



Adopted: 2000-06-27	Reviewed:	Amended: 2003-04-22 2018-04-10 2019-05-07
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POLICY

SUBJECT: **HEAD LICE**

The Board of Education, School District No. 78 (Fraser-Cascade), recognizes that head lice are common and may spread in any situation where individuals gather and are in close contact. This contact could happen at school, on buses, during social activities outside of school such as visiting, sleepovers, sports, birthdays and family get-togethers. The Board recognizes that head lice are a nuisance but that they do not transmit disease. In keeping with [Fraser Health policy](#), the presence of head lice in a school shall not be considered a health hazard.

The identification, management and treatment of head lice shall be a cooperative endeavor between the family and the school community, with primary responsibility resting with the parent. Public Health may be involved as a resource. It is important to note that the presence of head lice is not a reflection on the level of cleanliness or parenting skills of a home. The dignity of the student and family shall be respected in the implementation of this policy and steps will be taken to protect the child's self-esteem and social status in the classroom.

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REGULATIONS

SUBJECT: **HEAD LICE**

Procedures for the Control of Head Lice and/or Nits

1. Information, including current research and developed in collaboration with Fraser Health, regarding the detection and treatment of head lice will be distributed to parents or guardians of all schools in September each year and then as needed. (Appendix A)
2. When cases of head lice are confirmed, schools will confidentially contact parents. Treatment information will be distributed to the class(es) attended by the student and any other groups or teams as determined by the school. (Appendix B & C)
3. Where parents or guardians require supplementary information and support in dealing with a head lice problem, it is recommended that a public health nurse be involved through Public Health. Support for school principals is also available through Student Services in the school district.
 - a. 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.

Appendix A: HealthLinkBC Information on Head Lice and Treatment



HealthLinkBC



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Head Lice

What are head lice?

Head lice are tiny, greyish brown, wingless insects that live on the scalp, feeding on human blood. They lay eggs which stick to strands of hair very close to the scalp. Once the egg hatches the empty case left behind is called a nit.

Head lice are hard to see because they are tiny and move around on the head. Eggs are very small, about one-third (1/3) the size of a sesame seed and take 6 to 12 days to hatch. The nits are easier to see and are found further down the hair shaft. Both eggs and nits may look like dandruff, but they cannot be easily removed because they are sticky.

Do head lice cause illness or spread disease?

No, head lice do not cause illness or spread disease. However, they can be irritating because of the discomfort they cause and how easily they are spread from person to person.

How are head lice spread?

Anyone can get head lice. Having head lice does not mean a person has poor personal hygiene or lives in an unclean environment. Anyone who has hair can get head lice.

Head lice are commonly spread among children and adults who have close head-to-head contact. Head lice cannot jump or fly from 1 person to another. They are most commonly spread through head-to-head contact by crawling from one hair to another. There is a very small chance of head lice spreading indirectly through shared pillowcases, hair accessories, brushes, and combs.

How do I prevent the spread of head lice?

Head lice can best be controlled through the cooperation of parents, children, daycares, schools, and health care providers. Checking the hair of all family members weekly using the wet combing method is the best way to prevent the spread. Children should be encouraged not to share hats, combs, hair accessories, or hairbrushes. If your child has long hair, tie it up or put it in a braid.

What are the symptoms of head lice?

Often people who have head lice will have no symptoms for 4 to 6 weeks with their first case.

Symptoms of head lice may include:

- crawling or tickling sensation on the scalp;
- itchy scalp due to an sensitive reaction caused by the bites; and
- scratch marks or small red bumps like a rash.

How can I tell if my child has head lice?

The most accurate way to check for head lice is the wet combing method:

- Wash and rinse the hair. Apply enough conditioner to cover the whole scalp (usually 2 handfuls). The conditioner stops the lice from moving, making them easy to find.
- Use a wide tooth comb to get the tangles out. At any time if the comb tugs, add more conditioner.
- Begin combing the entire head with a lice comb. Pull the comb through the hair in one stroke from the front to the back of the head. Keep the teeth in contact with the scalp for the entire stroke.
- After each stroke, wipe the comb on a paper towel and check for lice.

If no lice are found, repeat the above process weekly as part of your family's hygiene routine. Having head lice once does not prevent someone from getting them again.

What are safe options for treating head lice?

Treatment should be considered only if live lice are found. Head lice will not go away without treatment.

If one person in the household has head lice, there is a good chance other household members do as well. All members of the household should be checked on the same day and those with lice should be treated.

There are many different products and ways to treat head lice. Some health experts recommend wet combing and others recommend chemical treatments.

Wet Combing treatment

This method removes live head lice. Wet combing is less expensive and non-chemical. Combing treatments are done following the same steps used to check for lice. Any young lice, that hatch from eggs after the first session are removed at the second, third and fourth sessions. This is why it is important to do the full series of sessions. Use generous amounts of hair conditioner and a special lice comb, every 4 days for at least 2 weeks. If lice are found on the final combing, add one more combing in 4 days until no live lice are found.

Wet combing is safe for infants, young children, as well as pregnant and nursing mothers. Contact your public health unit at www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/health-authorities/regional-health-authorities for complete instructions on the wet combing method.

Chemical treatments

Non-prescription products – Shampoos, creams, rinses and sprays that contain an ingredient that kills lice are available at most pharmacies without a prescription. Some examples are permethrin, pyrethrins, isopropyl myristate, and dimethicone.

These products may not be appropriate for children or adults of all ages, so speak to your health care provider or pharmacist to find out which is best for you or your child. Always carefully follow the directions for use on the label.

After treatment, the hair should be checked and eggs and lice should be removed. The nits may also be removed, although you don't have to remove them, as nits are empty eggshells.

Most treatments are repeated in 7 to 10 days to make sure that any head lice that have hatched after the first treatment are killed before they have a chance to lay any eggs. It is also important to check the head for any eggs and remove them after the second treatment. Itching may last for 7 to 10 days, even after successful treatment.

Head lice have started to develop resistance to many of the chemical products. If you think the product is not working after 24 to 48 hours, use the wet combing

method to check for lice. If lice are found, use a different treatment method. Head lice cannot develop resistance to non-chemical treatments.

The medications should be kept out of the reach of young children. Some medications cannot be used for infants, young children, pregnant or nursing mothers and should only be used following advice from a health care provider.

Children should receive their first treatment, whether wet combing or chemical, at home the first day that they are found to have head lice. Children should not be sent home or kept home from school or daycare because of head lice. The child should be encouraged to avoid head-to-head contact with other students until after their first wet combing or chemical treatment. Parents should check their child weekly for head lice using the wet combing method.

Confidentiality should be maintained in order not to embarrass a child or family who has head lice.

When should I call my health care provider?

Call your health care provider if the treatments are not successful. Chemical treatment of pregnant or nursing mothers and of children less than 4 years of age should be given only under the direction of a health care provider.

What options are not recommended for treating head lice?

Methods and products that should not be used because they are either not safe or do not work include: insect sprays, motor oil, gasoline, alcohol, flea soap, dyes, bleaches, heat applied to the scalp, garlic, tea tree and other essential oils, electric lice combs, and shaving the head.

What should be cleaned?

Healthy head lice rarely leave the scalp and if they do they may only survive for 24 to 55 hours. Head lice are not shared through contact with furniture, pets or carpets. There is no evidence that a major cleaning of the house or car is necessary. Hats, pillowcases, combs, and hairbrushes that have had contact with the head of the person with head lice in the previous 3 days, could be considered for cleaning in hot soapy water. Also clean supplies that you used for wet combing in hot soapy water.

Appendix B: Sample Letter

Date: _____

Dear Parent/Guardian:

Re: Head Lice in the Classroom

Head Lice have been identified in your child's classroom. Please check your child's hair and scalp carefully.

Step 1

Find a comfortable well-lit spot

Step 2

Check the hair from the scalp to the end of the hair strand. First, look at the hair at the back of the neck, behind the ears and above the forehead. Then, check the rest of the head.

Step 3

You are looking for live lice and/or eggs. Nits (eggs) are glued to hair close to the scalp (6mm or ¼ inch).

Nits are white to light brown in colour and may be confused with dandruff. Nits are firmly attached to the hair and do not move unless you slide them down the hair strand.

Step 4

If you find a louse or nit, check all household members. Treat only those who have head lice or nits, following Option A and/or B or C (see attached).

Step 5

Let the school and other social groups know if your child has head lice or nits.

Remember:

- ✓ Make weekly head checks part of your routine
- ✓ If your child has long hair, keep it tied back

If you have questions, please call your Public Health Nurse/Health Care Provider or go to:

<https://www.healthlinkbc.ca/healthlinkbc-files/head-lice>

Sincerely,

(Insert Principal Name)

(Insert School Name)

Appendix C: Sample Letter

Date: _____

Dear Parent/Guardian:

Re: Head Lice

Your child was found to have head lice today. Please treat your child by following the steps outlined in the provided information. In order to avoid treatment failure, you must follow all the steps in the option you choose.

Check all other family members and treat only those who have dead lice or nits.

Head lice do not carry disease and do not have anything to do with cleanliness. The only harmful effect from head lice is the way children and adults react. Negative reactions to head lice can harm children's self-esteem and result in their isolation from others.

Remember:

- ✓ Make weekly head checks part of your routine
- ✓ If your child has long hair, keep it tied back

If you have questions, please call your Public Health Nurse/Health Care Provider or go to:

<https://www.healthlinkbc.ca/healthlinkbc-files/head-lice>

Sincerely,

(Insert Principal Name)

(Insert School Name)