

**Arlington County
Department of Parks and Recreation**

PERMISSION AND PROCESS FORM FOR PERSONS THAT ARE NON-TOILET TRAINED

We welcome all individuals in our program, regardless of their personal care needs. If a participant should soil him or herself the following procedures will be followed:

1. The soiled clothing or Disposable Undergarment (DUG) will be changed immediately.
2. A staff person will bring the participant into the changing area or restroom. Preschool aged participants will be changed within visual sight or sound of the other participants. DUG's will be changed only on non-absorbent surfaces that will not be used for eating or other activities.
3. Soiled clothing and/or DUG's will be removed and the participant will be cleaned with a disposable wipe. If the participant is capable of completing these tasks, he or she will be asked to do so.
4. A clean DUG and/or clothing will be replaced with those supplied by the parent or guardian. If the participant is capable of completing these tasks he or she will be asked to do so. DUG's shall be used for participants unless the individuals' skin reacts adversely to disposable undergarments. Parents /guardians must provide camp staff with clean cloth diapers (if allergic) or disposable undergarments.
5. The hands of both the staff person and the participant will be cleaned with a germicidal cleansing agent when sink is not readily available and soap and water when sink is available after each toileting. Staff will use vinyl gloves for toileting changes unless otherwise specified by parent/guardian.

Parents/guardians of all children/teens/adults are asked to sign the following statement of understanding and authorization:

"I understand that if my child, or participant under my guardianship, soils his/her clothing or disposable undergarment (DUG) that it will be changed immediately by recreation staff members. A separate, private changing area that is located in the activity room or nearby restroom will be used for changes. **Exception:** the playgroups for ages 3 and under change in common areas. If the participant is capable of changing his or her own clothes and cleaning him or herself, he or she will be asked and allowed, to do so. If, however, he or she cannot complete the tasks, recreation staff members will change the soiled clothing or DUG and clean the participant with a disposable wipe. I am responsible for providing all necessary items for changing. Disposable pull-up pants or DUG will be used unless the participant's skin reacts adversely to the disposable undergarments." ***"I give permission for recreation staff, or Preschool Co-op volunteers, to change my child's, or participant under my guardianship, soiled clothing or DUG as needed"***.

Only check if applicable

- My child is allergic to disposable undergarments and must use a cloth diaper. I will provide the necessary supplies.
- My child needs detailed personal care supports due to a disability please see the back of this form for the outlined steps needed or the further training I will provide for recreational staff.

Name of Program Participant

Signature of Parent/Guardian

Date

Detailed Personal Care Support for Toileting

Only to be completed if your participant requires assistance toileting due to a disability as indicated on front of this form.

Please let us know how we can best help your participant with toileting by completing the chart below.

Self-care task	Independently	With Partial Assistance	With Total Assistance	N/A	Detail Support Needed
Identify need to use the restroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Communicate need to use the restroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transition to restroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Go into restroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Select urinal or toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Un-do fastener on bottoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pull bottoms down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Remove underwear/DUG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sit on toilet until done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wipe clean after urination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wipe clean after bowel movement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pull up underwear/put on new DUG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pull up bottoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fasten bottoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wash hands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transition out of restroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

What time(s) of day (approximate) does your participant typically use the restroom?

If applicable, how often would you like staff to check for a soiled DUG?

Please make sure to send your participant to camp with extra DUGs, clothing and wipes if needed. Staff will have and use gloves on site. If your participant requires additional supplies, please make sure to bring them for camp staff and outline instructions for use in table above. Please fill out a separate medication release form if any topical ointments or creams are required.