

Decontamination of Toys			
Statement of Intent	To ensure that all items of play equipment are cleaned and Decontaminated in order to reduce the risk of cross infection in facilities where SBC children's community health staff are delivering regulated activities.		
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Related policies	Infection Prevention and Control policy		
Applies to	SBC Children's Community Health staff		
Care Quality Commission Outcomes	Regulation 12 (Outcome 8) Cleanliness and infection control		
Equality & Diversity	SBC is committed to promoting equality in all its responsibilities - as a provider of services, as a partner in the local economy and as an employer. This policy will contribute to ensuring that all clients, potential clients and employees are treated fairly and respectfully with regard to the protected characteristics of age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.		

Contents	Page
Introduction	2
Toy Selection	3
Decontamination	3
Hard Toys	3
Soft Toys	4
Water Play	4
Sand Pits	4
Play Dough	5
Second Hand Toys	5
Outbreaks and epidemics	5
Responsibilities	5
Training	5
Monitoring	5
References	6

Introduction

Toys are an important tool in the educational and social development of children. Studies have demonstrated that germs can persist for a considerable time on the surface of toys and they have been implicated in the transmission of potentially harmful pathogens and the development of infection in children (Laborde *et al* 1993 DH 2009).

Toys shared between children may be readily contaminated if put into children's mouths or following contact with body fluids and unwashed hands.

The Health and Social Care Act (2008) code of practice on the prevention and control of healthcare associated infections, criterion 1, 2 and 5 place a requirement on organisations to have effective organisation and managerial systems in place to ensure a clean and appropriate environment to prevent and control HCAI. This includes the correct purchase of toys and their subsequent decontamination.

Principle guidelines on the decontamination of toys

Toy selection

Careful consideration and individual risk assessment must be undertaken prior to the purchase of toys to determine their suitability for appropriate decontamination.

All toys should have smooth, non-porous surfaces that are easy cleaned. Soft toys must only be purchased if clinically essential.

Decontamination

SBC Service and team Managers are responsible for delegating the cleaning requirements of toys. Procedures must be established that stipulate ongoing cleaning processes. This must include cleaning schedules for all toys that identifies items to be cleaned, the frequencies and cleaning products to be used.

Any toys that are visibly soiled or contaminated with blood/body fluids must be immediately decontaminated or disposed of. Toys that have been used by very young children or put in their mouths must be cleaned after use.

Toys must not be taken into the toilet areas.

Toys must be stored clean in a suitable, washable containers or cupboard.

Toys should be stock rotated so that they are not all in use at once.

Children must be encouraged to wash hands after handling toys or after water/sand/ball pool play

Hard toys

Ideally toys should be cleaned and disinfected between uses by different children. However, this may be impractical on a day to day basis but keeping toys hygienically clean is an important way of preventing the transmission of infections. Communal toys in waiting and general areas should be visually checked daily and cleaned weekly as a minimum.

Hard/plastic toys should be cleaned by washing with water and detergent or detergent wipes followed by rinsing and drying. If disinfection is required use 1000ppm chlorine solution (Milton/Haz-tabs) followed by rinsing and drying. Detergent wipes can be used for toys during home visits

Toys with moving parts and openings can harbour dirt and germs in the crevices and must be washed using detergent and warm water or detergent wipes before thorough rinsing and drying.

Soft toys

Soft toys support microbial growth and can be difficult to decontaminate, therefore they must not be used except if clinically necessary and other alternatives not available. There

may be occasions when soft toys form an essential part of a therapy session and in these circumstances children should be encouraged to bring their own soft toys for their individual use. These toys must be used only by them and returned home with them at the end of each session.

In exceptional circumstances when soft toys need to be purchased by the service provider the toy must be machine washable and subject to thorough air drying/ tumble drying (according to manufacturer's instructions).

Repeated decontamination of soft toys can compromise the integrity of the fabric and create a choking hazard, therefore ensure thorough checking takes place before and after use.

Water play

Containers for water play must be emptied, cleaned and dried after use and freshly filled daily.

Children with open sores or wounds must not play in the water. Toys used in water play should be non-porous and cleaned after each use (toys that are hollow or sponge should not be used)

Sandpits

Only play sand must be used for sandpits.

- Keep sand covered when not in use
- Check sand for debris etc at each session
- Wash and dry toys used with sand at the end of each session
- Store toys separately from the sand
- Ensure each child using the sand washes their hands before and after the activity
- Change the sand regularly (e.g. four weekly for indoor sandpits)
- Sand that falls on the floor must be discarded and not put back in the sandpit.

Play dough

This must be single child use only and stored in individually labelled pots for no longer than 3 months.

Homemade play dough must be prepared on the day of use and discarded on the same day. Children's hands should be washed before and after use and any skin lesions covered.

Second hand toys

Second hand toys should not be accepted.

Outbreaks and epidemics

During pandemic influenza or other outbreaks, latest guidance must be consulted. In any influenza outbreaks, all non-essential furniture and other non-essential items such as toys, books and magazines should be removed from reception and waiting areas, consulting and treatment rooms (DH, 2009).

Some communal play activities (e.g. sand and water play, cookery) may need to be suspended to help prevent the spread of specific infections e.g. diarrhoea and vomiting.

Responsibilities

Registered Managers, service managers, team managers and all practitioners are responsible for ensuring colleagues are aware of these guidelines and compliant with all aspects. Managers are also responsible for ensuring colleagues have adequate supplies of equipment particularly consumables to ensure compliance with these guidelines

Training

Formal education supporting guidelines is provided by the Infection Prevention & Control via Infection Prevention and Control mandatory training sessions and the infection control link network (ICLN). Link workers are responsible for ensuring the information and knowledge received is cascaded to health care workers within their area of responsibility.

Responsibility for the provision of appropriate facilities and compliance with the toy decontamination guidelines lies with the service managers within each location

Monitoring framework

Auditing compliance with the toy decontamination guidelines is a joint responsibility between all clinical teams and the Infection Prevention & Control lead Nurse. Actions and recommendations arising from the audits will be collated by the Infection Control Nurse and used to inform the registered manager and all service managers in SBC.

References

Department of Health (2008) *The Health and Social Care Act: code of practice for the NHS on the prevention and control of healthcare associated infections and related guidance*. DH

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