

Supplementary File

Categories	Subcategories	Labels
Parents' characteristics	Family structure	Single parents Double-income nuclear families
	Work	Unable to take time off (e.g., self-employed individuals and teachers) Having difficulty taking time off Parents are concerned about their dismissal from work caused by taking time off
	Family situation	Sickness of parents School events in which the siblings of the sick child need to participate
	Parents have no one to look after their children	Grandparents do not live nearby Grandparents have a job Preventing grandparents from being infected Family that moves around a lot due to job transfers
Children's characteristics	Age	Age of 0 years to the 6th year of elementary school
	Diseases	Infectious diseases (e.g., a cold, diarrhea, vomiting, influenza, and chickenpox) Chronic diseases (asthma and epilepsy)
	Disabled children	Down syndrome Mentally disabled children Children with developmental disorders Children with muscular dystrophy Children with cerebral palsy Children using a respirator
	Physical and psychological discomfort	Avoidance of attending school
		Rest and recreation
Postoperative children	Postoperative children	

Table 1. Characteristics of parents and their children who use sick child care.

Categories	Subcategories	Labels
Idea that convenience for parents should be prioritized over looking after their children	Risk of neglecting children	Parents place their children in care facilities as if the children were inanimate objects Parents blame their children for having to come to care facilities The children of individuals who tend to neglect them are more likely to become sick Parents do not want to change their lifestyles or working styles
	Parents' lives are prioritized	Parents' lives are prioritized. Many parents prioritize themselves over their children
Parents' lack of caregiving skills	Insufficient monitoring and management	Children's temperature is not measured Parents do not write their children's symptoms in their contact notebook
	Parents do not make their children take necessary drugs in the morning	Children have difficulty taking medicine Children's emotional independence on their parents Parents' concerns Parents' dependence on sick child care
	Children do not eat breakfast in the morning	When children do not want to eat, it is not necessary to force them to eat Children do not seem well when they come to the care facility without having breakfast Children tell staff members that they are hungry
	Meals inappropriate for children's symptoms	Children pass dyspeptic stools Parents do not have the idea of providing a weaning diet or similar meals Parents bring a meal that has been normally cooked using normal ingredients
	Children's hygiene is not maintained	Children are malodorous Parents think that sick people should not bathe Many parents do not clean their children when they are unable to bathe Children are wearing the same clothes as the day before
	The bottoms of children have a rash	The bottoms of some children have a rash due to diarrhea
Parents ignoring the rules	Parents do not call the facility for cancellation	The care facility cannot accept more children The care facility cannot sufficiently arrange rooms or staff members
	Parents are not punctual	Desire for parents to call the facility when they are late for their reservation Heavy burden on children (they become disappointed to find that the woman who has come to the facility to pick up her child is not their parent)

Table 2: Parents' issues.

Categories	Subcategories	Labels
Being unable to take medication	Requests of parents	Making children take medication at the care facility Teaching parents how to make children take medication
	Instructions for parents	Repeatedly teaching parents a specific medication method Showing parents the ways in which their children have been able to take medication successfully
Inappropriate meals	Requests of parents	Teaching parents about meals suitable for their children's symptoms Providing parents with dietary instructions Providing children with rice porridge, minced food, and soft meals
	Instructions for parents	Providing mothers with dietary instructions in a manner facilitating their understanding with the pictures of the meals that their children have had at the care facility Teaching parents digestible meals and an appropriate serving of these meals Teaching parents a meal that their children should ideally have that night
Bottoms have a rash	Instructions for parents	Encouraging parents to wipe their children's bottoms
Bathing	Requests of parents	Consultation sought by parents regarding whether or not their children can bathe
	Instructions for parents	Instructing parents to clean their children Instructing parents to wipe their children's bottom
Infection	Instructions for parents	Informing parents of the possible infection routes and need for hand washing Providing children with activities in which they make things (e.g., drawings) that they can bring back home so that their parents are able to understand the children's behavior at the facility
Anxiety regarding children	Care to relieve anxiety	Providing parents with records of care provided for their children and the children's symptoms

Table 3: Care for parents.

Categories	Subcategories	Labels
Care for children	Developmental stage	Activities provided according to the developmental stage of each child Assigning children to different facility rooms according to their age regardless of their diseases Constant one-to-one care provided for 1-year-old children for cuddling, diaper changes, and milk feeding
	Safety	Taking risk prevention measures because some children run at care facilities Resting small children in a crib or separating them from other children
	Peace	Separating children in the acute phase from those in the recovery phase Making schedules and providing activities for children according to their physical condition
	Relief	Children feel comfortable staying at care facilities Providing children with activities while observing their behavior
	Not taking medication in the morning	Medication care is provided for children according to their developmental stage in order to ensure that they take necessary drugs
	Not having breakfast	Providing snacks (lunch) earlier Increasing the serving of snacks
	Inappropriate food brought to the care facility	Providing rice porridge or udon noodles when mothers are unable to bring soft food to the care facility
	Bottoms have a rash	Washing children's bottoms
Children with asthma	Reason	Children should not be left at home alone regardless of their age
	Instructions for parents	Teaching parents comfortable postures and proper humidity for children
	Care	Inhalation, suction, humidity adjustments, posture assistance, and infusion Cuddling children all day to prevent them from crying
Disabled children	Reason	Providing respite care
	Care	Ensuring safety Providing a quiet environment (partitioning rooms and using isolation rooms) Providing one-to-one care
	Care for children with developmental disorders	Ensuring peace
	Care for children with cerebral palsy	Providing dietary and excretion care
	Care for children using a respirator	Inhalation, sputum suction, intranasal injections, and excretion care

Table 4: Continue...

	Care for children who have undergone tracheostomy	Inhalation, sputum suction, intranasal injections, and excretion care
	Benefits for disabled children	It is significant for children to interact with nursery staff
	Benefits for parents	Parents can rest or do other activities
	Financial burden on parents	It is difficult for unemployed mothers to pay a daily care fee of 2,000 yen
	Nurturing the environment of sick child care facilities	It is necessary to increase the number of staff members and procure more facility equipment
Children with physical and psychological discomfort	Reasons	The child has problems at school The child is unable or does not want to attend school
	Care	Interacting with children on a one-to-one basis Listening to children's worries Interacting with children in a manner encouraging them to attend school

Table 4: Care for children.

Categories	Subcategories	Labels
Avoidance of arriving at the workplace late and leaving early	Measures taken by care service users	Using a sick child care facility located near one's residence or workplace Using a sick child care facility located between one's residence and workplace Using a sick child care facility located on a street free from morning traffic congestion Making a reservation the day before Beginning to wait at the care facility 15-30 minutes before opening
	Measures taken by staff members	Beginning to accept reservations one hour before the start of business hours Going to the care facility earlier to accept reservations from before the start of business hours Reducing the morning business hours based on a specified checklist Looking after children until around 7 PM when their parents are unable to come to the care facility by 6 PM
	Parents' requests	Desire for the same opening hours as nursery school (7 AM to 7 PM)
	Staff members' opinions	Great physical and mental burden on children Great burden on physicians and staff members It is necessary to change all care-related systems, such as pharmacies
Systems for reducing care fees	Users of the systems for reducing care fees	Families receiving welfare support, single parents, non-regular employees, part-time workers, and people working on weekends
	Benefits of the care fee reduction systems for their users	Preventing children from being left alone at home Children impose less of a burden on their parents The care fee reduction systems are helpful for working parents because they do not have to worry about causing trouble for people at their workplace
	Usage of sick child care among users of the systems for reducing care fees	Using the care facility because of mild symptoms Using the care facility for extra days as a precaution Parents do not cancel their reservation
	Burden on parents not using the systems for reducing care fees	Service utilization by more than one child at any one time Having to pay fees for both nursery school and sick child care Frequent use of sick child care after entering a nursery school
	Measures taken by parents not using the systems for reducing care fees	Making children attend nursery school when they only have a fever Relieving the fever of children with antipyretics (suppositories) and making them attend nursery school Cancelling the reservation as the child's symptoms are relieved Making only the younger child attend a sick child care facility, and placing the older child in the care of their grandparents Making the child with milder symptoms attend nursery school Taking the day off from work when both children become sick at any one time Using sick child care for an extra day to avoid the possibility of leaving the workplace early

Table 5: Work support provided at sick child care facilities.