

Date: January 2019  
To: DECEs, EAs, Elementary Principals  
Subject: Toileting

**Please review the following information for all toileting clarification.**

The DECE Collective Agreement includes the following regarding toileting:

**1. L18.06 Medical/Physical Procedures**

In the event of a medical emergency, a DECE will perform such procedures to the best of their ability as are necessary for the safety and well-being of the student. No DECE, however, is required to carry out medical/physical procedures as part of her/his regular duties. **It is the expectation that a DECE will support students with respect to their toileting needs.** {See Letter of Understanding and Joint Memo}

**2. Letter of Understanding Medical Procedures**

The parties agree that under Article L18.06, Medical Procedures, the reference to supporting students with respect to their toileting needs does not include those students who require regular and ongoing toileting/diapering throughout the school year as identified through medical documentation.

**3. Joint Memo re: Toileting**

Re: Clarification of Toileting Procedures in the FDK program

The purpose of this joint memo is to bring increased clarity around the toileting of Full Day Kindergarten students as defined in the Collective Agreement between the Waterloo Region District School Board and the Elementary Teachers' Federation (ETFO) representing Designated Early Childhood Educators.

The Collective Agreement states:

L18.06 It is the expectation that a DECE will support students with respect to their toileting needs.

Further to this, a Letter of Understanding contained within the agreement states: "The parties agree that under Article L18.06, Medical Procedures, the reference to supporting students who require regular and ongoing toileting/diapering throughout the school year as identified through medical documentation."

Both ETFO and the WRDSB agree:

**DECEs are to support students in all cases where students require assistance with toileting/diapering until identified through medical documentation.** The exception to this exists when an FDK student has medical documentation that indicates a need for ongoing toileting/diapering stemming from medically supported reasons. In such cases, a Principal is to assign/hire a Level D Educational Assistant to toilet/diaper the student as needed.

### **Process for Developing a Support Plan**

In cases where there are FDK students requiring regular and ongoing toileting supports that do not have a medical diagnosis (not yet toilet trained), schools are required to follow SBT/MDT processes to begin to problem solve solutions for supporting these students. Once a determination is made that a student will require on-going support to toilet (until independent), a plan will be created and shared with the staff members supporting that student. This plan could result in having both DECE and/or EA involvement.

### **Safe Toileting Practices**

In all cases, Principals are to ensure FDK washrooms are properly equipped to support safe toileting practices. Latex gloves, a supply of Everyday Disinfectant (ED), and other considerations (e.g. change table or other suitable surfaces, proper disposal unit for soiled diapers) should be available.

The dignity of students being toileted will always be a priority for staff, and staff members will follow any plan that may be in place for the student (i.e. lift transfer, communication tools, reward systems, etc). **The intent of the FDK program is that children who have toileting incidents are changed and returned to the classroom as seamlessly and quickly as possible.**

*\*further to the safe toileting practices, please see the link below for updated Supplies/Cleaning Guidelines*

<https://staff.wrdsb.ca/hr/health-safety-and-security/health-safety/health-and-safety-topics-a-z/chemicals-custodial-supplied-products-in-elementary-classrooms/>

The EAA Collective Agreement includes the following regarding toileting:

#### **1. L24.01 Medical Procedures**

The Employer shall not require any Employee to administer medication or perform any medical procedure on any student or any physical procedure on any student that may subject the Employee to personal injury or liability. The Employer shall not direct any Employee to examine or diagnose pupils for communicable diseases. The Board personnel under the direction of the appropriate medical authority may assist with or perform certain physical procedures. These include but are not limited to lifting and positioning, assistance with mobility, feeding, toileting, and general maintenance exercises.

#### **2. Letter of Understanding RE: Toileting Kindergarten Students**

**Toileting/diapering of FDK students shall not be the responsibility of the EA unless the need is medically identified.** It is understood however, that the EA may be expected to assist with toileting/diapering in situations where the need is not medically identified but where the DECE is already occupied with assisting in another toileting/diapering situation. The Board agrees to communicate with Principals regarding this process.

Both agreements refer to “**medical documentation**” as a deciding factor in who is responsible for assisting students with toileting/diapering. While many of our students are diagnosed by a medical practitioner, toileting is not necessarily part of the diagnosis. For clarity, please see the two lists below.

**Examples of Diagnoses that do NOT require medical documentation from a doctor:**

- ADD/HD
- ASD/Autism
- Cerebral Palsy
- Constipation
- Continence
- Deaf/Blind/Low Vision
- Down Syndrome
- Hypotonia
- Intellectual disabilities
- Physical disabilities
- Resistance/fear of using a toilet
- Sensory processing
- Spina Bifida.

**Examples of Medical Conditions (lack of control over bowel or bladder functions) that DO require medical documentation\*:**

- Encopresis
- Gastroenteritis
- Lack of bowel nerve function
- Constipation if taking laxatives which is causing frequent fecal soiling
- Bladder overactivity
- Medication intervention (side effect of a medication).

*\*can be temporary and/or permanent conditions*

**Number of Staff required for toileting/diapering:**

Only one staff member is required to support a student in the toileting process unless there is a lift transfer plan requiring two staff members or if there is documented data indicating that two staff are required for the safety of staff and/or student. Suggestions for toileting include: leave the door propped open slightly, make your colleagues aware when you are toileting the student, talk student through toileting procedure if able and use gloves as needed. Preserving the dignity, respect and privacy of the student is expected at all times.

**Toileting Plan**

In some cases a Toileting Plan may be established-please refer to the attached document as a guideline for developing a toilet plan. For clarity, a toileting plan is an option, not a requirement.

### **To Summarize:**

Any student with a medical condition within Special Education such as the following, will be supported by a Board provided nurse or PSW.

- Manual expression of bladder/stoma
- Catheterization
- Postural drainage/suctioning

Students ages 3-5 in the FDK program (Extended Day and Core) are enrolled with the expectation that they will be successful with toilet training. This does not mean in all cases they will have mastered toilet training before starting the FDK program and it is the expectation of the **DECEs** to work with and assist these students. EA's working in other classrooms are NOT to be called to FDK classes for toileting purposes unless they are specifically supporting this student as assigned by the administrator.

Students with the following diagnoses are NOT considered to have a medical condition requiring EA support for toileting. **The diagnosis is not related to toilet training.** In many cases, toilet training children with any challenge is similar to training children in general. It simply requires more patience and some extra support and is the **DECEs** responsibility to work with, support and toilet these students.

- ADD/HD
- ASD/Autism
- Cerebral Palsy
- Constipation
- Continence
- Deaf/Blind/Low Vision
- Down Syndrome
- Hypotonia
- Intellectual disabilities
- Physical disabilities
- Resistance/fear of using a toilet
- Sensory processing
- Spina Bifida.

**EAs** are required to provide toileting support for students **outside of the FDK program (core and extended day)** within the school. The exception being when a medical condition (temporary or permanent) is identified and documented by a physician for an FDK student.

These medical conditions are as follows:

- Encopresis
- Gastroenteritis
- Lack of bowel nerve function
- Constipation if taking laxatives which is causing frequent fecal soiling
- Bladder overactivity
- Medication intervention (side effect of a medication).

### **Individual Student Toileting Plan**

This document can be created in consultation with the SBT and used when developing a toileting plan for a student.

Student Legal Surname

Student Legal Given Name

Present or Known As Name

Student ID

Student Date of Birth

Parent and/or Legal Guardian Name(s)

Telephone Number

Current Placement

Current School

Diagnosis (if applicable)

Description of needs

Student Directed

Fully Dependent

Any additional information/documentation

Students Level of Independence

Staff members supporting toileting plan

Communicate plan to teacher

Location of washroom(s)

Visual aids required

Verbal prompts

Supplies required

Rewards used

Other information