##### eke02 5.1.12 HEAD LICE PREVENTION GUIDELINES

**The Legal Position:**

National Administration Guideline 1 (iii) requires schools to report to parents on matters likely to prevent students from achieving. National Administration Guideline 5 requires schools to maintain a safe physical and emotional environment for students. Both of these guidelines mean a school must take action in the event that it becomes apparent that children are attending school with untreated head lice.

Section 19 of the Education Act 1989 enables the principal of a school to preclude a student who is not clean enough to keep attending school or may have a communicable disease. A communicable disease is defined by the Health Act 1956 and includes lice (pediculosis).

**Why have head lice prevention?**

Head lice are not new. Head lice and the eggs (nits) have been with us for centuries. Egyptian mummies over 3,000 years old have been found with the remains of head lice. It is only recently that the western world has been relatively free of head lice. No one to date has found a sure-fire way of totally eradicating head lice in a community.

Head lice are a common problem throughout the world. Schools do not give people head lice; people bring head lice to schools. Head lice are also brought to churches, supermarkets, sports fields and homes by people. A population is likely to host head lice most of the time. Infestation levels fluctuate for no apparent reason and sometimes head lice appear to be epidemic while at other times they appear to be absent.

Head lice are a community problem that need to be controlled by the whole community. If a family fails to check and treat a child’s head, the work done by others to control the problem is likely to be wasted. It is a family’s responsibility to check and treat their children.

**How do we manage head lice?**

1. Include teaching about body care and cleanliness in the school health and physical education teaching plan.
2. Send periodic reminders to families about the need to check all family hair weekly, and if need be, to commence treatment immediately. Reminders sent home once each term will be more effective than waiting for a perceived crisis time.
3. Twice a year, information on the most up to date prevention and treatment information will be sent out to parents by newsletter. Parents can request this information when needed at other times of the year.
4. As with any other illness, parents will be contacted directly by the school if head lice is positively identified on their child and immediate action to address the issue will be requested.
5. When the child goes home, they will take a copy of the up to date prevention and treatment information with them.
6. If the infestation is still evident after that initial phone call then parents will again be contacted by the school and asked to collect their child as soon as possible from school.
7. When parent collects child from school, a copy of the up to date prevention and treatment information will be given to them. A referral to the Public Health Nurse will also be suggested to assist with parent and child education.
8. When head lice are confirmed in a class we will inform the parents of other children in that room by sending home an information sheet on prevention and treatment. It is important for them to check their children.
9. As soon as the identified child has been treated and NO lice are detected, they can return to school as usual.
10. Children should be rechecked on a regular basis by parent/family.
11. As a last resort, if the principal feels that the situation has not been dealt with they will preclude the child from attending school. A child who is precluded under this section of the Education Act 1989 is neither stood-down nor suspended. The Education Act 1989 prescribes what a principal and a board must do if a student is precluded. The principal must make all reasonable efforts to tell:

* the board;
* the student’s parents and
* the Medical Officer of Health, that the student has been precluded and why.

1. The Board of Trustees must have the matter looked into within 7 days of preclusion and will either cancel the preclusion or confirm the preclusion until the principal is satisfied that the student is clear of head lice.
2. In this case, the Board of Trustees will require a clearance from the Public Health Nurse before the child may return to school

At all times our staff will deal with infestations in a sympathetic and professional manner. We will be sensitive to the emotional safety of all children who are suspected of being infested and of the other children in the class or school

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BOT Chairperson Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NEXT REVIEW DATE: 2021