

Lice Procedure

*Procedure reviewed/revised August 2017 according to recommendations from American Academy of Pediatrics, Texas Department of State and Health Services, and Centers for Disease Control

Initial Identification of Infestation

Cases of lice should be confirmed by the RN, LVN or trained HCISD staff. Below is the Guideline for treatment of lice. On a case by case basis, actions may differ from the guidelines with collaboration from the Director of Student Health.

Live Lice

- Students identified with live lice will be allowed to remain at school. The child will be sent home as usual at the end of the school day after contacting the parent/guardian by phone. In addition, a letter and educational materials will be sent with the child advising Parents/Guardians to treat their child for head lice or nits. As per the parent/student handbook, the student should be treated before returning to school the following day. The name of the treatment product must be provided by the parent/guardian on the treatment letter which is sent home with the student.
- Educational materials about treatment and prevention MUST be given to and explained to parent/guardian. These are standardized and can be found on the google site.
- Please note, lice do not jump, hop or fly. They crawl and are transmitted by direct contact or with infested items.

Nits

- Students identified with nits only that are within a ¼ inch of the scalp will have their Parent/Guardian contacted to see if treatment has taken place within the last seven days. Parents should be educated on the importance of manual removal of nits with a fine tooth nit comb. The name of the treatment product must be provided by the parent/guardian on the treatment letter. Students will not be kept out of school because of the presence of nits.

Requirements for Readmission to School

- Students who have been identified to have live lice or nits must bring proof of treatment or a statement verifying treatment signed by parent/guardian. The student should report to the nurse upon return to school.
- If evidence of treatment is seen but live lice are found at recheck, the RN should contact the Parent/Guardian to provide education or reinforcement of education and determine what barriers might be present. The student may remain in school unless otherwise recommended by the school nurse secondary to open wounds.
- If no evidence of treatment is found, the nurse should contact the Parent/Guardian and the student should be treated before returning to school.

Follow up

- Students with live lice and nits should be rechecked by the school nurse after about seven days due to the recommendation for a second treatment at 7-10 days. If evidence of lice or nits are found, then the nurse should contact the Parent/Guardian and use this as an opportunity to provide education on the importance of treatment between 7-10 days based on product recommendations.

Treatment Failures and Frequent Re-infestations

- If live lice are found following treatment, the RN should be notified. She will investigate and make further recommendations in collaboration with the family. The role of the nurse is to collaborate with the family and ensure education is provided and barriers are removed whenever possible. Title I campuses may have treatments and combs available to provide to families with financial barriers to treatment.

Classroom Notification Elementary ONLY

SB 1566 was passed that requires notification of the classroom parents of **elementary students** with cases of head lice. Based on this new bill the district requires the following:

- The child with lice may not be identified
- The parent of an elementary student with lice must be notified within one business day (if possible say day) utilizing the Lice Treatment Letter-[English](#) / [Spanish](#) as well as the CDC Prevention and Treatment fact sheet [English](#) / [Spanish](#)
- The parent(s) of elementary students in the classroom must be notified 3 business days utilizing the Lice Classroom letter [English](#) / [Spanish](#) as well as the CDC Prevention and Treatment fact sheet [English](#) / [Spanish](#)

Classroom Control Measures:

- The School Nurse will provide teachers with the "Checklist for Classroom Lice Control." Teachers may contact the RN for any questions regarding classroom lice control.
- Teachers are expected to follow the guidelines to prevent the spread of lice.
- At all times, schools are encouraged to discontinue fabric-covered items such as pillows, headphones on listening stations, blankets used by more than one child, etc. Students should have individual headphones kept in individual ziplock bags, and teachers should utilize storage bags to separate coats/sweaters. Teachers, Assistants, and Monitors should not allow piling of coats.

Responsibilities

Student Health Services

- Screening students sent to nurse's clinic displaying symptoms
- Screening will be done on an individual basis for students reporting or demonstrating symptoms (ie. lice visible in hair, scratching scalp). Current evidence does not support the efficacy and cost effectiveness of classroom or school wide screening for decreasing the incidence of head lice among school children (Centers for Disease Control, American Academy of Pediatrics).
- The school nurse has educational materials about lice available in the nurse's office for students, staff and parents. The RN will submit newsletter articles to educate parents and staff regarding lice at her discretion.
- The RN will provide health teaching to students, staff, and parents regarding prevention, detection and treatment of lice as needed.
- Privacy will be protected when screening for lice and details will not be discussed in front of other students, staff or parents that are not involved in the situation.

Teaching Staff

- Survey the classroom environment regularly for students displaying signs of lice or items in the classroom that could be contributing to the spread of lice.
- Implement the "Checklist for Classroom Lice Control" and make appropriate changes.

- Send students to the nurse's clinic for inspection by the school nurse if lice visible in hair or scratching scalp.
- Privacy will be protected when a teacher is informed a child has head lice as it is a sensitive situation and can have emotional consequences for the student.
- If a student is sent back to class with live lice, the teacher will be asked to ensure the child refrains from sharing personal items that come into contact with the head such as hair accessories, combs/brushes, hats, clothing, pillows, blankets etc.

Parent/Guardian

- Parents/Guardians need to make lice screening a part of their family routine. Parents should check their children's head at least weekly.
- Parents/Guardians should follow the recommendations and/or treatment guidelines from Student Health Services.

References and Resources:

American Academy of Pediatrics

<http://pediatrics.aappublications.org/content/pediatrics/early/2015/04/21/peds.2015-0746.full.pdf>

<http://pediatrics.aappublications.org/content/126/2/392.full?sid=10e25e1b-8146-470b-8c0a-3c3cc16460ec>

Texas Department of State Health Services

<https://www.dshs.texas.gov/schoolhealth/lice.shtm>

Centers for Disease Control

<https://www.cdc.gov/parasites/lice/head/schools.html>

<https://www.cdc.gov/parasites/lice/head/parents.html>

DSHS Lice Fact Sheet-[English/Spanish](#)

National Association of School Nurses

<https://www.nasn.org/nasn-resources/practice-topics/head-lice>

[NASN Lice Guide for families](#)

[Head Lice 101 for Parents, Teachers, and Communities](#)