

# UNIFORM AND DRESS CODE POLICY

<b>Department / Service:</b>	Corporate
<b>Originator:</b>	Deputy Chief Nursing Officer
<b>Accountable Director:</b>	Chief Nursing Officer, Chief Medical Officer
<b>Approved by:</b>	Trust Management Committee – JNCC
<b>Date of Approval:</b>	August 2017
<b>Review Date:</b>	4 <sup>TH</sup> April 2020
<b>This is the most current document and should be used until a revised version is in place</b>	
<b>Target Organisation(s)</b>	All employees All Bank, Agency or NHSP staff Staff who are carrying out work on behalf of the Trust but are employed by another Trust/Local Authority WAHT Volunteer organisations
<b>Target Departments</b>	All departments
<b>Target staff categories</b>	All employees

## Policy Overview

The purpose of this policy is to help all staff understand precisely what is expected of them with regards to their appearance at work.

Date	Amendment	By:
August 2017	Policy revised	Sarah Needham, Associate Director, Nursing

## Latest amendments to this policy

August 2017

This policy has been reviewed and changes have been made to a number of WAHT uniforms in order to rationalise the numbers of uniforms in use across the Trust.

Guidance is included on Equality and Diversity issues in relation to this policy.

October 2019 – Document extended for six months whilst document is reviewed by Lisa Miruszenko and Chief Medical Officer

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## Policy

### 1 Policy Statement

- i. The aim of this Policy is to ensure that clothing and accessories worn by those working within the Trust are consistent with the trust's Infection Prevention and Control Policies and Health and Safety Policies, and comply with patient and public expectations.
- ii. The policy objectives are:
  - To contribute towards Trust Infection Prevention and Control measures by minimising the risk of cross-infection from clothing/accessories;
  - To contribute towards Trust Health and safety measures by minimising risk of injury or harm to patients and staff from inappropriate clothing/accessories and ensuring use of appropriate protective clothing;
  - To ensure that a smart, professional image is maintained by all persons working within the Trust
  - To promote mobility and comfort of the wearer; and
  - To allow identification from security and communication purposes
- iii. The Trust considers that the way employees dress and their appearance is of significant importance in portraying a professional image to all users of its service. Whether patients, visitors, clients or colleagues.
- iv. The impact of "Health Care Associated Infection" (HCAI) on patients in terms of morbidity and mortality cannot be understated, and the safety of patients in relation to HCAI is a clear priority for the Trust. Dress code, uniform and hygiene in the clinical setting are integral to the control and prevention of HCAI. This policy is therefore based on the principles of the Health and Social Care Act 2008: Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections and Related Guidance. This requires that uniform and work wear policies ensure the clothing worn by staff when carrying out their duties is clean and fit for purpose and that such policies should specifically support good hand hygiene.
- v. All healthcare workers have a responsibility to minimise the spread of infection by complying with the requirements of this policy. This policy must be read in conjunction with the Trust Infection Prevention and Control Policy and the Hand Hygiene Policy.
- vi. The Trust recognises and values the diversity of cultures, religions and disabilities of its employees and will take a sensitive approach which this affects dress and uniform requirements. However, there may be circumstances in which there are genuine occupational reasons as to why the wearing/not wearing of certain articles and/or clothing is not permissible, and priority will be given to health and safety, security and infection control. Every effort has been made to reach assurance that this policy does not cause either offence or discrimination. However, individual cases will be considered on their merits.

## Policy

- vii. A breach of this policy is regarded as a serious offence and may lead to disciplinary action, which may include dismissal, in accordance with the Trust Disciplinary Policy.

### 2 Scope

- i. This policy applies to ALL staff groups, whether they wear a uniform or not, including those with honorary contracts, subcontractors, volunteers, locum, bank and agency workers, and students working on and off Trust premises and representing the Trust.

### 3 Framework

- i. This section describes the Trust board framework relating to dress and uniform. Detailed instructions are provided in the associated procedural document "Dress and Uniform Standards". These are provided in Appendix 2.
- ii. The Chief Nursing Officer and Chief Medical Officer will approve all procedural documents associated with this policy and any amendments to such documents, and are responsible for ensuring that such documents are compliant with this policy.
- iii. The Trust will provide uniforms to staff who are required to wear them. Clinical staff will be provided with clinical style uniforms. All other staff who are required to be in uniform will be provided with appropriate professional style work wear.
- iv. Other groups of staff who wish to adopt or change a current style uniform may only do so with the guidance of the Deputy Chief Nurse and approval from the Chief Nursing Officer.
- v. The Trust will provide theatre scrubs/clogs to staff who require them.
- vi. Staff who travel to and from work in Trust uniforms must cover their uniform with a coat during their journey between their home and place of work.
- vii. When in uniform, staff must not enter commercial premises (e.g. supermarkets, shops and public houses) but if entering on Trust business staff must be smartly dressed with their identification badge visible.
- viii. Where there are legal requirements under Health and Safety legislation, the Trust will provide appropriate personal protective clothing and equipment which must be worn correctly.
- ix. The Trust will provide information to staff who wear uniforms to ensure they have the appropriate washing instructions. This is incorporated into the Dress and Uniform Standards document in Appendix 2.

- x. When employment ceases with the Trust, the employee must return the uniforms via their Line Manager. The Line Manager needs to ensure that this happens as part of the exit process.

## 4 Duties

### i. Board of Directors

The Board of Directors is responsible for ensuring appropriate uniforms and health and safety equipment is available and provided for staff when required.

### ii. Chief Nurse and Chief Medical Officer

The Chief Nurse and Chief Medical Officer will:

- Approve the Dress and Uniform Standards and any other associated procedural documents;
- Receive reports of serious breaches of the Dress and Uniform Policy and associated procedural documents from line managers
- Provide a judgement where the individual staff interpretation of the policy and its associated procedure in relation to individual beliefs has meant a compromise cannot be achieved by line and senior managers.
- The Chief Nursing Officer will declare relaxation of the policy in relation to wearing of full uniforms in exceptional heat circumstances.

### iii. Uniform Services Department

The Facilities Manager for the relevant site will:

- Ensure that all staff requiring uniforms will be provided with uniforms appropriate to their role as outlined in Appendix 6 of this policy.
- Uniforms can be exchanged to ensure that they are well fitting and of good condition.

### iv. The Divisional Directors and Associate Directors of Nursing, Divisional Directors of Operations, Clinical Service Leads, Heads of Departments and Professional Leads, Matrons and Senior Sisters/ Charge Nurses will;

- Ensure all staff are aware of and know how to access and comply with this policy and its associated procedural document
- Ensure appropriate uniforms and health and safety equipment is available and provided for staff.
- Manage failure to adhere to this policy and its associated procedures, using the disciplinary procedure if required.

- v. **The Divisional Directors of Nursing Divisional Directors of Operations, Clinical Service Leads, Heads of Departments and Professional Leads, Matrons and Senior Sister/Charge Nurses will:**
- Ensure all staff are aware of, know how to access and comply with this policy and its associated procedural document
  - Ensure appropriate uniforms, and health and safety equipment is available and provided for staff
  - Manage failure to adhere to this policy and its associated procedures, using the disciplinary procedure if required.
- vi. **Line Managers will:**
- Ensure all staff are aware of and know how to access and comply with this policy and its associated procedural document.
  - Ensure adherence to this policy within their areas of responsibility
  - Ensure all staff have uniforms if required
  - Act as good role models
  - Set out particular requirements for areas where there are legal requirements under Health and Safety legislation in terms of personal protective equipment. They will ensure that such local Codes of Safe Practice are compliant with this policy and associated Dress and Uniform Standards and must ensure that staff working in such areas do wear the protective apparel specified.
  - Manage failure to adhere to this policy and its associated procedures using the disciplinary procedure if required.
- vii. **All Staff will**
- Ensure that they are fully conversant with this policy and its associated procedural documents.
  - Comply with the requirements of this policy and the Dress and Uniform standards that apply to them.
  - Raise any issues that may prevent them from complying with this policy so they can be managed on an individual basis, and follow Health and Safety advice as required.
  - Assume responsibility for ensuring colleagues are compliant with the policy and challenge or report to their line manager if unable to address any breaches.

# Policy

## 5 Implementation and Monitoring

i. This policy supersedes previous policies and will be circulated to the following forums:

- Clinical Governance Group
- Senior Nurses Meeting
- Junior Doctors Forum
- Allied Health Professional Meeting
- Infection Prevention Control Group
- Joint Negotiation Consultative Committee

### ii. Dissemination

The policy will be published on the intranet following approval by the Key Documents Approval Group

### iii. Training and awareness

There are no training requirements however a period of awareness raising will take place prior to implementation to allow for any required changes to uniforms.

### iv. Monitoring and compliance

The policy will be overseen by the Chief Nursing Officer and Chief Medical Officer. Compliance will be monitored by audits of compliance undertaken by Department Managers.

### v. Policy Review

The policy will be reviewed by Chief Nursing Officer and Chief Medical Officer in two years or in the light of any legislative changes or developments in practice

### vi. Contribution List

vii. This key document has been circulated to the following individuals for consultation

Designation
Chief Nursing Officer
Chief Medical Officer
Divisional Directors of Nursing and Midwifery

## Policy

Associate Directors of Nursing
Divisional Directors of Operations
Divisional Medical Directors
Therapy Heads
Matrons

This key document has been circulated to the chair(s) of the following committee's / groups for comments;

Committee
Clinical Governance Group
Infection Prevention Control Group
Joint Negotiation Consultative Committee
Senior Nurse Meeting
Junior Doctors Forum
Allied Health Professional Meeting

### **Approval process**

This policy will be approved by Trust Management Committee and JNCC and sent to the Key Documents Approval Group for final ratification.

## Version Control

Date	Amendment	By:
August 2017	Policy revised	Lisa Miruszenko/ Sarah Needham/
December 2017	Scrub Suit requirements	Susan Smith

See Appendix 1 for detail of the monitoring of this policy, and its associated procedures.

## 6 References and Bibliography

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National Patient Safety Agency (2005) Cleaning your hands Campaign. National Patient Safety Agency London  
<http://www.npsa.nhs.uk/cleanyourhands>

Department of Health (2005\_ Saving Lives: delivery programme to reduce healthcare associated infections (HCAI) including MRSA  
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Healthcare Commission (2007): Healthcare associated infection: What else can the NHS do? Healthcare Commission, London Sex Discrimination Act 1975 [http://www.opsi.gov.uk/acts/acts1975/pdf/ukpga\\_19750065\\_en.pdf](http://www.opsi.gov.uk/acts/acts1975/pdf/ukpga_19750065_en.pdf)

Religious or Belief Regulations (2003)  
<http://www.opsi.gov.uk/si/si2003/20031660.htm>

Disability Discrimination Act (2005)  
[http://www.opsi.gov.uk/acts/acts2005/ukpga20050013\\_en\\_1](http://www.opsi.gov.uk/acts/acts2005/ukpga20050013_en_1)

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Human Rights Act (1998)

[http://www.opsi.gov.uk/acts/acts1998/ukpga\\_19980042\\_en\\_1](http://www.opsi.gov.uk/acts/acts1998/ukpga_19980042_en_1)

Equality and Human Rights Commission Guidance. Guidance on the wearing of Sikh articles of faith in the work place and public space.

[http://www.equalityhumanrights.com/uploaded\\_files/publications/Sikh\\_articles\\_of\\_faith\\_guidance\\_final.pdf](http://www.equalityhumanrights.com/uploaded_files/publications/Sikh_articles_of_faith_guidance_final.pdf)

Royal College of Nursing – Wipe it Out Guidance on laundering uniforms.

[https://my.rcn.org.uk/\\_data/assets/pdf\\_file/0010/78652/002724.pdf](https://my.rcn.org.uk/_data/assets/pdf_file/0010/78652/002724.pdf)

## 7 Associated Policy and Procedural Documentation

- i. Trust Infection Prevention and Control Policy
- Hand Hygiene Policy
- Disciplinary Policy

## Appendix 1 - Implementation and Monitoring Plan

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Line managers of all ward/departments and patient/public facing areas will complete audits, using the Dress and Uniform Policy Audit Tools (Appendices C and D)	Divisional Management Teams	Divisional Management Teams	Audit	At least annually and otherwise as required by the Chief Nurse
A programme of spot audits will be carried out as part of regular governance visits.	Divisional Management Teams	Senior Manager Corporate Risk	Audit	As required

## Appendix 2 – Dress and Uniform Standards

### 1 Section 1: Generic Requirements For All Trust Staff

All staff are expected to be smart and well-presented at all times whilst on Trust business with a high standard of personal hygiene which would be acceptable to others. Staff are reminded that when attending courses within or external to the Trust they are representing the Trust and their appearance must reflect a professional image.

All staff must wear an easily visible identity badge at all times. Lanyards must not be worn by any Trust staff due to health and safety and infection control reasons.

A maximum of two professional/religious badges, of which one may be a religious badge, may be worn.

Safety footwear, where provided, must be worn at all times. Where safety footwear is not provided, staff must wear footwear appropriate to the environment in which they are working and the job they perform. Footwear must be in a good state of repair, with anti-slip soles and low heels with enclosed toes heels and uppers. The material must be wipeable. Staff should wear shoes that give protection against spillages or falling equipment.

Facial hair must be tidy and well presented.

Make up, perfume and after-shave must be discreet.

Where a staff member has a visible tattoo this must not be offensive to others. If deemed offensive, considered inappropriate or likely to cause upset to patients, carers, visitors or other staff, it is the line manager's responsibility to discuss with the individual staff member the appropriateness of their tattoo being on display. Tattoos must not make a political statement. Facial tattoos are not permitted and must be covered with make-up.

All departments where staff wear uniforms (other than nursing uniforms) must make arrangements for the provision of emergency uniforms to be available if:

- A member of staff has had their uniform soiled whilst working clinically
- A member of staff is called into work unexpectedly e.g. In the event of a major incident
- In exceptional circumstances when their uniform has been left at home.
- Emergency uniforms for nursing staff may be accessed by contacting the uniform rooms during normal office hours. Scrub suits may be used in extreme circumstances (out of uniform rooms' normal office hours) with the approval of Nurse in Charge. These must not be worn home.
- Smoking or vaping/electronic cigarettes is not permitted whilst on duty or in the grounds of the hospital. Chewing gum is not acceptable by any staff whilst at work.

## 2. Section 2: Trust Staff Wearing Uniforms

Where uniforms are provided, they must always be worn fully fastened including the top press stud; in the way they have been designed to be.

A clean uniform must be worn every day.

Any problems with uniforms must be discussed with the Line Manager, who will give authorisation for any exchanges that are appropriate.

When involved in patient contact all staff must be bare below the elbows to enable effective hand washing. There may be occasions when it is necessary for staff to wear personal protective clothing to cover their arms to reduce any risk of exposure (refer to the relevant guidance, for example the COSHH Assessment for a particular hazardous substance being used as part of a procedure).

Belts and buckles are optional for qualified nursing staff but must not be worn when delivering clinical care or working in clinical areas.

Ties must be tucked in or removed when carrying out direct patient care as they have been shown to be colonised by pathogens. Ties are regularly handled by the owner and come into contact with numerous objects and therefore have the potential to transmit Health Care Associated Infections (HCAIs).

Clinical staff involved in patient procedures and direct clinical contact must not wear prosthetic nails or nail varnish and nails must be short i.e. not visible above the tips of fingers. This is to avoid potential damage to patient's skin and to facilitate correct hand hygiene.

Clinical staff involved in patient procedures and direct clinical contact must not wear false eye lashes. This is to prevent false lashes becoming loose and causing potential harm to patients.

Sweaters, fleeces and cardigans may be worn if in keeping with a professional image. These must be of an agreed matching colour to the uniform as agreed by your Line Manager. These items of clothing must not be worn when in direct contact with patients.

Launder uniforms and clothing worn at work at the hottest temperature suitable for the fabric. A wash for 10 minutes at 60°C removes almost all micro-organisms. Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms. Washing machines and tumble dryers should be cleaned regularly, in accordance with manufacturer's instructions.

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The Trust will ensure that all uniforms will be reviewed and will take into account the consideration of the fabric washing instructions prior to purchase

Appropriate plastic aprons must be worn when assisting patients with toileting bathing or any activity, which may result in the dispersal of pathogens and/or procedures causing splashing of blood and body fluids. Aprons must be removed and disposed of immediately at the end of patient contact and must not be worn outside clinical areas.

In areas where food is prepared and handled, appropriate protective clothing must be worn in line with Food Safety (General Food Hygiene) Regulations 1995.

Hosiery (tights/stockings) must be plain and either flesh or black in colour. Plain black/navy socks must be worn with uniform trousers.

When in uniform, hair must be worn up or tied back off the collar in a style that does not require frequent re-adjustment. Hair when tied into a pony tail must not fall beneath the level of the collar or onto the face – if it does hair must be clipped up to prevent this happening.

Hair must be clean and neat and tidy at all times. Hair colour and style must reflect a professional image at all times. Accessories, clips and fasteners must be discreet if worn. Where required, the appropriate clinical head covering must be worn.

Staff in uniform or engaged in patient contact must not wear jewellery with the exception of one plain metal ring (no stones), (however, if metal band contains stones this must be removed or taped) and a single pair of stud earrings in the ear lobe. No other visible piercing, including tongue, nose stud, eye brow studs or any other facial piercings or stretchers can be worn. Ear stretcher 'tunnels' are not acceptable, 'plugs/spacers' will be permitted. If spacers are removed then large holes in ears should be taped.

Safety footwear, where provided, must be worn at all times. Where safety footwear is not provided, staff must wear footwear appropriate to the environment in which they are working and the job they perform. Footwear must be in a good state of repair, with anti-slip soles and low heels with enclosed toes, uppers and heels. Shoes must be plain black with no embellishments, quiet soled and enclose the whole foot, either in lace up, velcro or slip on design. The material must be wipeable. Staff should wear sensible shoes that give protection against spillages or falling equipment. Theatre and endoscopy foot wear must be cleaned of marks at every possible opportunity using clean surface wipes.

Nursing staff are not permitted to wear "croc" or any "croc style" shoes or clogs whilst working in clinical areas other than Theatres. Croc style clogs worn in theatres must be impervious to fluids.

### 3 Section 3: Wearing Uniforms Out of Work

Uniforms are only to be worn for official duties inside or outside the hospital premises (see section 3.3 re travel to and from work). The wearing of uniform outside the hospital premises is only permitted when staff are on specific Trust duty e.g. transferring patients.

Trust staff whose roles involve reviewing patients in the community may visit patients wearing their uniforms but these must be covered by a coat whilst travelling between the patient's home and your place of work.

Staff travelling to work in uniform must cover uniforms with a coat whilst travelling between their home and place of work e.g. with a coat that is fully fastened and of an appropriate length. It is acceptable for staff to change into a casual top such as sweater or T-shirt with work trousers to travel home in. These requirements are made for the safety and security of all staff.

### 4 Section 4: Theatre Scrubs/Trauma Suits

#### Scrub Suits (Scrubs)

Scrubs are recognised as Trust uniforms for staff working in the Theatre complexes, Sterile Services, Cardiac Catheterisation Lab, Interventional Radiography and Endoscopy.

Clean scrubs must always be worn. They must be changed as soon as possible when contaminated with blood or bodily fluids. Changing rooms and showering facilities are provided. Scrubs must not leave the Trust site and will be laundered by the Trust.

Staff must change their scrubs following any surgery/procedure when a patient has been identified as being infected.

Hair must be tucked under a cap or tied up as per this policy (page 14) personal protective equipment must be removed when not in use including face masks, aprons and gloves.

Staff wearing scrubs **are** permitted to:

- Escort patients to and from their department
- Visit a clinical area in the course of their duties ie seeing a patient
- Visit their office whilst on-call

Staff wearing scrubs are **not** permitted (unless attending an emergency ie cardiac arrest call/fire assembly) to:

- Leave the hospital
- Travel home or between sites
- Visit the education or library department
- Visit the hospital restaurants or shops
- Wear a surgeons operative gown, under any circumstances, over their scrub suits unless performing an aseptic procedure

## Trauma Suits

The following groups of staff only are authorised to wear uniform Trauma Suits:

- Junior Doctors can wear green trauma suit tunic, and matching green trousers.
- Pharmacists can wear a burgundy trauma tunic and black trousers.
- Endoscopy Nurses can wear trauma suit tunics and matching trousers in a colour according to their role.
- Critical Care staff can wear trauma suit tunics and trousers in a colour according to their role.
- Meadow Birth Centre Staff can wear navy blue trauma suit tunics and trousers.

## 5 Section 5: Trust Staff not Supplied With a Uniform

All staff not wearing uniform must wear clothing that is consistent with a smart, professional image

Hemlines must be no shorter than just above the knee to promote a professional image nor cause embarrassment or offence to patients, colleagues, other staff or visitors to the Trust. Plunging necklines and exposed midriffs are not acceptable.

Jeans, leggings on their own or worn with a short top, ski pants, tight fitting trousers and shorts are not acceptable exception for the therapy staff working in the gymnasium only. It is recognised that if on call staff are called in from home in an emergency that clothing may be different from the recommended

Hair must be kept clean, neat and tidy at all times. Hair colour must reflect a professional image.

Staff must ensure nail varnish is well maintained, of a discrete colour and portrays a professional image. Nail varnish is not permitted in Clinical areas

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Staff are reminded that jewellery can be a health and safety hazard. Any jewellery worn must be discreet. When engaged in direct patient care, staff must not wear any visible jewellery except one plain metal ring and a single pair of stud earrings. No other visible piercing, including tongue, nose and eye brow studs or stretchers can be worn. Staff engaged in patient contact must not wear jewellery with the exception of one plain metal ring and a single pair of stud earrings in the ear lobe. No other visible piercing, including tongue, nose stud, eye brow studs or stretchers can be worn. Ear stretcher 'Tunnels' are not acceptable, 'plugs/spacers' will be permitted. If spacers are removed then large holes in ears should be taped.

Clinical staff involved in patient procedures and direct clinical contact must not wear prosthetic nails or nail varnish and nails must be short i.e. not visible above the tips of fingers. This is to avoid potential damage to patient's skin and to facilitate correct hand

### 6 Section 6: Wearing of Religious Adornments

The wearing of religious adornments or symbols is permitted for those who wish to wear them, providing that the health, infection control, safety and security of patients and staff is not compromised.

Staff who wear facial coverings for religious reasons are required to remove them whilst on duty. This is to ensure that the member of staff is identifiable, and to enhance engagement and communication with patients, visitors and colleagues.

The Sikh Kara (bangle) may be worn, but must be worn high up the forearm as possible or removed when carrying out direct patient care. Where this cannot be achieved it must be covered by the wearing of disposable gloves. Patient safety is paramount, the Trust's primary concern is to maintain a bare below the elbow policy.

The wearing of Turbans, Kippots, and headscarves is supported on religious grounds. Headscarves must be plain and either navy or black in colour, shoulder length, adornment free and must not drape freely when providing direct clinical care.

Staff members who wish to wear a visible faith symbol for religious reasons may wear a small and unobtrusive badge on the lapel or underclothing, as long as they do not present a risk either to the health and safety or a risk of infection to the individual wearing them or anyone else.

### 7 Section 7: Return of Uniforms

When employment ceases with the Trust the employee must return the uniform to the Trust via their line manager. The line manager needs to ensure this happens as part of the exit process.

## Appendix 3

### Equality and Diversity Implications of a Uniform Policy/Dress Code

#### Key points for Managers

There are many legitimate health and safety, business, and practical reasons in the NHS why dress codes are not just important, but sometimes vital. However, Managers must ensure that they have a legitimate reason for imposing a dress code that can stand up to scrutiny. All existing and potential departmental dress codes should be reviewed with this in mind.

Managers should carefully review the accepted standards of dress on an ongoing basis – perceptions of what is “acceptable” clothing at work do change, and dress codes may become outdated and more difficult to justify as a result.

The Trust needs to be consistent and sensitive in its approach to the enforcement of a code. If an individual feels that an employer is trying to compromise their religious beliefs by enforcing a dress code then it can be upsetting for that employee and a heavy handed approach is likely to exacerbate the situation. Managers are therefore advised to contact one of the Equality Leads for advice. Any restriction should be connected to a real business or safety requirement.

#### Avoiding Discrimination

Dress codes can be considered to be discriminatory on a number of grounds covered by the Equalities Act 2010, including:

Protected Characteristic	Examples
Age	Tattoos are more prevalent in the younger generation. Rules should be based on justifiable grounds and applied consistently.
Disability	Some people wear a necklace or bracelet to highlight a disability in case of an emergency. Although a necklace or bracelet may not be allowed for health and safety or infection control reasons a compromise might be to allow a lapel pin. Reasonable adjustments should be applied under the Disability Discrimination Act 1995 for disabled employees who cannot comply with a uniform policy.
Gender Reassignment	The individual will dress in accordance with the sex that they identify with. Issues that an employer might need to accommodate include hair length and style, use of makeup, and the wearing of jewellery
Marriage/civil partnership	Requirement not to wear rings (or to have them taped) should be applied consistently to those who are married or not, and those in civil partnerships.

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Religion/belief	Some staff may be concerned on religious grounds with the requirement for clinical staff to be “bare below the elbow” Infection control will always take precedence but a compromise would be for wedding rings to be taped, the Kara to be pushed the arm or for disposable sleeves to be worn where the individual is not able to expose their forearms.
Race	A restriction on hairstyles such as cornrows or braids would need to be justified on health and safety or infection control grounds.
Gender	Females should not be required to wear skirts or dresses. A compromise would be to offer alternative uniform of tunics and trousers. Likewise requirements for long hair to be tied up on health and safety or hygiene grounds should be applied consistently to both sexes.
Sexual orientation	Most employers impose restrictions on piercings, tattoos, hairstyles and make-up but this needs to be applied consistently to both genders and to people of any sexual orientation.

Many employers now face confusion in trying to implement their dress codes, in fear that they may fall foul of the law. However, the principle remains that the implementation of a dress code is still legitimate, provided that it is **justifiable and is applied consistently**. Dress codes can also allow some differentiation between rules applying to men and women, as long as they are consistent overall.

The main risk with enforcing dress codes is indirectly discriminating against employees which can occur where:

1. A dress code is applied to all employees, however the policy puts some employees who share a protected characteristic at a particular disadvantage when compared to other employees (this is usually due to cultural or religious reasons).
2. You cannot show that applying the policy is justified as a proportionate means of achieving a legitimate aim.

If an employee makes a request which is contrary to this dress code but which could relate to a protected characteristic, careful thought should be given as to whether there is a legitimate business reason for applying the policy. If there isn't then the request should be handled sensitively and discussed with one of the Equality Leads or a member of the HR department.

### Tips for keeping within the law

- Set clear standards
- Set out clear consequences of failing to comply.
- Communicate the policy.

## Policy

- Avoid having blanket bans unless you have reasons which would justify that decision, such as health and safety, or infection control
- Allow some flexibility to deal with requests on a case by case basis.
- Deal with issues as they arise - you are within your rights for example to ask employees to cover up tattoos or visible piercing if there is a reason behind this.
- Be aware of discrimination issues: these usually concern an employee's religion, belief race but can in some instances relate to disability or gender.
- Policies should apply to men and women equally, although there may be different requirements they should have the same overall effect.
- Consider the reasoning behind the policy so that you can justify your decision if required.

When devising or reviewing a local dress code, employers must ask themselves whether the dress code will require employees to dress in a way that contravenes their religion or belief. Codes may directly or indirectly restrict:

- the length of beards for men
- the wearing of headscarves
- the wearing of burkhas and veils
- the wearing of jewellery (such as a Christian cross) or a piercing

If a rule is likely to conflict with an employee's religion or belief there must be clear evidence to demonstrate objective justification. This analysis may be required on a case by case basis.

### **Bare below the Elbow**

The Trust expects all patient facing clinical staff to practice "bare below the elbows" on the grounds of control of infection. However, it is recognised that exposure of the forearms is not acceptable to some because of their faith.

- Uniforms may include provision for sleeves that can be full length when staff are not engaged in direct patient care activity.
- Uniforms can have three-quarter length sleeves.
- Any full or three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity.
- Disposable over-sleeves, elasticated at the elbow and wrist, may be used but must be put on and discarded in exactly the same way as disposable gloves. Strict procedures for washing hands and wrists must still be observed.

Where, for religious reasons, members of staff wish to cover their forearms or wear a bracelet when not engaged in patient care, they must ensure that sleeves or bracelets can be pushed up the arm and secured in place for hand washing and direct patient care activity.\*

## Appendix 4 – Dress and Uniform Policy Non Clinical Staff Audit Tool

Dress and Uniform Policy Non Clinical Staff Audit Tool: This audit tool should be completed following observation and questioning of Non Clinical staff.

Date: Department: Completed by:	1	2	3	4	5	6	7	8	9	10
Clothing of non-clinical staff: Should project the professional status of the member of staff. Neck line and hemlines should be of appropriate length. No jeans or leggings should be worn. Clothing should be clean, undamaged, crease free, odour free and of a good fit.										
Footwear: Shoes should be professional in image and give protection against spillages or falling equipment.										
Identification badge: Should be on display and easily visible, lanyards may not be worn by any Trust members.										
Hair: Hair must be clean, neat and tidy and should be of a discreet colour reflecting the professional status.										
Jewellery: All jewellery worn should be discreet no other visible piercing including tongue nose or eye brow or stretchers should be worn. Spacers are accepted and if removed earlobe holes should be taped										
Makeup, perfume and aftershave: must be discreet.										
Nails: Nail varnish must be well maintained and of a discrete colour and portray a professional image.										
Score										
Total possible score	7	7	7	7	7	7	7	7	7	7

## Policy

### Appendix 5 – Dress and Uniform Policy Audit Tool Clinical Staff.

Dress and Uniform Policy Audit Tool Clinical Staff: This audit tool should be completed following observation and questioning of clinical staff.

Date: Department: Completed by:	1	2	3	4	5	6	7	8	9	10
Uniform: Should be crease free, not damaged, odour free, clean and of good fit. Vests, T-shirts or under garments should not be visible at any time. Staff must be bare below the elbows.										
Footwear: Shoes should be plain black, well supported, good firmness to the sole, quiet soled and enclose the whole foot. Running trainers (except in the gym) are not permitted. Clogs are permitted in theatre environment and should be clean and stain free. Court shoes are not permitted.										
Identification badge: Should be on display and easily visible, lanyards may not be worn by any Trust members.										
Hair: Hair must be clean, neat and tidy and must be worn up or tied back of the collar and must not fall onto the face. Hair colour must be discreet.										
Wristwatches: Must not be worn in clinical and personal care situation. A fob watch is acceptable.										
Jewellery: One single pair of stud earrings and a plain stone free metal wedding ring may be worn. No other visible piercing including tongue, nose, eyebrow or stretchers are permitted. If spacers are removed then holes should be taped. Tattoos must not be offensive.										
Makeup, perfume and aftershave: must be discreet. False eyelashes are not permitted to be worn.										
Nails: Clinical staff must not wear prosthetic nails or nail varnish and nails must be short.										
Hosiery: Plain flesh colour/black hosiery if worn. Plain navy or black socks.										
Care of Uniform: Should be washed separately at 60°C in a domestic washing machine, tumble dried or ironed. A clean uniform should be worn every shift/working day.										
Score										
Total possible score	1 0	10 0								

#### UNIFORM AND DRESS CODE POLICY

## Appendix 6 – Approved Uniforms

Chief Nursing Officer	Red with navy trim tunic /dress Navy trousers Red belt
Deputy Chief Nursing Officer	Red with navy trim tunic /dress Navy trousers Red belt
Corporate Nurses Divisional Directors of Nursing/Midwifery Associate Directors of Nursing	Navy with red trim tunic/dress Navy trousers Red belt
Matron	Navy with royal blue trim tunic/dress Navy trousers Navy belt
Consultant Nurse	Navy with purple trim tunic/dress Navy trousers Navy belt
Lead Nurse	Navy with yellow trim tunic/dress Navy trousers Navy belt
Ward Manager/ Ward Sister/Charge Nurse /Midwife	Navy with white trim tunic/dress Navy trousers Navy belt
Junior Sister/Junior Charge Nurse/Midwife	Navy with white trim tunic/dress Navy trousers Navy belt
Specialist Nurse Advanced Nurse Practitioners Female	Navy /white Spotted tunic/dress Navy trousers Navy belt
Male	Navy tunic with white epaulettes Navy Trousers
Advanced Clinical Practitioners	Navy Trauma Suits
Senior Staff Nurse	Royal blue with white trim tunic/dress Navy Trousers Royal blue belt

### UNIFORM AND DRESS CODE POLICY

## Policy

Staff Nurse	Hospital blue with white trim tunic/dress Navy trousers Navy belt
Associate Practitioner and Assistant Practitioner (Band 4)	Pale blue with navy trim and epaulettes tunic/ dress Navy trousers
Senior Health Care Support Worker (Band 3)	Pale blue with white trim/red epaulettes dress/ tunic Navy trousers.
Health Care Support Worker (Band 2)	Pale blue with white trim tunic/ dress Navy trousers
Physiotherapist	White with navy trim tunic/dress White polo shirt Navy trousers
Physiotherapy assistant	Sky blue tunic/ polo shirt Navy trousers
Occupational Therapist	White with bottle green trim tunic/ dress white polo shirt with bottle green trim Bottle green trousers/
Occupational Therapy assistant	Bottle green with white trim tunic/dress Green polo shirt with white trim Bottle green trousers
Ward \Dept. Clerks/Receptionists Female:	Navy/aqua patterned blouse Black skirt/trousers
Male:	Sapphire short sleeve shirt Black trousers.
Ward Administrator Female/Male	Ruby blouse/shirt Black trousers/skirt
Ward Housekeeper Female/Male	Blue stripe shirt Black skirt/trousers
Nursery Nurse (Paediatric Wards)	White/ pale blue polo shirt Navy trousers Play tabard.

### UNIFORM AND DRESS CODE POLICY

## Policy

Nursery Nurse (NICU and TCU)	Grey/ white striped tunic/dress Navy trousers.
Corporate Nurses /Allied Health Professionals (Bands 5,6 & 7)	Navy with white trim tunic/dress Navy trousers
Student Nurse\Midwifery Student (Worcester University)	White with blue trim tunic/dress Epauettes navy with white stripes dependent on year of training Navy Trousers
Dental Nurse	Navy/white stripe tunic/ dress Navy trousers
Orthoptist	White tunic with black trim tunic/dress  Black trousers
Audiologist\Student Audiologist	White with emerald green trim tunic/dress Black trousers
Senior Assistant Technical Officer and Assistant Technical Officer (Audiology)	Aqua with emerald green trim tunic/dress  Black trousers
Newborn baby screening	Aqua with white trim tunic/dress  Black trousers
Phlebotomists	White with turquoise trim tunic/dress/ Black trousers
Diagnostic and Breast Imaging Radiographers Female  Male	White with burgundy trim tunic/ dress Burgundy trousers Burgundy trauma suit with white trim for interventional work only  White tunic with burgundy trim Black Trousers Burgundy trauma suit with white trim for interventional work only
Assistant Practitioners(Radiology)	White with royal blue trim tunic/dress Navy trousers Royal blue trauma suits for interventional work only.

**UNIFORM AND DRESS CODE POLICY**

## Policy

Radiography Assistants	Blue/white pin stripe tunic Navy trousers
Pharmacist Pharmacy Assistants	Burgundy trauma tunics tops Black trousers (sewn in front seam)
Advanced Pharmacist Practitioners	Navy Trauma Suits
Dietician	Burgundy tunic/dress Black Trousers
Dietician Assistant	Pale Grey with white stripe tunic /dress Black trousers
Occupational Health Nurse	Purple tunic /dress Navy trousers
Theatre Staff	Blue theatre scrubs
Clinical/Medical Scientist	White with turquoise trim tunic/dress Black trousers Laboratory coats depending on working environment.
Vascular Scientist	White with green stripe tunic/ dress Black trousers
Housekeeper – AGH KTC	Green trauma top /white trim Black trousers
Housekeeping Supervisor AGH KTC	Green blouse/shirt Black trousers
House Keeping Fast Response Team AGH KTC	Jade trauma suit /red trim
House Keeping Supervisor Fast Response Team AGH KTC	Jade trauma suit /yellow trim
House Keeping Team Leader KTC	Green trauma top /navy trim
Catering AGH KTC	Purple tunic/ white trim Black trousers

### UNIFORM AND DRESS CODE POLICY

# Policy

Linen Room Staff AGH	Red polo shirt Black trousers
Porters – Team AGH KTC	Blue Shirt Black trousers
Porters – Supervisor AGH KTC	Royal blue shirt Black trousers
Estates Staff AGH KTC	Blue Polo shirt Blue trousers
Progress Chaser	Grey with white trim tunic/ dress Black trousers .
Speech and Language Therapist	Turquoise with white piping dress/ tunic Black trousers.
Volunteer	Mid blue “Volunteer” tabard.
Meadow Birth Centre	Trauma suits (colour according to grade)
Cardiopulmonary physiologist	White with black trim tunic/ dress Black trousers.
Newborn baby screening	

## Appendix 7 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
<b>1.</b>	<b>Does the policy / guidance affect one group less or more favourably than another on the basis of:</b>		
	• Race	No	This policy has potential to discriminate and will be applied sensitively and will take account of individual cultural or religious observance, unless there are justifiable reasons such as health and safety of infection control for not permitting certain items of clothing or jewellery.
	• Disability	No	
	• Gender	No	
	• Religion or belief	No	
	• Age	No	
	• Sexual Orientation (L.G.B.T.)	No	
	• Culture	No	
	• Ethnic origins (Gypsies & Travellers)	No	
	• Nationality	No	
<b>2.</b>	<b>Is there any evidence that some groups are affected differently?</b>	No	Potentially yes for some religious groups
<b>3.</b>	<b>If you have identified potential discrimination, are any exceptions valid, legal and / or justifiable?</b>	Yes	Health and Safety and Infection control
<b>4.</b>	<b>Is the impact of the policy / guidance likely to be negative?</b>	No	
<b>5.</b>	<b>If so can the impact be avoided?</b>	No	
<b>6.</b>	<b>What alternatives are there to achieving the policy / guidance without the impact?</b>	No	
<b>7.</b>	<b>Can we reduce the impact by taking different action?</b>	No	

If you have identified a potential discriminatory impact of this key document, please refer it to Head of Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

## Appendix 8 - Financial Risk Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	<b>Title of document:</b>	<b>Yes/No</b>
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval

## Appendix 9 – Checklist for review and approval of key documents

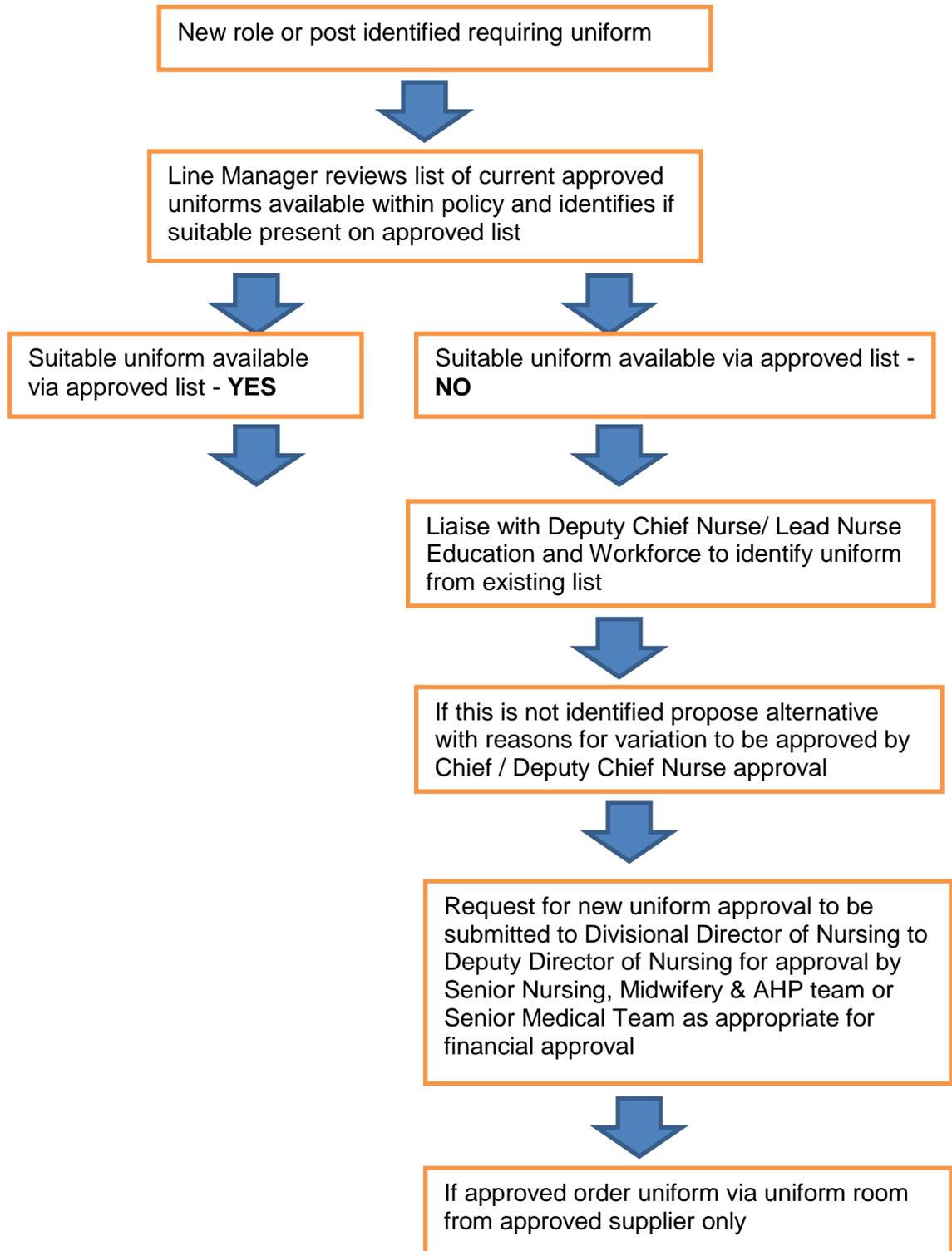
This checklist is designed to be completed whilst a key document is being developed / reviewed.

A completed checklist will need to be returned with the document before it can be published on the intranet.

For documents that are being reviewed and reissued without change, this checklist will still need to be completed, to ensure that the document is in the correct format, has any new documentation included.

1	Type of document	HR Policy
2	Title of document	Standards of Dress Policy
3	Is this a new document?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If no, what is the reference number _____
4	For existing documents, have you included and completed the key amendments box?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5	Owning department	Chief Nursing Officer/Chief Medical Officer
6	Clinical lead/s	CNO/CMO
7	Pharmacist name (required if medication is involved)	n/a
8	Has all mandatory content been included (see relevant document template)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
9	If this is a new document have properly completed Equality Impact and Financial Assessments been included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
10	Please describe the consultation that has been carried out for this document	Matrons, Divisional Directors of Nursing Trust Management Committee
11	Please state how you want the title of this document to appear on the intranet, for search purposes and which specialty this document relates to.	UNIFORM AND DRESS CODE POLICY Search facility for “uniform” also
<p>Once the document has been developed and is ready for approval, send to the Clinical Governance Department, along with this partially completed checklist, for them to check format, mandatory content etc. Once checked, the document and checklist will be submitted to relevant committee for approval.</p>		

Appendix 10 – Flowchart for approval of new uniforms



## Appendix 11

### UNIFORM REQUEST FORM

NAME		GRADE	
CONTRACTED HOURS:		LOCATION	
COST CENTRE CODE		CONTACT NO	
NEW STARTER:	<b>Y / N</b>	SIZE REQUIRED	
NO. REQUIRED*:		TUNIC	
DRESSES		BLOUSE	
TROUSERS		TRAUMA TROUSERS	
TRAUMA TOP		MATERNITY TROUSERS	
MATERNITY DRESS		POLO SHIRTS	
AUTHORISED BY (MANAGERS SIGNATURE)			

You will be issued with the following number of uniform sets dependent on contracted hours – (31 to 37.5 hours - 5 SETS), (28-30 HOURS - 4 SETS), (21 to 27 hours – 3 sets), (under 21 hours – 2 sets).

#### SEWING ROOM OPENING HOURS

WRH Monday to Friday from 8.00am – 13.00 pm, Alexandra Hospital from 8:00am – 13:00pm.