

## Walla Walla Public Schools Procedure on Management of Head Lice in the School Setting

### Introduction:

Walla Walla Public Schools Health Services Department supports the National Association of School Nurses' position statement on "Head Lice Management in Schools" (NASN, 2020): the management of head lice infestations in school settings should not disrupt the educational process, including but not limited to the elimination of classroom screening, forced absences from school for nits and/or live lice, and broad notification that a case of head lice has been found. Head lice are not responsible for the spread of any disease, are not a sign of uncleanliness, and do not pose a health hazard. In-school transmission is considered to be rare and when transmission occurs, it is generally found among younger-age children with increased head-to-head contact.

### Procedure:

This procedure describes the process in which WWPS Health Services supports the inclusion and academic achievement of students with verified cases of head lice, while implementing research-based prevention and control measures to minimize the spread of head lice among students. The objective of this procedure is to allow the student to fully participate in all educational and school-sponsored activities.

#### 1. School Responsibilities:

- a. Teachers and other school personnel will maintain discretion and CONFIDENTIALITY when dealing with students who have head lice/nits.
- b. Teachers and other school personnel will be alert and intervene appropriately to prevent bullying of the student with head lice/nits.
- c. Teachers will be vigilant to symptoms of head lice/nits and discreetly notify the school nurse/HRA of any suspected cases.
- d. Classroom control measures include:
  - i. Transmission of head lice in most cases occurs by direct contact with the head of an infested individual. Indirect spread through contact with personal belongings of an infested individual (combs, brushes, hats, ect.) is much less likely to occur (Frankowski & Bocchini, 2010).
  - ii. It may be prudent to routinely keep student's personal belongings such as hats, scarves and jackets on the back of each student's chair, on separate hooks, or individual storage cubicles.
  - iii. Students should be discouraged sharing personal belongings such as hats, brushes, barrettes, or jackets.
  - iv. Staff will be vigilant to symptoms of head lice/nits and discreetly notify the school nurse/HRA of suspected cases.

#### e. Inappropriate responses:



- i. Excluding or quarantining the student from classroom activities.
  - ii. Applying insecticides to the classroom.
  - iii. Bagging of coats and clothes
  - iv. Requesting classroom or school wide screenings.
2. School Clinic Responsibilities:
  - a. If a parent/guardian or school staff informs the clinic that a student is suspected of having head lice or nits, the clinic staff will conduct a head check on the student in order to verify the presence of head lice/nits. Only the school nurse or HRA may identify or verify the presence of head lice/nits in students.
  - b. After examining the student, the school nurse/HRA will send them back to class whether or not there is evidence of head lice.
  - c. It may be appropriate to screen other children who have likely had direct head-to-head contact with a student with an active infestation, such as household family members. Classroom or school-wide screening is not merited (Frankowski & Bocchini, 2010) (NASN, 2011).
  - d. Contact the parent/guardian to discuss the results and treatment options. The “Individual Parent Head Lice Notification” letter which includes lice management instructions will be sent home with the student. Any parent/guardian of a student with head lice will be given the option of picking up their student prior to the end of the school day to begin treatment.
  - e. If parent/guardian cannot be reached then the “Individual Parent Head Lice Notification” letter will be sent home with the student at the end of the school day.
  - f. Recheck the student upon return to school. If examination indicates continued infestations with lice, and/or there is no evidence of treatment, the student’s case will be considered “chronic”.
  - g. In cases where the student has a chronic or persistent head lice the school nurse will work closely with the parent/guardian to provide on-going support, community referrals, resources, and education regarding treatment and control.
  - h. In cases where the school nurse verifies that **three or more** students in one classroom are infested with head lice the school nurse will notify the Principal and Director of Health services and additional measures may be implemented

**REFERENCES/RESOURCES:**

- Frankowski, B.L., & Bocchini, J.A. (2010). Clinical Report-Head Lice. *Pediatrics*. 126(2) 392-403.  
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- National Association of School Nurses (2020). *Head lice management in schools*.  
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