It is the goal of the Burnt Hills- Ballston Lake School District staff to help stop the spread of head lice and to ensure that no healthy child is excluded from school because of head lice nits.

The New York State Education Department, The Center for Disease Control, The American Academy of Pediatrics, The Harvard School of Public Health and the National Association of School Nurses has taken the position that no-nit policies for return to school should be abandoned. (Head lice do not cause or spread disease. No-nit policies and practices keep children out of their educational program needlessly.)

These guidelines are supported by the recommendations of

1. Dr. Sipperly – our school district doctor
2. Center for Disease Control
3. American Academy of Pediatrics
4. Harvard School of Public Health
5. National Association of School Nurses

Proactive Communication

➢ Head lice information will be available on the district website for parents.
➢ A reminder on where to access this information will be included on the district calendar.

Guidelines if a student is found to have head lice in school.

➢ School nurses will educate staff about head lice. Children should be taught not to share personal items such as brushes, hair clips, smocks and hats.

➢ Students with live head lice should be sent home and referred to their parent/guardian for treatment. The school nurse will give the parents a Pediculosis (head lice) information sheet when they come to take the student home. Parent/guardians should contact their child’s health care provider for recommended treatment. Parents/designee will be required to transport the child with live lice home. The nurse maintains a record with the date of the incidence of live lice.

➢ At the elementary level the principal will send or email a communication and information sheet home with all students in the school that a student has live head lice. The letter will advise that children be checked at home for head lice. Sample information sheets are attached. The letter should contain the date of correspondence but not the specific date of individual detection to insure confidentiality. The letter should indicate if it is one case or multiple cases in the building with specific reference to grade levels. Since the letter advises parents to monitor their children for three weeks, the principal will not send further communication about additional cases until the completion of the three week period including an extended watch for new cases. The letter will clearly communicate that children are expected not to return to school with nits in their hair.

➢ Parents should transport students to school following treatment and be checked by the nurse prior to readmission. Students must be louse free to be readmitted.

➢ At the secondary level, since students are better able to monitor themselves, letters will be sent to all students after the first live louse detection in the secondary buildings to raise awareness. Further information will be shared if a cluster of three or more students with live lice occurs. In
addition, information will be shared with teammates for each incidence if the child participates in a sport with physical contact.

- If a student experiences multiple incidents of live lice, the nurse should communicate with the building principal to determine further guidance and action. The superintendent may impose additional procedures.

- Students with symptoms of head lice (itching of scalp, visible nits) will be checked by the school nurse. School nurses will also check a student if a parent requests help. A nurse will communicate with any siblings of a student with live lice and check for lice if symptoms are present.

- After being treated the student will be checked by the school nurse prior to going to class. If live lice are found, the student will be sent home from school. If nits are found, the nurse will contact the parent/guardian and principal to report the findings and to suggest the nits be removed. The nurse will at a minimum continue to monitor the student on a weekly basis for three weeks following treatment.

- Because social stigma frequently accompanies identification of head lice, care should be taken to protect the students' confidentiality.

- In the event of a head lice occurrence in an elementary building, the principal will notify the physical education teacher to respond by curtailing physical contact in phys. ed classes (wrestling and square dancing) and by stopping the sharing of team jerseys in affected classes. In secondary schools the athletic director will be contacted to address physical education restrictions.

- In elementary with notification of live lice in the building the principal will communicate to staff regarding the use of head phones.

- In elementary in an attempt to prevent transmission via art smocks, we are instituting a new procedure which requires students to bring and store smocks in a resealable plastic bag throughout the year.

PEDICULOSIS (HEAD LICE) BULLETIN

In order to prevent the spread of head lice as far as possible and to ensure better cooperation between home and the school, we wish to inform you that we have had a case(s) of head lice in our school. Head lice do not observe any class distinction; they can infest anyone. There is no evidence that lice are a health hazard.

Since it is difficult to detect a very early case of lice, before the nits are laid and visible, we would appreciate it if you would check your child’s head every day for the next two (2) weeks.

Head lice are insects approximately 1/10 – 1/8 inch in length: they have no wings, and DO NOT jump or fly. They lay eggs which are called NITS. Lice are usually transmitted from one person to another by direct contact with the hair. Personal items such as combs, brushes, towels and bedding are other frequent sources of contamination. Another common source of infestation is clothing such as hats, scarves, sweaters and coats.
FACTS ABOUT NITS
from the School Nurse Network Newsletter

Nits are egg sacs of lice that attach themselves to the base of human hairs by nature’s own superglue. A single head louse may deposit 90 nits in her 30 day cycle. The nits appear as small pearly, oval specks that bear an uncanny resemblance to dandruff. They are extremely difficult to remove, especially the hatched eggs that are close to the scalp. Any nits that are not killed may hatch and re-infest the hair in 7 to 10 days, which is why a second treatment is required. Nits are not infectious. There is no currently marketed pediculicide which will kill the eggs. They can be removed only by picking them off one by one or by using a special NIT comb.

WHAT TO DO IF YOU CHILD HAS HEAD LICE

1. Call your doctor for his recommendation for treatment.
2. After treating your child’s head, be sure that you use the special NIT comb and comb and pick all of the nits out. A regular tooth comb will not effectively remove the nits. Combs and brushes should be cleaned by soaking in hot water for 5 to 10 minutes. **Even though your child’s head has been treated, please continue to check your child’s head every day for the next 3 weeks even if you don’t see any nits or lice.**
3. Wash all of the bedding, towels, hats, etc. **on the same day** that you shampoo your child’s hair. Bedding etc. should be machine washed in hot water and then dried using the hot cycle of the dryer for **at least 20 minutes.**
4. If an item cannot be washed, put it in a double plastic bag and leave it for at least **3 weeks.**
5. All furniture and rooms used by the person with head lice should be thoroughly vacuumed and the vacuum bag should be removed.

**Please notify the school nurse if you find nits or live lice in your child’s hair.**

5 – STEPS TO NIT REMOVAL

1. While hair is still wet comb with your regular comb to remove snarls and tangles. Part hair into four sections.
2. Starting at the top of the head from any one of the four parted sections, lift a one inch wide tuft of hair up and away from the scalp.
3. Take the special nit removal comb in your other hand and place the teeth of the comb as close to the scalp as possible. Comb slowly away from the scalp to the end of the hair being careful to comb the entire length of each one inch section of hair.
4. Clip or pin back nit free strands; continue to combing and pinning until the entire section is free of nits and lice. Wipe nits from the comb frequently with a tissue.
5. Repeat steps 2 - 4 for the remaining sections. Always comb away from the top of the head to prevent re-infestation of combed hair. This may take some time if the hair is long and thick. If the hair dries during the combing, wet it again with water.

June 2011
Renumbered from AR5410.3 – December 2015
Renumbered from AR5420.3 – August 2017
Dear Families,

A case of Pediculosis (head lice) has been found in grade ________. Your child may have come into contact with an infected child, so I encourage you to frequently check your child’s hair for the next three weeks.

If you find any questionable condition, or if you suspect that your child has Head Lice, please contact ___________, our school nurse, at 399-9141, extension ___________.

Children who are found to have head lice will need to be treated with a medicated shampoo that kills the lice. Nits (eggs) must be removed and it is recommended that the child should not return to school with nits. Parents will be asked to transport their child to school after having been treated to be checked by the nurse prior to going to class.

More information can be found on the back of this letter (taken from www.kidshealth.org).

We advise you to wash your child’s personal items like coats, sweatshirts and hats if worn and hung up at school during the day. Head lice can be spread whenever there is direct contact of the head or hair with an infested individual. Lice can also be spread through the sharing of personal articles like hats, towels, brushes, helmets, hair ties, etc. There is also a possibility of spreading head lice via a pillow, headrest or similar items. Head lice do NOT jump or fly and generally do not survive longer than 48 hours off the host.

Good communication between home and school is very helpful in preventing the spread of head lice, and all communication is confidential. Thank you very much for your help.

Sincerely,

Principal
Dear Families,

Several cases of Pediculosis (head lice) have been found in grade __________. Your child may have come into contact with an infected child, so I encourage you to frequently check your child’s hair for the next three weeks.

If you find any questionable condition, or if you suspect that your child has Head Lice, please contact __________, our school nurse, at 399-9141, extension __________.

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