SIMPLE TOILETING ASSESSMENT

AIM
To provide a simple toileting solution to support child’s independence with toileting and to ensure child sits in optimal position on the toilet.

Procedure
1. Check referral/case notes to establish why and where toileting is required. If this is unclear contact the referrer for more information. Liaise with other’s involved (e.g. CDU, Portage, Physio, SALT) and if the case is likely to require a complex toileting solution STOP and seek advice from Clinical Lead

2. If appropriate arrange an appointment in clinic, home or school setting as appropriate. Ensure an adult with parental responsibility will be present to give consent and make sure they understand the purpose of the assessment.

3. If the referral gives an indication as to the type of toilet solution required it may be possible to have the equipment (via loan stores) and /or represent present for the assessment. If not a second appointment will be needed to assess the child with the specific toileting solution(s) prescribed.

Child Considerations
4. Identify the child and check parent/carer/child’s communication and understanding. Build rapport to ensure they are comfortable and relaxed and ensure they understand the reason for the visit.

5. Ask parent/carer/child how they currently manage re toileting and where they are having problems and document on reasoning record.

6. Undertake objective assessment of child’s baseline physical abilities: Observe their posture and movement and performance skills as per clinical reasoning record. If the child’s condition is more severe than indicated in the referral STOP and seek advice from Clinical Lead.

7. Review the current toileting method and equipment check whether this is adequate or compromises posture & performance through lack of support.

8. Observe the child’s behaviour e.g. unpredictable movements, poor safety awareness. If the child’s behaviour does not allow for satisfactory assessment STOP and seek advice from Clinical Lead.
Environmental Considerations

9. Observe the toilet to be used and note the space around the toilet. Note positions of any fixings (e.g. toilet roll holder) and how the current toileting equipment fits.

10. If the toilet is in an early years or school setting, check the cubicle space, sitting of toilet roll holder, and how the child transfers on/off.

Carer Considerations

11. Take into account the type of carer support the child has (e.g. how do they assist).

12. If the current toilet equipment is unsuitable consider possible solutions as per reasoning record. Consider the impact of any proposed solution on other persons who access these facilities.

13. Arrange an assessment with an alternative toilet solution (ordered from loan stores/via rep). Check the carer can assist the child safely. Ensure written fitting (manufacturers) instructions are available.

14. Following delivery and fitting of toilet equipment, arrange to review the child to check their progress, and to ensure the carer knows who to contact if further advice is needed.

15. Document advice and instructions given to the carer.

16. If the solution identified is unacceptable to the carer/child or the problem is not resolved STOP and seek advice from Clinical Lead
SIMPLE TOILETING ASSESSMENT REASONING RECORD

Name ............................................. DOB.................................

Address .........................................................................................
........................................................................................................

Date of Assessment ....................

People Present:

1. Child Considerations

Medical Conditions:

Reason for Referral & Current problems (reported):

Posture and Movement

Sitting

- Supported sitting: Head Control YES/NO
  Trunk Control YES/NO
- Independent sitting YES/NO

Sit – stand:

- Unable to weight bear – needs full assistance YES/NO
- Can weight bear but needs help YES/NO
- Able to use arms to push self up YES/NO

Upper limb function:

- can use arms to push/pull YES/NO
If child becomes irritable/uncooperative so assessment not possible **STOP and seek advice from clinical lead**

2. **Environmental Considerations**

   Location of toilet(s):
   Toilet size:
   Sketch to show space and fixtures:

   **STOP and seek advice if concerned about proposed location or function of seat**

3. **Carer Considerations**

   How does the carer assist now?

   Does the carer have any medical conditions impacting on their ability to assist?

   Does current equipment make toileting easier?

   Who else uses these toilet facilities?

**Toileting Solutions**

a) If the child is pre-school age and toilet training with poor trunk stability consider a potty chair (e.g. Lecky or Rifton)

b) If the child has head control but poor trunk control consider supportive toilet seats with trunk support (these can be detached from toilet) e.g. Columbia toilet support.

c) If the child has independent sitting but poor postural stability consider toilet seat frame (designed to fit over an existing toilet)

d) If the child has independent sitting and struggles to stand from the toilet consider toilet frame or toilet handles.

**If the child does not appear safe or is unable to sit upright using the equipment STOP and seek advice from registered practitioner.**
Agreed Toileting Solution

Reason for choice of Solution and Plan

Name………………………………………………  Position……………………………………

Signature …………………………………………………………..Date………………