No Live Lice Policy

The Chippewa Falls Area Unified School District endorses a **"No Live Lice"** policy to provide a safe and healthy environment at school.

Preventative Measures

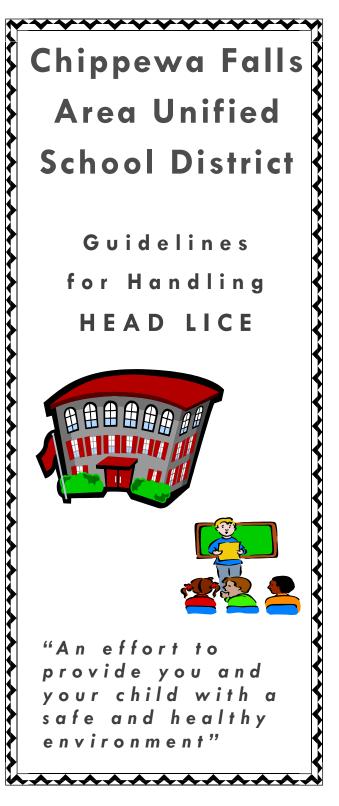
- Upon admission to school, parents will receive a copy of "Guidelines for Handling Head Lice."
- Periodic individual screenings will be conducted by school health personnel.
- Educational materials will be available for parents, students and staff. They will be located in the library or in the nurse's office.
- Referrals will be made to appropriate health/social agencies for families in need of resources.
- Policy accepted July 2012

School Control Measures

The Chippewa Falls Area Unified School District endorse a **NO Live Lice Policy**. Any student or employee who is suspected or diagnosed as being infested with adult head lice shall be excluded from the school environment until the day after treatment **OR** live lice removal has been completed.

The first infestation of a student/ employee shall be treated as follows:

- Infestation is determined by school personnel.
- Person is excluded from school (parents are responsible for transporting their child home immediately after student is identified as positive for live lice.).
- Treatment takes place.
- Student/employee may return to school the day after treatment. Student must be accompanied to school by a parent or designee.
- Student/employee will be checked by school health personnel/secretary upon return to school and before going to class. The student/employee must be live lice free before being re-admitted to school.
- Students who are repeatedly infested may be referred to public health officials by the building administrator. Public health will verify that contact was made from this referral.





HEAD LICE

Each year there are reported cases of head lice in our school district. Head lice is a nuisance condition that can be very frustrating and costly in time and money.

Evidence of head lice infestation is usually more prevalent at the early childhood and elementary level because of students' closeness in play activities and behavior.

Many people associate head lice with a lack of cleanliness and feel very embarrassed when informed that they or members of their family have lice. Anyone can get head lice, regardless of the level of cleanliness.

"Getting head lice is EASY, Getting rid of head lice is DIFFI-CULT"

Steps to Help

1. Identify—Be able to identify head lice infestation.

The adult louse has six legs and moves through its surrounding by grasping onto filament-like structures (hair, clothing, etc.) It pushes and pulls itself along. The adult louse does not hop, fly or jump. The louse however, is fast! The adult louse can live for 30 days on a host, but only two days off a host.

The eggs (nits) incubate for 1—10 days and can live off a host for ten days or more.

Itching of the head is a symptom that needs to be investigated. Look for sores on the head that may be the result of scratching. Be sure to look through the hair carefully. Pay close attention to the crown and hair along the neck and ears. These are the easiest places to see the nits. Nits are very small and cylindershaped. Nits are "glued" onto the individual hair strand and do not release. They must be removed manually, either by combing with a special comb or being pulled off with your fingernails.



2. Treat—Know what to do. Remove every nit!

You may want to obtain a lice-killing product from your pharmacy or family doctor. Use according to directions! Treat ONLY the persons who have been identified to have head lice. No product will be 100% effective. Complete nit removal (with comb or fingers) is the only way to be sure of a successful treatment.

Thorough, housecleaning is essential!

Vacuuming will help to get rid of stray hairs and live lice. Vacuum all rugs, furniture, mattresses, cars, car seats, etc. Wash clothes and bedding in HOT WA-TER. Dry clean or put articles that can't be washed in a dryer for 20 minutes. Bagging (putting articles in a plastic bag) for 14 days can help, but it may be a safety hazard around small children.



3. Prevent!

* BE ALERT TO SYMPTOMS *TREAT EFFECTIVELY *CHECK CLOSELY AND FREQUENTLY *NOTIFY YOUR SCHOOL/DAY CARE *NOTIFY PLAYMATES AND SITTERS