

## Tip Sheets

### Preventing, Monitoring, and Managing Head Lice

#### Preventing Head Lice

Head lice spreads primarily through direct head-to-head contact. Although much less frequently, head lice can also spread by sharing clothing or other belongings onto which lice have crawled.

Head lice must have a source of food to survive. If a louse falls off someone it can only survive 1 to 2 days. To prevent head lice:

- **Avoid head-to-head (hair-to-hair) contact.** Although this can be challenging, encourage children to avoid head-to-head contact. Head lice cannot fly, hop, or jump so are most likely only passed on through direct contact.
- **Don't share what is on your hair.** Encourage children not to share combs, brushes, hats, scarves, bandanas, hair accessories, ribbons, towels, or anything that goes on their heads.

#### Monitoring and Managing Head Lice

Perform a well-organized and quick response to the first case of head lice with these tips:

- Learn to recognize nits and signs of head lice, and provide information to parents about detection and management.
- Check all children for head lice when there is a known case in your program.
- Notify parents about new cases of head lice, and maintain confidentiality by not sharing the name of the child who has it.

#### Checking for Head Lice

The American Academy of Pediatrics recommends that families do regular checks for head lice. To do a check:

- Have the individual sit in a brightly lit area.
- Part the hair and look for crawling lice and nits on the scalp one section at a time.
- Use a fine-tooth comb
- Nits will look like white or yellow-brown specks that are firmly attached to the hair close to the scalp. Nits are easiest to find at the back of the neck or behind ears.
- Dandruff, dirt particles, etc., will be moveable since not firmly attached to the hair shaft.

#### Treating Head Lice

According to *Caring for Our Children* (2011) and the American Academy of Pediatrics, children should not be excluded immediately or sent home early from their early care and education program due to the presence of head lice.

However, a child with a new case of head lice needs to be treated before returning to the early care and education program the next day.

To treat head lice:

- Notify families that affected children must be treated before returning to the program.
- Provide families with information on treatment, and talk to parents about the importance of follow through with treatment at home.

- Refer parents to their child’s primary health care provider for additional advice about head lice treatment and nit removal.
- \*You may wish to notify parents before they pick up their child to give them with time to contact their health care provider regarding treatment options.
- Wash clothes (including hats and scarves) and bedding in very hot water.
- Soak combs and hairbrushes in hot (149°F or 65°C) water for at least an hour.
- Vacuum carpets and upholstered furniture in rooms used by anyone with head lice.
- Wipe the lining of bike helmets with a damp cloth. (Do not use detergents, cleaning chemicals or sanitizers).
- Items that are not washable can be dry cleaned or sealed in a plastic bag for up to two weeks.
- Do not use pediculicide (medicated) sprays. These can be harmful if inhaled or get into the skin, especially on young children.

## Treating Persistent Cases of Head Lice

In situations in which there is a persistent case of head lice, despite the use of a prescription treatment, the following may be the case:

- There has been a misdiagnosis and the individual did not have head lice.
- The individual/family is unable or unwilling to follow the proper treatment protocol.
- Treatment was inadequate (i.e. hair was not saturated with the treatment product).
- There has been a re-infestation.
- The product did not kill the eggs that have now hatched.
- The lice have become resistant to the treatment.

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*Funding provided by the Minnesota Department of Human Services.*

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