SOP Objective
To ensure that Healthcare Workers (HCWs) are aware of infection risks associated with toys in healthcare settings.

This SOP applies to all staff employed by NHS Greater Glasgow & Clyde and locum staff on fixed term contracts and volunteer staff.

KEY CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

- Updated wording in Section 1. Introduction
- Updated wording in Section 3. Criteria
- Updated wording in Section 5. Cleaning Procedure

Document Control Summary

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The most up-to-date version of this SOP can be viewed at the following website:
www.nhsggc.org.uk/your-health/infection-prevention-and-control/

### 1. Introduction

Age appropriate toys and games which do not increase the risk of infection, will be available for patients within the clinical setting where children, young people or adults are treated. This SOP applies to toys/games owned by the directorates/Sectors and used by staff and parents/patients. Toys donated by the public for this purpose must be new and unused, of BS standard, wipeable and age appropriate.

In areas where mental health is a key consideration, by following an appropriate risk assessment, this SOP may be adapted to suit the needs of the patient. This risk assessment must be documented in the patient’s notes.

Related Policies can be viewed by following the link
http://www.nhsggc.org.uk/content/default.asp?page=s708
2. Responsibilities

Healthcare Workers (HCWs) must:

- Follow this SOP.
- Inform a member of the Infection Prevention Control Team (IPCT) if this SOP cannot be followed.

Senior Charge Nurses (SCN) / Managers must:

- Ensure that staff are aware of the contents of this SOP.
- Will not purchase or accept donations of new toys/games unless there is an approved method for cleaning in place as agreed in Section 5.
- Will have devised a process to ensure that all toys/games in their ward/department are cleaned as per this SOP.
- Support HCWs and IPCTs in following this SOP.

Infection Prevention Control Teams (IPCTs) must:

- Keep this SOP up-to-date.
- Provide education opportunities on this SOP.
3. Criteria

**Toys/Games:**
The words ‘toys/games’ in the context of this SOP refer to all toys used for recreational, therapeutic or educational purposes by children, young people, adults and their families or by healthcare staff.

**Toy/Games selection and purchase:**
Toys/games will be chosen with hard surfaces (plastic, vinyl, varnished or painted wood, metal) which can be thoroughly cleaned. Where toys/games with fabric parts must be used, these parts must be able to be able to be laundered.

**Donations of toys and games:**
The board receives many offers of used toys/games by the general public. Because we cannot control the cleanliness or safety of these items, they cannot be accepted for patient use.

**Storage of clean toys:**
Toys/games will be stored in a dedicated cupboard/box (or play area if large) fit for purpose and is the subject of an identified and documented regular cleaning schedule. Only clean toys/games will be stored in this cupboard/area.

4. Toys and Games

**Children’s own toys – Parents informed about Toy Cleaning SOP**
- Patients may bring their own toys/games into hospital but for most admissions this should be limited to one or two items only. There is discretion on the part of the nurse in charge of a ward in relation to children who may need to exceed this number, e.g. those with longer admissions and/ or any identified developmental or mental health need for additional toys.
- They should be stored in their locker when not in use or other appropriate covered storage area, e.g. toy box.
- They should not be shared with other patients, except when children are playing together in a group activity with an expectation that the toy or game would need to be shared in order for the activity to take place (see note on group play below).
- In acute settings, parents have the responsibility for keeping toys/games clean as per this SOP and removing them from the child should they become damaged or contaminated.
Group Play
In circumstances when children may benefit from sharing toys, staff have a responsibility to support safe play. This may require risk assessment with clear documentation by the clinician responsible for overseeing the area where such informal group play occurs. Managers need to ensure that there is clarity about responsibility for decision making in these cases. Where there is uncertainty, professional advice should be sought regarding the importance of that activity and this advice should be weighed against the infection prevention control advice. Suitable advice may be obtained from a play specialist, neurodevelopment specialist or child mental health professional.

Individual in-patient ward toys/games
- The ward/department manager must have a written system in place for staff to ensure that toys are cleaned and examined between patient use.
- Staff will examine each toy/game after use to ensure that it is fit for re-use, i.e. check for broken parts/faults/loose wiring etc.
- Toys/games will be cleaned prior to being returned to the toy cupboard/box/area. (See Cleaning Procedure in Section 5)
- A notice will be displayed in each waiting area, advising parents/patients to report any dirty toys to a member of staff

Out-patient and waiting areas
- The clinic/department manager must have a written system in place for staff to ensure that toys are cleaned and inspected at the start/end of the clinic session.
- Toys will be kept to a manageable minimum so that appropriate cleaning can be undertaken.
- Staff will examine each toy/game regularly to ensure that it is fit for re-use, (i.e. check for broken parts/faults/loose wiring etc).
- Toys/games will be cleaned prior to being returned to the toy cupboard/box/area. (See Cleaning Procedure in Section 5)
- A notice will be displayed in each waiting area, advising parents/patients to report any dirty toys to a member of staff.
5. Cleaning Procedure

The SCN/ Manager must designate a member of staff to clean and check the toys/games on a daily basis.

**Cleaning – Detergent**
- Use detergent wipes to wipe toys.
- If wipes are not available use a fresh solution of detergent made up as per manufacturer’s instructions, using disposable paper towel.
- Wipe dry with disposable paper towel.

*Do not store toys wet*

**Cleaning – Disinfection**
- Clean as per cleaning procedure above if item is visibly soiled with blood or body fluids or has been used by a patient in isolation using chlorine based detergent. See NHSGGC SOP Cleaning Near Patient Equipment
- Wipe dry with disposable paper towel.

*Do not store toys wet*

**Books**
- Books and posters should be examined for visible soiling with body fluid and disposed of as necessary.
- Between patients, wipe the cover with detergent wipe.
- Where possible, photocopies of pages, laminated pages or computers should be used for children in source isolation.

**Construction toys, e.g. Lego**
- These should not be considered for patients in source isolation unless they can be given to the child as a gift to take home.
- Where toys with small parts are used, care must be taken to examine parts at the end of the child’s play and wash all parts thoroughly in warm water and neutral detergent.

**Hand held electronic toys (i.e. computers/ Gameboys/ CDs/ DVDs)**
- Damp wipe (disposable cloth and neutral detergent/detergent wipes, or chlorine based detergent if patient is in isolation - see Section 4) between patients where appropriate and before returning to toy cupboard/area.
- Keyboards should have a wipeable cover or be washable.
- Please follow the manufacturer’s instructions.

**Play dough (home-made and therapeutic putty)**
- The child should be encouraged to wash their hands prior to start of play.
- Play dough should be discarded at the end of the session and not stored for another day.
- A child in isolation will be given their own play dough that is not shared with other children and discarded after use.
- Therapeutic putty must be single-patient use.

The most up-to-date version of this SOP can be viewed at the following website: [www.nhsggc.org.uk/your-health/infection-prevention-and-control/](http://www.nhsggc.org.uk/your-health/infection-prevention-and-control/)
### Soft toys/ cloth dolls
- Only new soft toys and cloth dolls can be accepted by the hospital and will be given to one child as a gift to have as their own toy and to be taken home at the end of their stay.
- If the patient has been in source isolation the soft toy issued should either be discarded or taken home by the parents for laundering at the end of the period of source isolation.
- Soft toys sitting in incubators and cots should be visibly inspected daily for signs of contamination. If soiled, parents should be encouraged to take the toy home to wash.

### Soft toys used for decoration
- Avoid if possible.
- A person should be allocated with the responsibility for the regular cleaning of these items.
- Regular checks should be made to ensure that dust does not accumulate on these items.
- All body fluid spillage will require thorough cleaning followed by disinfection. Where this is not possible, these items should be discarded.

### Therapeutic toys
- All therapeutic toys including soft bodied toys must be made of a wipeable material.
- All patients should be encouraged to wash their hands before touching any play equipment.
- Where a soft bodied toy must be used, the toy should be visibly clean before use.
- There must be a protocol in place for replacement/ cleaning.

### Toys/games soiled with body fluid
- Consider disposal of toy/ game if grossly contaminated.
- All blood and body fluid should be decontaminated as per [NHSGGC Decontamination SOP](#).
- Seek advice from a member of the IPCT prior to decontamination.

### Toys games used in source isolation
- Clean item with chlorine based detergent, i.e. Actichlor Plus or a solution containing 1000ppm hypochlorite.

### Wall mounted toys/games
- Damp wipe (disposable cloth and neutral detergent or detergent wipes) after each patient use.

### Wall murals
- All permanent wall murals should be sealed to reduce paint from peeling/ chipping. The surface must be able to withstand being washed and disinfected with chlorine based detergent, i.e. Actichlor Plus or a solution containing 1000ppm of available chlorine based detergent.
| **Water play**          | • This should be on a one-to-one basis only.  
|                        | • Water should be discarded at the end of the session.  
|                        | • All toys should be cleaned and dried thoroughly prior to storage. |

| **Therapeutic Sand play** | • This should be on a one-to-one basis only.  
|                         | • Each patient should be allocated their own container of sand with their name on it.  
|                         | • Sand should be inspected before each use for dust/debris.  
|                         | • Sand must be stored dry. It if becomes wet during play, it must be discarded.  
|                         | • At end of therapy, sand should be discarded and the container washed with detergent and water, and dried. |

| **Window painting** | • Prior to allowing patients to paint on windows, clear lines of responsibility for removing the paint must be established.  
|                     | • Only clean glass surfaces should be used.  
|                     | • The responsible person must remove all traces of paint from the window when the painting is no longer required or on discharge of the patient. |