The purpose of this practice review is to provide infection prevention and control (IPAC) recommendations to ensure that patients, siblings and families have access to clean and safe play equipment and toys. Toys can be a reservoir for potentially pathogenic microorganisms that can be present in saliva, respiratory secretions, feces or other body substances. Families should be encouraged to bring a limited number of the child’s favourite toys from home. These toys are to be stored in a cleanable container, kept at the child’s bedside and labelled with the child’s name.

Toys referred to in this practice review include ALL infant and toddler toys, dolls, games, books, puzzles, cards, craft supplies, electronic equipment and teaching toys/dolls.

*ALL toys include those also ordered/recommended for treatment purposes.

**Infection Prevention and Control Practice Recommendations for Toys**

1. **Hand Hygiene**
   - Before and after playing with toys, children should be encouraged or assisted to clean their hands with alcohol-based hand rub (ABHR) or soap and water.
   - Playrooms should have access to both ABHR and a hand wash station.
   - Play areas (e.g., physician’s office) should have an ABHR station.
   - Hand hygiene with ABHR must be supervised.

2. **Toy Materials/Design**
   - Toys that are shared must be easily cleanable or dedicated to a single child.
   - Toys should be nonporous and able to withstand rigorous mechanical cleaning.
   - Smooth/non-textured toy surfaces are preferred, to facilitate cleaning.
   - Water-retaining bath toys should **not** be used.
   - Acceptable donated toys:
     - Must be in the original package
     - Meet the requirements of toy materials/design (as stated above)
     - Must be sent home with child on discharge, if stuffed or made of fabric and donated to the child (single patient use)

3. **Frequency and Responsibility for Toy Cleaning and Disinfection**
There should be written procedures regarding the frequency and method for cleaning the toys.

There should be assigned responsibility for cleaning and disinfecting toys.

Persons cleaning and disinfecting toys should receive training.

All toys should be cleaned and disinfected between users.

Toys utilized or stored in individual patient rooms should be cleaned, at minimum, when visibly soiled and once per week. They should be cleaned sooner if a child has mouthed the toy.

When a child is on Additional Precautions, the toys should be cleaned more frequently to mitigate the risk of re-infection.

Playhouses/climbers should have their high touch surfaces cleaned on a daily basis. A thorough cleaning of the entire playhouse/climber should be done according to a regular schedule based on frequency of use and when visibly soiled.

Shared electronic games, video equipment and computers should be cleaned between users. Computer keyboards should be either of the immersible type, have a keyboard cover or be made of a material that can be cleaned and disinfected. These should be wiped down prior to leaving the room (including the keyboard cover and all attachments). For a child on Additional Precautions, the items are to be assigned and terminally cleaned upon discharge or when precautions are discontinued.

In waiting rooms, limit shared books, magazines, puzzles, cards and comics. It used these should be discarded when visibly soiled. These items should be dedicated to children on Additional Precautions and discarded afterwards if they cannot be cleaned.

Toys should be removed from general waiting rooms if an adequate process cannot be established to ensure their daily inspection, cleaning and disinfection.

Patient specific sand for sand tables

4. Toy Storage

Playrooms or play areas that are used by more than one child should have an area for segregation of dirty toys (e.g., a bin into which children/parents/staff can place used toys).

Clean toys should be stored in a manner that prevents contamination (e.g., dust and water splatter) and should be clearly marked as clean.

Toy storage boxes/cupboards (including those from home) should be emptied and cleaned weekly or when visibly soiled.

5. Procedure for Toy Cleaning and Disinfection

Toys must be inspected for damage, cracked or broken parts, as these may compromise cleaning. Any toy that is found to be damaged, cracked or broken should be discarded.

Toys must be cleaned according to the manufacturer’s instructions or local practices (e.g., in hot, soapy water) prior to disinfection.

Disinfection options include:

- Use of a commercial dishwasher/cart washer (must reach 82° C for 10 seconds)
- Hospital-grade, approved low-level disinfectant which is safe and suitable for the cleaning of toys (follow manufacturer’s recommendations regarding dilution and contact times)
- Phenolics (must not be used for toys or equipment that comes into contact with infants)
  - 70% alcohol solution
  - 1/100 dilution of sodium hypochlorite (bleach)
- If a disinfectant is used, toy must be rinsed with potable water thoroughly prior to use.
- Allow toys to air-dry, in a manner to prevent contamination, prior to storing.

Monitoring Compliance
- An audit process should be in place to monitor adherence to the policies to further minimize potential infection risk.

References:

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