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Holyoke Public Schools

Head Lice (Pediculosis) Policy

Purpose: To define the steps that will be taken by the Holyoke Public Schools' staff in the event of a suspected case of head lice.

Rationale: The goal of Holyoke Public Schools Head Lice (Pediculosis) Policy is to support students' regular school attendance and guard against unnecessary absenteeism due to head lice.

Background: Lice (singular louse) are tiny, wingless insects that survive by feeding on human blood. They cannot jump or fly, and they do not burrow under the skin. The louse needs direct contact to infect another person. Adult head lice or their eggs (nits) are found in the hair and are most often found behind the ears and at the base of the neck. Head lice usually lay their eggs on strands of hair about 4 mm or $\frac{1}{4}$ of an inch from the scalp. Head lice can be a nuisance, but they are not a medical or public health hazard, as they have not been shown to spread disease. Personal hygiene or cleanliness in the home or school has nothing to do with getting head lice.

Plan of Action:

- 1) The student will be examined by the school nurse. Physical findings of an active infestation may include crawling lice or nits less than $\frac{1}{4}$ inch away from the scalp.
- 2) If the school nurse determines that there is an active infestation, the student's parent/guardian will be notified. Students with live head lice do not need to be sent home early from school. They can go home at the end of the day, be treated, and return to school after appropriate treatment has begun. Nits may persist after treatment, but successful treatment should kill all crawling lice. However, if the parent, in consultation with the school nurse so decides, the student may be dismissed as excused for crawling lice.
 - a. The school nurse will determine that a child is in need of treatment for head lice.
 - b. If the family is unable to obtain the medication necessary for treatment, then Holyoke Public Schools may provide, as is available, medicated product for the treatment of head lice. The school nurse will dispense to the parent a box of Pediculicide, such as, but not limited to Nix or RID, for the family to use on the student as supplies last. The School nurse will point out the active ingredient(s) in the pediculicide to the parent/guardian and advise that the product is contraindicated in the case of sensitivity/allergic reaction to any one of the ingredients.

c. The School Nurse will provide written directions and educational materials and resources to parents/guardians, students, and school staff regarding head lice infestations, management, and treatment, including, but not limited to, the Massachusetts Public Health Fact Sheet regarding Head Lice (Pediculosis), which can be found at mass.gov/eohhs/docs/dph/cdc/factsheets/g-i/head-lice.pdf.

d. Parents/Guardians should examine all members of the household for head lice and all close contacts should be notified.

e. The school nurse will notify the parents/guardians of children in the classroom of a child identified as having head lice by sending home the Head Lice Information Sheet to all students in that particular class. Entire classrooms of children will not be screened for lice.

3) It is the responsibility of the parent/guardian to make arrangements with the School Nurse for the student to be examined before re-entry into school. The parent/guardian must accompany the child to school for this examination so that the School Nurse can check for the presence of live lice, review treatment, and provide any needed instructions or support.

4) Up to two (2) full days will be allowed as an excused absence for the purpose of treatment. More time out of school than this may be considered unexcused absence due to parental/guardian non-compliance and will be referred to the Principal for follow-up. It is recognized that no child should routinely be excluded from school due to head lice and parents will be encouraged to treat promptly if needed and return the child to school the next day.

5) Chronic or repeated head lice infestations should be referred to the Director of Health, Wellness and Nursing for consultation. In the case of repeated head lice infestations, the child may be excluded (excused) from school as long as the case is active (live lice) and until effective treatment has been provided.

6) The following are steps that can be taken to help prevent and control the spread of head lice:

a) Pediculosis educational materials are available on the District website and through each school nurse's office. In terms of education and prevention, the school nurse may send information directly to families at the start of the academic year and other times as needed.

b) Teach child to avoid head-to-head (hair-to-hair) contact during play and other activities.

c) Do not share clothing such as hats, scarves, coats, sports uniforms, hair ribbons, or barrettes.

Put on clean clothes. Clothing, bedding and cloth toys/stuffed animals can be disinfected by machine washing or drying using hot cycles. Dry cleaning, or storing articles in plastic bags for 10 days is also effective.

d) Do not share combs, brushes, or towels. Combs and brushes are disinfected by soaking in hot water for 10 minutes. You may choose to wash them with the chosen lice removal solution.

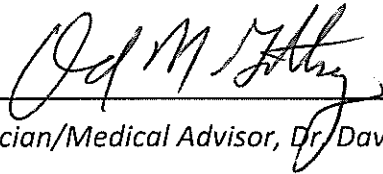
e) Do not lie on couches, pillows, or carpets that have recently been in contact with an infected person. All carpets, sofas, chairs and interior of cars must be vacuumed and the vacuum bag must be tied tightly in a plastic bag and thrown away.

f) In addition to using the product, you can also use a white vinegar and water rinse. A 50/50 solution has been found to loosen the nits and aid in their removal. After the treatment, a fine toothed nit-comb should be used to remove the nits, working from the scalp outward.

g) The best way to interrupt a chronic lice problem is with regular checks by parent/guardian and early treatment.

h) In cases of frequent recurrences or chronic lice, with the consent from the parent, the school nurse and school-family promoters/family access and engagement coordinators will offer consultation and support in the home.

i) Families that are experiencing homelessness (doubled-up or residing in a shelter) may require additional, specialized support. The school nurse, with parent consent, in consultation with the homeless educational services coordinator, can jointly review the case and decide what supports are needed. The family's Case Manager, Shelter Director, Health Department, HPS's Director of Health, Wellness and Nursing, or other service providers may be involved, if applicable, to the specific family situation, offering support and guidance to the family.



School Physician/Medical Advisor, Dr. David Gottsegen

Date: 10/29/17