



1. Purpose:

To ensure that issues and procedures related to pediculosis (head lice) are dealt with in a sensitive and knowledgeable manner.

2. Background:

The Board believes in supporting parents/guardians in understanding pediculosis and its impact on students, their families and school life.

The Board recognizes that pediculosis is not a disease or a health issue but is defined as a social nuisance which needs to be managed in the best interest of students through the partnership of parents/guardians, students, staff, and the school community. The treatment and eradication of pediculosis is ultimately the parents'/guardians' responsibility.

The Board also believes that communication and education about pediculosis with students and parents/guardians are essential for fostering a relationship of trust and respect in dealing with the problem of pediculosis which may become a school issue when nits or lice are detected on students attending school.

3. Procedure:

- a) The primary focus of all schools should be on the education and prevention of pediculosis and should include:
 - the establishment, in consultation with the Catholic School Council, of a school-based plan of action which addresses the education, prevention, and suggested treatment of head lice; and
 - the provision of the details of the school plan to students and parents/guardians and the provision of other available resources at appropriate intervals during the school year.
- b) Each school is required to have an action plan in place to respond to cases of pediculosis, with the following requirements:
 - 1) an annual procedure for informing parents about pediculosis; utilizing the information provided by the local health unit, and;
 - 2) a process for informing parents/guardians about the suspected case of pediculosis in a discreet and confidential manner, and treatment requirements

(Please refer to Appendices 1 & 2 – Letter to Parents/Guardians & Head Lice - Information Sheet).

- c) The school plan should outline the manner in which the school will approach the acquired knowledge of a case of pediculosis in the school and should include:
- steps taken to inform the child’s parents/guardians of the child who has pediculosis;
 - the method used to confirm the presence of pediculosis;
 - an outline of the communication with a student’s parents/guardians designed to ensure the dignity and self-worth of each student is upheld;
 - And a shared understanding that students are not to be excluded from school, based on a case of pediculosis.
- d) Schools should also:
- advise parents/guardians of their responsibilities to treat their children with the goal of eliminating any presence of pediculosis;
 - encourage parents/guardians to examine all members of the family for pediculosis and to provide appropriate treatment, if necessary;
 - provide all necessary or requested information on the treatment and prevention of pediculosis;
 - inform other parents/guardians of students in the school that a case of pediculosis has been confirmed and that they should be checking their own child; always ensuring that the dignity and privacy of the child with the confirmed case of pediculosis is maintained, and;
 - meet with parents/guardians in cases where a child has had repeated instances of pediculosis in a single school year. The Principal may choose to invite the Behaviour Crisis Consultant to such meetings.
- e) It is a strong expectation that schools will be proactive in their approach to pediculosis and that schools will assure that, at all times, the dignity and right to privacy of all students is protected and reinforced.
- f) School plans are to be reviewed and updated as necessary or on an annual basis in consultation with the Catholic School Council.

**Appendix 1
(School Letterhead)**

Dear Parents/Guardians:

It has come to our attention that your child has a case of pediculosis (head lice). Please be aware that pediculosis is a nuisance and can spread among children through head-to-head contact. For this reason, we ask that you closely check your child's head and begin treatment.

Having head lice is not a serious problem, but it does require that treatment be given immediately and repeated once more in 7-10 days.

Head lice multiply quickly and spread easily from one person to another, so it's important to respond quickly.

WHAT TO DO

1. Contact or visit your local pharmacist for recommended treatment.
2. Follow the recommended treatment for head lice. You may wish to refer to the Head Lice Information Sheet attached.
3. Check all members of the family, frequently over the next two weeks. The usual areas where head lice are found are behind ears and the back of the neck.

Appendix 2 Head Lice - Information Sheet

Head lice crawl from person to person by direct head-to-head contact. They do not carry or spread disease. Anyone can get them. Itching is the main complaint. Parents/guardians should check their children's hair weekly for head lice. Check more often if your child has close contact with someone who has head lice.

WHAT TO LOOK FOR

Lice

- Small, flat, hard to see insects
- About the size of a sesame seed
- Greyish-brown in color
- Crawling, unable to jump or fly

Eggs (Nits)

- On hair shafts very close to the scalp
- Size of a grain of sand
- Oval in shape
- Glued to the hair (They cannot be washed off with shampoo or flicked off like dandruff or sand)
- Brownish in colour when alive
- Hatch in about 7 days
- Nits found more than 1 cm from the scalp are dead or hatched and are whitish in colour

WHERE TO LOOK

Look for lice or nits close to the scalp, particularly around the ears and at the back of the neck. Use a bright light and a magnifying glass if available. Act quickly if you find them.

HOW TO GET RID OF HEAD LICE

1) **Check all close contacts:**

If one person in the family has head lice, it is possible that other family members will also have them. Tell the school, daycare, and children's groups (i.e. sports, cubs, etc.) so other parents can be notified to check their children's hair. An untreated source among close contacts is a common reason for getting head lice again. It is important that all individuals who have head lice be treated at the same time.

2) Treat only the person who has head lice with a product that kills live lice. Treatment is available from your pharmacy (no prescription needed). Your pharmacist can help you choose a head lice product.

Always remember to:

- Follow the label directions carefully.
- Avoid use of conditioning shampoo or conditioner before or 48 hours after using head lice treatment.
- Contact your health care provider or a pharmacist before using head lice treatment if you are pregnant, breastfeeding, have allergies or for a child under 2 years old.
- Treatment must be repeated 7-10 days after the first treatment.

- 3) **Remove all head lice and nits from hair:**
 - Use your fingernails to pull off the nits from the hair or use a head lice comb. Repeat daily until there are no nits.
 - Separate hair into sections then pick up a few strands at a time to remove nits.
 - Check each section of the head closely before moving on (pay attention to behind ears, nape, and close to the scalp).

- 4) **Treating the Home:**
 - Wash clothing and bedding used in the last 3 days by the affected person in hot water and dry in hot dryer.
 - Place items that cannot be washed in a sealed bag for two weeks.
 - Put all combs, brushes, and hair accessories in hot, soapy water.
 - Extra housecleaning and use of insecticide sprays are not needed.

Do not treat a person with head lice more than 2-3 times with the same shampoo if it does not seem to be working. Always seek the advice of your health care provider if this should happen. They may recommend a different product.

Several household products such as mayonnaise, petroleum jelly, olive oil, tea tree oil, hair gel and vinegar or wet combing have been suggested as a treatment. These products show little proof of killing head lice and are not as effective as head lice shampoo.

- 5) **Talk to your pharmacist:**

Your pharmacist can help you choose a head lice product. You do not need a prescription. Read the list of ingredients and the directions very carefully.

- 6) **Give 2 treatments 7 to 10 days apart:**

The first treatment will kill head lice but not all of the eggs. Even with careful nit picking some live eggs will be missed. These eggs can continue to hatch over the next week, which is why all products must be used again in 7-10 days. This will kill the newly hatched lice before they are able to move from the head and reproduce. If you see live lice 48 hours after the second treatment, contact your physician.

- 7) **Nit Removal:**

Thorough nit removal is necessary after each treatment. Removing the nits after treatment makes it easier to see a new infestation and is an essential step to getting rid of the head lice. It may also be important for the child's appearance. Children may return to school after the first treatment even if nits still remain in their hair.

Short sessions of nit removal over several days may be easier than one long session. Work with small sections of the hair using a bright light. With a fine-toothed nit comb or your fingernails, pull the nits from the hair strands starting from the roots right down to the tips. Wipe the nits onto a tissue, place in a bag for disposal, and wash your hands and the comb with soap and water.

CLEANING PERSONAL ITEMS

Head lice and their nits do not survive for long away from the warmth and humidity of the scalp. However, sharing of hairbrushes while undergoing treatment is discouraged. You should wash combs and brushes, headgear, bed linens and towels in hot water.