

Head Lice Policy

Head lice infection is common in young children. The head louse is a very small whitish or grey-brown insect that ranges from the size of a pinhead to the size of a sesame seed; it feeds by biting on the scalp and sucking blood. Nits are head lice eggs. Head lice do not jump and they do not fly, they walk from one hair to another which is why they are so common at nursery when children often have their heads bowed down together and their hair is touching.

What are Head Lice? Head lice are not a serious health problem; they rarely cause physical health problems other than itching of the scalp (Health Protection Unit). -Itchy head Signs of head lice - Rash on the scalp -Black specks that look like dust on their pillow (head lice droppings).

Head lice can't be prevented but regular checking ensures early detection and treatment if necessary. The best detection method is wet combing (see below). Parents and carers should aim to check their children's hair once a week during hair washing. You need your usual shampoo, ordinary conditioner and a louse detection comb. Remember that you are looking for living moving head lice – the only evidence that your child has a head lice infection. The comb must be fine enough to catch the lice. Your pharmacist should be able to recommend a suitable one. Detection Good lighting is important. Look for nits by parting hair in small sections, going from one side of the head to the other. Check carefully, looking close to the scalp. Nits are most predictably found on hairs at the nape of the neck and behind the ears, where they are protected from extremes of light and temperature. However, they may be laid anywhere on the hair, especially in warm weather. The appearance of a nit is often confused with that of a flake of dandruff or a dried particle of hairspray or gel. A distinguishing feature is that dandruff and hair products can be easily combed off the hair or removed with the fingers, while nits cannot. Nits are firmly glued to the hair and must be removed with a fine-toothed comb or fingernails, or snipped off with scissors. The scalp should be examined in sunlight or under bright artificial light. The hair should be parted, with individual strands checked for nits. When head lice are found all members of the infected person's household and other recent head-to-head contacts should check themselves as soon as possible by detection-combing for signs of lice. Parents or carers should do this for children or adults in their care as necessary

Treatment should be carried out only when lice are found or strongly suspected, i.e. when there has been prolonged head-to-head contact with an infected person. When treatment is required, lotions rather than shampoos should be used whenever possible and left on for 12 hours or overnight. Lotions do not reliably kill eggs so they must be re-applied 7 days after the first treatment to kill newly hatched lice before they are old enough to lay eggs. Lotions may be obtained from the GP, local pharmacist, or the local health centre/clinic. Lotions are ineffective when used as a preventative measure. They are expensive and help create resistance to the insecticide.

If a staff member finds a louse or nit we would phone the parents/carers to ask that their child is collected and a treatment is applied. They will then be able to return to nursery straight after the treatment. Our aim in doing this is to prevent the spread throughout the nursery and therefore limit the number of families affected by this. In those cases where resistant and/or recurrent infections may be in evidence, the Nursery Manager should request the help of a general practitioner in giving additional support/advice to parents, sometimes on an individual basis. General Practitioners and Pharmacists are another source of support for parents. If the head lice are found in the staff's hair, they will be sent home to apply a treatment, they will be asked to come back following treatment.

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If we have an outbreak of 3 or more cases we will inform parents of this via email.

If you suspect your child has louse the easiest way to check is wet –combing using a fine comb called a nit comb once their hair has been washed. The NHS advises parents/ carers to repeat this process every 3 or four days for two weeks in case parents miss anything. The Health protection Unit recommends children should probably have their heads checked for head lice at least weekly, especially if their friends are known to be infected.

- Remember: • Make weekly head checks part of your routine If the person affected has long hair, keep it tied back.