

Head Lice/Nit Procedures

Although head lice are transmissible, their potential for epidemic spread in the school setting is minimal. From a medical perspective, infestation with head lice is a mild health condition without serious health consequences for a child, and will not be considered a major health threat to those infested or those potentially exposed. Head lice can be a nuisance but they have not been shown to spread disease. Personal hygiene or cleanliness in the home or school has nothing to do with getting head lice.

The following are recommended as best practices:

1. Providing consistent information for schools, health agencies and social service agencies to effectively control the spread of head lice;
2. Providing consistent education on safe and effective lice treatment;
3. Providing consistent education for effective prevention; and
4. Providing an established process to respond to those families and students having difficulty with chronic or recurrent lice infestations (including practice and referral criteria).

When a student is found to have live lice:

1. The parent is notified by phone if possible and information related to detection and elimination of head lice can be provided at that time or sent home with the student in a sealed envelope.
2. The student is **not** sent home from school, unless the parent desires to pick up the student. Confidentiality must be maintained.
3. The parent is instructed that the student must be treated before returning to school.
4. It is appropriate to have the student's head checked upon return to school. If live lice are found, the student will not return to the classroom. Parent will be instructed to remove all live lice before the student returns to school.
5. If nits are found, the parent is notified to keep combing them out with a lice comb at least daily for the next two weeks.
6. Follow up head checks may be done by trained school staff to confirm lice management efforts.
7. If live lice are found, the process of notification to parents/guardians begins again.

When a student is found to have nits in the hair (no live lice detected):

1. The parent is notified by phone if possible and encouraged to comb nits out at least daily for the next two weeks.
2. The student is **not** sent home from school.
3. Information related to detection and elimination of head lice is sent home with the student in a sealed envelope.
4. If future checks reveal an increased number of nits present or it is obvious to the screener that the student's hair has not been treated (live lice are present), the parent will be contacted for follow up and support.

When to check beyond the identified student with live lice or nits:

1. Determine if the student has siblings in the district. If yes, then check the siblings.

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2. If a student is found to have live head lice, they are to be documented on the confidential health office report and parent notification is to occur as previously stated.
3. Full classroom screenings for head lice are **not** done unless deemed necessary by the School Nurse. "Screening for nits alone is not an accurate way of predicting which children will become infested, and screening for live lice has not been proven to have a significant effect on the incidence of head lice in a school community over time." (AAP Policy, September 2002).

Treatment

1. Use of a lice-killing agent: There appears to be no satisfactory chemical or herbal treatment known to be 100% effective in the elimination of live lice and nits. Parents will be given accurate information regarding treatment. The school health nurse, health care providers or pharmacists can provide specific information regarding what treatment is best for a given family. It is very important to remember individuals react differently to different medications including alternative treatments. Therefore a referral to a health care professional is sometimes necessary.
2. Nit removal: Treatment will include daily lice and nit combing for 2 weeks. Daily head checks for all family members are imperative and will be continued until everyone has been clear of lice for 2-3 weeks.
3. Environmental clean-up: Written instructions will be given to families regarding home care. Use of sprays, fumigating agents and bug bombs will be discouraged. They are ineffective and can be a health hazard. Simple information regarding vacuuming, ironing, clothes drying and/or bagging items is appropriate.

Screenings

1. Criteria for screening an individual for lice are: persistent itching or scratching, known exposure to sibling or other close contact with head lice (e.g., overnight sleep activities, scouts, etc.,) self (student or parent) referral.
2. Three non-related cases of head lice in a classroom within ten consecutive school days will require that all children in the classroom be screened by the following school day.
3. If there is infestation among three percent of the entire student population within ten consecutive school days, there will be a screening of all students in a specific school entity within one week. Multiple cases from a single household count as one case for purposes of calculating the percent of children infested.
4. The school will notify parents and/or guardians whenever there is a multiple infestation in the classroom and a screening is planned.

Classroom environment:

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1. The classroom is only one of many environments where head lice can be transmitted. According to the CDC, most transmissions occur in the home environment (friends, sleepovers, camp, etc.).
2. Past practice of separating coats, backpacks, etc. have been found to not be important, as healthy head lice do not stray from the head. A head louse which is on an inanimate object is most likely a dying head louse.
3. No environmental pesticide treatments (sprays, pesticide bombs) are to be used.
4. Encourage students to avoid sharing hats, combs, and pillows; and to avoid head-to-head contact.
5. The School Nurse will use professional judgment to determine when unusual measures are necessary to respond to extraordinary cases.

Exclusion Procedures:

Note: the presence of severe infestations of untreated head lice can be disruptive to the educational environment.

1. In the rare case that a student has either a chronic head lice infestation or a severe head lice infestation that is disruptive to the learning environment, the School Nurse will be consulted.
2. If in the nurse's professional judgment it is determined that Exclusion needs to be considered, the nurse will consult with the building principal about implementing Exclusion. This measure will only be taken with careful consideration.
3. With chronic head lice cases the nurse will obtain the documentation of repeated and unsuccessful head lice management measures (from Skyward Office Visits).
4. In the rare case that a student is to be excluded a notice will be given to the parent in person if possible, and a phone contact will be attempted and documented. If there is concern about the delivery of the notification, it can be sent by certified mail.
5. The return of a student after Exclusion will necessitate a head check in the main office with evidence of progress in head lice management. Evidence is elimination of live lice and a decrease in the number of nits.
6. It may be appropriate in the judgment of the School Nurse to monitor progress of lice management over a period of time. The goal is to support the family in eradication of this pest.