



**THE HON NICOLA ROXON MP  
MINISTER FOR HEALTH AND AGEING**

The Hon John Murphy MP  
Chair  
Standing Committee on Petitions  
Parliament House  
CANBERRA ACT 2600

Dear Mr Murphy 

Thank you for your letter of 22 November 2010 regarding a petition submitted for the consideration of the Standing Committee on Petitions about Commonwealth funding for mobile specialist head lice treatment programs and Medicare funding for head lice treatment products.

The Australian Government provides policy and advice on health protection and works closely with the states and territories to implement the National Environmental Health Strategy (NEHS) 2007-2012. The NEHS commits to providing, amongst other things, evidence-based, effective and nationally consistent standards and guidelines that supports the protection of human health such as the control of head lice.

As part of this commitment, the *Guidelines for the control of public health pests – lice, fleas, scabies, bird mites, bedbugs and ticks* has been developed to assist state, territory and local governments to control public health pests such as lice.

The Guidelines are suitable for other agencies, groups, schools, child care centres, community health centres and individuals involved in dealing with infestations and are available from my Department's website at [www.health.gov.au/internet/main/publishing.nsf/Content/ohp-enhealth-vermin-cnt.htm](http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-enhealth-vermin-cnt.htm)

The states and territories provide for infestation control through their public health legislation and their departments of education and have developed their own head lice programs. For example, Victoria has developed a school head lice program consisting of the Parent Managed Head Lice Program and the Municipal Council Programs. Other states and territories have similar programs.

While department of education policies concerning the identification and treatment of head lice vary between the states and territories, they generally advocate that, children suspected of having head lice should be excluded from school until treatment has commenced and it is considered to be responsibility of the parent or guardian to detect and treat head lice infestations.

The states and territories also employ environmental health officers who provide assistance and advice to agencies and the public on the management of pest control including head lice. Councils and shires may also have information on organisations in their area which are able to assist with specific problems related to head lice.

The Medicare benefits arrangements are designed to provide financial assistance to people who incur medical expenses for clinically relevant professional services rendered by, or on behalf of, qualified health practitioners both in and outside hospital. The scheme is not designed to accommodate subsidies towards the cost of head lice treatment products or programs.

I do commend the petitioners efforts in wanting to raise more awareness of the impact of head lice in the community. While all levels of government contribute towards addressing this issue, most activity occurs at the local level. I would suggest the petitioners seek further advice at the local level in terms of identifying the need for a mobile treatment program.

I trust that the above information is of assistance.

Yours sincerely

**NICOLA ROXON**

02 FEB 2011