INDEPENDENT PROCEDURE

Title:	**PEDICULOSIS (HEAD LICE) CONTROL**	Procedure No.:	**9004**
		Effective Date:	1999 Apr 27

Department: Learning Support Services

Reference(s): - Head lice infestations: A clinical update Head lice infestations: A clinical update l Canadian Paediatric Society

Pediculosis (head lice) is not responsible for the spread of disease but can still cause an enormous amount of social distress. Any person may contract pediculosis. There is no medical evidence to exclude a student from class/school.

"There is no sound medical rationale for excluding a child with nits or live lice from school or child care. A full course of treatment and avoiding close head-to-head activities are recommended… The families of children in the same classroom or child care group where a case of active head lice has been detected should be alerted. Information on diagnosis and management of head lice from a credible source should be shared, along with clear messages that head lice are neither a disease risk nor a sign of lack of cleanliness." (Canadian Paediatric Society, 2018)

The Middlesex London Health Unit and Southwestern Public Health support this position and concur that there is no medical reason to exclude students from school due to head lice.

1.0 What is Pediculosis?

Pediculosis (head lice) is tiny, flat, grayish-brown insects that have no wings and do not fly or jump. They are mainly spread through head to head contact with someone who has head lice. They live on the scalp of humans and use the human blood to survive. They lay and cement their eggs (nits) on strands of hair close to the scalp, usually around the nape of the neck, behind the ears and the halo at the top of the head. Nits are greyish white, tan or yellow in colour and take about two (2) weeks to hatch.

Lice do not live off of the head for more than 36 to 48 hours and do not live on pets. Constant scratching is a good indication to check the head for lice.

Administered By:	**Learning Support Services**
Amendment Date(s):	2003 Oct 7, 2007 Jun 12, 2019 September 23

2.0 Roles and Responsibilities for Management and Control of Head Lice

2.1 Parent(s)/Guardian(s)

Control of head lice is a family responsibility. Encouraging families to take responsibility and educating them in the prevention and control of head lice can be achieved with the collaboration of parent(s)/guardian(s), health care providers and educators.

The parent(s)/guardian(s) is expected to assume responsibility for safeguarding the health, safety and wellbeing of their child. Parent(s)/guardian(s) is expected to ensure effective treatment and prevention of transmission of head lice within their home.

The parent(s)/guardian(s) will:

- Be aware of the signs and symptoms of head lice;
- Be familiar with the technique for examining hair for lice and nits;
- Examine their children's head weekly for signs of head lice as part of routine hygiene or more often during an outbreak;
- Notify the school and others (e.g. family members, neighbours) who have come into contact with the child who has head lice;
- Be aware of the importance of efficient treatment and environmental control measures in the home;
- Carry out treatment using a pediculocide. Consult with pharmacist or physician;
- Inform the school that treatment has been carried out by completing the Treatment Plan Checklist and returning it to the school upon the child's return.

2.2 School Administrator

The role of the school administrator is to ensure that situations involving pediculosis are dealt with equitably and sensitively to avoid stigmatizing affected families and students.

To be proactive, the school administrator will provide the school community with accessible information/brochures/links regarding pediculosis through possible means such as the school newsletter, social media and/or school website in September and at least once again throughout the school year.

The school administrator will:

- Make contact with parent(s)/guardian(s) to inform them that their child is exhibiting signs of having head lice;
- Provide most recent health unit information regarding treatment;
- Recommend seeing their pharmacist if they have any questions regarding methods of treatment;
- Send home Pediculosis 1 - Student Notification of Suspected Head Lice/Treatment Plan Checklist;
- Send home Pediculosis 2 - Classroom Notification of Suspected Head Lice;
- Maintain on-going communication with school staff;
- Follow-up with the parent(s)/guardian(s) in the event that the Pediculosis 1 –

Notification of Suspected Head Lice/Treatment Plan Checklist was not returned with the student;
- Provide the staff with pertinent information regarding the TVDSB Pediculosis (Head Lice) Control procedure;
- Consult their school superintendent in extenuating circumstances.

2.3 School Staff

As a person in primary contact with the students, the staff member is expected to:

- Demonstrate sensitivity, respect the students' right to privacy, and interact with students in ways that preserve their dignity;
- Familiarize themselves with this procedure and educational materials pertaining to head lice provided by the school administrator;
- Identify the risk factors for transmission and potential problem areas in the classroom and use strategies for preventing outbreaks;
- Identify the signs and symptoms of lice;
- Report suspected cases to the school administrator;
- Limit activities in the classroom where heads would touch when a child has been identified as having pediculosis. It is important to handle the situation sensitively and to minimize any embarrassment to the student.

3.0 **Resources**

Call your local health unit

- Middlesex-London Health Unit 519-663-5317
- Southwestern Public Health – St. Thomas 519-631-9900
- Southwestern Public Health – Woodstock 519-421-9901

Websites:

- http://www.healthunit.com
- http://www.swpublichealth.ca
- http://www.cdc.gov/parasites/lice/head/
- http://www.caringforkids.cps.ca/handouts/head_lice

PEDICULOSIS 1 – Notification of Suspected Head Lice

Date: _____

Dear Parent (s)/Guardian(s):

Your child is exhibiting symptoms of pediculosis (also known as head lice). Having head lice is not a health threatening problem, but it does require that treatment be given immediately. Your child's right to privacy, dignity, and cultural sensitivity was respected during this process. A recommended treatment such as Nyda, Nix, R&C Shampoo, Resultz etc. should be used, as soon as possible, before your child returns to school.

Treatment procedures and/or information are available from:

1. Your local drug store
2. Your local health unit: London-Middlesex Elgin and Oxford Counties www.healthunit.com www.swpublichealth.ca
3. Your family physician

If you are unable to access the recommended treatments, please contact the school for further information on available resources.

Remember, when head lice are found it is not a serious problem. We must all trust each other and work together to stop the spread. Please notify your school if head lice or nits are found. Treatment is not recommended unless there is evidence of head lice.

Please read and complete the Treatment Plan Checklist below to the best of your ability as of today. If you are unable to check 'yes' to any of the items, please contact the school administrator to discuss how the school can help to support you. Your child may attend school while treatment for head lice is underway. Please return the Treatment Plan Checklist on the day your child returns to school.

Sincerely, School Administrator

Treatment Plan Checklist

I have read the information provided.	Yes	□
I have used a recommended lice treatment and there is no evidence of live lice.	Yes	□
I have checked all family members, including adults, and treated if necessary.	Yes	□
I will be doing a daily head check for the next 10 days.	Yes	□
I have planned a repeat treatment after 7-10 days, to kill any newly hatched lice.	Yes	□

Signature of Parent/Guardian _____ Date _____

PEDICULOSIS 2 – Classroom Notification of Suspected Head Lice

Date:_____

Dear Parent or Guardian:

There has been an incidence of head lice in your child's classroom.

Having head lice is not a health threatening problem, but it does require that treatment be given immediately. Please check your child's head daily for two weeks and then weekly thereafter. If nits are found, check all family members. Treat only infested family members immediately, following manufacturer's instructions.

Treatment procedures are available from:

1. Your local drug store
2. Your local health unit: London-Middlesex Elgin and Oxford Counties www.healthunit.com www.swpublichealth.ca
3. Your family physician

Remember, when head lice are found it is not a serious problem. We must all trust each other and work together to stop the spread. Please notify your school if head lice or nits are found. Treatment is not recommended unless there is evidence of head lice.

Sincerely, School Administrator