1. **Preamble**

The procedures that follow provide guidelines and expectations for responding to situations where school personnel identify, or are notified by a parent/guardian, that a child had pediculosis. The procedures outline the re-admission process, environmental precautions and para-professional involvement. The pediculosis referral procedure and the parent volunteer head check program are also discussed.

2. **Identification, Treatment and Confirmation of Pediculosis**

2.1 Situation where school personnel identify that child has head lice, eggs, nits
   2.1.1 Identify head lice, eggs, nits in child's hair;
   2.1.2 Exclude the child at that time or at the end of the school day (at principal's discretion);
   2.1.3 Advise parent/guardian that head lice have been identified;
   2.1.4 Advise the parent/guardian to examine the child, all siblings and adults in the household for head lice;
   2.1.5 Advise parent that information on treatment is available from a pharmacist;
   2.1.6 Send **Head Lice Information Package** home with the child; **Head Lice Information Package** includes:
   - Head Lice Exclusion Notice (IS-99-TT);
   - Head Lice Parent/Guardian Response Form (IS-99-TT-1);
   - Advice for Parents, Schools and Health Workers; Myths and Facts about Head Lice and Guidelines for Your Home (IS-00-TT-4A);
   2.1.7 Distribute **Notice to Parents Regarding Head Lice in Your Child's Classroom** (IS-00-TT-3) to parents of students in the classroom, and those suspected of being in direct contact with the child;
   2.1.8 In addition to the **Head Lice Parent/Guardian Response form** (IS-99-TT-1), schools may initiate a form for parents of non-infested children to complete and sign stating that they have checked their child. This has been found effective;
   2.1.9 Follow procedure for re-admission.

2.2 Situation where parent/guardian contacts the school personnel that their child has head lice
   2.2.1 Explain pediculosis procedure to parent/guardian.
2.2.2 Advise parent that information on treatment is available from their pharmacy or physician.

2.2.3 If the child is at school and has not been treated, check the child and siblings. Exclude the child(ren) if head lice, eggs, nits are found. Send the Head Lice Information Package home.

2.2.4 Exclude the child at that time or at the end of the school day (at principal's discretion).

2.2.5 If the parent/guardian has kept the child home from school, explain the head lice procedure to them and ask that the parent pick up the Head Lice Information Package from the school. Schools may also wish to provide parents with a detailed fact and treatment sheet Headlice: Pediculosis…Fact Sheet prepared by the Community Health Department.

2.2.6 If the child has been treated for head lice, check the child. If no head lice, eggs, nits are found, allow the child to remain in school.

2.2.7 Distribute Notice to Parents Regarding Head Lice in Your Child's Classroom form (IS-00-TT-3) to classmates, and those suspected of being in direct contact.

2.2.8 Follow procedure for re-admission.

2.3 Re-Admission

Child should report to the Office upon returning to school

2.3.1 Option 1: The parent/guardian has examined the child and found no evidence of head lice, eggs, and nits. The parent/guardian completes Part 1 of the Head Lice Parent/Guardian Response form (IS-99-TT-1) and returns it to the school with the child. At the discretion of the principal, the child may be checked to confirm the parent’s response.

2.3.2 Option 2: The parent finds signs of head lice, eggs, nits and administers treatment according to product instructions. Once the child has been treated and all head lice, eggs, nits removed, the child may be readmitted to school. The parent completes Part 2 of the Head Lice Parent/Guardian Response form and returns it to the school with the child. At the discretion of the principal, schools may check returning students on a periodic basis to confirm treatment success.

It is imperative that all head lice, eggs, nits be removed after treatment as no head lice product is 100% effective.

The parent should be instructed to check their child’s hair daily during the first two weeks after treatment and remove any visible head lice, eggs, nits then weekly throughout the school year for any new signs of head lice.

3. Environmental Precautions

3.1 Prevention in the school is an important consideration in the control of head lice. Any child may become infested under suitable conditions, especially while working together on group activities.

3.2 The following precautions will help minimize the spread in the school:

3.2.1 Discourage students from using each other’s personal articles and clothing (e.g., brushes, combs, hats, sporting helmets, scarves and coats);

3.2.2 Encourage students to keep hats and scarves in coat sleeves, pockets, school bags or grocery plastic bags;

3.2.3 Permanently assign resting mats, towels or pillows to younger children (e.g., junior and senior kindergarten). Keep these articles separated during use and storage;

3.2.4 Assign individual coat hooks or lockers to students. Wall hooks should be at least 30 cm. (12 inches) apart or more, if possible. During an outbreak, have students keep their hats, coats (with hoods) and scarves at their desks, if necessary;

3.2.5 Have carpeted classrooms vacuumed regularly, especially in those grades where younger children spend considerable time on the floor. These precautions should be more strictly instituted when there is one or more infested students in the classroom.
3.3 Extra housecleaning and the use of insecticide spraying are not needed.

4. **Pediculosis Referral Procedure**

The following procedures are for situations where a student has experienced considerable difficulty with pediculosis and as a result is missing a significant amount of school so that their education is at risk. This intervention is not designed to accommodate an outbreak, which involves numerous students at one time, but to address a specific student or family with repeated problems. As funds are limited, it may not be possible to address all student referrals.

4.1 **Pediculosis Referral Procedure:**

4.1.1 The principal identifies a student with reoccurring and problematic pediculosis.

4.1.2 A log or record should be kept outlining the intervention strategies and discussions with the parents. If the situation continues and reaches the stage where the student is at risk, the principal should forward the log with the principal’s request to the Superintendent, Human Resource Services.

4.1.3 Once approval has been received from the Superintendent, Human Resource Services, the principal is asked to complete the remaining procedures.

4.1.4 The principal obtains a signed consent from the student’s parent/guardian to involve an outside agency to assist with the resolution of the pediculosis condition. The consent form (IS-04-TT-2) will give permission for the agency to contact the parent/guardian and permission for the agency to talk to the school principal regarding the student’s pediculosis condition. The consent form is the property of the Waterloo Region District School Board.

4.1.5 The principal contacts the following approved service provider: The Cootie Catcher [liceinfo@cootiecatcher.ca / (519) 576-0582], to initiate a pediculosis intervention. A copy of the signed consent form is to be faxed to the agency.

4.1.6 The agency personnel contact the parent/guardian and make an appointment to visit the student’s home.

4.1.7 The agency personnel make a home visit and initiate an appropriate intervention. The agency nurse decides whether a second home visit is required.

4.1.8 The agency personnel, in consultation with the student’s parent/guardian, will complete a final report indicating the outcome of the intervention(s).

4.1.9 The agency submits a copy of the final report and invoice for services rendered to the principal.

4.1.10 The principal authorizes the report and invoice and submits them to the Superintendent, Human Resource Services.

5. **Parent Volunteer Head Check Program (Suggested School Procedures)**

The Parent Head Check Program is an optional program for schools. Schools may choose to implement the program after reviewing the following information.

5.1 Considerations Prior to Implementation of the Head Check Program:

- Identify that there is a need for the program in your school community.
- Determine the level of School Council support.
- Determine the level of staff support.
- Establish a volunteer base that would be willing to carry out the program.
- Identify the children (e.g., grades JK to 4) who would be included in the head check program.
- Review the cultural practices of students in your school (Note: some cultures do not permit the touching of headgear, etc.).

5.2 School Administration Checklist for Parent Volunteer Head Check Program:

5.2.1 Make a presentation to the School Council. (Requests should be made for volunteer and financial support)

5.2.2 Determine staff support and provide staff with information about the program.

5.2.3 Prepare a letter/consent form to be sent home with each child that would be checked. (No students can be checked unless consent is given by the parent/guardian.)
5.2.4 Establish a list of parent/community volunteers.
5.2.5 Establish a Head Check Team(s) from the volunteers.
5.2.6 Provide training for the volunteer committee.
5.2.7 Establish a location for head checks. (Recommend a private location)
5.2.8 Post a Protection of Privacy Statement for Volunteers in this location.
5.2.9 Prepare the Volunteer Team equipment kit(s):
   - Vinyl gloves;
   - Popsicle sticks;
   - Student lists;
   - Log book (record name/date of cases);
   - Source of soap and water for hand washing.
5.2.10 Establish suggested school procedures for volunteers:
   - A second person on the team should confirm the case;
   - Office or school staff check the child for final confirmation;
   - Inform the child in a sensitive manner (determine the best person);
   - Inform the parent/guardian (determine the best person);
   - Document each case in a log book (include the name and date).
5.2.11 Establish a school re-entry and follow-up procedure that will be followed by school personnel. (Refer to WRDSB procedures for guidelines)
5.2.12 Prepare a Parent Resource Kit (if desired).
5.2.13 Contact the local pharmacy to obtain further information.
5.2.14 Other (as determined by the school)

5.3 Procedures for the Parent Volunteer Head Check Committee
5.3.1 Identify the chairperson.
5.3.2 Assign roles and responsibilities to various committee members (i.e., scheduling, contacting volunteers etc.).
5.3.3 Arrange for a team training session to be done by the administration of the school.
5.3.4 Training should include:
   - Demonstration of how to do a head check (Information is available from the video, pharmacies or other colleagues.);
   - Log of cases found;
   - In-school reporting process;
   - Protection of privacy of student information;
   - Communication with the child;
   - Communication with the parent/guardian;
   - Video: Head to Head with Lice (8 minutes);
   - Health standard recommendations for precautions in completing head lice checks for the parent volunteers and staff:
     a) Use a “no touch” technique with wooden sticks or applicators to part hair and check under the bangs, behind the ears and at the back of the neck. The person doing the head checks should not have direct contact with the child’s hair. Use new sticks for each child;
     b) Washing hands after each child is the best practice but may not be necessary if no touch technique is used and no contact made with the hair or scalp;
     c) If nits or live lice are removed, hands should be washed immediately after contact. Unsterile vinyl gloves may be worn also to remove nits or live lice. If gloves are worn hands should be washed when gloves are removed;
     d) Any nits or live lice removed should be placed in a sealed plastic bag or other sealed container;
     e) If the scalp has any open areas or broken skin, gloves are recommended before contact;
     f) Special fine-toothed combs for removal of nits may be used although fingers often work best for children with fine silky hair. It is preferable that parents purchase their own combs;
     g) In some circumstances combs are loaned out to parents. If the combs are to be re-used by someone else follow a cleaning and disinfecting process.
• Used combs should be returned in a sealed bag;
• A cleaning area should be established;
• The person doing the cleaning and disinfecting should wear non-disposable rubber gloves;
• Clean the used combs well in soap and water
• To disinfect, immerse the comb(s) for 10 minutes in a 1:10 solution of household bleach. (50 ml. Or 1/4 cup of household bleach + 450 ml. Or 2 1/4 cups of water). Solutions should be re-mixed daily. (From Personal Services Settings Protocol, Infection Control Program, Ministry of Health, Public Health Branch, January 1998)

5.3.5 Determine the frequency of checks and set up a checking schedule.
5.3.6 Discuss cultural practices specific to certain students (e.g. wearing of turbans).

Parent Resource Kit
(Suggested items for school developed kits)

- www.thecootiecatcher.ca
- Video: Head to Head with Lice (available from R&C, 1-800-250-8866)
- Parent handouts from the Parent Information Package
- Pamphlets or other information available from the local pharmacy (Only include combs if you follow the procedures (above) for the sterilization of combs)