confidential notification procedure occurs as per school policy.

OUTCOME

Each child will be assessed for head lice in an effective and confidential manner, and parents/guardians of those infected are notified as per school policy.

Parent-managed head lice program

INFECTION CONTROL GUIDELINES

EQUIPMENT

Alcohol based solution – to disinfect hands between children (eg. Hibiclens)

Hot soapy water (<60C) – to disinfect combs

PROCEDURE

1. Ensure that the volunteer parents have jewellery removed and nails are short to prevent injury to the child. Ensure any open wounds/abrasions are covered.
2. Hair should be tied back
3. Hands do not need to be washed in between children, except when head lice have been identified
4. All lice combs used during the 'conditioner method' should be soaked in hot water and disinfectant after use (Lice die in hot water at 60C in 30 seconds)
5. Lice combs will also need to be scrubbed with an old hard toothbrush, and perhaps a pin, tooth pick or dental floss, to remove eggs caught in the base of the comb.

OUTCOME

Head lice screening procedures will be conducted with no cross-contamination occurring between children.

[NAME OF SCHOOL]

Parent-managed head lice program (example)

PARENT NOTIFICATION

If every child receives a letter, then confidentiality is maintained for all students, regardless of screening results.

Child's name: _____ Grade: _____

Today your child was screened by the volunteer parents of the [Insert name of school] Parent-managed head lice program, and was found to have the following:

- Live lice
- Dead lice
- Louse eggs
- No evidence of lice or eggs found

Under the Health (Infectious Diseases) Regulations 2001, children found with live lice cannot be readmitted to school until appropriate treatment for lice has commenced.

- (*optional*) Conditioner and comb treatment performed at school

Please treat your child appropriately by following the attached information sheet on 'Management and treatment of head lice'.

Please return the slip below when your child returns to school informing the principal when treatment has occurred.

If you have any questions or concerns please do not hesitate to contact the school office. Thank you for partaking in this community approach to head lice control.

[Name of School Principal]

[NAME OF SCHOOL]

Parent-managed head lice program

NOTIFICATION OF TREATMENT

Child's name: _____ Grade: _____

My child was screened on ___/___/___ by the Parent-managed 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 names (Please print)

Parent signature

___/___/___
Date

[NAME OF SCHOOL]

Parent-managed head lice program

HEAD LICE SCHOOL POLICY

Note: This policy is a sample only that incorporates recommended practices. Please read it to ensure it is appropriate to your needs and make any amendments and additions as required. Delete this paragraph from your customised version.

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

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

This school policy draws on information obtained from the Information Pamphlet and Management Guidelines 'Scratching for Answers?'.¹

It is the expectation of parents/carers and families attending this school that:

- Children's hair will be checked for head lice on a weekly basis, at home, using the recommended conditioner/combing detection method
- That your child does not attend school with untreated head lice (in accordance with Health Infectious Diseases Regulations 2001)
- Regularly inspect all household members and then treat them if necessary
- Parents/carers will notify the school if their child is found to have live lice and advise when appropriate treatment was commenced (in accordance with Health Infectious Disease Regulations 2001)
- Children with long hair will attend school with hair tied back
- Use only safe and recommended practices to treat head lice
- Notify the parents or carers of your child's friends so they have an early opportunity to detect and treat their children if necessary
- Maintain a sympathetic attitude and avoid stigmatising/blaming families who are experiencing difficulty with control measures
- Act responsibly and respectfully when dealing with members of the school and broader community especially around issues of head lice
- Sign an agreement accepting the terms of the School Head Lice Policy.

To support parents/carers and the broader school community to achieve a consistent, collaborative approach to head lice management the school will undertake to:

- Distribute up to date and accurate information on the detection, treatment and control of head lice to parents and staff at the beginning of the year or more frequently if required

¹ www.health.vic.gov.au/headlice

- Include information about head lice management in orientation and transition programs for new families/staff attending the school;
- Include information and updates in school newsletters
- Include annual head lice updates for staff in-service programs
- Provide practical advice and maintain a sympathetic attitude and avoid stigmatising/blaming families who are experiencing difficulty with control measures
- Access community educational resources and support, such as primary school nurses, community health centres and local government
- Abide by the recommendations of the School Exclusion Policy of the Health (Infectious Diseases) Regulations 2001 in that the responsibility to exclude a child from the school rests with the principal or person in charge, and
- Only exclude children from school with live insects
- Accept the advice of parents that appropriate treatment has commenced;
- Encourage children to learn about head lice so as to help remove any stigma or 'bullying' associated with the issue
- Request that all families attending this school sign an 'agreement' to accept the conditions of the school's head lice policy
- Be aware of real difficulties some parents may encounter and seek extra support if required
- Participate in a Head Lice Local Area Network to work with other schools, childcare centres, health services and pharmacists in our Local Government Area to achieve consistent management and policy across sectors
- Review the head lice policy annually and seek endorsement from the School Council/community
- Act responsibly and respectfully when dealing with members of the school and broader community especially around issues of Head lice
- Continue to seek opportunities to increase our collective understanding of and response to managing head lice.

There is no requirement for any school to undertake 'head-lice inspection' programs however those that do, need to consider the following as additions to a school head lice policy:

- Ensure that any person employed by the school, or volunteering, to undertake 'head lice inspections' will adhere to the school policy and latest Department of Human Services information and Health (Infectious Diseases) Regulations 2001
- Only inspect the heads of children whose parents have given prior consent
- Develop a generic/blanket consent form which parents sign at commencement of school year
- Respect the wishes of parents/families who elect not to participate in a school head lice check
- To help reduce the stigma and maintain confidentiality when conducting head lice inspections a letter should be given to all the children involved;
- Include teachers and school staff in inspection.

