I. Policy

II. Definitions

**Pediculosis**: Infestation of the head, hair and/or scalp with lice. Head lice infestation can be a nuisance, but lice have not been shown to spread disease.

**Louse**: A small insect that lives on the scalp of the head.

**Head Lice**: More than one louse. Adult head lice are parasitic insects roughly 2-3 mm long. Head lice infest the head and neck and attach their eggs to the base of the hair shaft. Head lice move by crawling. They cannot hop, jump or fly.

**Nits**: Nits are lice eggs laid by the adult female head louse at the base of the hair shaft nearest the scalp. Nits are firmly attached to the hair shaft and are oval-shaped, very small and hard to see. Nits often appear yellow or white. Head lice nits usually take about 8-9 days to hatch. Eggs that are likely to hatch are usually located no more than ¼ inch from the base of the hair shaft/scalp. Nits located further than ¼ inch from the base of the hair shaft are likely to be non-viable nits or empty casings.

III. Procedures

The American Academy of Pediatrics (AAP) reports most cases of head lice are acquired outside of the school setting. Evidence indicates that only about 1% of identified cases of head lice are acquired at school. Head lice are most frequently transmitted by close head-to-head contact with an individual with a live head lice infestation. Schools rarely provide an opportunity for such contact.

The purpose of this document is to provide information and best practice guidelines for prevention, treatment and management of head lice in the school community. Like any student concern, incidences of head lice must be handled confidentially.

A. In an effort to prevent outbreaks, the elementary school principal, in collaboration with the registered nurse, will provide appropriate information about head lice and its control to parents and students at the beginning of the school year, following extended school breaks, and as needed throughout the school year. Information at the middle and high school level will be provided at the start of the school year and as necessary.

B. If a student presents to the health room and is determined to have live head lice and/or an infestation, parents/guardians will be notified and provided with guidelines about effective treatment for head lice infestation.

C. Siblings of students within the same school with confirmed head lice may also be screened if symptomatic or if not symptomatic, with parent/guardian consent.

D. Parents/guardians are expected to consult with their child’s healthcare provider and/or treat their child for head lice prior to sending him/her back to school.
E. Health room staff will recheck the student upon return to school and again in one week to determine the effectiveness of treatment. If head lice are present, parents/guardians will be notified and expected to consult with their child’s healthcare provider and/or treat their child again before returning to school.

IV. Roles and Responsibilities

A. Parent/Guardian Responsibilities

Parents/guardians are integral to the prevention, treatment and management of head lice in the school setting. Regular observation by parents/guardians/caregivers is an effective way to detect and quickly treat head lice, thereby reducing the incidence of transmitting head lice in the school setting. It is important for school nurses and parents/guardians to work collaboratively to prevent the spread of head lice. Parents/guardians are responsible to:

- Observe their children for indications of possible head lice infestation, and when/if head lice infestation is suspected to consult with the school nurse and/or their child’s health care provider prior to sending their child back to school.
- Consult with their child’s health care provider and/or treat their child for head lice before returning to school when it has been identified by school health staff or at home.
- Facilitate having other household members checked for head lice. If other household members have live head lice, they should be treated simultaneously.
- Communicate with school health staff once their child has been treated for head lice and plans to return to school.
- Communicate with school health staff any barriers to treating their child for head lice, so appropriate support may be provided.
- Respect the confidentiality of their child’s personal information, as well as the personal information of all students.

B. School Administrator Responsibilities

School administrators should work closely with the school nurse to disseminate evidence-based information about the prevention, treatment and management of head lice in school. School administrators are integral to setting the tone for remaining calm and objective, as well as ensuring student confidentiality is protected. The school administrator is responsible to:

- Collaborate with the school nurse to provide evidence-based information and guidance to parents/guardians and all school staff regarding prevention, treatment and management of head lice at the beginning of the school year and as needed throughout the school year. Information should be distributed in elementary schools following extended school breaks as well.
- Collaborate with the school nurse about sending specific information to parents/guardians if/when head lice has been identified by the school nurse.
- Collaborate with the school nurse to support families and students who are experiencing chronic head lice infestation.
- Collaborate with the school nurse to determine on a case-by-case basis if a student needs to be excluded from school because of head lice infestation. Exclusion from school should be a last resort and based on best practice school health standards. Students should not be excluded from school solely because of the presence of nits.
C. School Nurse Responsibilities

The registered nurse is the leader of the school health nursing team and is integral to the prevention and management of head lice transmission in the school setting. The school nurse is responsible to:

- Collaborate with the school principal or designee to provide evidence-based information and guidance to parents/guardians and all school staff regarding prevention, treatment and management of head lice at the beginning of the school year and as needed throughout the school year. Information should be distributed in elementary schools following extended school breaks as well.
- Ensure parents/guardians of students who have been identified with live head lice are notified and receive education about evidence-based treatment options.
- Direct parents/guardians of students who have been identified with live head lice to consult with their child’s health care provider and/or treat their child for head lice before sending the child back to school.
- Ensure students returning to school following treatment for head lice are checked for efficacy of treatment upon return to school and one week later.
- Ensure the confidentiality of any student who is screened for and/or identified with head lice is maintained.
- Support a non-stigmatizing environment when supporting students/families who are experiencing chronic head lice infestation.
- Communicate with classroom teachers about appropriate strategies to prevent transmission of head lice as needed.

D. School Staff Responsibilities

School staff are important members of the school team and should collaborate with school health staff to maintain an objective, professional, non-stigmatizing approach to supporting students who experience head lice infestation. School staff are responsible to:

- Send students to the health room when they are complaining of an itchy scalp or are demonstrating excessive scratching of the head. Students should not be sent to the health room solely based on knowledge of their history of previous head lice infestation nor based on hearsay.
- Support a calm, non-stigmatizing environment and maintain the confidentiality of any student suspected of or known to have a head lice infestation.
- Collaborate with school health staff to identify prevention and control strategies when head lice is identified in the school setting.

E. Resources

https://www.cdc.gov/parasites/lice/head/schools.html
https://www.healthychildren.org/English/health-issues/conditions/from-insects-animals/Pages/Signs-of-Lice.aspx

Approved:

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