

## Toilet skill assessment instructions

Prior to commencing a toilet training programme it is important to assess if the child or young person (CYP) has all the skills required in order to be trained. By carrying out the assessment not only can skill deficits be identified, but also any underlying pathology, such as constipation/overactive bladder can be identified. Using the Toilet Skill assessment chart, the CYP is assessed and the chart completed as directed, so that any skill deficits or problems are identified which will help inform an individualised toilet skill development programme. Once the CYP achieves each skill e.g. will happily sit on a potty or toilet, tick the relevant box. The more boxes that are ticked 'yes' the more likely the CYP is ready to be formally toilet trained.

The assessment should commence around the age of 24 months, or as soon as it is identified that there is a delay in toilet training, and should be a continuous dynamic process. That is, following assessment a programme is put in place to address any issues that are identified. For example, if the CYP will not sit on the potty or toilet, the family are advised regarding strategies to use, such as engaging the CYP in a pleasurable activity, which will encourage the CYP to sit for an increasing length of time. This programme would then continue until the CYP is able to sit for long enough to complete a void or evacuate their bowels. If the CYP was unable to sit, because of lack of balance etc, referral to an Occupational Therapist (O/T) should be made for assessment for a potty chair/toileting aid.

The CYP would be reassessed every 1-3 months, with the family given an individualized programme to follow in the meantime. The amount of support required for each CYP will depend upon the individual CYP's needs and the family dynamics, with some families needing frequent review and support and others minimal intervention.

Prior to undertaking the assessment a baseline record needs to be taken of the CYP's bowel and bladder habits which will help inform the assessment. The main aim of the bowel and bladder assessment is to identify a maturing bladder that can hold urine for increasing periods of time. In order for this to be identified the frequency of voids needs to be recorded. See appendix one a for information on how to complete a bladder/bowel (toileting chart

A formal toilet training programme should be put in place once the CYP is achieving the skills to enable training to take place.

These include:

- A maturing bladder that can hold urine for increasing lengths of time
- A bowel that is not constipated
- An ability to sit on toilet/potty for sufficient time (with or without support or toilet adaptations)

This toilet skills assessment checklist will form part of a holistic continence assessment, undertaken by a competent health care professional, which may also need to include urinalysis if indicated, and a physical examination to exclude any underlying pathology, if suspected.

Any identified problems such as constipation / overactive bladder / nocturnal enuresis should be addressed using the normal appropriate care pathway.