



Head Lice: Policy

Intent Statement

Head lice (Pediculosis Capitis) infestations are common in children attending child care, but head lice are not a health hazard and are not responsible for the spread of any disease. This policy was developed to assist child care providers by providing information about and guidelines for dealing with head lice in the child care setting.

Procedure and Practice Cause:

Head lice are small, tan colored insects (less than 1/8" long) that live on blood they draw from the scalp. They live for days or weeks depending on temperature and humidity. They deposit tiny, gray/white eggs, known as nits, on hair shaft 3-4mm from the scalp. They cannot live for more than 48 hours away from scalp. Head lice infestations occur in all socio-economic groups and do not represent poor hygiene.

Symptoms:

- Itching of skin where lice feed on the scalp or neck
- Nits may be glued to hair, most easily seen behind ears and at or near the nape of the neck
- Scratching, especially behind and around ears and at the nape of the neck
- Open sores and crusting from secondary bacterial infection that may be associated with swollen lymph nodes (swollen glands)
- The itching results from an allergic reaction to the saliva of lice and itching often persists for weeks after the infestation resolves

Incubation and contagious periods:

- 10-14 days from laying to hatching of eggs
 - Lice can reproduce 2-3 weeks after hatching
 - Contagious period: Until lice are killed with a chemical treatment
- Spread:**
- Most commonly by direct contact with infested people and less commonly by direct contact with personal items of infested people such as a hat, comb, brush, or pillow
 - Only lice, not nits spread the infestation

Treatment and control:

- Medications that kill lice and nits (pediculocides) should be recommended by the child's health care professional and used as directed. Some chemicals require two treatments because lice become resistant. Most products used to treat head lice are pesticides that can be absorbed through the skin. Therefore, all medicines used for treatment of lice should be used with caution and only as directed. It is important to note that none of the remedies using common household products have been shown to be effective, and some are very dangerous to use.
- Although not medically necessary, removal of nits that are attached within one centimeter of the base of the hair shaft may be manually performed. Removing the nits may help in situations where outbreaks are occurring in the group to determine whether a child who has been treated became re-infested after treatment or merely has residual non-viable nits
- In addition to treating the affected child with a medication, any items such as headgear, pillowcases, and towels that have come into contact with the affected child in the forty-eight hours prior to treatment should be washed in hot water.

Exclusion from group setting:

- Children will be excluded immediately or sent home early from child care due to the presence of head lice
- Parents/guardians of affected children will be notified that their child must be treated before returning to the child care facility
- "No-nit" policies before permitting return of an infested child to child care or school are not effective in controlling transmission
- Children will be readmitted to group setting after the child has received the treatment recommended by the child's health care professional and no live lice are seen, a doctors note must be provide.

Role for Caregiver/teachers:

- Until the end of the day, any activity that involves the child in head- to- head contact with other children or sharing of headgear will be avoided
- Staff will encourage parent/guardians to consult with health care professionals for a treatment plan for their child

- Children and staff who have been in close contact with an affected child should be examined and treated if infested, defined as the presence of adult lice or nits (eggs) on a hair shaft within three to four millimeters from the scalp.
- Staff and families will be educated on how to recognize head lice and nits and the relatively benign consequences of head lice

For more information about head lice go to

<http://www.healthychildren.org/English/healthissues/conditions/from-insects-animals/Pages/Signs-of-Lice.aspx?nfstatus=401&nftoken=00000000-0000-0000-0000000000000000&nfstatusdescription=ERROR%3a+No+local+token>

Applicable

This policy applies to all staff, substitute staff, parents and volunteers in child care setting

Communication

Staff and volunteers will receive a written copy of this policy in their orientation packets before beginning work at this facility. All parents will receive a written copy of this policy in the parent handbook.

Reviewed by:

Director/Owner

Parent/Guardian

Effective Date/Review Date

This policy is effective immediately. It will be reviewed yearly by the center director.