

## **Administrative Procedure 315**

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### **PEDICULOSIS (HEAD LICE)**

#### **Background**

The Division recognizes the concern represented by the transmission of pediculosis in schools and therefore encourages close communication between school staff, parents and public health nurses regarding the detection and resolution of instances of pediculosis. Care will be taken to protect the individual from undue invasion of privacy.

#### **Procedures**

1. School staffs shall work with public health authorities and School Councils to describe and then communicate to parents both preventative and remedial procedures for dealing with instances of pediculosis. Appendix 315A – Health Authority 5: Routine Treatment Recommended for Pediculosis is recommended as a reference.
2. Students will not be permitted to return to school until they have undergone a course of treatment.
3. If there are ongoing concerns about particular cases not responding or being compliant with therapy, then the Principal or designate shall inform the Public Health Authority of these concerns.

Reference: Section 18, 20, 45, 60, 61, School Act  
Public Health Act

**Health Authority 5: Routine Treatment Recommended for Pediculosis**

**What are head lice?**

Head lice are small grayish insects the size of a sesame seed that can live on a person's head. They do not jump or fly, but they move quickly. Lice lay tiny grey-white eggs (nits) that stick to hair very close to the scalp. An adult louse can live for 1 to 2 days away from the head.

**How are head lice spread?**

Lice are spread through head to head contact with someone who has lice or by sharing personal items such as hairbrushes or hats. Anyone can get lice. Lice is not a sign of being 'unclean' or having poor hygiene. Lice are very common in daycares and schools. Head lice may be annoying or embarrassing, but do not harm your health.

**What are the symptoms of head lice?**

Symptoms of lice may include:

- Constant itching of the head
- Red marks on the scalp

Nits (1mm long) can be seen firmly attached to hair (don't confuse with dandruff, which is easily brushed off). Lice are hard to see.

**How are head lice prevented?**

- Teach your child not to share combs, hats, headgear, etc.
- Check your child's head every week. Look carefully for nits or lice around the temples, behind the ears and at the back of the neck.
- If you think your child may have lice, but are unsure, contact a healthcare professional.
- Treat lice as quickly as possible and take time to remove nits after treatment.
- Discreetly tell all possible contacts (e.g. schoolmates, daycare workers) so they can be checked or treated.
- All family members should check their hair, but treat only those who actually have lice.

After an outbreak of lice, soak combs and brushes for one hour in hot water. Bedding, hats, toys, etc. should be washed in hot water and dried on a hot dry cycle, dry cleaned, or sealed in plastic bags for two weeks. Do not use fumigant sprays because they can be harmful.

**How are head lice treated?**

You can buy anti-lice shampoo or lotions at a pharmacy. Read and follow directions carefully, as products can be harmful if used incorrectly or too many times.

- Apply to clean hair only. Wash hair with shampoo only (do not use conditioner or combined shampoo/conditioner) and dry well.
- Apply enough of the lice shampoo/lotion to soak the hair (long hair may need more than one bottle).
- Leave the product in for the amount of time noted on bottle (usually 10 minutes) – not longer.
- Do not use conditioner or shampoo for 2 days after treatment.

Remove nits from hair with a fine-tooth comb or by pulling them out with your fingernails. Put the nits in a bag and throw it out. It may take several days to remove all the nits. A child can return to school/daycare after the lice are treated with anti-lice shampoo/lotion.

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