

LEBANON SCHOOL DISTRICT

POLICY: 209.3
SECTION: PUPILS
TITLE: HEAD LICE
ADOPTED: June 18, 2018

209.3 HEAD LICE

Purpose

The Board is committed to maintaining a healthy environment for students and staff. To fulfill that commitment, the Board established this lice policy/procedure which is in line with evidence based practice and is based on recommendations from the Center for Disease Control (CDC), American Academy of Pediatrics, and National Association of School Nurses. Both the American Academy of Pediatrics and the National Association of School Nurses advocate that “no-nit” policies should be discontinued. “No-nit” policies that require a child to be free of nits before they can return to school should be discontinued for the following reasons:¹

1. Many nits are more than one-quarter ($\frac{1}{4}$) inch from the scalp. Such nits are usually not viable and very unlikely to hatch to become crawling lice, or may in fact be empty shells, also known as casings.
2. Nits are cemented to hair shafts and are very unlikely to be transferred successfully to other people.
3. The burden of unnecessary absenteeism to the students, families and communities far outweighs the risks associated with head lice.

¹ Andresen, K. & McCarthy, A. *A policy change strategy for head lice management*. Journal of School Nursing, 25(6), 407-16 (2009).

Frankowski, B., & Bocchini, J (2010). Clinical Report Head Lice. Pediatrics, 126 (2), 392-403.

Head Lice Information for Schools, Center for Disease Control.
<https://www.cdc.gov/parasites/lice/head/schools.html>

Head Lice Management in the School Setting. National Association of School Nurses.
<https://www.nasn.org/nasn/advocacy/professional-practice-documents/position-statements/ps-head-lice>

4. Misdiagnosis of nits is very common during nit checks conducted by nonmedical personnel.
(<http://www.cdc.gov/parasites/lice/head/schools.html>)

Procedure

At any time during the school year, the school nurse may examine a student for head lice. Pediculosis (infestation by head lice) should not disrupt the educational process. In cases that involve head lice, as in all school health issues, it is vital that the school nurse prevent stigmatizing and maintain the student's privacy, as well as the family's right to confidentiality. If lice are identified, the following procedures shall be implemented:

1. The school nurse will provide information to the parent/guardian regarding treatment. Students diagnosed with live head lice can be sent home at the discretion of the nurse, be treated, and return to class after appropriate treatment of live lice has begun. Nits may persist after initial treatment, but successful treatment should kill crawling lice. 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.
2. Determine if the student has siblings in the district. If yes, then check the siblings and others in close contact with the affected child. Children found with live head lice should remain in class, but be discouraged from close, direct head contact with others. The school nurse should contact the parents/guardians to discuss treating the child at the conclusion of the day.

Readmission

After the in-home treatment has been initiated and live lice have been removed, the child may return to school, even if nits persist.

The nurse will continue to work with the family through the lice treatment and provide daily checks of the child before school each day.

Once the nurse has verified that the child is lice/nit free, parents/guardians will be given notification that the child no longer needs daily checking in the nurse's office at the start of each day.

Guidelines

Classroom Environment

The classroom is only one (1) of many environments where head lice can be transmitted. According to the CDC, most transmissions occur in the home environment (friends, sleepovers, camps, etc.).

The practice of separating coats, backpacks, etc. has 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.

No environmental pesticide treatments (sprays, pesticide bombs) are to be used.

Encourage students to avoid sharing hats, combs, and pillows; and avoid head-to-head contact.

The school nurse will use professional judgment to determine when unusual measures are necessary to respond to extraordinary cases.

When a student is found to have live lice:

1. The parent/guardian 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 sent home if recommended by the school nurse. Confidentiality must be maintained.
3. The parent/guardian 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/Guardian will be instructed to remove all live lice before the student returns to school.
5. If nits are found, the parent/guardian is notified to keep combing them out with a lice comb at least daily for the next two (2) weeks.
6. Follow-up head checks may be done by the school nurse to confirm lice management efforts.
7. Record these head checks in Health eTools as an office visit.

8. 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/guardian is notified by phone, if possible, and encouraged to comb nits out at least daily for the next two (2) 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. Record these head checks in Health eTools as an office visit, noting that no live lice were found.
5. If future checks reveal an increased number of nits present or it is obvious to the school nurse that the student's hair has not been treated (live lice are present), the parent/guardian will be contacted for follow up and support.