When should I keep my sick child home from school?

A guide for parents with young children

Developed by the Task Force on Sick Child Care, Subcommittee on Education, c/o United Way Fox Cities, 1820 Appleton Road, Menasha, WI 54952, 920-954-7210. This booklet is available on the United Way Fox Cities Web Site at www.unitedwayfoxcities.org.
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Introduction

A sick child can create stress for a family. As a parent, not only are you concerned with the sick child’s care, but you may also be concerned with work deadlines and employment absences if you must stay at home.

Many children with mild illnesses can safely and happily attend childcare or school. A cold, for example, could most likely be handled with over the counter medicine before and after a child’s day away from home. However, parents should always check with the child’s school or childcare center or review the handbook for specific policies that apply to sick children.

What are some signs to watch for to see if your child should stay home from childcare or school? Ask yourself these questions:

- Does my child feel well enough to comfortably participate in the day’s activities at school? A child who is lethargic or whiney would be better off staying home from the program.
- Can the teacher care for your sick child without affecting or risking the care of the other children in the classroom? If not, the child should be kept at home.
- Has the doctor diagnosed a contagious illness in your child and ordered that he or she be kept at home? Illnesses such as pink eye, scabies, head lice, impetigo, strep infection, whooping cough and chicken pox are highly contagious. Keep your child home and separated from other children to risk passing the illness onto others.
- Does your child have any of the following symptoms?
  - Fever above 100 degrees Fahrenheit for school age children or 100.5 degrees Fahrenheit for infants and toddlers, and the child looks and acts ill,
  - Signs of severe illness such as uncontrolled coughing, difficulty breathing, wheezing, persistent crying or lethargy,
  - Diarrhea, such as loose or runny stools, a stool that runs out of a diaper, or a sick child that cannot make it to the bathroom in time,
  - Vomiting: once your child has vomited, most programs require that your sick child may not return to school or daycare for a minimum of 24 hours per state law,
  - Any kind of rash, especially one accompanied by a fever or a change in behavior.

It is important that parents consider the other children in the class or group when thinking about whether or not to send their child to school. Remember the golden rule: “Do onto others as you would have them do onto you.” As a parent, you wouldn’t want your child playing with a child that has signs of illness. Other parents feel the same as you do.

It is not uncommon for parents to drop off a child who has a fever or has recently vomited because of their own work arrangements. A major health risk is thus presented to all of the children in the program and is very unfair to the child who is ill. A sick child needs plenty of rest and tender loving care.
# Earache

<table>
<thead>
<tr>
<th>My Child has…</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
</table>
| An earache    | • Pulling or scratching at the ear, accompanied by the following:  
1. hearing problems  
2. crying, irritability  
3. fever  
4. vomiting  
5. ear drainage  
• In young children, adolescents, and adults, look for:  
1. earache  
2. feeling of fullness or pressure  
3. hearing problems  
4. dizziness, loss of balance  
5. nausea, vomiting  
6. ear drainage  
7. fever | Yes, it is important to have a child’s ears checked for the chance of infection. If the child is comfortable enough to be at school, he or she may return after having a confirmed ear infection, since it is not contagious.  
Yes, if a fever is present, the child is vomiting or the child is under two years of age. | Yes, child needs to have ear examined.  
Take medication as directed. |
# Sore Throat

<table>
<thead>
<tr>
<th>My Child has…</th>
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<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
</table>
| A sore throat  | • Severe and prolonged sore throat  
• Difficulty breathing  
• Difficulty swallowing  
• Difficulty opening the mouth  
• Joint pain  
• Earache  
• Rash  
• Fever above 100 degrees Fahrenheit for school age children or 100.5 degrees Fahrenheit for infants and toddlers,  
• Blood in saliva or phlegm  
• Frequently recurring sore throat  
• Lump in neck  
• Hoarseness lasting over two weeks | Yes, if the sore throat is severe.  
Yes, if it persists longer than the usual 5-7 day duration of a cold or flu.  
Yes, if it is not associated with an allergy or irritation.  
Take medication as directed by the physician, and return to school after on antibiotics for 24 hours. | Yes, if any symptoms described in this chart are present. Keep child home until he or she is without fever for 24 hours and throat pain is resolved. |
## Fever

<table>
<thead>
<tr>
<th>My Child has...</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
</table>
| A fever: oral, rectal or axillary (armpit) temperature above 100 degrees Fahrenheit for school age children or 100.5 degrees Fahrenheit for infants and toddlers | • Crying  
• Lack of appetite  
• Mild aches/pains  
• Vomiting  
• Diarrhea  
• Irritability  
• Mild weakness  
• Sore throat  
• Difficulty swallowing  
• Rash  
• Pain with urination  

**The following symptoms may indicate a serious condition and need medical care or evaluation immediately.**  
• Extreme weakness  
• Difficulty breathing  
• Had a seizure with fever  
• Stiff neck  
• Confusion  
• Severe headache  
• Rash with purple or blood colored spots. | Yes, if fever goes above 104 degrees Fahrenheit. (Parents should note that sometimes doctors want to be contacted if the child has a fever of 102 degrees Fahrenheit or above.) | Yes, if your child is not able to participate comfortably in all scheduled activities (including outdoor play). |
| | | Yes, if your child is younger than 12 weeks of age and has a fever greater than 100.4 degrees Fahrenheit rectally. | Yes, if fever is accompanied by any of the symptoms described in this chart. |
| | | Yes, if fever lasts more than 3 days (72 hours). | **Child should not be left home alone.** |
| | | Yes, if your child looks or acts very ill. | |
RASHES

Rashes may have many causes, including heat, infection, illness, reaction to medications, allergic reactions, insect bites, and other skin irritations.

<table>
<thead>
<tr>
<th>My Child has…</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red or pink rash over large or small areas of the body</td>
<td>• Fever • Headache • Diarrhea • Sore throat • Vomiting • Rash that is bright red &amp; sore to the touch • Joint pain</td>
<td>Yes, if there is joint pain, fever, or sore throat.</td>
<td>Yes, if your child is not able to participate in all scheduled activities (including outdoor play).</td>
</tr>
<tr>
<td>Hives</td>
<td></td>
<td>Yes, if there are red streaks, swelling or tender areas.</td>
<td>Yes, if rash is accompanied by any of the symptoms described in this chart.</td>
</tr>
<tr>
<td>Red spots (large or small)</td>
<td></td>
<td>Yes, if there are large blisters on skin.</td>
<td></td>
</tr>
<tr>
<td>Small blisters</td>
<td></td>
<td>Yes, if skin is bright red or sore to the touch.</td>
<td></td>
</tr>
<tr>
<td>Purple or blood colored spots</td>
<td></td>
<td>Yes, if your child looks or acts very ill.</td>
<td></td>
</tr>
</tbody>
</table>

**The following symptoms may indicate a serious condition and need medical care or evaluation immediately.**

- Sudden onset of rash with difficulty breathing or swallowing
- Rash or hives all over body (may be allergic reaction)
- Extreme weakness
- Purple or blood colored spots
## Red, Itchy, Watery Eyes

<table>
<thead>
<tr>
<th>My Child has...</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red, Itchy, Watery Eyes</td>
<td>• Swelling and redness of the clear membrane of the eyelid and eye</td>
<td>Yes, if you are not sure of allergies.</td>
<td>• Not if the child has known allergies that could be causing this reaction.</td>
</tr>
<tr>
<td></td>
<td>• Mild to severe itching</td>
<td>Yes, if your child looks or acts very sick.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Redness, tearing, swelling</td>
<td>Yes, if the eyelid is very red or very swollen.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Burning or a sensation of fullness in the eyes or eyelids</td>
<td>Yes, if constant tearing or blinking.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Urge to rub the eyes</td>
<td>Yes, if eye pain or blurred vision.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Sensitivity to light</td>
<td>Yes, if your child is younger than 12 weeks of age and has a fever greater than 100.4 degrees Fahrenheit rectally.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Occasionally, blurred vision</td>
<td>Yes if your child is less than 1 month old.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• No pus or other discharge</td>
<td>Yes, if only 1 eye is red and present for more than 24 hours.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Does the child have a cold?</td>
<td>Yes, if a green or yellow discharge develops.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes if the redness lasts longer than a week.</td>
<td></td>
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</tbody>
</table>
# Head Lice

<table>
<thead>
<tr>
<th>My Child has…</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Lice</td>
<td>• Itching</td>
<td>Yes, if the child is less than 2 years old.</td>
<td>Yes, until one day after treatment with medicated shampoo.</td>
</tr>
<tr>
<td></td>
<td>• Irritability</td>
<td>Yes, if the child doesn’t get rid of the lice.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Tickling or crawling</td>
<td>Yes, if the child has infected sores that are tender and do not heal.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>sensation in hair</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Examine hair and scalp</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>for eggs and adult lice</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Comb through hair with a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>fine comb to look for nits</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>– may need to use a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>magnifying glass</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Nits stick to the hair</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>unlike dandruff which</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>can be blown away</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Nits could be on the</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>scalp, in the hair</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>behind the ears or at</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>the back of the neck</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>near the neckline.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Respiratory Disorders

<table>
<thead>
<tr>
<th>My Child has…</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
</table>
| Common cold / flu | • Fever above 100 degrees Fahrenheit for school age children or 100.5 degrees Fahrenheit for infants and toddlers,  
• Headache  
• Stuffy / runny nose  
• Cough  
• Severe aches or pains  
• Fatigue  
• Sore throat  
• Exhaustion | Yes, if unable to bring fever down.  
Yes, if other symptoms have not improved within 5 – 7 days. | Yes, if fever is above 100 degrees Fahrenheit for school age children or 100.5 degrees Fahrenheit for infants and toddlers, severe aches or pains, fatigue, sore throat and exhaustion are present.  
Child should not be left home alone if coughing results in vomiting. |


# Vomiting

<table>
<thead>
<tr>
<th>My Child is...</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vomiting</td>
<td>• fever</td>
<td>Yes, if there is severe vomiting, lack of tears (dehydration), or if present with sore throat, severe headache, fever; neck pain or if related to an injury or poisoning, seek medical care.</td>
<td>Yes, child should stay home from school until symptom free for 24 hours.</td>
</tr>
<tr>
<td></td>
<td>• sore throat</td>
<td>If neck pain is present, child becomes unconscious, unable to respond to simple commands, there is blood or fluid in the ear, head wound, bleeding, sleepy or confused, call 911.</td>
<td><strong>Child should not be left home alone.</strong></td>
</tr>
<tr>
<td></td>
<td>• headache</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• severe vomiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• other symptoms of illness</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• -injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• -poisoning</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If vomiting is related to poisoning contact Poison Control Center for instruction at 1-800-222-1222. Never induce vomiting unless instructed to do so.
### Stomach Ache

<table>
<thead>
<tr>
<th>My Child has...</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
</table>
| A stomach ache  | • Illness  
|                 | • hunger  
|                 | • overeating  
|                 | • diarrhea  
|                 | • food poisoning  
|                 | • menstrual difficulties  
|                 | • psychological issues  
|                 | • constipation  
|                 | • gas pains  
|                 | • fever  
|                 | • injury  | Yes, if severe or related to injury or poisoning. | Yes, if child is vomiting or has severe stomach pains.  
|                 | | | Yes, if stomachache persists after resting, eating and toileting.  
|                 | | | Yes, if pain is related to injury or poisoning, keep child from school until symptom free 24 hours.  
|                 | | | No, if no injury or illness or other symptoms and you allow child to rest 20 minutes, offer food, encourage use of toilet. If child feels normal, child may be at school.  
|                 | | | **Child should not be left home alone if vomiting.** |
## Headache

<table>
<thead>
<tr>
<th>My Child has...</th>
<th>What else should I look for?</th>
<th>Do I contact the Dr.?</th>
<th>Should I keep him/her home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A headache</td>
<td>• Signs of injury</td>
<td>Yes, if headache is related to an injury, or with fever or other symptoms of illness, such as nausea and vomiting or neck pain and stiffness.</td>
<td>Yes, if headache is severe, or with fever or other illness, or related to an injury—keep child from school until symptom free 24 hours. <strong>Child should not be left home alone.</strong></td>
</tr>
<tr>
<td></td>
<td>• Other symptoms of illness</td>
<td></td>
<td>No, if headache is not severe, consider offering pain reliever, child may be at school. Monitor for other symptoms to develop.</td>
</tr>
</tbody>
</table>
I need to go to work but my child needs to stay home from school. So what do I do now?

If you are a parent who needs to go to work even though your child should stay home from school, here are some options to consider when arranging for someone to stay with your child:

- Grandparents
- Other relatives
- Extended family members
- Friends
- Neighbors
- Members of your church
- Other parents from the school your child attends
- Co-workers from another shift at work
- Past babysitters
Can I leave my child home alone?

When deciding if you can leave your sick child home alone, here are some factors to consider:

- Is my child old enough or mature enough to be left home alone?

- Is my child running a high fever or is my child vomiting?

- Is there a place nearby where an adult lives or works and where my child can go to for help?

- Does my child have special medical, physical or emotional needs?

The next two sections of this book will help you to assess whether or not your child is ready for self-care and, if so, how to prepare your child for self-care.
Assessing Your Child’s Readiness for Self-Care

Each day after school, several million children come home alone and take care of themselves while their parents work. In earlier times, they were called latchkey children because they used their own key to let themselves into the house.

Today, the practice of letting children stay home alone is commonly called self-care. Many children take care of themselves after school, in the evenings, or on weekends, or vacations—whenever a parent or other adult can’t be home with them.

When the time is right, staying home alone can be a positive experience for children. A child in self-care may become more responsible and often will feel proud about staying home alone, if he or she is ready for it.

HOW CAN YOU TELL IF YOUR CHILD IS READY TO STAY HOME ALONE?

There is no magic age when children develop the maturity and good sense they need to stay alone. Some children display these abilities around age 12, or even sooner; others do so when they’re older.

There are signs that show your child may be ready. For example, if your child can get ready for school on time, do homework with little assistance and talk to you about his or her feelings, he or she may be ready to stay home alone.

When assessing your child’s readiness for self-care, you’ll want to consider his or her maturity in four areas: physical, mental, social and emotional. Here are some questions to ask yourself.

SIGNS OF READINESS FOR SELF-CARE

The following checklist will help you evaluate your child’s readiness. Check (x) “Yes” or “No” for each item.

1. Is your child physically ready to stay alone?
   
   Is your child able to:
   
   • Lock and unlock the doors and windows of your home? (   ) (   )
   • Perform everyday tasks such as fixing a sandwich, dialing the telephone and writing messages? (   ) (   )

2. Is your child mentally ready to stay alone?
   
   Does your child:
   
   • Tell time? (   ) (   )
   • Understand what “stranger” and “emergency” mean? (   ) (   )
   • Recognize danger and know how to stay safe? (   ) (   )
   • Solve small problems on his or her own, but knows when to get help? (   ) (   )

---

1 Project HOME SAFE Children in Self-Care, 1555 King Street, Alexandria, Virginia 22314 (703) 706-4600. 1989 Whirlpool Corporation and American Home Economics Association. Permission to reprint brochure is granted to educational and non-profit organizations.
• Consider how his or her actions affect others?  

Yes No

( ) ( )

3. Is your child socially ready to stay alone?
Does your child:
• Solve conflicts with brothers and sisters with little help from adults? ( ) ( )
• Talk easily to you about what happens at school, and about his or her feelings? ( ) ( )
• Feel confident enough to contact another adult if a problem arises? ( ) ( )

4. Is your child emotionally ready to stay alone?
Does your child:
• Feel confident and secure when alone? ( ) ( )
• Seem willing to stay alone? ( ) ( )
• Know how to handle fear, loneliness and boredom? ( ) ( )
• Know how to handle responsibility, such as getting ready for school on time and looking out for younger brothers and sisters? ( ) ( )

You may have to do some detective work to answer these questions. Try asking your child to open a window, fix a sandwich, take a message and answer the door. Play a “What if?” game to learn if your child could handle emergency situations safely. Ask, for example, what should be done if the smoke alarm sounds or if he or she gets a bad cut when home alone. Whenever possible, have your child act out his or her response. Sometimes children can give the right answer but can’t do what is needed.

If you can answer “yes” to most of the above questions, your child is showing signs of the physical, mental, social and emotional maturity needed for self-care. Your child needs to be capable in each of these four areas before he or she will be safe and secure staying home alone.

OTHER CONSIDERATIONS

Even if your child does seem mature enough for self-care, you’ll need to think about some other factors:

• Is your home safe?
• Is your neighborhood safe?
• How long will your child be alone each day?
• Is there a place nearby where an adult lives or works, and where your child can go for help?
• Does your child have special medical, physical or emotional needs?
• Is your family going through a difficult transition period due to a recent move, death, divorce or remarriage?
There are certain times when self-care is not a good idea. It is never good if your home or neighborhood is not safe.

Many children do best in self-care when they’re not home alone for more than an hour or so at a time. However, this varies for different children and different settings. For example, more mature children in a neighborhood with several adults nearby may be all right for somewhat longer periods. For younger children or children in less supportive settings, an hour may be too long. You will need to decide if the time alone will be too much based on your child and setting.

Children in self-care do best when they’re not overburdened by caring for younger siblings. Children caring for siblings need to be even older and more mature than other children ready for self-care. The younger siblings need to be comfortable about staying home without an adult.

Your child will need a special adult he or she can telephone when feeling frightened or lonely, or for help in an emergency. Your child will need a safe place to go in case of a lost key or fire.

Self-care is not a good idea if your child has special needs, or is adjusting to new family circumstances.

ARE YOU READY FOR YOUR CHILD TO STAY HOME ALONE?

Your own feelings as a parent also are important:

• Do you feel comfortable about your child staying alone?
• Are you ready to give your child more independence and freedom?

If you’re confident your child will be safe and will make wise choices while you’re not home, you will feel good about self-care. If you believe he or she actually is willing to stay alone, you’ll be able to feel good about your child and about yourself as a parent.

WHAT COMES NEXT?

If both you and your child seem ready for self-care, and if other factors make staying home alone a good choice, you’ll want to start preparing your child. You’ll need to teach him or her certain skills, and you’ll need to develop rules and schedules.

It can be helpful to try out self-care on a trial basis to see how well it works and to make sure your child likes the new arrangement. For more information, read the next section, “Preparing Your Child for Self-Care.”

If you don’t think your child is ready to stay home alone regularly, you’ll want to look for a good after-school program.

Remember that assessing your child’s readiness for self-care is an ongoing process. You’ll want to review periodically how well self-care is working out for you and your child.
Preparing Your Child for Self-Care

Are you thinking of having your child stay home alone for a couple of hours each day after school? Some parents are using this arrangement, commonly called self-care, for their children.

Reading the previous section, “Assessing Your Child’s Readiness for Self-Care,” will help you decide whether your child is ready to stay alone. If you’re going to try self-care, you’ll want to prepare your child for the experience. Careful planning and guidance can help children be more safe, productive and self-confident when caring for themselves at home.

TEACH YOUR CHILD WHAT HE OR SHE NEEDS TO KNOW

Children who stay home alone need some basic knowledge and skills. Make sure your child knows:

- **Important Names and Telephone Numbers.**
  Your child should know this information for home and for your workplace. Your child also should know the phone number of a nearby relative or neighbor and emergency numbers, such as the all-purpose 911 helpline. Post a list of these important numbers by the telephone. A form is enclosed in this booklet to assist you with posting important telephone numbers.

- **When You’ll Be Home.**
  Your child should know your schedule, as well as how to tell time.

- **How to Use the Telephone.**
  Your child needs to know how to make a telephone call, and write messages.

- **How to Enter and Exit the House.**
  Your child must be able to keep track of his or her keys and know how to lock and unlock doors easily.

- **What Appliances to Use and How to Use Them.**
  Your child must know what appliances you have approved for his or her use while home alone and how to operate them safely.

- **Where to Go for Help.**
  Your child needs an adult who lives or works nearby who’ll help in case of an emergency or lost key.

When preparing your child, make directions clear and simple. Explain one thing at a time, and talk slowly. If some information seems complex or may not be needed often, write it on paper. Then post it on the refrigerator or other place that is clearly visible.

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2 Project HOME SAFE Children in Self-Care, 1555 King Street, Alexandria, Virginia 22314 (703) 706-4600, 1989 Whirlpool Corporation and American Home Economics Association. Permission to reprint brochure is granted to educational and non-profit organizations.
Have a few practice runs to make sure your child understands the knowledge or skills he or she will need. Go over this information regularly—a good time for review is Sunday, before the weekly routine begins.

TALK ABOUT SAFETY

Prepare your child to be safe everyday, and in an emergency. Assure your child that emergencies are rare, but that everyone needs to know what to do just in case there’s trouble.

Everyday Safety—Your Child should know:

- **How to Come Home Safely**
  Children should always walk home from school along well-traveled routes that have been approved by their parents. They should let themselves into their homes quickly and lock the door behind them. If a stranger follows your child, or if your home shows signs of a break-in, (for example, a door ajar or a window broken), your child should go directly to a neighbor’s home or a nearby store.

- **How to Check In**
  Once home, your child should telephone you or a special adult who lives or works nearby to report that he or she is safe.

- **How to Answer the Telephone**
  Children home alone should tell callers, “My mom/dad is busy right now. May I take a message?” They should not tell callers that you are not home.

- **What to Do if Someone Comes to the Door**
  Children should use a peek hole to see who is at the door. They should let in only people a parent has said may come in.

In an Emergency—Your child should know what to do if there is:

- **A Fire**
  Plan an escape route and practice using it. Tell your child to leave the house first, and call the fire department from a neighbor’s home later.

- **An Injury**
  Teach your child basic first aid, and when to call for help. For example, children need to know how to wash and bandage a cut, how to apply pressure if there’s a lot of bleeding, and how to pinch their nose if they have a nosebleed.

- **Bad Weather**
  Plan and practice what to do if the electricity goes out, and where to go if there’s a severe weather warning.

- **Any Change in Routine**
  Plan and practice what to do if school unexpectedly lets out early or if neighbors aren’t home. Also, children should be taught to contact an adult and report a problem even if they feel they can handle it on their own.
WORK TOGETHER TO MAKE HOUSE RULES

After your child understands safety, you should develop reasonable house rules. Having your child help you plan these rules will go a long way toward ensuring that the rules are remembered and followed.

Most parents make rules about several things, including:

- **Visitors**
  Decide if friends will be allowed to come to your home, and if so, which friends.

- **Boundaries**
  Decide if your child will be allowed to play outside or go to the library, the park, or a friend’s house.

- **Telephone Use**
  Decide how long your child can talk on the telephone so you don’t always get a busy signal when you call.

- **Siblings**
  Each child who stays home without an adult needs to understand and follow the rules. Household chores should be divided in advance so that each child knows what to do. Make it clear if an older child is to be “in charge” of a younger one or if they’re to be responsible only for themselves. State how you expect them to resolve conflicts or report problems.

PLAN A SCHEDULE TOGETHER

You can be involved in your child’s after-school time by helping him or her plan for it. Discuss interesting and acceptable things your child can do while you’re gone, and then let your child choose. Make a long list of “do’s” and a short list of important “don’ts.”

If your child regularly watches television, sit down together with the TV guide to make a list of good shows he or she might want to watch while you’re not home. Plan nutritious snacks your child will enjoy.

Many children are expected to do certain household chores after school. Choose chores that your child can do without an adult around. Children also may do their homework when they’re home alone. Plan to spend some time answering your child’s homework questions after you come home.

Time after school can be relaxing, creative and productive. It can be a special time for hobbies and recreation. Your child may want to read, do arts and crafts, or practice a musical instrument while staying home alone. Many children enjoy simply having some quiet time to themselves after a busy day at school.

GIVE YOUR CHILD RESOURCES

Children need to have certain things available if they stay home alone, including:
• **Emergency Packet**
  Your child should always carry a piece of paper with your workplace telephone number written on it, as well as money (for a pay phone or taxi) in a small packet pinned inside a pocket or backpack.

• **Check-in Person**
  An adult who lives or works near your home should be available to check that your child arrives home safely and to help during an emergency.

• **Telephone Number List**
  As noted earlier, all important phone numbers—yours, a nearby relative’s or friend’s and emergency numbers—should be written and posted near the telephone.

• **List of House Rules**
  These also should be written and posted to remind your child what to expect when you’re gone.

• **First Aid Kit**
  Band-Aids, bandages, first aid cream and other basic supplies should be kept on hand in a special place, along with instructions on simple first aid procedures.

• **Bad Weather Kit**
  Put a flashlight, transistor radio and some comic books in a box your child can find easily if there is a power failure or a severe weather warning.

• **Emotional Support**
  Having a pet may help your child feel more secure or less lonely when home alone. Arranging for your child to attend a club or sports activity during the week can provide a refreshing break. Leaving your child a loving note will let him or her know that you care.

**USE A TRIAL PERIOD**

Once your child is prepared to stay alone, set up a trial period to see how he or she adjusts. This will give both of you the chance to end the arrangement if either of you is uncomfortable.

If for some reason self-care doesn’t work out, you’ll want to look for a good after-school care program. Even if you continue self-care, you may want to find a program to use on holidays and during summers.

**TALK AND LISTEN**

Throughout the trial period and afterwards, if your child continues to stay alone, *talk to each other often*. Good communication is the key to a successful self-care experience. Find out how your child really feels about staying alone. Are the rules working? Does he or she feel safe? Encourage your child to discuss any fears, questions or problems. Make changes when needed. Sometimes a new schedule or different rules will work better.

Again, remember to review everything you’ve taught your child. Children forget easily and need to be reminded of important information. Play “what if?” games—where you ask a
question and your child acts out the answer. Ask your child, “What if someone comes to the door?” or “What if you lose your keys?”

With proper preparation and good communication, your child is more likely to be safe and secure staying home alone. Moreover, you and your child can be more confident that the experience will be a positive one.
Emergency Telephone Numbers

Mother’s work number: ____________________________

Father’s work number: ____________________________

Grandparents’ number: ____________________________

Physician’s number: ____________________________

Hospital number: ____________________________

Affinity Nurse Direct number: 920-738-2230

ThedaCare On Call: 920-830-6877

Other relatives:
____________________  ____________________________
____________________  ____________________________
____________________  ____________________________
____________________  ____________________________

Other numbers:

Non-Emergency Information & Referral in the Fox Cities 211

Child Care Resource & Referral in the Fox Cities 920-734-0966

____________________  ____________________________
____________________  ____________________________