

Office of School Attendance and Truancy Response

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Head Lice Policy Introduction

Head lice are tiny insects that live on hair, particularly on the scalp. They can create a tickling feeling or a sensation of something moving in the hair, irritability, and sleeplessness. They spread most commonly by close person-to-person contact. However, much less frequently they are spread by sharing clothing or belongings onto which lice have crawled, or clothing on which shed hairs with nits (head lice eggs) attached may have fallen. The risk of being infested by a louse that has fallen onto a carpet or furniture is very small. It is important to note that lice can only crawl; they cannot jump, hop or fly. Head lice are a very common problem in school age children. It is most prevalent among preschool and elementary school age children and their household members or caretakers. A head lice infestation may have no symptoms, particularly with a first infestation, or when an infestation is light. Itching is the most common symptom of head lice infestation and is caused by an allergic reaction to louse bites. It may take 4-6 weeks for itching to appear the first time a person has head lice.

While a head lice infestation is a nuisance, it does not pose a significant health hazard and is not known to spread disease. Head lice is known as a legacy parasite, it has been with mankind since the earliest human societies. Head lice can be acquired anywhere in the community and may not be identified until weeks to months after exposure. Having head lice is not related to cleanliness of the person or their environment. Acquiring head lice is more indicative of a child having friendships than it is of any deficiency in hygiene or parenting.

The most challenging aspect of head lice is not the condition itself but school staff and parent's reaction and emotions that occur when head lice is suspected. A lice infestation is made worse

than it should be when parents, school and/or the community reacts with fear and anger, creating an environment of hysteria. This overreaction frequently creates anger directed towards parents and/or the school personnel and it often leads to teasing or alienation of the child, which can affect self-esteem and social inclusion. Inappropriate management of head lice can also result in damaging school exclusion, unnecessary absenteeism, and may lead to improper treatment that could potentially be harmful.

Historically, in an effort to decrease head lice infestations, many U.S. schools, including many in Kent ISD, adopted “no nit” policies. This type of policy, in certain students experiencing chronic infestations, often leads to extended student absences. This absenteeism can be the result of either parent “excuse,” or of school exclusion. The result is often the same as that of school suspension: the cycle of school failure and increasing chronic absenteeism. One study found 12 million to 24 million school days are lost annually in the U.S. due to excluding students with nits (Price, Burkhart, Burkhart, Burkhart, & Islam, 1999). However, research shows that the presence of nits does not indicate active infestations and nits do not lead to any disease process. The American Academy of Pediatrics (AAP) recommends that classroom or school-wide screening should be strongly discouraged due to the lack of evidence of efficacy and instead suggests that schools help educate parents in diagnosing and managing head lice.

The Centers for Disease Control, the American Academy of Pediatrics, and the National Association of School Nurses all recommend that students not be excluded from school for having nits and that the management of head lice should not disrupt a student’s educational process. The AAP further recommends that since a child with an active head lice infestation has likely had the infestation for a month or more by the time, it is discovered, poses little risk to others, and does not have a resulting health problem, the student should remain in class but be discreetly discouraged from close direct head contact with others. If a child is assessed as having head lice, confidentiality must be maintained so the child is not embarrassed nor shunned. The child’s caretaker should be personally notified that day, and educated on the prompt, proper treatment of head lice. The child should return to school the next day, after proper treatment has begun.

The information contained in this document was developed based on current research and knowledge obtained from guidelines set forth by the American Academy of Pediatrics, the

Centers for Disease Control, the National Institutes of Health, the Environmental Protection Agency, the National Association of School Nurses, and the Kent County Health Department.

Kent ISD Recommended School Head Lice Policy

Kent ISD recommends a policy that focuses on treatment, education, and support of families experiencing head lice infestation. Continuous, regular school participation should take precedence over the largely benign problem of head lice in students. “No nit” policies have no scientific nor public health justification and should be immediately abandoned. In no case, should an otherwise healthy child be absent from school for more than one day, due to head lice.

Cases where caretakers neglect to properly treat head lice infestation, despite support from school and/or community, should be reported as mandated reporters report any neglect case.

Prevention in the School

- Prevention should be three-pronged: education, design, and maintenance (cleaning).
- Teach students to avoid head-to-head (hair-to-hair) contact during play, sports, physical education, playground and other activities.
- Students should not share clothing, especially hats, scarves, athletic uniforms, coats, and neckties.
- Sharing of personal items such as headphones, safety glasses, combs, hairbrushes, towels, barrettes, headbands, smocks and similar accessories must be avoided. “Community” headphones and safety glasses/goggles are inappropriate. When shared headgear is unavoidable, it must be cleaned and sanitized between users.
- Classrooms must be free of upholstered fabric furniture, plush toys, cloth towels, blankets, and “throws.”
- Design coat storage areas to preclude contact between students’ belongings. Dividers between hooks, individual lockers, and personally assigned spaces are appropriate measures. Hats and scarves are best kept in the coat sleeve.
- Encourage containment of long hair in braids, buns, ponytails, and the like.
- Carpet, rugs, other soft floor coverings, and padded furniture should be vacuum cleaned daily.

- The use of pesticides in the school environment is neither needed nor appropriate. Exterminator services are also unnecessary. Normal and regular cleaning is sufficient.

Model School Head Lice Protocol

Beware of telltale scratching that may indicate head lice. When a case of head lice is suspected:

- While maintaining confidentiality and dignity, a trained designee from the school (preferably a school nurse) should check the child for head lice in a private space.
- The school should call the parents (or caretakers) and notify them of the head lice and the procedures to follow. Treatment that evening, and return to school the next scheduled day should be emphasized. At the most, the student should not miss more than one school day. School exclusion is inappropriate and may have lasting harmful educational and social effects. **Immediate removal of the child is unnecessary.** If a child has lice, they likely may have been infested for weeks, and any likely transmission has already occurred. Immediate removal of the child from the classroom could lead to embarrassment and ridicule. **Children can be sent home at the end of the day** and they should be allowed to ride the bus home. Transmission via school bus seats is not likely because of the biology and life history of head lice.
- The student with suspected head lice should be discreetly restricted from activities involving close personal contact (e.g. hugging and team sports) and reminded not to share personal items, such as headphones. If not done so by environmental design, outerwear should be segregated from that of others.
- Send the informational letter, "Lice Found on Child," home with the student.
- Only if several cases of head lice occur in the same classroom, the principal may choose to send a letter to all classmates' parents that more than one case of head lice is suspected, asking them to check, and treat all of their children as necessary.
- School personnel should not check all of the children in a classroom or grade for head lice unless unusual circumstances warrant it. Even among trained medical personnel, both false positive and false negative findings are common. Evidence does not support the efficacy and cost effectiveness of mass screening. More psychosocial harm and loss of learning time can result than the benefits justify.
- Although schools and parents are partners in providing educational opportunity for children, parents have the ultimate responsibility for the well-being of their children. Schools support parents by providing both direct information and by providing information

on, and access to community resources. Parents are key in the prevention and management of head lice cases by regularly checking their children's hair and immediately treating when a head lice infestation is detected.

School Absenteeism due to Head Lice

- School exclusion for head lice is inappropriate and unjustified.
- Head lice do not transmit disease.
- Head lice are not easily transmitted between individuals, absent direct hair-to-hair contact. The health and well-being of other students is not compromised by the mere presence of a student afflicted with a head lice infestation.
- The American Academy of Pediatrics states, "No healthy child should be excluded from or allowed to miss school time because of head lice or nits."
- At most, a child should never miss more than one day of school due to head lice.
- If a head lice infestation is left untreated, pruritus (itchiness) leads to scratching, and skin damage can result in open sores and secondary infection. The reaction by others, especially peers, to an obvious infestation can lead to embarrassment, shunning, and psychosocial harm to the child. Therefore, failure to treat for a head lice infestation is neglectful on the part of the caretaker. Schools can help their families through education, referral to community assets, and (when resources permit) treatment resources and products. The damage caused by lost learning time can cost much more to remediate than the minimal cost of resources. However, parents and caretakers are ultimately responsible for the care of children, including proper treatment for parasites such as head lice.
- Therefore, continued failure to treat for head lice, after notice and education, should be reported as neglect, as any mandated reporter should report any neglect. The reporting should continue as long as the problem persists and by each and every reporter who observes the evidence of the neglect to properly treat.
- There is no valid reason for school absence due to head lice. At the very most, no more than one day of absence should be tolerated. If absences for head lice, combined with other absences or solely for head lice, result in school attendance of less than the Kent ISD-wide standard of attendance of greater than 90 percent, the case should be referred

to the Kent ISD attendance office as chronic absenteeism. Chronic absenteeism includes all counted absences, whether parent “excused” or not.

Removal of Head Lice and Nits

One effective treatment of head lice requires the removal of both lice and eggs from the hair. Lice shampoos do not remove eggs from the hair. Since the eggs are “glued” to the hair shaft, to remove them, they must be combed out manually. Sit behind your child in a room with good lighting to comb through the hair, one section at a time. Use a fine---toothed nit comb. These combs are sold at most stores or may be included in packages of the lice preparation. Combs with metal teeth spaced close together work best. Your child’s hair should be clean, wet, well combed or brushed to remove tangles before using the louse comb. A conditioner may be used to lubricate the hair. Divide hair into small sections. Comb through each section until no more lice or eggs are found. Clean the comb with a paper towel to remove any eggs or lice. You should continue checking and removing any lice or eggs for a period of 3 weeks.

Never use dangerous chemicals, hydrocarbons, or other combustible products to treat any person for lice.

Treating the Home Environment

In addition to treating persons with lice, the home environment also needs to be addressed. No special products are needed. Fabric items such as bed linens, throw pillows, blankets and throws, pajamas, clothing, coats, hats and such, which the person has been in contact with in the past two days, need to be treated. Laundering in water of at least 130 degrees Fahrenheit, and/or hot tumbled in a drier on high heat for at least 30 minutes. Items that cannot be washed or hot tumbled, and also cannot be effectively vacuumed, such as stuffed animals, should be placed in a tightly closed plastic bag for 14 days at room temperature or 24 hours in below freezing temperatures. Lice in the environment (not on the head) usually die within a day and the eggs generally cannot live much longer.

Vacuum the house, mattresses, furniture, car upholstery, and child car seats. Non-fabric durable items such as combs and brushes can be soaked in very hot (140+ degree) water or isopropanol (rubbing alcohol) for 30 minutes. Using insecticides or hydrocarbons to treat the home, vehicles, carpets or furniture **is not** recommended and may unnecessarily expose your household to harmful chemicals.

The best way to prevent transmission:

- Teach children not to share combs, brushes, hair accessories, hats, scarves, headsets, or any other personal headgear.
- Do not try on other people's hats (even at department stores).
- Teach children to hang coats separately- placing hats and scarves inside coat/jacket sleeves.
- Conduct regular checks of your child. Even if your child is lice free, you may want to keep an effective lice control product on hand for quick use in the event of a positive inspection. Hypertonic sodium chloride (salt) preparations, such as *Licefree* are non-toxic, safe and effective.

If head lice/nits are found on your child:

- Check others in the household for signs of head lice or nits. If found, complete remaining steps on all infested individuals.
- Use an effective head lice treatment. *Licefree* brand is highly effective and non-toxic.
- Remove nits from the head by combing. This is the most important lice control measure in very difficult cases. Complete nit removal is time consuming but is critical for successful treatment.
- Remove all of the lice and nits from the environment by washing or vacuuming. There is no need to use pesticides as they unnecessarily expose your household to harmful chemicals.
- Perform daily head checks and remove nits for two weeks until head lice are gone.
- Continue to check your child weekly to detect re-infestation.
- If you have difficulty getting rid of the head lice on your child, please contact your child's health care provider.