

Date of Original: 01.03.2018
Date of Reviews/Revisions: (5.2018)
Date of Newly Revised:

**Blackwater Elementary School.
District 1
Lice Management in the Schools**

Policy Statement:

Pediculosis Humanis Capitis: (infestation with head lice) is a reportable disease under the Gila River Indian Community Tribal Health Department. Arizona law does not require that children that children be excluded from attending school for Pediculosis (See Title).

Definition(s):

- A. Pediculosis humanis capitis, or head lice
 - a. A group of human parasitic insects that are host specific and live and produce only on humans. They need human blood to survive. The life cycle of *Pediculosis humanis capitis* is composed of the egg (nit), nymph, and the adult.
 - b. They are not particular to race, gender, age, or socioeconomic status and are not an indicator of poor hygiene or living conditions.

- B. Nits, or lice egg
 - a. These are silvery white in color and are approximately ½” from the scalp
 - b. These are attached to the hair shaft with a cement like substance making them very difficult to remove

- C. Infestation
 - a. Harboring any live lice, nymphs, or adult head lice
 - b. Excessive scratching of the head is often the first sign of head lice infestation

Procedure(s): The goal of head lice policies should be to help facilitate the parent’s ability to quickly and easily eradicate lice and nits and place the child back in school/child care. Schools and childcare facilities do not need to exclude children for head lice. Except for certain circumstances, when they are harboring any live lice, nymphs, or adult head lice.

- A. Each school and childcare facility should have at least two staff members who are trained to screen children for head lice. Larger schools or facilities may need more than two.
 - 1. School staff will be trained how to prevent lice transmission at the beginning of the school year, during the School Health Services (SHS) teacher in-service training. In addition, SHS educators are available on an as needed basis and will

facilitate additional trainings to staff on preventative measures of head lice throughout the year.

2. If a teacher/school staff suspects a student has lice, he/she will send the student to the nurse's office for further evaluation.
3. The school nurse and SHS educators will be available to train staff members on how to educate parents on head lice treatment and nit removal.

B. School wide screenings will take place annually at the beginning of the school year. Additional head lice screenings may be conducted, as needed, depending on school staff and or nurse availability.

1. SHS health educators will conduct lice prevention classes throughout the year and at the request of the school as needed to the school and community.

School Nurse Role:

1. The School Health Services (SHS) Registered Nurse (RN) will conduct a lice screen as needed for student(s) suspected of having pediculosis.
2. If a student is positive for lice infestation as evidenced, by harboring any live lice, nymphs or adult head lice the school nurse will notify the parent or guardian.
3. The School Health Services (SHS) Registered Nurse will dispense the first initial supply of OTC lice shampoo to the parent or guardian. In addition, the parent must sign the SHS consent and SHS over-the-counter (OTC) medication consent. The school nurse will notify, explain process, and answering any questions for the parents/guardians regarding OTC lice shampoo usage.
4. The parent or guardian must come to the school nurse office in person to receive the OTC lice shampoo box for their child.
5. The SHS RN will contact the parent to pick up a child from school if the child presents with lice infestation. At times, due lack of parent transportation children may remain on the campus until the end of the day (depending on the severity of the case). The school may also transport a student home if school personnel is available, at the parent request.
6. The SHS RN will give the parent/guardian a copy of the GRHC –Getting Rid of Head Lice Simple 14-Day Treatment Schedule and Information on Head Lice Brochure. In addition, a GRHC PHN flyer will be given to the parent for assistance in the home and with lice treatments in the home.
7. Prevention and control of head lice begins at home. The parent/guardian has the ultimate responsibility to ensure children are free of lice and nits. By incorporating head lice screening into a daily hygiene routine in the home, head lice can be detected earlier and treatment started more quickly.
 - a. **Initial Lice Shampoo treatment**-should be done the same day the parent receives the lice shampoo from the nurse office.
 - b. Lice shampoo will be given to parent for the affected child. Since, it is important for all family members to be treated at the same time, the parent/guardian will be directed to go to the HHK/KHC pharmacy to receive lice shampoo for other household members.
 - c. Parent/guardian should understand that their child is expected to return to school the following day after initial shampoo treatment, combing and nit removal have been accomplished. The child will be re-checked prior to attending school. If significant

improvements are seen with no live lice and majority of nits removed, the child may remain in school.

- d. **A second lice shampoo treatment** is due on day 7-10 of treatment cycle. This dose may be picked up by the parent or guardian at the HHK or KHC pharmacy.
8. The SHS' registered nurse must ensure student confidentiality is protected when dispensing medication, as outlined in the Family Education Rights and Privacy Act and the Health Insurance Portability and Accountability Act.
9. If the parent/guardian is unable to pick up the lice shampoo from the nurse office/or if the parent/guardian does not want the lice shampoo. The child will be sent home with education materials detailing head lice treatment, a parent pharmacy referral to HHK/KHC to obtain the lice treatment shampoo, nit removal, nit comb, and preventive measures to reduce transmission in the home.
10. If a family does not have transportation to pick up lice shampoo from the pharmacy, the school nurse will make a referral to Public Health Nursing. Public Health Nursing can deliver lice shampoo to the home and may assist in nit removal, emphasize importance of combing hair with nit comb, and encourage laundering of linens at home to reduce the spread of lice.
11. If the student continues to have lice infestation, a referral will be made to the Gila River Indian Community Tribal Health Nurse to assist in lice removal, support and education for the family on lice prevention.
12. If a student continues to have lice infestation after referrals to GRHC PHN and GRIC Tribal Health Nurse, Tribal Social Service Child Protective Services may be contacted depending on the circumstance.
13. In cases of severe infestation with head sores and or possible impetigo (secondary bacterial infection of the skin from sores and scratching), the parent/guardian will be referred to their primary care provider. In these cases, the child should be excluded from school or childcare until the infestation is cleared. If the child is excluded from school, a note from their physician or healthcare provider, clearing them will be required for the child to return to school or childcare.

- C. Schools and childcare facilities will work with parent advisory committees and parent groups to set aside funds and educational materials to control head lice. Schools and childcare facilities should consider purchasing metal nit combs to provide to families.

School Staff Roles

All teachers must have a good understanding of head lice transmission and prevention.

- Teachers will observe children carefully for symptoms of head lice, as early detection can limit spread. Teachers are to refer children to the school nurse office if they suspect head lice.
- Hang coats and jackets separately, properly spaced apart, and not touching each other. Each child should have his or her own storage place for the backpacks, mats, coats, scarves, gloves, or other items brought from home.
- Carpeted floors need to be vacuumed,, linoleum floors swept,, and computer headphones wiped daily.

- School staff and school health educators will teach basic information about head lice as part of the health and hygiene curriculum. The importance of each child using his or her own care items and not sharing hats, hair accessories or scarves should be emphasized as methods to reduce transmission in schools.
- Schools and childcare facilities will clearly communicate the policy to parent/guardian and children

Parent/Guardian Roles

Prevention and control of head lice begins at home. The parent/guardian has the ultimate responsibility to ensure children are free of lice and nits. By incorporating head lice screening into daily hygiene routine in the home, head lice can be detected earlier and treatment started more quickly.

- Parent/Guardian will review the GRHC Getting Rid of Head Lice Educational Brochure. This is a simple 14-day treatment schedule, including day to day instructions and can be located in the nurses office.
- Initial lice shampoo treatment: topical shampoo as directed. Use warm water to form a lather, shampoo, then thoroughly rinse and comb.
- Second lice shampoo treatment is due in 7-10 days. The second lice treatment shampoo/supply: The parent/guardian may be picked up from a GRHC pharmacy.
- Treat all family members who have lice at the same time. Refer to the 14-day treatment process. Rinse combs and brushes in very hot water after each use and between individual usage.
- The parent/guardian may pick up additional lice shampoo for other family members at the HHK/KHC pharmacy without a referral.
- Use of kerosene, gasoline and similar products do not work and are dangerous.
- Only ordinary house cleaning, vacuuming, and washing of bedding and clothes in hot water are needed. No specific sprays are needed to clean the home

Attachments/Forms:

1. Gila River Healthcare-Getting Rid of Head Lice Simple 14 day Treatment Schedule & Information on Head Lice.
2. Parent/Guardian Lice Information for GRIC schools and Headstarts, sent out with each SHS consent.
3. GRHC Public Health Nursing Lice flier.
4. SHS consent and SHS OTC medication consent

References:

1. American Academy of Pediatrics
2. National Association of School Nurses
3. Oklahoma State Department of Health

Other Policies:

1. Gila River Indian Community Communicable Disease Ordinance: A new policy is being reviewed by the GRIC Tribal Health Department

School Health Services

17487 S. Health Care Drive Laveen, Arizona 85339

School Year 2018-2019

Lice Information for Parents/Guardian Gila River Indian Schools

- I understand it is my responsibility to keep my child's hair free of head lice. I understand I need to have my child's hair cleaned in a timely manner to reduce school absence.
- I will follow the school's lice policy/guidelines in student's school handbook for nits, lice, or head sores related to lice infestation.
- The school nurse or school staff will contact me either by phone or letter if my child is found to have nits, lice, or head sores related to lice infestation. Information will be sent home with me regarding lice treatment options.
- The School Nurse will send a pharmacy referral for lice shampoo.
- The school nurse may give the parent/guardian lice shampoo, if a signed Over the Counter Medication Consent is completed. I understand the parent/guardian must pick up the lice shampoo from the school nurse office in person. The lice shampoo will only be given for my affected child.
- The school nurse will send home a 14 day-Lice educational flyer on lice prevention regarding how to treat and prevent lice infestation.
- The Gila River Healthcare Public Health Nursing Department can make a home visit and assist the family with head lice removal at the request of the family.

Additional Tips

- Treat all family members who have lice at the same time. Use the 14-day treatment process. Rinse combs and brushes in very hot water after each use, and between people.
- Only ordinary house cleaning, vacuuming, and washing bedding and clothes in hot water are needed. No special effort or sprays are needed to clean your home. Only dead or dying lice are found on clothing, bedding, or furniture.
- Use of oils, mayonnaise, lotions, creams, and vinegar has not proven effective; ketosene, gasoline and similar products do not work and are dangerous.



Image of real lice

What about school?

- There is no need for children to be sent home or to miss school, though treatment should be started before returning to school the next day
- School officials should ask parents to check their children's hair at least weekly.



What if treatment does not work?

Reasons:

- 1) Wrong diagnosis - dandruff, hair products, dust, and other objects can seem like nits (the white eggs) and other insects can look like lice
- 2) New lice - child got head lice again from playmate or family member
- 3) Timing - the lice may take a few days to die; nits alone do not mean the child still has lice, look for crawling lice
- 4) Poor treatment - directions on the treatment product were not correctly followed
- 5) Resistance to treatment - some lice are not killed by the chemicals in the over-the-counter treatments (permethrin and pyrethrin)

After the 14 day treatment, if crawling lice are still present, contact your healthcare provider who may recommend a prescription treatment for lice.

If you would like any more information, please contact your primary care provider, public health nurse, pharmacy or child's school nurse.

Information received from:

www.gilahealthcare.com
www.azdhs.gov/health

Getting Rid of

HEAD LICE



Simple 14-Day

Treatment Schedule

and

Information on Head Lice


Gila River
HEALTH CARE

FACTS ABOUT

HEAD LICE

What does head lice look like? Since adult lice are the size of a sesame seed (2-3mm), head lice can be seen by the human eye. They live in human hair, draw blood from the skin, and lay eggs (called nits) on the hair shaft. Live nits are found less than 1/2 inch from the scalp and most often on hair at the back of the head in the neck region. Some children with lice complain of itchiness but many have no symptoms.

Is your child at risk? Yes. Head lice will spread as long as children play together. They spread almost completely through human hair to hair contact, and pets do not spread lice. Anyone can get head lice. Children in child care, preschools, elementary or middle schools are at risk. Head lice are NOT a sign of being dirty. Head lice are not dangerous and DO NOT spread diseases.

What can you do? Parents are the key to looking for and treating head lice! The Iowa Department of Public Health advises parents to spend 15 minutes each week on each child carefully looking for head lice or nits. Persons with nits within 1/4 inch of the scalp OR live lice should be treated. Careful use of a nit comb can potentially remove all lice. Each child should have his or her own comb or brush. Teach your child NOT to share hats, scarves, brushes, combs, and hair fasteners.

Treatment: The Iowa Department of Public Health recommends a 14-day treatment process. You may use over-the-counter products. They are safe and not costly. Mark your calendar to help you keep track of treatment.



Lice at various stages of their life cycle

Treatment Calendar

<input type="checkbox"/> Day 1 Medicated shampoo	<input type="checkbox"/> Day 8 Shampoo, condition and COMB
<input type="checkbox"/> Day 2 COMB only DO NOT WASH	<input type="checkbox"/> Day 9 Shampoo, condition and COMB
<input type="checkbox"/> Day 3 Shampoo, condition and COMB	<input type="checkbox"/> Day 10 Medicated shampoo
<input type="checkbox"/> Day 4 Shampoo, condition and COMB	<input type="checkbox"/> Day 11 COMB only DO NOT WASH
<input type="checkbox"/> Day 5 Shampoo, condition and COMB	<input type="checkbox"/> Day 12 Shampoo, condition and COMB
<input type="checkbox"/> Day 6 Shampoo, condition and COMB	<input type="checkbox"/> Day 13 Shampoo, condition and COMB
<input type="checkbox"/> Day 7 Shampoo, condition and COMB	<input type="checkbox"/> Day 14 Shampoo, condition and COMB

14 Day Treatment Guidelines

- ✓ The treatment days are scheduled to interrupt the lifecycle of the insect. A nit comb should be used to comb the hair and can be bought at most pharmacies.
- ✓ Day 1: Use an over-the-counter medicated head-lice shampoo containing pyrethrin or permethrin. Read and follow all directions on the shampoo.
- ✓ Day 2: COMB hair carefully for 15 minutes from the scalp to the end of the hair. Do not wash hair today.
- ✓ Days 3-9: Wash the hair using your regular shampoo. Rinse. Apply hair conditioner to make the hair slippery. COMB the hair the entire length from the scalp to end of hair. Wipe the comb between each stroke with a paper towel, which removes any lice or nits. Keep hair wet while combing. COMB all hair for at least 15 minutes.
- ✓ Day 10: Use an over-the-counter medicated head-lice shampoo. (to kill any lice that hatched since the previous medication use). Read and follow all directions on the shampoo.
- ✓ Day 11: COMB hair carefully for at least 15 minutes from the scalp to the end of the hair. Do not wash hair today.
- ✓ Days 12-14: Wash the hair using regular shampoo. Rinse. Apply hair conditioner to make the hair slippery. COMB the hair the entire length from the scalp to the end of hair. Wipe the comb between each stroke with a paper towel, which removes any lice or nits. Keep hair wet while combing. COMB all hair for at least 15 minutes.



Public Health Nursing (PHN) is available to assist your family with Head Lice Treatment

Home visit with individualized teaching
Offer initial treatment at PHN office, if needed
Demonstration of combing technique
Follow-up visits, if needed

**For more information, please
contact a Public Health Nursing
District office:**

District 1: 520-215-2110

District 2: 520-562-3450

District 3: 520-562-3721

District 4: 520-418-2845

District 5: 520-315-3826

District 6: 520-550-6042

District 7: 520-550-6042

Ak Chin: 520-568-7334

Facts about head lice and what you can do:

- School Health Nurses will issue a Pharmacy referral for treatment shampoo
- Read the instructions and begin **DAY 1** of the 14 Day Treatment Guideline provided by School Health Services
- Allow PHN staff to assist with initial application of shampoo and combing of the hair
- Have other family members present who can learn to help
- Be willing to continue combing hair daily to remove all nits and lice
- New brushes and combs for everyone in the home
- Wash bedding and clothes in hot water, vacuum floors
- **COMB, COMB, COMB** — continue combing hair daily. Once all nits and lice are removed, weekly checks of the hair is recommended.



GILA RIVER INDIAN COMMUNITY
SACATON, AZ 85147

ORDINANCE GR-14-09

THE GILA RIVER INDIAN COMMUNITY COUNCIL HEREBY RESCINDS ORDINANCE GR-05-01, COMMUNICABLE DISEASE ORDINANCE, AND ENACTS THE COMMUNICABLE DISEASE ORDINANCE TO BE CODIFIED AT TITLE 17, CHAPTER 9, COMMUNICABLE DISEASE ORDINANCE, OF THE GILA RIVER INDIAN COMMUNITY LAW AND ORDER CODE

WHEREAS, the Gila River Indian Community Council (the "Community Council") is the governing body of the Gila River Indian Community (the "Community"); and

WHEREAS, the Community Council is empowered by Article XV Section 1 (a) (9), of the Constitution and Bylaws of the Gila River Indian Community (approved March 17, 1960), to promote and protect the health, peace, moral, education, and general welfare of the Community and its members; and

WHEREAS, it is the policy of the Community to protect the health and welfare of its members; and

WHEREAS, there is a need for prompt detection and control of outbreaks of communicable disease within the Community and to prevent such outbreaks from occurring; and

WHEREAS, the Community enacted GR-05-01 establishing a Communicable Disease Ordinance; and

WHEREAS, since the enactment of the Communicable Disease ordinance the need for further clarification and changes to the ordinance have become apparent; and

WHEREAS, this revision provides for clarification and changes to the Communicable Disease Ordinance; and

WHEREAS, the revised Communicable Disease Ordinance has complied with pre-adoption notification procedures pursuant to Title Five (5), Chapter Seven (7), Section 5.703 of the Gila River Indian Community Law and Order Code by publication in the Gila River Indian Community News and at all seven district service centers.

NOW, THEREFORE, BE IT ENACTED, that the Gila River Indian Community Council hereby amends the Gila River Indian Community Law and Order Code by rescinding Ordinance GR-05-01 currently in existence, effective immediately, and enacts and codifies the revised Title 17, Chapter 9, Communicable Disease Ordinance, effective immediately, which is attached to this Ordinance.