

Best Practice Guideline	Toys in Healthcare
Date	September 28, 2016
Reviewed Date	September 7, 2017
Revised Date	March 15, 2022

A printed copy of this guideline may not be the most recent version. The **OFFICIAL** version is located at www.ipac.vch.ca.

Site Applicability

All VCH owned and operated sites.

Scope

This guideline applies to toys used during the course of healthcare services.

Definitions

Toys in this guideline includes all action figures, books, building toys, cards, craft supplies, dolls, games (including, but not limited to board games, and electronic games) sports equipment, musical instruments, puzzles, etc. unless otherwise specified below.

Purpose

To provide Infection Prevention and Control (IPAC) guidance to staff and volunteers in all healthcare settings for the care and safe shared use of therapeutic, recreational and educational toys (see definitions).

Background

Toys can be a reservoir for potentially pathogenic microorganisms that can be present in saliva, respiratory secretions, feces or other body substances. Unless managed carefully, a risk of person-to-person transmission of infection exists when patients/clients/residents share toys and play/lounge areas.

Although there are published studies indicating paper materials (e.g., books, magazines, puzzles) carry low levels of bacteria, shared paper materials do not present a significant source of microorganism transmission in healthcare settings. Under specific circumstances additional restrictions and recommendations may be provided by IPAC.



The risk of transferring microorganisms from **non-soiled** paper is negligible and risk-reduction should be balanced with the quality of the patient care experience.

Guidelines

- Toys that are shared must be cleaned between users.
- Toys that cannot be cleaned must be dedicated to a single patient.
- Patients/families may bring their own toys as needed but toys that cannot be cleaned (i.e. soft/plush toys) must go home with the patient or discarded at discharge. Soft, plush toys must be dedicated to an individual and are to be sent home with patient/client/resident or discarded at discharge.
- Items provided to a patient on Additional Precautions that cannot be cleaned (i.e. books and craft supplies) must go home with the patient or be discarded.
- Families of patients with known or suspected infection should avoid common play areas and use of shared toys.
- There should be a written procedure regarding the frequency and method for cleaning the toys.
- Toys should be removed from places where an adequate process cannot be established to ensure daily inspection, cleaning and disinfection (i.e. general waiting rooms).

Procedures

Cleaning and Disinfection

- Inspect toys prior to cleaning for damage, cracks and broken parts.
- Discard damaged toys, as damage will compromise cleaning and disinfection.
- Refer to [VCH Low Level Cleaning & Disinfecting Guideline](#)
- Cleaning and disinfection options include:
 - Use a dishwasher with a sanitizer cycle and air dry before storage, or
 - Clean and disinfect toys thoroughly with the VCH approved cleaning/disinfecting ready-to-use wipes (e.g., Accel Intervention) and allow to air dry. Wipe with damp cloth to remove any residue prior to storage. Note: If toy is grossly soiled, clean first with warm soapy water, then wipe with disinfectant and allow to air dry.

Items that cannot be cleaned i.e. Craft supplies, Reading Materials, Playing cards, Puzzles, etc.

- Inspect items prior to placing in waiting room/lounge and on a weekly schedule.
- Discard if wet, worn, torn, stained, damaged, or infested (e.g. silverfish, bedbugs, etc).
- Remove shared reading materials during a pandemic or outbreak that are difficult to resolve. Removing these materials at times of heightened transmission allows for removal of unrecognized contaminated items and for thorough cleaning & disinfection of surfaces, they were covering.

Frequency and Responsibility

- Responsibility for cleaning and disinfecting toys should be assigned.



- Toys utilized or stored in individual patient rooms should be cleaned, at minimum, when visibly soiled and once per week. They should be cleaned more frequently if the toy is mouthed.
- Toys used by patients on Additional Precautions should be dedicated to the patient for the duration of their precautions if possible.
- When the patient is on Additional Precautions, the toys (personal or hospital owned) should be cleaned daily to mitigate the risk of re-infection.
- Indoor playhouses/climbers should have their high touch surfaces cleaned on a daily basis and when visibly soiled. A thorough cleaning of the entire playhouse/climber should be regularly based on frequency of use (minimum bi-annually).
- Outside play structures should have a regular cleaning schedule (minimum yearly) and more frequently if parts have visible mould or dirt.
- Large toys on wheels (i.e. Computers, movie stations, electronic game systems) should be wiped down prior to leaving the room (including the keyboards and all attachments). Refer to [IPAC guidance for cleaning and disinfecting electronic IT equipment](#)

Storage

- Area for segregation of dirty vs clean toys should be provided (i.e. a labeled bin where used toys can be placed).
- Clean toys should be stored in a manner to prevent contamination (e.g. dust and water splatter) and clearly marked as clean.
- Toy storage boxes/cupboards should be emptied and cleaned weekly and when visibly soiled.

Additional Recommendations

Hand Hygiene

- Encourage hand hygiene before and after handling shared items.
- Encourage or assist patients/clients/residents to clean their hands before and after using toys, especially difficult to clean ones (i.e. electronic games, video equipment, remote controls and computers).
- Ensure all waiting rooms, lobbies, lounges and common patient spaces have:
 - Wall mounted alcohol-based hand rub
 - Surgical / procedure masks
 - Respiratory etiquette signage
 - Tissues and waste receptacles
 - Process to ensure separation of patients with respiratory symptoms, draining wounds or incontinence



Toy Materials/Design

- Cleanable toys are made of non-porous solid material (hard plastic) and able to withstand rigorous mechanical cleaning.
- Smooth/non-textured toy surfaces are preferred, as they are the easiest to clean.
- Toys that retain water should not be used.
- Donated toys:
 - Must be in original package
 - Meet requirements of toy materials/design (as stated above)
 - Must be sent home with patient on discharge if stuffed or made of fabric and donated to the patient/client/resident (single patient use)
- Sand and water tables may be used but sand should be patient dedicated or discarded. Water must be changed between patients. Tables high touch surfaces must be cleaned between users, left empty overnight and cleaned weekly.

REFERENCES

1. [IPAC Canada Practice Recommendations Toys](#). (2016 July)
2. [Control of antibiotic-resistant bacteria in the office and clinic](#). Matlow, A. & Morris, S. Canadian Medical Association Journal vol. 180 no 10, pp 1021-1024. (2009 May).
3. [Infection control in paediatric office settings](#). Moore, D. Pediatrics and Child Health, 13 (5), pp 408-419. (2008 May).
4. Swabbing of waiting room magazines reveals only low levels of bacterial contamination. Charnock C. [British Journal of General Practice](#), 55, pp 37-39. (2005 January). Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1266241/>
5. [Best Practices for Environmental Cleaning for Prevention and control of Infections in all Health Care Settings](#), 2nd Edition. PIDAC. (2012 May) p.97. Public Health Agency of Canada. (2012).
6. [Infectious Disease Prevention and Control. Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings](#).

