


<b>Name of Policy:</b>	<u>Toys in the Lobby and Inpatient Unit</u>	 <p><b>Effective Date:</b> August 5, 2008 Effective Date: September, 1987</p>
<b>Policy Number:</b>	3364-143-16	
<b>Department:</b>	Lenore W. and Marvin S. Kobacker Center	
<b>Approving Officer:</b>	Administrator, Ambulatory Services and Behavioral Health	
<b>Responsible Agent:</b>	Clinical Practice Manager & Agency Executive Director	
<b>Scope:</b>	Kobacker Center	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy

**(A) Policy Statement**

All toys used in the Kobacker Center Lobby and Inpatient Unit shall meet certain specifications relating to safety and infection control requirements.

**(B) Purpose of Policy**

To provide a safe play environment for any children brought to the Kobacker Center Lobby and Inpatient Unit, all toys shall correspond to established criteria.

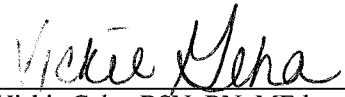
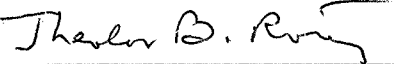
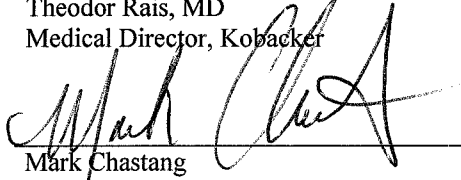
**(C) Procedure**

1. Prior to purchase, all toys for the inpatient unit shall be reviewed by the Nursing Director and all toys for the lobby and outpatient areas shall be reviewed by the Departmental Administrator, Psychiatry, to ensure toy characteristics meet specifications.
2. The admitting nurse will determine the appropriate toys brought from home by parents.
3. Specifications
  - a) unbreakable
  - b) washable
  - c) lead-free
  - d) allergen-free
  - e) without sharp edges
  - f) without small, removable parts (for young children)
  - g) non-sparking
  - h) non-toxic.
  - i) non-water retaining
4. Infection Control Requirements
  - a) Children with communicable diseases shall use only their personal toys.
  - b) Any toys acquiring personal secretions shall be disinfected prior to continued use.
5. Toys will be disinfected by an approved solution as needed. Soap and water is acceptable.
6. Patients and care givers will wash hands prior to the session
7. Toys used during a therapy session will be placed in a bin to easily identify those used during the course of the day.
8. Toys in the bin and the bin will be cleaned at the end of the day using the described method before the next day.

9. Toys in Activity/Waiting Areas should be kept to a minimum and be cleaned after use by children with or suspected to have a communicable disease. Provide sanitizer wipes that can be used for both skin and surfaces in the common area.
10. Toys (used as therapeutic medical equipment) would be considered a noncritical item, as they only make contact with unbroken skin. Here the major requirement is prompt destruction of the ordinary vegetative bacteria.
11. There are no published guidelines on toy cleaning in the hospital setting, but one can extrapolate from experience with community and home care of children. A logical approach is to avoid high risk toys, such as water-retaining toys, soft/stuffed toys, and others that are difficult to clean and dry. Toys that have become contaminated with secretions should be washed thoroughly, disinfected with a nontoxic, low level disinfectant (e.g., bleach 1:100); and air dried completely between patients.

References:

1. Infection Control Policy 31:EQP-800
2. Paulding, EH Chemical disinfection of medical and surgical materials In: Laurence CA, Block, s s (Eds) Note: According to the Spaulding Classification Scheme, Favero MS, Bond WW. Chemical disinfection of medical and surgical materials. In: Block SS, editor. Disinfection, Sterilization, and Preservation. 5th ed. Philadelphia: Lippincott Williams & Wilkins; 2001. p 881-917
3. University of Michigan Health Sysent Infection Control and Epidemiology Infection Control Manual, Principles of Cleaning and sanitation
4. APIC Text of Infection Control and Epidemiology, Volume II, Chapter 40-1
5. Akhter J, al-Hajjar S, Myint S, Qadri SM: Viral contamination of environmental surfaces on a general pediatric ward and playroom in a major referral center in Riyadh, Eur J Epidemiol 11:587-90, 1995

<p><b>Approved by:</b></p> <div style="margin-bottom: 10px;">         _____        Vickie Geha, BSN, RN, MED        Administrator,        Ambulatory Services &amp; Behavioral Health     </div> <div style="margin-bottom: 10px;">         _____        Theodor Rais, MD        Medical Director, Kobacker     </div> <div style="margin-bottom: 10px;">         _____        Mark Chastang        Vice President &amp; Executive Director     </div> <p><i>Review/Revision Completed By:        Kobacker Administration</i></p>	<p><b>Review/Revision Date:</b></p> <p>9/88        11/89        10/90        7/93        4/95        5/97        5/99        4/02        3/07        8/5/2008</p> <hr/> <p><b>Next Review Date:</b> 8/1/2011</p>
<p><b>Policies Superseded by This Policy:</b> new</p>	

*It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.*