

Head Lice in Schools

Guidance for the School Nurse

Head lice (Pediculus humanus capitis) live on the human scalp and feed exclusively on human blood which can result in itching, irritability, and sores on the head. They are spread primarily through head-to-head contact. An estimated 6 million to 12 million infestations of head lice among children 3 to 11 years of age occur each year in the United States. Integrated pest management (IPM) is a smart and sensible approach to managing pests.

Integrated Pest Management

IPM is a decision-making process based on prevention, accurate pest identification, evidence-based interventions, record-keeping and evaluation to manage pests effectively while safeguarding human and environmental health. Although head lice do not transmit disease, they can affect student health due to discomfort, sleep disturbance, and secondary infection, which can impact academic performance. Schools can and should adopt IPM policies and protocols for prevention and management that focus on education and communication.

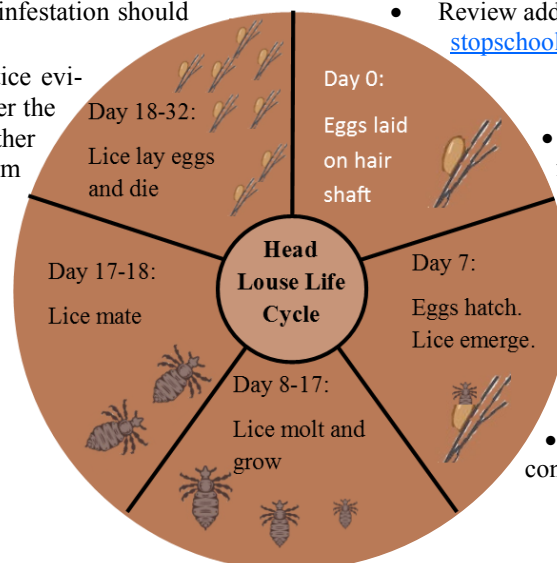
Managing Head Lice at School

- Head lice are mostly spread through direct head-to-head contact. Indirect spread through contact with personal belongings (combs, brushes, hats) is much less likely to occur⁴. Head lice are very unlikely to be spread through contact with furniture, rugs or other surfaces previously occupied by an infested person.
- The major focus of control activities should be to reduce the number of lice on the head and to lessen the risks of head-to-head contact⁴.
- Do not use sprays or fogs; they are not necessary to control head lice and can be toxic if inhaled or absorbed through the skin³.
- School personnel involved in detection of head lice infestation should be appropriately trained. The importance of correctly diagnosing a head lice infestation should be emphasized.
- Teachers may be the first to notice evidence of head lice but should refer the student to the school nurse or other trained staff member to confirm the diagnosis.
- The American Association of Pediatrics¹ and the US CDC³ recommend against mass screening of students.

The School Nurse's Role

School nurses play a critical role in diagnosing and educating about head lice. They can train other staff to accurately diagnose head lice infestations. Nurses also play an important leadership role in advocating for effective, evidence-based policies and protocols for prevention and management of head lice in schools and at home.

- Advocate for a more progressive policy if school still has a 'no-nit' policy.
- At the beginning of the school year, or during a head lice 'outbreak', inform parents of school head lice policies and provide information on effective strategies for prevention and control of head lice.
- If needed, designate and train other school staff how to accurately diagnose head lice infestations.
- After diagnosis allow the student to return to class and remain in school. The child has likely been infested for some time before diagnosis. Encourage all students to avoid head-to-head contact and sharing of hats and hair accessories. Notify parents of the diagnosed child at the end of school day.
- Screen known contacts in the school, utilizing discretion and maintaining confidentiality.
- Do not report cases to youth / social services.
- Head lice are only rarely found on clothing. It is not necessary to bag student's clothing at school.
- Keep records of each diagnosis, noting student's name, classroom, date reported and action taken by school staff. Records can help to continuously improve policies and protocols.
 - Review additional training resources at stopschoolpests.org⁶



Educate Parents and Students

- Provide parents with guidance for effective management of head lice.
- Advise parents to use a fine-toothed comb to remove lice and nits. Applying hair conditioner first can make it easier. Over-the-counter lice-killing shampoos, used according to directions, may be helpful but combing may still be needed, especially if lice are resistant to the active ingredients in the shampoos.
- Educate students to avoid head-to-head contact and avoid sharing hats and combs.

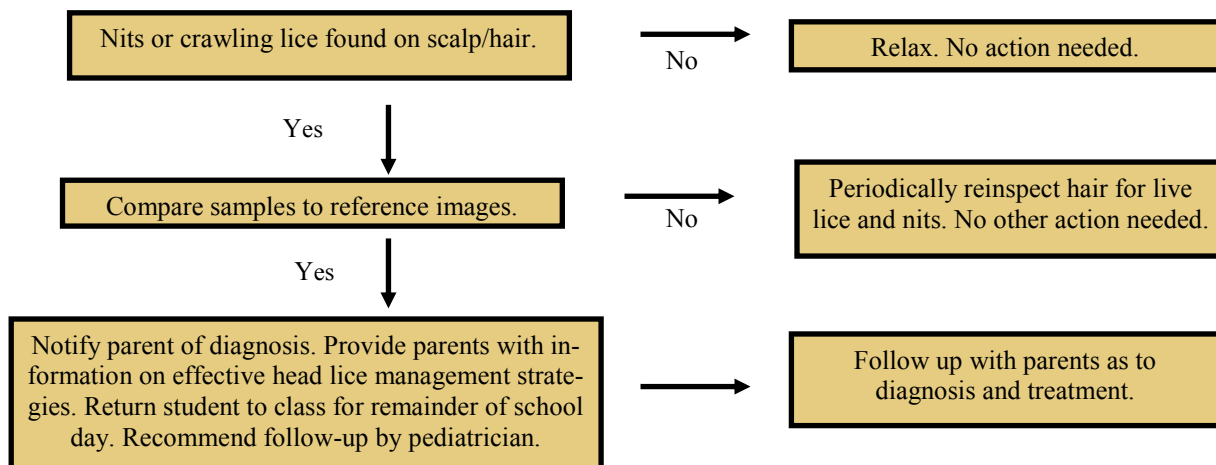
Resources

- ¹American Academy of Pediatrics (AAP): <http://pediatrics.aappublications.org/content/135/5/e1355.full.pdf>
- ²National Association of School Nurses (NASN): <https://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatementsFullView/tabid/462/ArticleId/40/Pediculosis-Management-in-the-School-Setting-Revised-2011>
- ³US Centers for Disease Control and Prevention (CDC): <http://www.cdc.gov/parasites/lice/head/index.html>
- ⁴Devore, C.D. and G.E. Shutze, 2018. Head Lice. Pediatrics 135 (5) e1355: <http://pediatrics.aappublications.org/content/pediatrics/135/5/e1355.full.pdf>
- ⁵Harvard School of Public Health: <https://www.health.harvard.edu/diseases-and-conditions/head-lice>
- ⁶Stop School Pests Training Resources: <http://stopschoolpests.org/>

Use Integrated Pest Management

- Prepare: Develop and implement an action plan including protocols for communication, intervention, record-keeping and training.
- Identify: Ensure nursing or other designated staff can accurately diagnose active head lice infestations.
- Maintain records. Keep a log of sightings, dates and actions taken.
- Do NOT apply pesticides to classrooms and buses for head lice.
- Provide parents with information on effective strategies for managing head lice and preventing recurrence.

Head Lice School Response Action Chart



Treatment Options for Head Lice

