

### **Pediculosis (Head Lice)**

The American Association of Pediatrics, Center for Disease Control and Prevention and the National Association of School Nurses recommend that students with nits or active head lice not be excluded from school. The burden of unnecessary absenteeism to the students, families and the community far outweighs the risks associated with head lice. Periodic student head lice checks and whole class screenings are not recommended and will not be performed.

Criteria for screening an individual for lice are: persistent itching or scratching, known exposure to sibling or other close contact with active head lice or self-referral.

Students diagnosed with nits or active head lice will remain in school and participate in regular school activities, including riding the bus home at the end of the school day. They can go home at the end of the day, be treated and return to class after appropriate treatment has begun. Parents of students with nits or active head lice will be provided written treatment and effective preventative or management information on the day head lice is discovered. These students may return to school after treatment and will be rescreened by school staff.

Parents will be advised to:

1. Use a lice-killing agent, which their health care provider, school nurse, local pharmacy or local health authority recommends, on all family members who demonstrate symptoms;
2. Follow personal and household cleaning instructions provided by the district, health care provider or local health authority, as appropriate;
3. Remove all nits after treatment.

Nits persist after treatment, but successful treatment will destroy active head lice. Head lice can be a nuisance but have not been shown to spread disease. Personal hygiene or cleanliness in the home or school has nothing to do with contracting head lice.

Parents must either accompany their child to school for readmittance or provide a signed statement that treatment has been initiated. Parents of students who return to school without having proper treatment will be contacted immediately by school personnel with guidance on proper treatment and effective prevention or management. Parents of students who return to school on a subsequent day without having proper treatment will be asked to participate in a meeting with the principal and others, as determined by the principal, to discuss solutions. After the meeting, the student will be sent home with the parent so treatment may begin.

The school staff will work to identify resources for parents who are unable to pay for proper treatment. Students with chronic head lice may be referred for follow-up to the school nurse or local health department.

In place in schools at all times is the standard classroom practice that hats, headwear, hair accessories, combs and/or hairbrushes will not be shared by students.

When there are three or more nonrelated cases of head lice in a classroom within 15 consecutive days the following preventative and management procedures will be implemented until no head lice cases exist in the class:

1. Custodial staff will automatically implement deep cleaning procedures.
2. School bags, coats, scarves and other personal items of all students in the classroom will be wrapped in plastic bags before placed in the coat hook or locker area;
3. Throw rugs, pillows and cushioned/fabric chairs will be removed from the classroom;
4. The classroom carpet will be treated as appropriate.

Parents who identify head lice on their child at home are to begin treatment prior to attending school and are encouraged to report that treatment has begun to the school office the following day when the child attends school.

In the event additional assistance and/or information is needed regarding the treatment of the student, other family members, close contacts and the home environment such as bedding, linens, grooming equipment, parents should refer to their local health department or health care provider.