# **QUINCY SCHOOL DISTRICT #172 LICE POLICY**

Evidence based practices from Illinois Department of Public Health, Center for Disease Control and American Pediatric Association recommendations include:

- Screening of family members upon parent request
- No regular screenings or constant rechecks
- No notification of classmate parents
- Notification of parent (of affected child) by the end of the day by phone or note indicating that prompt, proper treatment is in the best interest of the child and his/her classmates
- Education to staff, parents and students

# **Outdated practices no longer recommended:**

- Classroom wide screening
- Notes home to parents of classmates
- Immediate exclusion for infestation
- Nit-free policies

#### **GENERAL INFORMATION**

Head lice (pediculus humanus capitis) are a nuisance, but they have not been shown to spread disease. Research has shown that head lice do not survive for longer than 1 day when not on the head, and the eggs only hatch when they are incubated by body heat near the scalp. Transmission occurs primarily through head-to-head contact and infrequently through indirect contact with shared personal belongings. Contrary to popular belief, lice do not jump from one host to another, they crawl.

#### **IDENTIFICATION**

- A. Adult lice are gray, about 1/16 inch long.
- B. Nits are the lice eggs. Many nits are more than ½ inch from the scalp and are usually not viable and very unlikely to hatch or may in fact be empty casings.
- C. Nits are cemented to the hair shaft and are unlikely to be transferred to other people.
- **D.** If a child is discovered to have live lice, they have likely had it for more than 1 month and do not pose a significant risk to others. Therefore, they should NOT be removed from the classroom.

## TEACHER/SCHOOL RESPONSE

- A. If a teacher, teaching assistant, or other staff observe either nits (lice eggs) or live lice on a student, they notify the nurse. Nurse will check student for lice and nits.
- B. Students are NOT rechecked constantly by school staff.
  - 1. Students who are found to have lice at school and parent was unaware, nurse will call home with assessment, education, and offer kit to be sent home by the end of the day. Recheck upon parent request after treatment. No more checks are needed.
  - 2. Students who were positive and treated at home will be rechecked the day after we are notified. Nurse will call home with assessment, education, and offer kit to be sent home by the end of the day. No more checks are needed.
- C. The student remains in the classroom and is NOT excluded from activities.

#### HOME TREATMENT

- A. Shampoos
  - 1. Permethrin 1% (Recommended by AAP). Apply per package directions (may need to be reapplied 7-10 days later).
- B. Remove all nits from hair with nit comb or by picking them out one at a time until all are gone.
- C. Wash all clothes and bed linen in hot water, then dry on a hot cycle for 20 minutes.
- D. Dry clean items that cannot be washed.
- E. Everyday cleaning methods are sufficient; there is no need for special chemical treatment (Pesticide Research Institute)
- F. Boil combs, brushes, hair bands and barrettes for 5 minutes.
- G. Check all members of the family and treat as needed.
- \*Treatments should be at least 7 days apart. After two treatments and still seeing live lice, advise to see healthcare provider.

Some children may develop a resistant strain of head lice and require a more concentrated effort from a physician.

Since lice cannot live on family pets, pets should not be treated.

## **PREVENTION**

- A. The use of combs, brushes or other grooming aids belonging to other persons should be discouraged.
- B. Individuals should not share caps, other headwear, or clothing, especially coats or sweaters.
- C. Parents should be encouraged to examine their children's hair periodically for nits.
- D. Cloakroom hooks should be individually assigned and spaced so clothing does not touch. If this is not feasible, outerwear can be placed in plastic or paper bags and hung on hooks. Gym lockers or numbered hooks should be assigned to individual students.

# References:

Centers for Disease Control and Prevention https://www.cdc.gov/parasites/lice/head/index.html

Devore, C. & Schutze, G. (2015) Head Lice, American Academy of Pediatrics <a href="https://publications.aap.org/pediatrics/article/135/5/e1355/33653/Head-Lice">https://publications.aap.org/pediatrics/article/135/5/e1355/33653/Head-Lice</a>

Illinois Department of Public Health <a href="https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/head-lice.html">https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/head-lice.html</a>

 $National\ Association\ of\ School\ Nurses-\underline{https://www.nasn.org/nasn/advocacy/professional-practice-\underline{documents/position-statements/ps-head-lice}$