
HEAD LICE

Attendance

The Division recognizes attendance is key to our students' success and mental health. Due to the fact that head lice do not spread that easily, that symptoms do not present until well into a case, and children often have a small number of lice, children will not be required to miss school for head lice.

Roles and Responsibilities

Head lice control works best when everyone helps. Parents, schools, Child & Family Services, and the Public Health Unit all have a part to play with control of this ongoing challenge.

Parents' Role

Parents are a key partner for the identification and treatment of lice. The school community counts on households to communicate cases of infestation and to treat the situation quickly and effectively.

Parents Actions:

- Be aware of the signs and the symptoms of infestation.
- Be familiar with the technique for examining hair for lice and nits.
- Examine their children's head weekly for signs of infestation as part of routine hygiene or more often, daily, during an outbreak.
- Notify the school and others (e.g., family members, neighbours) who have come into contact with the child who has lice.
- Be aware of the importance of efficient treatment and environmental control measures in the home.
- Consult with pharmacist or physician, and carry out treatment using Pediculicide
- Parents should be checking each child who has experienced a head lice infestation daily in the weeks following treatment as nits and adult insects can be missed during checks.

School's Role: Principals and Teachers

Principal Responsibilities:

- Distribute head lice information including a head lice control checklist to all families of students at the beginning of the school year or when infestation occurs.

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- Advise all parents and guardians by letter when their child is identified as having lice or has come into contact with other students with head lice.
 - Upon discovering lice in a student(s) head, their attending siblings, and all students in that classroom may be checked at the discretion of school administration.
 - Increase classroom cleaning measures, especially vacuuming if carpet is present.
 - Separate student clothing so they do not touch (use of plastic bags may be required)
 - Discourage students from laying on carpets.
 - Remove any pillows or communal chairs.
 - Encourage students with long hair to keep their hair tied back.
 - Suspend use of gym mats

Teacher's Responsibilities:

- Actively promote and teach preventive measures for the control of head lice in the classroom.
- Report suspected cases to the principal.
- Assist in distributing literature to families.

Child & Family Services Role

- Support parents/guardians who require assistance in dealing with infestations

Public Health Office Role

The Health Unit will:

- Assist in providing training and educational material as required.
- Public Health will provide information and support by following the Manitoba Health Protocol on Pediculosis Capitis (Head Lice). Manitoba Health does not support "no nit" policies requiring that children be free of nits before they return to a childcare facility or school.

School Action Plan

When a case of head lice infestation has been identified at the school:

A case of head lice is identified by teacher, parent or school staff member.

A note sent home with the infected child indicating identification. The child must be treated promptly at home.

A letter of notification is sent to all staff, the parents of children in classrooms where head lice have been identified and to all school community households requesting that diligent adult screening take place. An information package is provided to households at the time of notification.

A student returning to school following treatment for head lice may be checked for the next 7-10 days to support the home in ensuring the child is free of eggs and/or lice. If evidence of continued infestation is identified, the parents will be contacted, and further treatment requested. The notification of households' process will again be followed.

In situations where children have chronically had head lice, Public Health and Child & Family Services may be contacted to support families.

When a parent or guardian reports a treated case of head lice:

A treated case of head lice infestation is reported to the school. The child is in attendance.

The child is checked for evidence of successful treatment and feedback is given to the parents. If treatment appears to have been successful then this protocol will be followed. If an active infestation is identified, then the protocol for an active case of head lice as identified at the school will be followed.

A letter of notification is sent to all staff, the parents of children in classrooms where head lice have been identified and to all school community households requesting that diligent adult screening take place. An information package is provided to households at the time of notification.

In 7-10 days, the child will be checked to ensure that he or she is free of eggs and/or lice. If evidence of continued infestation is identified, the parents will be contacted, and further treatment requested. The "notification of households" process will again be followed.

A third check will be held for these students following treatment. If a check again reveals continued infestation (lice and/or eggs) parents will be notified, further treatment requested and a referral to Public Health may follow. The number of cases will be assessed, and classroom checks completed by a school team as required will follow. This will include rechecks and continued monitoring of the situation.

******In situations where there seems to be little improvement or repeated infestations, the family will be referred to public health.