

Management of Head Lice and Nits

Policy No. 302.5R

REGULATIONS

FORM: 302.5N – Sample Letter to Parents/Guardians – Your child has Head Lice

FORM: 302.5N – Sample Letter Parents/Guardians – Head Lice in the Classroom

HANDOUT: The Facts about Head Lice

HANDOUT: HealthLinkBC – Head Lice – March 2019

RESOURCE: Recommended Head Lice Management – Information for Schools, Families and Individuals

Rationale

Meeting the educational needs of students is the primary responsibility of the Board. Keeping students in the classroom is the priority even while simultaneously assisting individuals who have head lice, or taking reasonable steps to minimize the spread of head lice.

Current literature clearly shows that school exclusion, early dismissal and no-nit policies do not prevent or control head lice infestations. These practices are not supported by this policy. While research sites a lack of consistent evidence to encourage school screening, this policy continues to give school communities the option of conducting regular head checks. All individuals participating in head checks should be well-trained in the correct identification of lice and nits. The Northern Health Authority may be consulted in the provision of this training.

Information Regarding Lice and Nits:

Head lice are common among the general population. They are very small insects which feed on the tissues of the human scalp and lay eggs (nits) on the hair close to the scalp. Head lice are very small – about 2-3mm long. The color of adults ranges from white to gray to brown and may vary with the skin or hair color of the individual. For these reasons, lice may be present on the scalp weeks before they are discovered.

Nits (head lice eggs) are tiny oval specs about one third the size of a sesame seed. They are found glued to the strands of hair, very close to the scalp. The presence of nits does not always indicate an active infestation. An active infestation may be identified if head lice are found crawling on the head, or if many nits are found within 6mm of the scalp. It should be noted that while not all individuals having head lice will experience severe discomfort, serious cases can result in bleeding and an infected scalp as a result of excessive scratching.

Frequent pediculicide (drugs commonly used to treat head lice) use can be hazardous to a child's health. Research continues to provide alternatives to pediculicides in the treatment of head lice. Current research should be reviewed when determining identification and treatment options.

Procedures

In consultation with the Northern Health Authority, schools shall develop a plan for the control of head lice which includes the following steps:

1. Schools shall provide basic student and parent education including information on the importance of regular checks, detection methods and suggested treatment. Schools will emphasize to students that they not share hats, combs, pony tail elastics and barrettes, etc.
 - 1.1. Principals/Vice Principals can use the "Recommended Head Lice Management – Information for Schools, Families and Individuals" as a resource from Northern Health.
2. Parents will be advised that they must inform the school if their child has head lice.
3. Staff shall be made aware of possible signs of head lice.
4. Schools may decide to conduct regular head checks using trained volunteers. If a parent/guardian objects to this practice, he/she will inform the school principal/vice principal.
5. If a child is found to have head lice, the issue should be addressed sensitively. Students will not be sent home from school unless necessitated by the child's discomfort. The parent/guardian will be contacted and information regarding lice/nits and recommended treatment will be provided. Schools will communicate to parent(s)/guardian(s) that it is expected that treatment will begin right away.
 - 5.1. For parents/guardians of the child found to have head lice, schools can use the sample letter "302.5F – Sample Letter to Parents/Guardians – Your Child has Head Lice." Attach the handouts: "The facts about Head Lice" and "HealthLinkBC – Head Lice – March 2019."
 - 5.2. For parents/guardians of the classroom, please use the sample letter "302.5F Sample Letter to Parents/Guardians – Head Lice in Classroom." Attach the handouts: "The facts about Head Lice" and "HealthLinkBC – Head Lice – March 2019."
6. Should there be economic reasons that parents/guardians cannot purchase treatment supplies, the principal/vice principal will make every effort to obtain the recommended products through normal channels.
7. In chronic cases, where recommended management practices have been tried and failed, or where management practices may not have occurred, a meeting between family, the principal/vice principal and key community personnel may be needed to provide support and develop an action plan which facilitates successful treatment of the head lice and the student's continued attendance at school.
 - 7.1. Responsibility for timelines or unusual circumstances required by the action plan is shared by the principal/vice principal and the community personnel in cooperation with the family.