

Children's Centre - Nursery - Primary Dulwich Wood Federation

NITS POLICY

Dulwich Wood Federation is aware of the national problem of head lice and how it can sometimes affect children of a nursery / primary school age at home and in school. In carrying out the schools' responsibilities the Headteacher and staff members will follow the guidance given by Public Health England in their publication 'Guidance on Infection Control in Schools and other Childcare Settings'.

WHAT ARE HEAD LICE?



A head louse is a tiny six-legged insect. It is approximately the size of a pin head but can become the size of a match head. It is greyish brown in colour but both the louse and the eggs it lays can change colour to match hair colour. The louse feeds only on human blood, approximately five times per day.

HOW TO SPOT HEAD LICE



These are egg cases that show your child has already been infected. The eggs have an incubation period of seven to eight days, within 7-14 days of hatching the louse becomes an adult, begins to mate, and the females start to lay eggs. Live eggs are skin coloured, whereas the cases of dead eggs (nits) are white and remain glued to the hair.

Head lice can be difficult to spot, even when the head is closely inspected.



They're very small whitish or grey-brown insects that range from the size of a pinhead to the size of a sesame seed. The only way to be sure someone has head lice is to find a live louse by combing their hair with a special fine-toothed comb. This is called [detection combing](#).

This is what they look like on the teeth of a nit comb.

webpage:

You can watch a video of how to do detection combing on this

Less reliable signs of head lice include:

- small white eggs or nits (egg cases) in the hair behind the ears or at back of the neck – see image above
- an itchy scalp
- a rash on the back of the neck
- feeling as though something is moving in the hair

HOW DO THEY SPREAD?

They are spread by head-to-head contact and climb from the hair of an infected person to the hair of someone else. Children are often affected by head lice because they tend to have more head-to-head contact while at school or during play. Head lice are most common in children between 4 to 11 years old although anyone with hair can catch them. Head lice will not be eradicated in the foreseeable future, but a sensible, informed approach, based on fact not mythology, will help to limit the problem.

PARENTS' / CARERS' RESPONSIBILITIES

Parents or carers are responsible for preventing, detecting and treating head lice infections in their families by arranging:

- To check hair regularly i.e. undertake detection combing once weekly for signs of infection and also to check amongst close contacts when informed of an infection.
- To undertake “contact tracing” among all members of the family who have had head to head contact with an infected person. Contact tracing means informing people about the head lice infection so they can do detection combing and treat if necessary.
- To promptly treat any members of the family who have a head lice infection.
- To inform the school promptly if a school child is infected.
- To use lotions only as a treatment when an infection is present and not as a preventative measure.
- To seek help and advice from the school if necessary.
- To start treatment as soon as possible.

TREATMENT

There are 2 methods of treatment:

1. Lotions and sprays

There are several different products that can be applied to the scalp and hair to kill head lice, including:

- dimeticone 4% lotion or lotion spray – applied and left for 8 hours (usually overnight)
- dimeticone 4% spray gel – applied and left for 15 minutes
- mineral oil and dimeticone spray – applied and left for 15 minutes
- isopropyl myristate and cyclomethicone solution – applied and left for 5-10 minutes

Some treatments need be done twice – seven days apart – to make sure any newly hatched lice are killed.

2. Wet-combing.



Wet combing involves removing head lice with a special fine-toothed comb. It's suitable for everyone and is relatively inexpensive.

A number of lice removal combs are available to buy (99 p on Amazon! Or go to your local pharmacy). Combs with flat-faced teeth spaced 0.2-0.3 mm apart are best for removing head lice, although combs with smaller gaps can be used to remove eggs and nits (egg cases) after treatment.

The comb may come with instructions outlining how to use it. A commonly used method is described below. Wash the hair with ordinary shampoo and apply plenty of conditioner.

- Use an ordinary, wide-toothed comb to straighten and untangle the hair.
- Once the comb moves freely through the hair without dragging, switch to the louse detection comb.
- Make sure the teeth of the comb slot into the hair at the roots, with the edge of the teeth lightly touching the scalp.
- Draw the comb down from the roots to the ends of the hair with every stroke, and check the comb for lice each time – remove lice by wiping the comb with tissue paper or rinsing it.
- Work through the hair, section by section, so that the whole head of hair is combed through.
- Do this at least twice to help ensure you haven't missed any areas, until no more lice are found.
- Repeat this procedure on days 5, 9 and 13. **Detection combing** should be done on day 17, to check for any live head lice.

SCHOOL'S RESPONSIBILITIES

When a child at school has a head lice infection, the child will be allowed to stay in school for the remainder of the day but the parents will be notified and requested to start treatment the same evening.

In some cases the head lice infection may lead to discomfort for the child making it difficult for him / her to concentrate on schoolwork. In these cases school may suggest to the parent / carer concerned that the child is taken out of school to begin treatment as soon as possible.

Because a child with head lice is likely to have contracted them of another child in class and is now has the potential to spread them in the class, the whole class will receive a letter asking all parents to carry out detection combing that evening and to treat their child if they find evidence on recent / ongoing infection.

If all parents act on the same day they receive an alert letter and carry out detection combing (and treatment if required) head lice can be easily prevented from spreading. On-going infections are caused because not all parents check their children when they receive the letter leading to a cycle of reinfection which can be very costly.

The school will not

- Carry out physical checks on pupils for head lice.
- Discuss individual families / children with other parents.
- Tell parents to keep children away from school because of head lice.
- Exclude a child from school because of head lice but parents are required to treat them.

School does not recommend the use of:

- Essential oils such as lavender oil or tea tree oil. In their concentrated form they can be toxic if used inappropriately.
- Electronic combs which only kill live lice but not eggs.
- Repellent sprays. They do not treat an active infection. At the present time there is no research evidence to support their effectiveness.