

Focus on play

Play in healthcare

This briefing provides information about the importance of play in healthcare settings. The wellbeing of children and teenagers who are patients in hospital or community settings, such as children's hospices, can be supported by the provision of play.

The importance of play for health, wellbeing and happiness

There is a well-established body of solid evidence¹ that shows the contribution that play, particularly self-organised play, can make to children's lives. This shows that play contributes to children's long-term and immediate wellbeing, to their physical health and to their mental health and resilience. Several studies have concluded that play:

- **supports socialisation:** when they play, children interact with others, build attachments to peers, deal with conflict, and learn respect and tolerance.
- **is crucial for good health and wellbeing:** being active through play contributes to children's health and happiness, helping them physically and emotionally.
- **supports children in feeling part of their neighbourhoods and wider communities:** playing allows children to learn about the world around them, make connections, and develop a sense of identity and belonging.
- **supports learning and development:** play builds the structures of the brain, as well as valuable skills such as critical thinking.
- **builds resilience:** playing boosts children's emotion regulation, confidence and creativity, enabling them to cope with stress and challenges throughout life.

The right to play

The right to play is set out in the United Nations Convention on the Rights of the Child (UNCRC). Article 31 of the convention states: 'Every child has the right to rest and leisure, to engage in play and recreational activities appropriate to the age of the child'.

The United Nations Committee on the Rights of the Child sees children's play as highly important. To clarify the importance of children's right to play, the committee published a General Comment on Article 31. This is an official statement that elaborates on the meaning of an aspect of the UNCRC that requires further interpretation or emphasis. The General Comment² determines play as a behaviour, activity or process initiated, controlled and structured by children, as non-compulsory, driven by intrinsic motivation, not a means to an end. It lists the key characteristics of play as fun, uncertainty, challenge, flexibility and non-productivity.

In its General Comment, the committee includes children in hospitals as requiring particular attention. It reinforces that appropriate provision for children to enjoy the rights under Article 31 when they are ill and/or hospitalised will play an important role in facilitating their recovery. It also notes that in these settings, opportunities for play and recreation may be limited or denied.

The committee stresses that the following are needed to ensure that every child in an institution can realise their Article 31 rights:

- availability of time
- appropriate space
- adequate resources and equipment
- trained and motivated staff
- provision of dedicated budgets.

The importance of play in healthcare

For children who experience serious illness and hospital treatment, play has a positive impact on wellbeing and their ability to cope with fear, pain and treatment.³ Starlight Children's Foundation, the UK charity for children's play in healthcare, has gathered data, research and evidence⁴ to show that health play can:

- reduce anxiety and fear and help children cope with stress
- lessen painful feelings during procedures
- mitigate the need for sedation or general anaesthetic
- build resilience
- help children be more engaged with their treatment
- support children to regain a sense of control and autonomy
- strengthen family wellbeing and relationships
- support quicker recovery after treatment
- have more positive experiences of healthcare
- increase children's trust and improve their rapport with healthcare professionals
- reduce the length of hospital stays and the need for more appointments
- improve NHS efficiencies and provide cost savings.

Hospital stays and healthcare visits will have positive physical and medical outcomes for children's health. However, these experiences create a sense of uncertainty, and children and their families may experience a sense of displacement⁵ and stress.

The 2018 International Play Association's *Access to Play for Children in Situations of Crisis* toolkit notes that, 'in situations of crisis, stress, weakened physical and emotional development, feelings of lack of control and loss of trust steadily multiply if children lack everyday opportunities for play'.⁶

The economic benefits of providing play in healthcare settings

Playing contributes to the immediate wellbeing of children whilst they receive care and during recovery. Investing in play has the potential to improve outcomes and save costs too, supporting a more efficient and effective healthcare system for children.

Better clinical outcomes and use of medical resources

Providing opportunities to play before and during a procedure can result in shorter stays, reduced need for additional intervention and promote better health outcomes. When guided by trained health play specialists, play can:

- distract children from painful procedures
- reduce their perception of pain
- decrease anxiety before and after treatment.

Less anxiety and pain can lead to smoother recovery time and decrease the need for sedatives or painkillers, including general anaesthetic, lowering medication costs.

Children who participate in therapeutic play often recover more quickly, as reduced stress supports the immune response.⁷ This results in shorter hospital stays, which saves on bed occupancy costs and frees up resources for other patients.

When children are engaged and less distressed, they are more cooperative with healthcare staff. This can prevent complications related to non-compliance, such as the need for cancellations, repeated attempts and sedation. This reduces treatment costs and more importantly, reduces the trauma and anxiety faced by children and their families.⁸



Investing in future health outcomes

Hospitalisation and living with on-going health conditions can be a traumatic experience for children, potentially leading to anxiety, phobias or post-traumatic stress. Providing opportunities to play can minimise these risks, reducing potential mental health issues and associated costs for treatment. Prolonged treatment and hospital stays can potentially disrupt the mental, social and emotional development of children.

Play helps maintain normalcy and supports ongoing learning, reducing the need for other support services. Play contributes to a positive healthcare experience, which in turn can result in trust in medical institutions, contributing to a likelihood that early care will be sought in the future, leading to lower costs at the healthcare system level.

Case study: paediatric screening – a new play specialist approach⁹

It has been common practice to carry out MRI scans for children using general anaesthetic. The play specialist team and the radiology team at North Devon Hospital have developed a new, safer approach. This involves inviting the child and their family to visit the scanner room and receive support from play specialists before their tests.

An evaluation has shown an increase in children having their MRI at the hospital without general anaesthetic, including a 100 percent increase in the numbers of younger children. A considerably better experience for children and families has been recorded through feedback and Friends and Family surveys. Staff now have a better understanding of each other's roles and North Devon Hospital saw 99 children scanned in this way in one year, thereby reducing bed days in a specialist unit with a cost saving in the region of £49,000.

Drivers of quality, good practice, staffing and understanding impact

National Institute for Health and Care Excellence (NICE) guidelines on babies, children and young people's experiences of healthcare

The NICE guidelines, *Babies, children and young people's experiences of healthcare*, recommends that providing play can improve patient experiences, mitigate trauma and improve outcomes, stating that:

- providers can reduce the fear and anxiety about pain that may be experienced by babies, children, and young people during healthcare interventions by using therapeutic play* and distraction techniques, and creating a calm environment before, during and after interventions or procedures
- the healthcare environment should support easily accessible, age-appropriate play and recreation for children and young people, including to reduce boredom and anxiety while waiting for appointments or interventions.¹⁰

Royal College of Nursing (RCN) professional development publication

*How to safely support and promote play within health care settings*¹¹ provides guidance to staff working across health and care settings on the use of play materials and equipment to facilitate play. The importance of play cannot be underestimated, and consideration of infection prevention and control elements is central to supporting its continuity for children and teenagers receiving care.

Royal College of Paediatrics and Child Health (RCPCH) Wales

Putting children first: Prioritising Wales's future, RCPCH Wales' manifesto for the 2026 Senedd election, highlights the United Nations Convention on the Rights of the Child (UNCRC) and calls on the next Welsh Government to ensure that all children in Wales have a safe, happy and healthy life.



Under the manifesto theme 'Transform child health services', RCPCH recommends a Child Health Quality Statement is implemented and sets out 'what good looks like' for child health services. Providing for play synergises with this recommendation.

* Therapeutic play provided by health play specialists and their teams in healthcare services is different to play therapy delivered by play therapists.

NHS England's *Play Well* toolkit

A Taskforce on Children's Play in Healthcare, jointly convened by Starlight and NHS England and in collaboration with the Society for Health Play Specialists (SoHPS), has developed guidance and standards for health play services. The *Play Well* toolkit¹² is designed to help commissioners, service managers, health play practitioners and clinical leaders to design, plan and deliver high-quality health play services for babies, children and teenagers. It includes:

- guidelines for commissioning and designing health play services
- recommended standards which define good practice for health play services and how to achieve them
- a quality checklist which is a practical tool to audit progress against the standards.

The state of health play in Wales

Play for children in hospital is seriously under resourced.^{13, 14} In England, 77% of trusts/health boards state they have no budget for play resources¹⁵ and children and parents have called for more activities and better facilities that enable them to interact and connect with others through play.¹⁶ Small scale research studies in Wales indicates a similar picture.

Workforce development

The current health play workforce across Wales is generally made up of a combination of health play specialists (HPSs), health playworkers and health play service leads or managers (who are often qualified HPSs). This is not consistent across health board areas.

The training route to qualifying as a HPS is to undertake a unique course of study – a level 5 foundation degree in Healthcare Play Specialism, awarded by the Society of Health Play Specialists (SoHPS). Once trained, HPSs are required to re-register annually and maintain their record of continuing professional development. Historically, individuals could be appointed to HPS roles even if they had not undertaken this course of study and this has led, in some settings, to teams made up of qualified practitioners and unqualified but 'alternatively qualified' or highly experienced staff who all hold the same job title.

The course is open to volunteer and employed staff in the sector. It includes a work placement of a minimum of 200 hours. All candidates need to provide a letter from their supervisor confirming they will be supported with a qualified and SoHPS registered mentor throughout the programme. This is problematic for the workforce across several health trusts/boards as there is a lack of qualified staff in HPS roles to act as mentors.

Currently in Wales, the level 5 foundation degree is available at Cardiff and Vale College (CAVC). It is open to learners with a full and relevant level 3 qualification in early years, or a related subject, with two years' work experience in the related field. CAVC has announced that it will not continue running this course.

Funding

Most hospital play teams are reliant on external funding to either fund the team or to fund resources. Fundraising activity is often undertaken by a member of the health team, by senior nurses and by ward managers.

Spaces to play

The hospital playroom conveys a strong message. The presence of and access to a hospital playroom suggests that children have permission to play. It recognises that time and space for play are vitally needed. A playroom also provides respite and contributes to children

realising their right to play. Despite their importance to patients and parents, many hospital playrooms (or sections of them) have been repurposed since being closed due to COVID-19 restrictions.

Spaces for teenagers are also important. Settings strive to create places for relaxation and socialisation, with a focus on the positive benefits that sensory experiences bring to all children, but this is dependent on knowledge of older children's play needs, available space and appropriate resources.

Access to outdoor play spaces can be incredibly important to sick children as it can provide a solace from unfamiliar and sometimes unsettling hospital wards. Outdoor spaces provide contact with nature, which can be an effective component in:

- coping with and reducing anxiety and stress
- strategies to reduce aggression
- increasing concentration levels in children
- healthy mental development of children
- increased sense of wellbeing and mental health.

Despite this, access to outdoor space is limited in many hospitals across Wales.

Conclusion

As play is vital to a child's healthy growth and development, ensuring that access to play is maintained when children undergo medical and surgical procedures should carry great significance. The emphasis must be on safe practice and enhanced patient experience that considers children's immediate and long-term health and wellbeing alongside their healthcare needs.

Playing is essential to the health and happiness of children, and it should be given priority when children are ill. All children staying in hospital or receiving long term healthcare should have daily access to a health play service. The provision of a rich play environment, supported by skilled staff, will ensure that children receive time, space and permission to realise their right to play.

The costs of establishing play environments and employing health play specialists and health play teams are economical costs for the healthcare system. Providing for play is good value for money, particularly when compared to the expenses associated with extended hospital stays, additional treatments, poor health outcomes and traumatic experience.

Recommendations for healthcare policy in Wales

1. Consider the adoption of the NHS England *Play Well* recommended standards for health play services in Wales
2. Work with Play Wales and Starlight to contextualise the *Play Well* guidelines for health play services in Wales
3. Work with Play Wales to consider an appropriate response to identified health play workforce development issues
4. Work with Play Wales to consider professional development opportunities for the wider healthcare workforce.

References

- ¹ Russell, W., Barclay, M. and Tawil, B. (2024) *Playing and being well. A review of recent research into children's play, social policy and practice, with a focus on Wales*, Cardiff: Play Wales.
- ² United Nations Committee on the Rights of the Child CRC (2013) *General comment No. 17 (2013) on the right of the child to rest, leisure, play, recreational activities, cultural life and the arts (art. 31)*, Geneva: Committee on the Rights of the Child.
- ³ Starlight Children's Foundation (2023) *Reducing Trauma for Children in Healthcare*, London: Starlight.
- ⁴ Starlight Children's Foundation (2024) *Starlight Play In Healthcare Week Report 2024*, London: Starlight.
- ⁵ Comment from a Hospital Play Specialist at the Starlight Health Play Forum: *Playing with Children's Health?*, April 2024.
- ⁶ King-Sheard, M., Mannello, M. and Casey, T. (ed) (2018) *Access to Play for Children in Situations of Crisis: Play: rights and practice: A toolkit for staff, managers and policy makers*, Faringdon: International Play Association, p. 4.
- ⁷ Centre for Research on Play in Education, Development & Learning (PEDAL) and Starlight (2025) *Playing with children's health*, Cambridge: PEDAL.
- ⁸ Cabrita Gulyurtlu, S.S. (2025) Health play: promoting a better quality of childhood through illness and in healthcare, *International Journal of Play*, 14:2, pp. 166-184.
- ⁹ Referenced in Starlight Children's Foundation (2025) *Briefing for policymakers and officials*, London: Starlight Children's Foundation. Case study available at: www.england.nhs.uk/atlas_case_study/paediatric-screening-a-new-play-specialist-approach/
- ¹⁰ National Institute for Health and Care Excellence (2021) *Babies, children and young people's experience of healthcare* Manchester: NICE. Available at: www.nice.org.uk/guidance/ng204
- ¹¹ Royal College of Nursing (2022) *How to safely support and promote play within health care settings*, London: Royal College of Nursing.
- ¹² NHS England and Starlight (2025) *Play well – resources for health play services for England*. Available at: www.england.nhs.uk/publication/play-well-resources-for-health-play-services-for-england/
- ¹³ Gulyurtlu, S., Jacobs, N. and Evans, I. (2020) *The Impact of Children's Play in Hospital*, London: Starlight Children's Foundation.
- ¹⁴ Starlight Children's Foundation (2023) *State of play in Hospital Report 2022*, London: Starlight Children's Foundation.
- ¹⁵ Ibid.
- ¹⁶ Care Quality Commission (2022) *Children and Young Peoples Survey 2020*, Care Quality Commission.



This issue of *Focus on play* has been endorsed
by Starlight Children's Foundation

www.play.wales