

Kimberly School District

STUDENTS 3113

Student Exclusion for Pediculosis (Head Lice)

Pediculosis (head lice) is a common condition in the school age child. It is highly contagious and easily spread from direct or indirect contact with the infested person and/or infested personal items. The school principal or designee will screen students for head lice. If nits (egg cases) or live lice are present, the student will be excluded from school until the student is nit and lice free.

CASE FINDING:

1. At the beginning of each academic year, all students (K—5) may be examined for head lice. Student may be examined for head lice upon request of any staff member.
2. When a case is found, all children in the classroom may be examined. Also, a notification of head lice letter is to be sent home to all parents of children in the classroom the same day the case of head lice is discovered.
3. If five (5) or more children appear to be infested, an examination of the entire school may be done.

ADMINISTRATIVE HANDLING:

1. Each infestation will be recorded. The following information shall be entered: name, age, grade, teacher, bus number, date the infestation was discovered, type of treatment, date student returned to school after treatment, other pertinent information. Each new infestation shall be recorded, even if the child has previously been treated and declared free of head lice and nits.
2. Parents of infested students will be required to come to school and take the child home.
3. Parents shall be shown some of the nits in order to
 - demonstrate that the child is infested and
 - enable parents to see what a nit or louse looks like and thus gain the information needed to examine other family members for infestation.
4. Proof of treatment (note from physician or shampoo box top) must accompany the student returning to school. The child will be reexamined for lice or nits before readmission. If a child returns to school the same day as diagnosis and treatment, the child must be wearing a different set of clothing. If after any infestation, the child is not treated as set forth, he or she will be refused readmission to school and sent home to their parents. The parents shall also be sent a separate letter. If a child has been treated twice and is still coming to school with nits and lice, parents will be required to bring the child to school for five continuous days to be checked before regular admission to school will be allowed. If a child returns without receiving any treatment a third time, or if the principal or nurse knows in advance that the family cannot afford treatment, the principal may do one or all of the following:
 - Request direct follow up by the local health department.
 - Provide enough medication to treat the infested student and infested members of his or her household. Medication will be provided by Kimberly Schools.

PREVENTING TRANSMISSION:

1. When an outbreak of pediculosis is recognized at school, classroom activities involving frequent body to body or head to body contact between students should be temporarily suspended.
2. During outbreak, group work around classroom tables should be temporarily suspended or every other chair spacing used.
3. The following may help to prevent transmission:
 - Policy assigning hooks in classrooms.
 - Hats to be kept in coat sleeves or pockets.
 - Clothes should be segregated in areas where adequate facilities for hanging coats are not available.
 - Play on carpeted areas may be suspended.
 - Bedding in nurse's office will not be used.
 - Students will be reminded not to share combs, brushes, and/or hats.

Head lice are a common problem among school-aged children and adolescents. The District shall take appropriate steps to assist parents/guardians in preventing and addressing head lice while respecting the confidentiality of students with head lice and limiting disruption to their education.

Lice prevention and management activities shall be under the direction of the District nurse who shall conduct the following tasks and/or train and designate other staff members to do the following:

1. Provide general information to parents/guardians on the diagnosis, treatment, and prevention of head lice
2. Encourage parents/guardians to perform regular lice checks on the scalp of their children who attend school, especially when excessive itching is noticed;
3. Conduct checks for head lice in students showing symptoms of head lice; and
4. Notify a student's parent/guardian if they are found to have head lice and provide resources on appropriate treatment options.

Individuals shall be trained and assigned within each school to assist in implementing this policy.

To prevent the spread of head lice at school, students should avoid head-to-head and hair-to-hair contact during activities. Students shall be discouraged from sharing such items as hats, scarves, coats, sports uniforms, hair accessories, combs, brushes, or towels.

Checking for Head Lice

Parents/guardians shall be informed that the school may conduct head lice checks as described below and shall be given the opportunity to consent to such checks ahead of time or decline to do so.

If a parent/guardian declines to consent to a head lice check for their child, the staff member who would have conducted such a check shall document that they requested consent for such a check and that the parent/guardian declined to provide it.

Any staff member who suspects a student has head lice shall report this to the school nurse or building principal or their designee. The school nurse or building principal or their designee may train school staff on recognizing signs of head lice.

If the student's parent has consented to such a check, the student will be checked for head lice in a confidential manner by trained personnel. Students who attend school in the District and are likely to have had head-to-head or other close personal contact with the student, such as siblings, may also be checked.

The District shall not conduct mass lice screenings of students not showing symptoms of head lice.

Students Found to Have Head Lice

Cases of head lice should be managed in ways that reduce disruption to the education process.

In addition to ensuring the District has parent/guardian consent prior to checking a student for head lice, the school nurse or building principal or designee will immediately notify student's parents/guardians.

The parent/guardian shall be notified of whether lice or nits were found. If signs of lice warranting treatment are found, the parent/guardian will be requested to begin treatment immediately. The notice shall state that prompt, proper treatment of the head lice is in the best interest of the student and their classmates.

Parents/guardians shall be provided with information on head lice treatment consistent with the recommendations of the district nurse. The information should include details explaining the problem, list the procedures for treatment, and explain any requirements for reentering school. In addition, the District nurse may offer extra help or information to families of children who are repeatedly or chronically found to have head lice.

Students who are found to have lice will be discouraged from making head-to-head contact with others and sharing personal items with other students. Students will not generally be sent home from school early due to signs of live or dead lice or nits. Exceptions may be made as determined appropriate and necessary by the

District Nurse.

If a student is suspected of having head lice but their parent/guardian does not consent to a check for head lice, the parent/guardian shall be notified that the school suspects the student has head lice. The parent may also be provided with information on head lice treatment and with assistance similar to that provided to parents of students found to have head lice.

Return to School

The student may return to school once the parent/guardian affirms they have begun an appropriate course of treatment for the student's head lice. Students will not generally be excluded from school for having live head lice, provided treatment has begun. Exceptions may be made as determined appropriate and necessary by the District nurse. In no case will a student be excluded from school due to the presence of nits only in their hair.

Notification of Head Lice Cases at School

The District will not normally send a notification regarding head lice cases in the school to parents/guardians of students, aside from notifications related to checks of their own child for head lice unless otherwise advised by medical personnel.

Review of Policy

The District's nurse shall review the lice management program and related procedures periodically, in consultation with medical experts as appropriate, to ensure that they are meeting the needs of the students, their families, and the District and to ensure they are in compliance with current best practices.

Any records created related to head lice cases should be maintained in accordance with state and federal laws and regulations and District policies regarding the maintenance and confidentiality of student records. Only information needed for purposes of assuring notification of the appropriate parties involved and for prevention of further exposures should be noted in a student's school records. Whether any student has or is suspected of having head lice shall be kept confidential.

LEGAL REFERENCE:

~~Idaho Code Sections 33-512.7~~

~~ADAPA 16.02.10.025.032 c.iv~~

~~IDAPA 02.10020.28~~

IC § 33-512	District Trustees - Governance of Schools
Other References	Description
American Academy of Pediatrics	Head Lice, Clinical Reports: Guidance for the Clinician in Rendering Pediatric Care by the American Academy of Pediatrics, 2022
American Academy of Pediatrics	Controlling Head Lice & Reducing Stigma by the American Academy of Pediatrics, 2022
Centers for Disease Control and Prevention	Head Lice Information for Schools by the Centers for Disease Control and Prevention, 2015
National Association of School Nurses	Head Lice Management in Schools: Position Statement by the National Association of School Nurses, 2020

ADOPTED ON: April 8, 2003