**Rhosymedre Community Primary School**

**Toileting Policy**



This document is a statement of the aims, principles and procedures at Rhosymedre Community Primary School.

Signed……………………………………………….. (Head teacher)

Date………………………………………………….

Signed………………………………………………. (Chair of Governors)

Review date: October 2019

**Wrexham County Borough Council**

**Education Department**

**Guidance for Developing Toileting Skills**



**Introduction**

Wrexham school population has increased steadily over recent years. With many three year olds now in school settings, the numbers of children in schools who are not toilet trained on entry to school, due to a range of reasons, has also increased. This has caused some anxiety amongst school staff, professionals and parents/carers. It is therefore, more important than ever for school staff to have good relationships with all parties involved to ensure information on children is shared to address the skills required for successful toileting.

Toilet training is sometimes a difficult skill to master, even in typically developing children. There are many reasons why a child may not have acquired the skills on entry to school. These range from social influence to more obvious reasons such as developmental factors.

1. **Developmental Factors**

Continence is achieved through the processes of socialisation and physiological / emotional / cognitive maturation. A child must know the difference between the feeling of wet and dry before training starts. The child also needs to be ready with regard to motor skills development. For example, she/he needs to be able to physically access the toilet area, sit on the toilet, remove garments, dress again, and flush the toilet.

To be successful, the child also needs to be able to communicate toileting needs, to understand instructions and be comfortable with familiar adults. The child must also be emotionally ready. He/she must want to use the toilet and have the desire to stop wearing nappies.

Children can experience fears around using the toilet. Emotional factors such as stress, anxiety, physical fatigue can lead to delay in achieving continence and, sometimes, regression. Young children can have accidents because they forget to pay attention to their own body signals when they are too busy or pre-occupied.

Some children’s developmental or learning disability needs will have an impact on their ability to toilet train, resulting in a longer slower process to acquire the skills necessary. This will require the support of school staff to learn this skill in a consistent and supportive manner. A child with these needs may have additional factors which include:

* Difficulty understanding reciprocal relationships limits understanding of being a “big boy” or “big girl”.
* Difficulty understanding language or imitating modelled behaviour.
* Difficulties with attention, organisation and sequencing information may cause problems in following all the steps in toileting and staying focused on the task.
* Difficulty accepting changes in routine, i.e. why does the child need to change the familiar routine of wearing and passing body waste into a nappy which is a strongly established routine.
* Difficulty with integrating sensory information and realising the relationship between body sensation and daily functional activity.
* Difficulty with sensory sensitivities e.g. loud flushing noises, echoes, rushing water, sitting on a “chair with a big hole with water in it”, changes in temperatures and tactile sensations when clothes are removed.
* Display challenging behaviours due to a range of the above.

In addition to those children with developmental delay, some children will have physiological reasons which explain a delay in toileting skills, whilst some children may have psychological reasons which need supporting and rewarding in school. These children and their families quite often have involvement from the Preschool Development Team, the Children’s Learning Disability Health team or the Children’s Continence Team and these services may need to support school staff.

1. **Planning a Programme**

A positive routine around toileting and collect information from parents/carers about the child’s readiness for training should be established.

On receipt of this, the Toileting Skills Checklist should be completed. This breaks down the skills associated with achieving independent toileting into small steps. This can provide a baseline measure of the child’s current skill level and can be used to plan achievable next-step targets.

If the answers to the first 4 statements in the Toileting Skills Checklist are “not achieved”, then the child is probably not ready for a goal of independent toileting. However, a goal of establishing positive toileting routines may still be appropriate. Consideration should be given to who is involved and the environment in which training takes place.

**Who:** Identify the adults who are responsible for supporting with toileting difficulties. Staff should be fully aware of the recommended protocol regarding supporting children with developing toileting skills. This should be shared with parents. Staff will need to work closely with parents and outside agencies such as Pre-school Development Team to establish consistent routines and appropriate shared goals.

**Where:** Toilet areas in school should be comfortable and non-threatening so that children are happy to be there. There should be private areas with closed doors for changing children to maintain an appropriate level of respect and discretion. Appropriate equipment such as changing mat, disposable gloves, sanitary disposal bin etc., should be readily available. A changing table may be necessary for bigger children with particular disabilities. There should be a consistent approach in all environments e.g. home and school. There should be a standard clean-up procedure, carried out in an emotionally neutral manner while directing the child through developmentally appropriate clean-up activities. Relaxed children will be more successful.

1. **Strategies for effective toileting**
* Establish the routine of the child going to the toilet with peers so that she/he has positive models to imitate.
* Some children may need distraction toys/books and sometimes music to help them relax when they go to the toilet.
* Encourage the child to help with the process by fetching appropriate items etc.
* It may be appropriate to establish a visual system as an additional teaching routine. At the most basic level, a transition object prompts the child to know that the toileting routine is starting. An object associated with toileting, e.g. a toilet roll may be shown to direct the child to the toilet. At a more abstract level a photograph or a line drawing of the toilet or the word on a card may be given to the child or put in a visual schedule. An object sequence, a picture/photograph/symbol sequence or written list can help a child to follow and complete the set routine.
* Have a role play activity available, with dolls that wet, use potties, changing equipment etc. Encourage the child to celebrate the dolls success with similar reinforces that you would use with the child, e.g., clapping, praising, stickers etc.
* Read picture story books about toilet training with the child and make them available for them to look at in the play area.
* Take the child to the toilet area on a regular and frequent basis. Use a timer set at regular, frequent intervals. Increase the amount of time in setting the timer as the child remains dry for longer periods of time.
* If the child is very fearful and resists sitting on the toilet:
	+ Allow to sit without removing clothes
	+ Allow to sit with toilet covered (cardboard under the seat, gradually cutting a larger hole in it)
	+ If strategies are helpful for sitting in other places, use in this setting also e.g. “good sitting “ picture cue card
	+ Take turns sitting, using a doll as a model
	+ Help him/her to understand how long (sing a song in full, set timer to a minute)
	+ As he/she begins to tolerate sitting, provide with entertainment and meaningful reinforces
* If the child is afraid of flushing:
	+ Don’t flush until there is something to flush
	+ Start flush with child away from toilet, perhaps standing at the door
	+ Give advance warning of flush, such as “ready, set go!”
	+ Allow child to flush
* If the child is overly interested in flushing or playing with toilet water:
	+ Physically cover the toilet handle to remove from sight
	+ Use a visual sequence to show when to flush
	+ Give something else of interest to hold and manipulate
* If the child is overly interested in playing with the toilet paper:
	+ Remove it if it’s a big problem
	+ Roll out amount ahead of time
	+ Give visual clue of how much, such as putting a line on the toilet paper
	+ Try different materials
	+ Take turns with a doll
* Bad aim:
	+ Supply a “target” in the water e.g. ping pong ball
	+ Add food colouring in water to draw attention
* Retaining when nappy is removed:
	+ Cut out bottom of nappy gradually, while allowing child to wear altered nappy to sit on the toilet
	+ Use doll to provide visual model

**References**

“Successful Potty Training” by Heather Welford: The National Childbirth Trust.

This is a popular book available for loan under the Bibliotherapy: Book Prescription Scheme. It provides useful tips and addresses the issue of disability in toilet training.

<http://www.bladderandboweluk.co.uk>

**Appendix 1: Toileting Skills Checklist**

|  |  |
| --- | --- |
| **Child’s Name:­­­­­­­­­­­­**  |  |
| **Please state if child is wearing nappies or pull-ups:**  |  |
|  | **Skills** | **Achieved** | **Partly Achieved** |
|  | Awareness of toileting needs? |  |  |
|  | Has periods of being dry? |  |  |
|  | Some regularity in wetting / soiling? |  |  |
|  | Pauses while wetting / soiling? |  |  |
|  | Shows some indication of awareness of soiling? |  |  |
|  | Shows some indication of awareness of wetting? |  |  |
|  | Understands signs / words given for communicating toileting needs e.g. toilet, potty, wet, dry, wee, poo etc.? |  |  |
|  | Can express some appropriate signs / words to communicate toileting needs? |  |  |
|  | Needs physical aids / support to access the toilet area? |  |  |
|  | Can access the toilet area with prompts? |  |  |
|  | Can access the toilet area independently? |  |  |
|  | Feels comfortable and relaxed in the toilet area? |  |  |
|  | Needs physical assistance to follow toilet routines e.g. lining up to go there, hand washing etc? |  |  |
|  | Needs some prompting to follow toilet routines? |  |  |
|  | Follows some toilet routines independently? |  |  |
|  | Will fetch and pass required changing items e.g. nappy, wipes etc? |  |  |
|  | Cooperates with having clothes removed / pulled down by appointed adult, for changing purposes? |  |  |
|  | Cooperates with having nappy changed? |  |  |
|  | Cooperates with cleaning up procedures? |  |  |
|  | Will sit on the potty with nappy on, with physical support? |  |  |
|  | Will sit on the potty with nappy on, unaided? |  |  |
|  | Will sit on the potty with nappy off, with physical support? |  |  |
|  | Will sit on the potty with nappy off, unaided? |  |  |
|  | Needs physical aids / special supports to enable sitting on the toilet? |  |  |
|  | Will sit on the toilet with nappy on, with physical support? |  |  |
|  | Will sit on the toilet with nappy on, unaided? |  |  |
|  | Will sit on the toilet with nappy off, with physical support? |  |  |
|  | Will sit on the toilet with nappy off, unaided? |  |  |
|  | Has passed urine into potty? |  |  |
|  | Has had bowel movement on potty? |  |  |
|  | Has passed urine on toilet? |  |  |
|  | Has had bowel movement on toilet? |  |  |
|  | *Can independently complete pulling down trousers from:* | **Achieved** | **Partly Achieved** |
|  | * Calves
 |  |  |
|  | * Knees
 |  |  |
|  | * Thighs
 |  |  |
|  | * Hips
 |  |  |
|  | * Waist
 |  |  |
| 1. 34
 | *Can independently complete pulling down underwear from:* | **Achieved** | **Partly Achieved** |
|  | * Calves
 |  |  |
|  | * Knees
 |  |  |
|  | * Thighs
 |  |  |
|  | * Hips
 |  |  |
|  | * Waist
 |  |  |
| **35** | **Girls:** Can lift skirt and pull down all necessary clothing independently |  |  |
| **36.** | **Boys:** Can pull down all necessary clothing independently |  |  |
| **37.** | Will put toilet lid/seat in appropriate position |  |  |
| **38.** | Will sit on the toilet and pass urine on a regular basis |  |  |
| **39.** | Will stand at urinal/toilet to pass urine  |  |  |
| **40.** | Will sit on the toilet for a bowel movement on a regular basis |  |  |
| **41.** | Needs assistance to get off the toilet |  |  |
| **42.** | Will get off the toilet without assistance |  |  |
| **43.** | Will get toilet tissue appropriately |  |  |
| **44.** | Will wipe themselves with tissue |  |  |
| **45.** | Will throw tissue in the toilet |  |  |
| **46.** | Will flush the toilet |  |  |
| 47. | Will replace toilet seat / lid appropriately |  |  |
| ***48.*** | *Will independently complete pulling up underwear from:* | **Achieved** | **Partly Achieved** |
|  | * Hips
 |  |  |
|  | * Thighs
 |  |  |
|  | * Knees
 |  |  |
|  | * Calves
 |  |  |
| ***49.*** | *Will independently complete pulling up trousers from:* | **Achieved** | **Partly Achieved** |
|  | * Hips
 |  |  |
|  | * Thighs
 |  |  |
|  | * Knees
 |  |  |
|  | * Calves
 |  |  |
| **50.** | Can manage fastenings independently |  |  |
| **51.** | Girls: Can rearrange skirt appropriately |  |  |
| **52.** | Needs prompting to wash hands |  |  |
| **53.** | Needs help to roll up sleeves |  |  |
| **54.** | Can roll up sleeves independently |  |  |
| **55.** | Needs help to operate taps |  |  |
| **56.** | Will operate taps independently |  |  |
| **57.** | Will hold hands under water for appropriate length of time |  |  |
| **58.** | Will put soap on hands with help |  |  |
| **59.** | Will put soap on hands independently |  |  |
| **60.** | Rinses off soap |  |  |
| **61.** | Needs assistance to dry hands on towel |  |  |
| **62.** | Dries hands independently and appropriately |  |  |
| **63.** | Puts used towel in bin with prompting |  |  |
| **64.** | Puts used towel in bin without prompting |  |  |
| **65.** | Will follow all toilet routines regularly with prompts and reminders |  |  |
| **66.** | Has frequent accidents |  |  |
| **67.** | Has occasional accidents |  |  |
| **68.** | Will follow all toilet routines independently |  |  |
| **69.** | Needs prompting to return to class |  |  |
| **70.** | Returns to class independently  |  |  |

Please note that some children will be unable to do some of the above without adult assistance.

**Appendix 2: Flowchart**

**Lack of Training / Developmental Delay**

**Medical Need**

Before entry to school, if appropriate liaise with feeder playgroups, private nurseries or childminders to gather information about the child’s medical needs.

Before entry to school, if appropriate, liaise with feeder playgroups, private nurseries or childminders to gather information about the child.

School to check that the child has already been referred to/involved with GP/Health Visitor, school nurse/ Learning Disability Nurse and any other relevant professional

During induction sessions in the summer term, gather as much information about the child from the parents/carers. Stress the importance of children being able to use the toilet independently and encourage parents to address this over the summer holidays.

\*Note that a very young child or a child with developmental delay may not be ready and parents should not feel under pressure.

If not, school to make a referral to the appropriate professional for further assessment via health visitor/school nurse.

If the child is still not toilet trained during the autumn term, liaise with professionals including Health Visitor / School Nurse/Learning Disability Nurse to provide liaison and support into home to develop a training programme. Parents should provide a bag with changes of clothes/wipes/nappies.

Outcome of the assessment will determine next steps in intervention/treatment for the child. Where a healthcare need has been identified, an individual Healthcare Plan should be developed for the pupil in line with the school’s Health Care policy.

Programme implemented and reviewed regularly by appropriate professionals, school staff and parents.

If no improvement, Health Visitor / School Nurse/Learning Disability Nurse refers child to Continence Service to determine next step.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Appendix 3: Toileting Plan Template**

|  |  |  |  |
| --- | --- | --- | --- |
| **Child’s Name** |  | **DOB** |  |
| **Health Visitor / School Nurse** |  | **Date Agreed** |  |

|  |  |  |
| --- | --- | --- |
|  | **Details** | **Action** |
| **1. Working Towards Independence:** e.g. taking learner to toilet at timed intervals, using sign or symbols, any rewards used  |  |  |
| **2. Arrangements for changing of nappy / pad / clothing:** e.g. who, where, when, arrangements for privacy  |  |  |
| **3. Staffing Requirements:** e.g. how many, who,(there should be more than one named person) |  |  |
| **4. Level of Assistance Needed:** e.g. undressing, dressing, hand washing, talking/signing to learner |  |  |
| **5. Infection Control:** e.g. wearing disposable gloves, arrangements for nappy/pad disposal  |  |  |
| **6. Resources Needed:** e.g. special seat, nappies/pull ups/pads, creams, disposable sacks, change of clothes, toilet step etc  |  |  |
| **7. Sharing Information:** e.g. if learner has nappy rash or any marks, cultural or family customs, birthmarks etc |  |  |
| **8. Cleaning**e.g. on rare occasions the use of shower facilities may be required / procedure for this scenario to be confirmed |  |  |

 |
|

|  |  |  |  |
| --- | --- | --- | --- |
| **Parent/carer name (print)** |  | **Name of School Staff member (print)** |  |
| **Signature** |  | **Signature** |  |
| **Review Date** |  |
| **Outcome of Review** |  |

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|  |

**Appendix 4: Toileting Risk Assessment Template**

|  |  |
| --- | --- |
| **Pupil Name:**  |  |
| **Pupil Date of Birth**  |  |
| **Date of Risk Assessment**  |  |
|  | **Yes** | **No** | **Notes** |
| Does the pupil’s weight / size / shape present a risk? |  |  |  |
| Does communication present a risk? |  |  |  |
| Does comprehension present a risk? |  |  |  |
| Is there a history of child protection concerns? |  |  |  |
| Are there any medical considerations (including pain and discomfort)? |  |  |  |
| Does moving and handling present a risk? |  |  |  |
| Does behaviour present a risk? |  |  |  |
| Is staff capability a risk (back injury/pregnancy)? |  |  |  |
| Are there any risks concerning pupil capacity?* General Fragility
* Fragile Bones
* Epilepsy
* Head control
* Other
 |  |  |  |
| Are there any environmental concerns? |  |  |  |
| **If ‘yes’ to any of the above please complete a Health Care Plan**  |
| Signed by:  |  |
| School staff Signature:  |  |