Read this document with the Health of students policy.[[1]](#footnote-1)

# Introduction

The appropriate management of head lice is an important aspect of student health and wellbeing. These guidelines are intended to ensure a consistent and coordinated approach in the management and control of head lice throughout NT Government schools. These guidelines align with the advice of the Department of Health.

Although head lice rarely pose a major threat to health, common symptoms of itching and irritation can cause sleep disturbance and behavioural problems. Head lice do not jump, hop or swim. They transfer from one person to another in situations where people are in close contact or from direct hair to hair contact with an infected person. Very occasionally they can be passed on by sharing hats and brushes but not through using furniture or contact with carpets.

To prevent the outbreak of head lice in a school, parents are required to treat their children if head lice or nits are suspected, prior to the next day of school. Effective treatments and prevention strategies are outlined on the NT Government webpage[[2]](#footnote-2) and in the Department of Health’s Head lice action pack.[[3]](#footnote-3)

These guidelines apply to all NT Government schools and preschools.

# Definitions

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| Term | Definition |
| Head lice | Tiny insects, 2 to 3 mm long, which live in the hair feeding on human blood and vary in colour from cream to black. |
| Nits | The common name for the small eggs that are laid by head lice. They are the size of a grain of salt, yellow and white in colour, and are found glued to the hair near the scalp. Dead nits are often black in colour and are found well away from the scalp. |
| Parent | A parent means a child’s father, mother or any other person who has parental responsibility for the child, including a person who is regarded as a parent of the child under Aboriginal customary law or Aboriginal tradition. |

# Roles and responsibilities

Principals and teachers will:

* inform parents if their child is suspected of having head lice
* inform parents of the class where head lice have been found
* encourage parents to check their children for head lice regularly through the school newsletter and other appropriate channels
* minimise head to head contact during outbreaks
* develop an action plan with those parents who have difficulties in providing treatment.

Parents must:

* regularly inspect their children’s hair and begin treatment immediately if head lice are present
* notify the school if head lice or nits are found and advise when treatment has begun.

# Procedures

Where a student is suspected of having head lice or nits, the student is to remain at school until the end of the school day. The student must not be excluded if evidence is provided that effective treatment has begun before the next day of school. This is in alignment with the NT Government Centre of Disease Control Time Out poster.[[4]](#footnote-4) The following steps provide guidance for schools when dealing with students suspected of having head lice or nits.

### Step 1. Suspect head lice

Head lice or nits are suspected on a child by school staff.

Step 2. Notify parents

The student suspected of having head lice is to remain at school until the end of the school day. The parent of the student suspected of having head lice or nits must be notified verbally where possible and the student must take home a note informing the parent of suspected head lice or nits and requesting them to check and if necessary treat their child.

Refer to the Student head lice letter to parents template.[[5]](#footnote-5)

Notification should be done discreetly.

The school must verbally advise and send out a letter with the class regarding the current outbreak and request that parents check their child for head lice.

Refer to the Class head lice letter to parents template.[[6]](#footnote-6)

Step 4. Treatment

Parents are asked to follow the treatment protocol from the Department of Health’s Head lice action pack[[7]](#footnote-7) and advise the school that treatment has commenced. Schools could make use of the posters[[8]](#footnote-8) and booklets[[9]](#footnote-9) provided by the Department of Health.

Step 5. If head lice persist

If a head lice problem persists, a whole school approach can be an effective strategy of minimising head lice outbreaks, with the support of the school representative body, parents and the community.

# Supporting documents

* Student head lice letter to parents template
* Class head lice letter to parents template[[10]](#footnote-10)

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| --- | --- |
| **Document title** | Head lice management – guidelines |
| **Contact details** | Inclusion and Engagement Services, Student Wellbeing and Inclusion Programs and Services  [Swipolicy.doe@education.nt.gov.au](mailto:Swipolicy.doe@education.nt.gov.au) |
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| Version | Date | Author | Changes made |
| 2 | May 2016 | Student Wellbeing and Inclusion | TRM EDOC:2018/96584 |
| 3 | 2023 | Student Wellbeing and Inclusion Programs and Services | Administrative amendments to align roles and responsibilities to the structural alignment in effect from 1 July 2022, including NTG template, minor formatting and edits, and changed flow chart to be text only |

1. <https://education.nt.gov.au/policies/health-safety#health> [↑](#footnote-ref-1)
2. <https://nt.gov.au/wellbeing/health-conditions-treatments/parasites/head-lice> [↑](#footnote-ref-2)
3. <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/525> [↑](#footnote-ref-3)
4. <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/1011> [↑](#footnote-ref-4)
5. <https://elearn.ntschools.net/policy-and-advisory-library> [↑](#footnote-ref-5)
6. <https://elearn.ntschools.net/policy-and-advisory-library> [↑](#footnote-ref-6)
7. <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/525> [↑](#footnote-ref-7)
8. <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/525> [↑](#footnote-ref-8)
9. <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/525> [↑](#footnote-ref-9)
10. <https://elearn.ntschools.net/policy-and-advisory-library> [↑](#footnote-ref-10)