Head Lice Prevention and Protocol

From time to time, it is important for the Schroon Lake Central School District to review and reinforce our head lice prevention strategies and protocol. It is important that we work together to assist our students, families, faculty, staff, and community in understanding the manner and means by which lice can be transferred from person to person, how it can be controlled if lice/nits are discovered, and how this district responds to prevention, treatment and control.

District Goal: Eliminate school exclusion policies, and, instead, incorporate evidence-based practices that reduce the stigma associated with head lice, and work to increase classroom time with an emphasis on keeping students in school.

The following information and protocol is based on the latest scientific information from both the American Association of Pediatrics and the National Association of School Nurses. It has also been reviewed and approved by our school physician.

Signs and symptoms of head lice infestation:

- Tickling feeling of something moving in the hair.
- Itching, usually severe, caused by an allergic reaction to the saliva of the louse.
- Irritability and difficulty sleeping; head lice are most active at night. * Sores on the head caused by scratching. These sores can occasionally become infected with bacteria found on the person's skin.
- Head lice are often difficult to find. A positive diagnosis of active infestation can only be made if a live louse/lice are seen. Nits can remain on hair shafts for months, but do not indicate an active infestation.

How does a person get head lice?

- Head-to-head contact with an infested person is the most common way to get head lice. This is most likely to occur during activities with prolonged and close contacts such as sleep away camps, slumber parties, etc.
- RARELY, head lice may be spread by sharing clothing or belongings onto which lice may have crawled or fallen. Examples include:
- Sharing clothing (hats, scarves, coats, uniforms) or articles (combs, brushes, hair ribbons, towels, stuffed animals) recently worn or used by an infested person.
- Lying on a bed, couch, pillow, or carpet that has recently been in contact with an infested person. Again, the risk is VERY small.
- Dogs, cats and other pets do NOT play a role in the spread of human lice.

SCHROON LAKECENIRALSCHOOL DISTRICT PROTOCOL.

- 1. Routine, mass screenings HAVE NOT been shown to be a significant help in the primary diagnosis, prevention or eradication of head lice outbreaks.
 - Students will not be excluded from school because of head lice OR nits.
 - They will be sent home at the end of the school day.

- The family will be notified and explicit verbal and written instructions will be given regarding treatment.
- The importance of frequent and thorough nit picking will be stressed.
- The student will return to school after the first treatment.
- A box top from the lice shampoo product will be sent to the nurse as proof
 of treatment.
- 2. In the event of more than the usual yearly sporadic outbreaks, the need for school screenings will be determined by the school nurse and/or physician.
- Students are to come to the school nurse for examination if parent, teacher, or the student him/herself has a high index of suspicion (refer back to signs and symptoms).
- 4. If the school nurse or physician deems necessary, or if large numbers of cases appear more stringent efforts such as individual bagging of coats and hats may be implemented.
- 5. Education is the key factor in the transmission and prevention of head lice.
 - Information will continue to be communicated home via the newsletter, and handouts will be sent home with elementary students.