

Toileting skills

Developmental milestones for toileting skills*

Age	Developmental toileting skills/milestones
2–2.5 years old	<ul style="list-style-type: none"> • Able to stay dry for over 2 hours • Can indicate they are having a poo, during or after it has happened • Will sit on a potty if placed there for 5 minutes • Will flush the toilet • Can wash their hands by themselves • May be able to say if they have done a wee in their nappy <p>The presence of these skills indicates that a child may be ready to start toilet training.</p>
2.5–3 years old	<ul style="list-style-type: none"> • Able to pull their pants/ training pants up and down • Can indicate in advance when they need to have a poo • Can indicate in advance when they need a wee • Can wipe effectively after having a wee • Are dry during the day • Are dry at night
3 years old	<ul style="list-style-type: none"> • Take themselves to the toilet independently during the day
4 years old	<ul style="list-style-type: none"> • Wipe their bottom effectively after a poo

*These milestones are intended as a guide only. The sequence of developing toileting skills is highly dependent on experience and opportunities to practise, family/cultural expectations and the child's choices and motivation. Please also consider your child's developmental levels, this can be impacted by a number of factors.

Assessing readiness for toilet training

Before starting toilet training, it is important to make sure that your child is ready.

Here are a few checks to make:

- **Bladder:** Can your child hold their bladder for at least half an hour?
- **Bowels:** Does your child poo between 3 times a day and 4 times a week?
- **Sitting:** Can your child sit safely and comfortably on the potty or the toilet for at least a minute?

If the answer to these questions is **yes**, then the child is ready to commence toilet training.

Here are some further points for consideration:

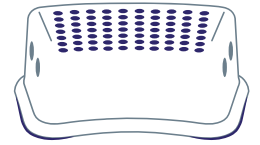
- **Awareness:** Does your child show any awareness that their bladder or bowel is full?
- **Communication:** Has a means of communication been identified? For example, using PECS cards, communication switches or gestures and signing?
- **Participation:** Can your child help pull pants and/or outer clothes up or down? Can they wash and dry their hands with or without assistance?
- **Behaviour:** Is the child able to respond to instructions? Do they usually respond appropriately to requests?

Positive answers to any of these questions points towards readiness for toilet training. Negative answers are not necessarily obstacles though; toilet training should not be delayed until the child shows signs of awareness for instance, as this may never happen. The child may however achieve continence with a regular, timed toileting programme.



Starting toilet training

- ✔ Where possible, work on these skills such as hand washing and wiping in the order in which they are identified in the typical developmental milestones table on the previous page
- ✔ It's important to remember that all children are individuals. Some children will be dry at night first, whilst others will be dry in the day first
- ✔ Can they sit comfortably on the potty or the toilet so they are able to relax? Are their feet supported? If their feet do not reach the floor, consider putting a step in place
- ✔ Dress children in loose clothing which is easier to pull up and down



Toileting charts

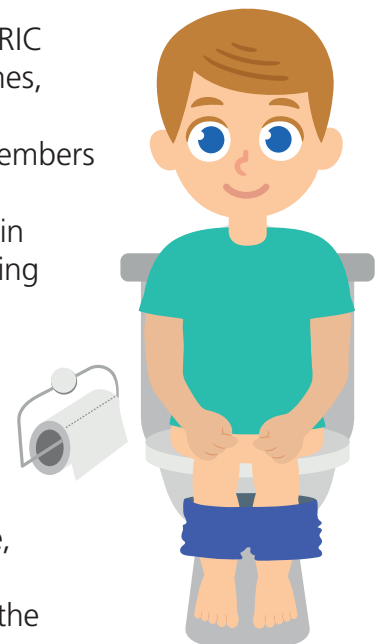
Completing a toileting chart may support you in identifying your child's bladder and bowel habits. At this stage, you do not need to make any changes to your child's toileting. If you are currently taking them to the toilet, continue to do so; if you are not taking them, you do not have to begin. Simply look/check their nappy when appropriate. Each hour record whether your child is dry, wet or soiled (or if they have been to the toilet, whether they had a wee or a poo). Recording this information in a chart, will enable you to identify a pattern in toileting. For example, if your child wees every 2 hours, then sit them on the toilet every 1½ hours. If a pattern of bowel actions occurs, for example, once in morning and once in evening, use this to guide toileting times – otherwise take your child to the toilet 20–30 minutes after meals and before bed.

- 🌐 A bladder/bowel chart can be found on The Children's Bowel and Bladder Charity (ERIC) website:
www.eric.org.uk/pdf-bladderbowel-assessment-chart



Preparing your child for toilet training

- ✔ Begin to talk about wees or poos as much as possible with your child. The ERIC website 🌐 www.eric.org.uk has lots of resources for children, such as games, videos and activity sheets
- ✔ Allow your child to observe other people using the toilet, including family members if possible
- ✔ If your child has had an accident or needs their nappy changed, change this in the bathroom and flush any contents down the toilet to cement understanding that these things happen in this room
- ✔ As previously mentioned, the first step to developing toilet training is ensuring that the child is able to remain sitting on the toilet for up to 5 minutes. There are various methods that will be helpful, including the following:
 - Build up how long your child sits on the toilet for gradually, depending on how long they currently sit for e.g. if they can currently sit for 1 minute, only trying to build this to 1 minute and 15 seconds the next time
 - Provide them with lots of praise for sitting on the toilet immediately after the task is finished
 - It is important to discuss what has worked well at home, which could then be used at school to help support them



Setting the 'just right' challenge with your child

It is important to enable your child to gain a sense of achievement when learning a new skill. The 'just right' challenge ensures that you are encouraging your child to develop their skills and independence, whilst ensuring that the goal they are working towards is realistic. The sense of achievement that they experience acts as a great motivator to encourage your child to keep working towards mastering these skills.



Things to consider:

- How long do you expect your child to do the task for?
- How much of the task do you/they expect to complete by themselves?
- What support will you provide?

Teaching bottom wiping

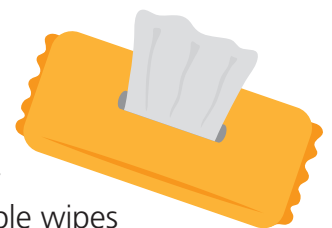
Using a 'backwards chaining' approach may help support your child to develop their skills within the 'just right challenge'. This is where your child learns the process backwards, first doing the final step and over time doing more as the adult does less, until they do the whole sequence. By learning backwards it ensures the task is not too difficult for your child, which ensures success. Initially you may complete the whole task with your child wiping an already clean bottom and checking the toilet roll. You may do this for one week and the following week wipe until their bottom is almost completely clean, with your child finishing this off. Gradually build up how much they are required to do until they are doing most, if not all, of the process. If the parents complete the first wipe, this will also give children sensory feedback so they know where they should wipe.



Here is an example:

- **Week 1:** Wipe your child until clean, and then ask them to do the final wipe, checking to make sure they are completely clean
- **Week 3:** Wipe your child's bottom, but leave the final few wipes, ask your child to wipe and check, as they did in week one. This time, they should see that they aren't fully clean, so will need to do another wipe
- **Week 5:** Do the first couple of wipes for your child to clean most of the mess. Then ask your child to continue the process
- **Week 6:** Ask your child to do the whole process. Prompt and support them as and when needed. At this stage, you can give the final check to make sure they are clean




Some children feel anxious about the possibility of getting mess on their hands. In the first instance, reassure them that if they do get mess on their hands, by saying "what's the worst that can happen?" Remind them that you are there to assist and you can help them wash their hands immediately. To reduce the risk of mess, it may be easier for your child to use alternatives to toilet roll such as biodegradable flushable wipes or washlets to start with. Using wipes can mean less mess and often require less wiping than toilet roll. Once they are confident using them, re-introduce toilet paper again.



Praise

Remember that each step of progress is **positive**! So, if your child sits on the toilet for 5 minutes, but doesn't do a wee, praise them for sitting so well on the toilet. The more you praise your child for each step of progress the better as it will make this learning process much more positive and encourage your child to consistently use the toilet.

Speak to your GP if:

-  If your child suffers from constipation, as this can impact on developing toileting skills
-  If your child is aged four and is not toilet trained
-  If your child is school age, is toilet trained, but is still having regular incidences of day time wetting



Helpful websites

ERIC – The Children's Bowel and Bladder Charity

For more information on toilet training, bed wetting, bladder and bowel problems, sensory needs, support for schools and a variety of resources for both adults and children

 www.eric.org.uk

NHS – How to potty train

For more information on how to potty train your child, visit:

 www.nhs.uk/conditions/baby/babys-development/potty-training-and-bedwetting/how-to-potty-train


References:

- ERIC (2021) Daytime Wetting. [Online] Available from: www.eric.org.uk/Pages/Category/daytime-wetting
- National Institute for Health and Care Excellence- NICE (2010) Bedwetting in Under 19s.[Online] Available from: www.nice.org.uk/guidance/CG111/chapter/1-Guidance#children-under-5-years-with-bedwetting.
- NHS (2018) How To Potty Train. [Online] Available from: www.nhs.uk/conditions/baby/babys-development/potty-training-and-bedwetting/how-to-potty-train
- Schum. T., Kolb.T., McAuliffe. T., *et al* (2002) Sequential Acquisition of Toilet Training Skills: A Descriptive Study of Gender and Age Differences in Normal Children.Pediatrics. 109 (3). [Online] Available from: pediatrics.aappublications.org/content/pediatrics/109/3/e48.full.pdf

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