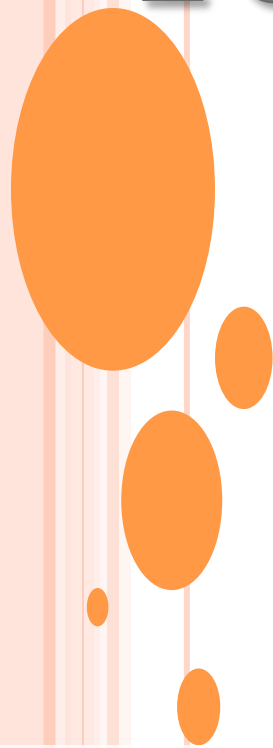


# Toilet Training Toolkit



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## Toilet Training Assessment (Interview)

Date Completed: \_\_\_\_\_ Interviewer: \_\_\_\_\_ Interviewee: \_\_\_\_\_

### **General Information about the Child/Family**

What is the name of child? \_\_\_\_\_

What is the name of the parents? \_\_\_\_\_

Age (Chronological/Developmental) of child? \_\_\_\_\_

Weight of child? \_\_\_\_\_

Medical diagnosis (if any)? \_\_\_\_\_

Who lives with the child (siblings and ages)? \_\_\_\_\_

Please describe what your child likes (food, drinks, bubbles, IPAD, movies, characters (i.e.: Spongebob), etc. \_\_\_\_\_

Are there any major stressors/occasions coming up in the next few months that may affect toilet training? (i.e.; birth of a child, pre-school starting, moving?) \_\_\_\_\_

### **Current Situation**

Have you ever attempted potty training in the past? If so, please describe what was tried and any success. \_\_\_\_\_

Does your child currently wear diapers, pull-ups, or underwear? \_\_\_\_\_

Does the child seem to notice when diapers are wet/soiled? \_\_\_\_\_

Does your child request to wear underwear? \_\_\_\_\_

Is there any interest in the bathroom, toilet, hand-washing, dressing, etc.? \_\_\_\_\_

Does child move away or hide to have BM? (If so, describe) \_\_\_\_\_

Does your child have regular bowel movements? (if so, when?) \_\_\_\_\_

Does your child soil during the night? \_\_\_\_\_

Does your child stay dry for at least 2 hours? \_\_\_\_\_

Does your child wake up dry? (always, frequently, occasionally, never) \_\_\_\_\_

Will your child: Sit on small potty or on the toilet? \_\_\_\_\_

If so, how long \_\_\_ seconds/minutes

Can your child follow simple directions? \_\_\_\_\_

Can your child pull pants up and down? \_\_\_\_\_

For boys, does your child ever stand to urinate? \_\_\_\_\_

Does your child ever urinate in the toilet? \_\_\_\_\_

\_\_\_\_\_ x/day or \_\_\_\_\_ x/week

Does your child ever have a BM in toilet? \_\_\_\_\_

\_\_\_\_\_ x/day or \_\_\_\_\_ x/week

How often does your child urinate in diaper/pull-up/underwear?

\_\_\_\_\_ x/day or \_\_\_\_\_ x/week

How often does your child have a BM in his/her diaper/pull-up/underwear?

\_\_\_\_\_ x/day or \_\_\_\_\_ x/week

Does your child request to use the toilet? \_\_\_\_\_

## SELF-CARE CHECKLISTS

The focus of the VB-MAPP is primarily on communication and social skills. However, self-care skills are an important part of the child's growing independence. The following self-care checklists can be used for assessment and skills tracking. The list can be downloaded and printed as needed to complete your child's program. As always, the procedures derived from applied behavior analysis provide the best way to teach these skills.

## DRESSING – BY ABOUT 18 MONTHS

- Pulls a hat off
- Pulls socks off
- Pulls mittens off
- Pulls shoes off (may need help with laces, buckles and velcro straps)
- Pulls coat off (may need assistance unbuttoning and unzipping)
- Pulls pants down (may need assistance unbuttoning and unzipping)
- Pulls pants up (but may need help getting pants over a diaper, and with buttoning, snapping and zipping)

## DRESSING – BY ABOUT 30 MONTHS

- Unties shoe laces
- Unbuttons front buttons
- Unsnaps
- Fastens and unfastens velcro
- Unzips front zippers (smaller zippers may be difficult)
- Removes shirt (tight shirts may require assistance)
- Removes pants or skirts (may need help unzipping and unbuttoning)
- Puts on shoes (needs help discriminating right from left and tying)
- Puts on pants (may need help zipping and buttoning up)
- Adjusts clothing
- Matches own socks
- Matches own shoes
- Puts dirty clothes in a hamper

## DRESSING – BY ABOUT 48 MONTHS

- Undresses (but may need help with tight pullover clothes)
- Dresses (may need help with back buttons and zippers such as on a dress)
- Puts on coat
- Puts on socks
- Puts on pants
- Buckles and unbuckles most buckles (some may be more difficult)
- Zips and unzips front zippers
- Buttons and unbuttons front buttons
- Snaps and unsnaps front snaps
- Identifies which clothes to wear for various weather conditions
- Attempts to lace shoes
- Puts on shoes (discriminating right from left with a prompt)
- Attempts to tie shoes
- Hangs up own clothes on a hook
- Hangs up own clothes on a hanger (with assistance)
- Folds own clothes (with assistance)
- Puts clothes in drawer

## BATHING AND GROOMING – BY ABOUT 18 MONTHS

- Wipes nose with a tissue (with assistance)
- Washes hands (with assistance)
- Dries hands (with assistance)
- Attempts toothbrushing (with assistance)

## BATHING AND GROOMING – BY ABOUT 30 MONTHS

- Attempts to use a washcloth and soap while bathing (with assistance)
- Brushes teeth (with assistance)
- Washes face (with assistance)
- Dries face
- Attempts to wash hands independently
- Dries hands
- Attempts to brush hair (with assistance)

## BATHING AND GROOMING – BY ABOUT 48 MONTHS

- Wipes nose with a tissue and puts it in the trash
- Gets in and out of a bath tub with minimal assistance
- Uses a washcloth and soap when bathing
- Washes hair (with assistance, especially for longer hair)
- Dries self after a bath or shower
- Brushes teeth
- Flosses teeth (with assistance)
- Washes hands
- Washes face
- Dries both face and hands
- Hangs up towel after washing
- Brushes hair (with assistance, especially for longer hair)

## FEEDING – BY ABOUT 18 MONTHS

- Eats finger foods
- Drinks from a cup by self
- Uses a spoon to scoop food
- Sucks from a straw

## FEEDING – BY ABOUT 30 MONTHS

- Uses a fork to pick up food
- Uses a napkin to wipe face and hands
- Carries own lunch box or plate to table
- Opens own lunch box
- Opens ziploc bags
- Unwraps partially opened food packaging
- Puts a straw into a juice box
- Takes off own bib

## FEEDING – BY ABOUT 48 MONTHS

- Uses the side of a fork to cut softer foods
- Uses a knife for spreading
- Uses a knife for cutting (softer foods)
- Keeps eating area reasonably clean while eating
- Unwraps most food packaging
- Opens milk or juice container
- Pours liquids into a cup or bowl (from a small pitcher or lunch thermos)
- Helps to prepare simple foods (spreading, stirring, using cookie cutters, holding a beater, measuring ingredients, pouring ingredients)
- Helps to set the table for meals
- Takes dishes to the sink
- Puts trash in a garbage can
- Wipes the table with a sponge or dish towel

## TOILETING – READINESS SKILLS - BY ABOUT 24 MONTHS

- Responds to reinforcement
- Follows simple directions
- Seems uncomfortable in soiled diapers
- Remains dry for 2 hours at a time
- Bowel movements are predictable and regular
- Pulls pants down
- Pulls pants up (with assistance)
- Can sit still for 2 minutes at a time

## TOILETING – BY ABOUT 36 MONTHS

- Has learned a word, sign, or PECS for toilet (e.g., potty, pee, sign for toilet)
- Mandates to use the toilet
- Unbuttons, unsnaps, or unzips pants
- Sits on toilet
- Urinates on toilet
- Wipes after urinating (girls)
- Defecates on toilet
- Wipes after defecating (with assistance)
- Pulls underwear up
- Pulls pants up
- Zips, snaps, or buttons pants (with assistance)
- Flushes toilet
- Washes hands (with assistance)
- Dries hands

## TOILETING – BY ABOUT 48 MONTHS

- Aims into the toilet while standing (boys)
- Wipes self (girls wipe from front to back)
- Zips front zippers
- Buttons front buttons
- Snaps front snaps
- Washes and dries hands - as part of the toileting routine
- Night-time trained (may still have accidents)



# Toilet Training Plan

Student Name: \_\_\_\_\_

Toilet Training Manager(s): \_\_\_\_\_

Date of original plan: \_\_\_\_/\_\_\_\_/\_\_\_\_ Revision Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Type of Program: (please check)

- Schedule Training
- Intensive "In the Bathroom" Method

## Place - What are the specific locations/bathrooms in setting?

- Home \_\_\_\_\_
- School \_\_\_\_\_
- Both Home and School \_\_\_\_\_

## Type of Toilet

- Regular Toilet Seat
- Toilet Insert
- Small Potty
- Step Stool

## Communication - The child will be prompted to ask using what form of communication before each scheduled toileting trip?

- Say
- Sign
- Use PECS

## Vocabulary - What words will be used for the following?

Urine \_\_\_\_\_

BM \_\_\_\_\_

(circle) Bathroom Toilet Potty Restroom Other: \_\_\_\_\_

## What will child wear during waking hours (underwear only, underwear with pull up on top, diaper with pants, underwear with pants/socks/shoes, a toileting alarm?)

At Home: \_\_\_\_\_

On Bus/In Community: \_\_\_\_\_

At School: \_\_\_\_\_

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During Naps and Nighttime: \_\_\_\_\_

### Schedule

The child will be taken to the toilet every \_\_\_\_\_min/hrs

If the child does not urinate in the toilet or in the diaper/pull up/underwear at time of scheduled toileting, the child will be taken to the toilet in \_\_\_\_\_min/hrs

### Wiping Child will be prompted to wipe:

Front to Back Back to Front Through legs Standing up/Squatting

How much toilet paper and how many times to wipe \_\_\_\_\_

**\*\*\*If an intensive "in the bathroom method" will be used please see attached sheet and data sheet**

### Reinforcement/Consequences: Please identify the reinforcers to be used or consequences to follow target behaviors.

Child will get \_\_\_\_\_while seated on the toilet

If the child is dry, he/she will receive \_\_\_\_\_

If the child urinates on the toilet he/she will receive \_\_\_\_\_

If the child independently requests toilet, he will receive \_\_\_\_\_

If the child has an accident, what will happen? \_\_\_\_\_

### Data

- Data will be recorded throughout the day on the attached data sheet
- Data will be graphed daily
- Only urine and BM accidents will be recorded

How often will data be shared between home and school (daily weekly, other)? \_\_\_\_\_

How often will the data be analyzed (daily weekly, other)? \_\_\_\_\_

Who will analyze the data (supervisors, team, etc)? \_\_\_\_\_

### Comments

# Toilet Training Data Sheet 1

Name: \_\_\_\_\_

D=Dry U=Urine BM=Bowel Movement N=Nothing SI=Self-Initiation

Date	Time	Check when at toilet D/U/BM	Taken to toilet U/BM/N	SI-U/BM	COMMENTS	Date	Time	Check when at toilet D/U/BM	Taken to toilet U/BM/N	SI-U/BM	COMMENTS

**Toilet Training Data Sheet 2**  
 Bathroom Schedule

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Time

	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
	Wet Pants	Dry Pants	BM in Pants	Pee in toilet	BM in toilet	Indep.
<b>Total</b>						

### Toilet Training Data Sheet 3

Name: \_\_\_\_\_

Date: \_\_\_\_\_

AM Home:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:
W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N
OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A
Fluids (oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)
0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4

Date: \_\_\_\_\_

AM Home:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:
W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N
OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A
Fluids (oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)
0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4

Date: \_\_\_\_\_

AM Home:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:
W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N	W D U B M N
OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A	OA OR A
Fluids (oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)	Fluids(oz)
0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4

W - Wet D - Dry U - Urinated in Toilet BM - Bowel Movement in Toilet N - Nothing OA - Offer Accepted OR - Offer Refused A - Alarm Sounded

### Toilet Training Data Sheet 4

Name: \_\_\_\_\_

Date	Time	Pants Check D=Dry U=Urine BM=Bowel Movement	In Toilet U=urinates BM-bowel movement N-nothing	Latency	Comments	Initials

## **Additional Resources and Products:**

### **Small Potty**

Fisher Price frog potty:

[http://www.amazon.com/Fisher-Price-X4441-Froggy-Potty/dp/B005IWM8GY/ref=sr\\_1\\_1?ie=UTF8&qid=1358795085&sr=8-1&keywords=potty+fisher+price+frog](http://www.amazon.com/Fisher-Price-X4441-Froggy-Potty/dp/B005IWM8GY/ref=sr_1_1?ie=UTF8&qid=1358795085&sr=8-1&keywords=potty+fisher+price+frog)

### **Potty Seat**

One Step Ahead 3 in 1 Toilet Training Potty Seat

<http://www.onestepahead.com/catalog/product.jsp?productId=537132&cmSource=Search>

### **Toilet Alarm**

Wet Stop 3

[http://www.amazon.com/PottyMD-W103-Wet-Stop3-Bedwetting-Alarm/dp/B0013LRVWA/ref=sr\\_1\\_1?ie=UTF8&qid=1358795198&sr=8-1&keywords=wet+stop+3+bedwetting+alarm](http://www.amazon.com/PottyMD-W103-Wet-Stop3-Bedwetting-Alarm/dp/B0013LRVWA/ref=sr_1_1?ie=UTF8&qid=1358795198&sr=8-1&keywords=wet+stop+3+bedwetting+alarm)

### **Books/Video/Doll Set**

Once Upon a Potty (for him or for her)

<http://www.amazon.com/gp/cart/view-upsell.html?ie=UTF8&HUCT=1&newItems=CBK6S5QEIMABK%2C1%7CC1ZN4V1I2SYO3D%2C1%7CC24UBK3P0HMB1W%2C1>

### **App**

Potty Time (Call Rachel and potty chart) Free in Itunes

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