

Headlice Out of Amblecote!

Headlice are a community problem and need a community solution so school, families and community health advisors/GP's need to work together to keep headlice away.

Please read the notes about Headlice – knowledge is power. If you don't know and understand an issue you can't work properly to address it.

School Perspective:-

If headlice (the living parasite) are observed by any adult in school their parents will be informed at the end of the day.

If the infestation is bad parents will be sent for immediately to treat the child in question. No more 'bug busting' letters will be sent out – it's not making a difference to the spread of headlice and is not environmentally friendly with the amount of paper used.

Nit combs and details of treatment are available free from our office or our Health Advisor (01384 366569) – Nitty Gritty combs are available at £6.50.

Annual staff/parent workshops will update everyone of procedures

Parents

YOU are responsible for regularly checking that your child does not have headlice.

YOU are responsible for treating your child immediately and properly when they do get headlice.

Community Health

The School Health Advisor, local GP's and chemists/pharmacies will be able to advise about detection and treatment.

If you require advice or help please phone our Health Advisor on 01384 366569.

THE MANAGEMENT OF HEAD LICE IN SCHOOLS

INTRODUCTION

This guidance note has been produced to provide schools with up to date information regarding the management of head lice. It takes a realistic approach that reflects present health organisations' thinking. The document was created by the Education Department Health and Safety Team in consultation with the Communicable Diseases Control Centre and the School Health Advisory Teams. It replaces all previous documents issued by the Education Department on this subject.

IMPORTANT INFORMATION ABOUT HEAD LICE

Head lice infection is not primarily a problem of schools, but of the wider community. Schools cannot solve it, but can help the local community to deal with it.

Head lice do not jump from head to head or indeed from head to objects. They are only transmitted by direct, prolonged (more than one minute) head to head contact.

Transmission of head lice in a classroom is relatively rare. When it does occur, it is usually from a close contact.

Head lice will not be eradicated in the foreseeable future, but a sensible informed approach, based on fact not mythology, will help limit the problem.

At any one time most schools will have a few children who have active infection. This is often between 0% to 5%, rarely more.

The *perception* of parents is often that there is a serious "outbreak" with many children infected. This is hardly ever the case. The "outbreak" is often an outbreak of alarm and agitation, not infection.

INFORMATION FOR HEADTEACHERS

You may worsen the problem if you are under the same misapprehension as many parents. Please read "Notes for Families, Head lice - The Truths and the Myths"; also be aware of the support available from School Health Advisers (formerly known as School Nurses).

Do make sure that the information in this document is passed to all school staff. It is important that this information is as widely understood as possible.

Do collaborate with your School Health Adviser in providing educational information to parents and children about head lice, but do not wait until there is a perceived "outbreak". Send information on a regular basis, preferably as part of a package

dealing with other issues. The “Notes for Families” attached to this guidance are suitable for this purpose.

Do consider asking your school health adviser to give a talk to parents at the school. Be present yourself and encourage staff to attend. Or you may prefer to arrange the talks separately for staff and parents.

Do inform your school health adviser in confidence of cases of recurring head lice infection where parents are not complying with advice. Keep these reports confidential and inform your staff to do likewise.

Do not send out standard "alert" letters to parents warning "we have head lice in the school". This is an illogical approach for the following reasons:

- Head lice are not easily transmitted widely in school. We do not send out alert letters for impetigo or chickenpox that are.
- Most schools will at any one time have 0% to 5% of pupils infected this would require letters to be sent out every day.
- Parents can become convinced that their child has head lice when in fact this is not so.

Do not exclude a child from school because of head lice infection. The Education Act 1996 provides for the examination and exclusion of children by a medical officer duly appointed by the LEA. This provision is a direct cut and paste from the Education Act 1944 Act. However, no such officer exists today. In any event exclusion is an illogical approach as:

- It cannot eliminate the infection
- It is an overreaction to a problem which is not a public health threat
- It is not used for other conditions with low transmissibility such as verrucae and herpes simplex.

Do not recommend or support any mass action, including wet combing campaigns.

Do not agree with angry parents that routine head inspections should be reintroduced. They were never effective.

Do not check children's hair; this is a parental responsibility.

Families with continuing and recurring infection should be assisted and supported as they would with any other infection by the concerted support and help of the community (including the school) and of the health professionals. This may include, for example, your Health Visitors, Practice Nurses, School Health Advisers and Social Workers (where involved).

LEA POWERS

The powers given to the LEA by the Education Act 1996 (which is a direct "cut and paste" from the 1944 Act) are both unenforceable and undesirable. The Act gives the power to "forcibly cleanse" a child. Today this kind of action is deemed to be culturally and morally wrong.

INFORMATION FOR PARENTS

The following "Note for Families" contains useful information which schools can print out, photocopy and distribute to parents on a routine basis.

NOTES FOR FAMILIES

Head lice: The Truth and the Myths

The lice

- Head lice are small insects with six legs. They are often said to be "as large as a match head". In fact, they are often not much bigger than a pinhead and rarely bigger than a sesame seed (the seeds on burger buns).
- They live on or very close to the scalp and don't wander far down the hair shafts for very long.
- The louse's mouth is like a very small needle. It sticks this into the scalp and drinks the blood.
- They can only live on human beings. You can't catch them from animals.
- Nits are not the same thing as lice. Lice are the insects that move around the head. Nits are egg cases laid by lice, stuck on to hair shafts. They are smaller than a pinhead and are pearly white.
- If you have nits it doesn't always mean that you have head lice. When you have got rid of all the lice, the nits will stay stuck to the hair until it grows out.
- You only have head lice if you can find a living, moving louse (not a nit) on the scalp.

Who and where?

- Anyone can get head lice, but they are much rarer in adults.
- Head lice infection is a problem of the whole community, not just schools.
- Infection is common during school holidays as well as during term time. Parents start to worry more about lice when children go back to school because they think the lice are being caught there.
- A lot of infections are caught from close family and friends of all ages in the home and community, not from the school.
- It's often said that head lice prefer clean, short hair. In fact, they don't much care whether hair is dirty or clean, short or long. Short hair may make it easier for them to get from one head to another.

How you get them

- Head lice can walk from one head to another when the heads are touching for some time.
- You are very unlikely to pick up head lice from brief contact with other people. The longer you have head to head contact with someone who has lice, the more likely it is you will get them too.
- They can't swim, fly, hop or jump. The idea that they can jump may have come from the fact that, when dry hair is combed, a head louse caught on the teeth of the comb is sometimes flicked off by static electricity (this is one reason why detection combing should be done with the hair damp).

- You don't get them from objects such as the chair back. Although it's just possible that a louse might get from one head to another if a hat is shared, this is very unlikely. It's not the way infection is usually caught.

What happens next?

- If you catch one or two lice, they may breed and increase slowly in number. At this stage, most people don't have any symptoms and won't know they have lice unless they look very carefully for them.
- For the first two or three months, there is usually no itch, but then the scalp may start to itch badly. This is due to an allergy, *not* to the louse bites themselves.
- Most people only realise they have head lice when this itch starts. By then they've had lice on their head for two or three months without knowing it.
- In most infections, there aren't more than a dozen or so lice on the scalp at any one time, but some infections can have many more, up to one hundred headlice.
- Some people never get the itch, including adults. They may have a few lice on their heads for years without knowing it and can pass them to other people.
- Louse droppings may fall on to the pillow during the night. Pillows may then get dirty more quickly than usual.

Prevention - Can you stop them?

- Combing is an important part of good personal care, but head lice are not easily damaged by it. Good hair care may help to spot lice early and so help to control them. There is no evidence that the old slogans "Break its legs, so it can't lay eggs" or "A legless louse is an eggless louse" have any truth in them.
- The best way to stop infection is for families to learn how to check their own heads. This way they can find any lice before they have a chance to breed. They can then treat them and stop them going round the family.
- The way to check heads is called "detection combing". It can be done as often as families want to.
- If a living, moving louse is found on one of the family's heads, the others should be checked carefully. Then any of them who have living lice should be treated at the same time.

The problem won't go away

- The problem may not be head lice at all. Often we think there are lice when there aren't really any there. We all start to itch as soon as head lice are mentioned.
- There are other causes for itching of the scalp. Using head louse lotion can make things worse.
- Using lotion over and over again can cause dermatitis, which itself makes the head itch.
- When living, moving lice *are* found, using the right lotion can almost always clear them. This will only work if enough of it is used, if it is put on in the right way, and if any other family members who have lice are treated properly at the same time.
- A day or two after using the lotion, you sometimes find little lice still there. These have hatched out of the eggs since you put the lotion on, and will be killed if you put the lotion on again after seven days.

- When you have got rid of the lice, you might still itch for two or three weeks. This doesn't mean you still have lice. Check the head carefully. Remember that you don't have head lice if you can't find a moving, living louse.
- When you have got rid of all the lice, the nits (empty egg cases stuck on the hairs) will still be there. This doesn't mean you still have lice and you shouldn't treat again no matter how many *nits* there are if you can't find a living louse.
- People who think their children keep on getting head lice may have made the mistakes listed above and may keep on "treating" lice which have long since been cleared, or were never even there in the first place.
- **If children do *really* keep on having living lice, this is most likely to be due to not doing the treatment properly and not treating all those close contacts who have also been found to have lice. Remember, if infection really does keep on happening, it is almost always from a member of the family, or a close friend. It is rarely from other children in the classroom except from a "best friend".**
- If you *still* have problems, ask your family doctor, health visitor, local chemist, or School Health Advisor if a wet-combing method to remove the head lice might help.

What the schools can do

- Schools must remember that most lice are caught in the family and the local community, not in the classroom.
- Mass head checks will not help, but the School Health Adviser can advise and support parents to check their own families.
- **"Alert" letters should not be sent out. These can cause an "outbreak" of imaginary lice.**
- Children who may have lice should not be excluded from school. If they do have lice, they will probably have been there for weeks already. Why not exclude? Exclusion is an illogical approach because:
 - It cannot eliminate the infection
 - It is an overreaction to a problem which is not a public health threat
 - It is not used for other conditions with low transmissibility such as verrucae and herpes simplex.
- The school should give information on lice for parents and staff including regular detection combing and how to do it. This should be on a regular basis, not just when there is thought to be an "outbreak" and should be done with the School Health Adviser.

What families can do

- Make sure that all family members know about good hair care, including regular, thorough combing.
- **The only way to control head lice which works is for the family to check their own heads.**
- Check all the family's heads every now and then with a special plastic detection comb from the school office or chemist's shop, using conditioner to help the comb slide. *All* the family means *everyone* (adults as well as children) in the same household.

- **Only if you are sure you have found living, moving head lice in your family,** tell your relatives and close friends so that they can check their own heads. Treat any of your family you are sure have lice at the same time. Ask at the chemist's, the surgery, or the School Health Adviser which lotion you should use.
- **Remember, never use the lotions unless you are sure you have found living, moving head lice (*not* nits).**
- Try not to worry too much about head lice. They rarely do any harm other than causing an itchy scalp.

Head lice: Have you got head lice?

Detection combing - how to do it

You need; plastic detection comb (from the chemist, supermarket or free from school)
 Nitty Gritty Comb from school £6.50 (discounted)/ chemist £10.
 good lighting
 ordinary comb to brush out knots and tangles.

- Wash the hair well, apply and leave conditioner, comb with specific detection comb, then dry it with a towel. The hair should be damp, not dripping.
- Make sure there is good light. Daylight is best.
- Comb the hair with an ordinary comb.
- Start with the teeth of the *detection comb* touching the skin of the scalp at the top of the head. Draw the comb carefully towards the edge of the hair.
- Look carefully at the teeth of the comb in good light.
- Do this over and over again from the top of the head to the edge of the hair in all directions, working round the head.
- Do this for several minutes. It takes 10 to 15 minutes to do it properly for each head.
- If there are head lice, you will find one or more lice on the teeth of the comb.
- Head lice are little insects with moving legs. They are often not much bigger than a pinhead, but may be as big as a sesame seed (the seeds on burger buns).
- Clean the comb under the tap. A nailbrush helps to do this.

Notes

- You can buy a plastic detection comb from the chemist or obtain one free from the school office. Special Nitty Gritty combs cost £6.50 from school.
- If you need help and advice, ask your local chemist, health visitor, school health adviser, or family doctor.
- Don't treat unless you are sure that you have found a living, moving louse.

Head lice - How to treat them

If you are sure you have found a living louse:

- Check the heads of all the people in your home.
- Only treat those who have living, moving lice.
- Treat them all at the same time with a head louse *lotion* (not shampoo). **NOTE:** Hair care products such as perming lotions and dyes do not get rid of head lice.
- Ask your local chemist, school health adviser/school nurse, health visitor or family doctor which lotion to use, and how long to leave it on.
- Put the lotion on to *dry* non-conditioned hair.
- Use the lotion in a well ventilated room or in the open air.
- Part the hair near the top of the head, put a few drops on to the scalp and rub it in. Part the hair a bit further down the scalp and do the same again. Do this over and over again until the whole scalp is wet.
- You don't need to put lotion down long hair any further than where you would put a pony-tail band.
- Use enough lotion - at least one small bottle for each head, more if the hair is thick. Use all the lotion up.
- Keep the lotion out of the eyes and off the face. One way is to hold a cloth over the face.
- Let the lotion dry on the hair. Some lotions can catch fire, so keep well away from flames, cigarettes, stoves, and other sources of heat. Don't use a hair dryer.
- Treat all of them again seven days later in the same way with the same lotion.
- Check all the heads a day or two after the second treatment. If you still find living, moving lice, ask your local chemist, health visitor, school health adviser, or family doctor for advice.
- Continued daily wet combing of hair, section by section is best way to eliminate eggs (nits) from hair before they hatch.

Notes

- Don't treat unless you are sure you have found a living, moving louse.
- Don't ever use head louse lotions on your family "just in case". It's never a good idea to use chemicals if they aren't really needed.