

CONTROLLED DOCUMENT

Dress and Uniform Policy

CATEGORY:	Policy
CLASSIFICATION:	Human Resources
PURPOSE	To ensure that clothing and accessories worn by Trust staff are consistent with the Trust's infection prevention and control policy, health and safety policies and comply with patient and public expectation.
Controlled Document Number:	189
Version Number:	3.1
Controlled Document Sponsor:	Executive Chief Nurse
Controlled Document Lead:	Deputy Chief Nurse
Approved By:	Chief Executive Advisory Group
On:	April 2016
Review Date:	April 2019
Distribution:	
<ul style="list-style-type: none"> • Essential Reading for: • Information for: 	<p>All Trust staff</p> <p>All Trust staff</p>

Contents

Paragraph		Page
1	Policy Statement	3
2	Scope	4
3	Framework	4
4	Duties	5
5	Implementation and Monitoring	8
6	References	8
7	Associated Policy and Procedural Documentation	9
Appendix A	Monitoring Matrix	11
Appendix B	Dress and Uniform Policy Audit Tool: Staff <u>not</u> wearing a uniform.	12
Appendix C	Dress and Uniform Policy Audit Tool: Staff wearing a uniform.	13

1. Policy Statement

- 1.1 The aim of the Dress and Uniform Policy (the “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 and Health and Safety Policies, and comply with patient and public expectations.
- 1.2 The policy objectives are:
 - 1.2.1 To contribute towards Trust Infection Prevention and Control measures by minimising the risk of cross-infection from clothing/accessories;
 - 1.2.2 To contribute towards Trust Health and Safety measures by minimising risk of injury from inappropriate clothing/accessories and ensuring use of appropriate protective clothing;
 - 1.2.3 To ensure that a smart, professional image is maintained by all persons working within the Trust;
 - 1.2.4 To promote mobility, comfort and safety of the wearer; and
 - 1.2.5 To allow identification for security and communication purposes.
- 1.3 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.
- 1.4 The impact of Hospital 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 is integral to the control and prevention of HCAI. This policy is therefore based on the principles, directions and guidelines as stated in Saving Lives (2007) campaign, the Department of Health (2015) and the Care Quality Commission’s fundamental standards as a basic requirement of registration for healthcare providers.
- 1.5 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.
- 1.6 The Trust recognises and values the diversity of cultures, religions and disabilities of its employees and will take a sensitive approach when 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. This policy has been reviewed by the various religious and cultural leads to reach assurance that it does not cause either offence or discrimination.

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

2. Scope

- 2.1 This policy applies to ALL staff groups, whether they wear a uniform or not, including those with honorary contracts, sub-contractors, volunteers, locum, bank and agency workers, and students when working on or off Trust premises and representing the Trust.
- 2.2 Military non clinical uniform is dealt with in a separate Military policy.

3. Framework

- 3.1 This section describes the broad framework relating to dress and uniform throughout the Trust. Detailed instructions are provided in the associated procedural documents. Staff who are not required to wear a uniform must comply with the associated Dress Code. Staff who are required to wear a uniform must comply with the associated Uniform Standards.
- 3.2 The Chief Nurse will approve all procedural documents associated with this policy and any amendments to such documents, and is responsible for ensuring that such documents are compliant with this policy.
- 3.3 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 Trust approved and appropriate professional style work wear.
- 3.4 Other groups of staff who wish to adopt or change a current style uniform may only do so with the guidance of the Head of Service and the Lead Nurse Standards and with the approval of the Chief Nurse.
- 3.5 The Trust will provide theatre scrubs/clogs to staff that require them.
- 3.6 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.
- 3.7 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.

- 3.8 Where there are legal requirements under Health and Safety legislation, the Trust will provide appropriate personal protection clothing and equipment which must be worn correctly.
- 3.9 The Trust will provide information to staff who wear uniforms to ensure they have the appropriate washing instructions. This is incorporated into the Uniform Standards document.
- 3.10 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.
- 3.11 Staff must be smartly dressed as appropriate for the Trust environment. This continues to apply whatever the staff's gender expression. If the member of staff is required to wear a uniform, any changes required or issues that prevent them from complying with this policy must be discussed their line manager so they can be managed on an individual basis and follow Health and Safety advice as required.
- 3.12 Nursing emergency uniforms may be accessed by contacting the Clinical Site Manager QEHB via switchboard who will authorise the temporary loan of an emergency uniform.
- 3.13 All departments where staff wear uniforms (other than nursing uniforms) must make arrangements for the provision of emergency uniforms to be available if:
 - 3.13.1 a member of staff has had their uniform soiled whilst working clinically;
 - 3.13.2 a member of staff is called into work unexpectedly e.g. in the event of a major incident; or
 - 3.13.3 in exceptional circumstances when their uniform has been left at home.

Staff must **NOT** wear surgical scrubs as an emergency uniform.

4. Duties

4.1 Board of Directors

The Board of Directors

- 4.1.1 will ensure appropriate uniforms and health and safety equipment is available and provided for staff when required.

4.2 **Executive Chief Nurse**

The Executive Chief Nurse will:

- 4.2.1 Approve the Dress Code and Uniform Standards and any other associated procedural documents;
- 4.2.2 Receive reports of serious breaches of the Dress and Uniform Policy and associated procedural documents from line managers; and
- 4.2.3 Receive issues and provide a judgement where the individual staff interpretation of the policy and its associated procedures in relation to individual beliefs has meant a compromise cannot be achieved by line and senior managers.
- 4.2.4 Declare relaxation of the policy in relation to wearing of full uniforms in exceptional heat circumstances.

4.3 **Uniform Services Department**

The Head of Uniform Services Department will:

- 4.3.1 Ensure all Nursing, Facilities Services and specified staff groups who require uniforms are provided with suitable well-fitting uniforms;
- 4.3.2 Undertake exchanges of uniforms as appropriate.

4.4 **Associate Directors of Nursing and Allied Health Professionals, Directors of Operations, Divisional Directors, Clinical Service Leads, Heads of Departments and Professional Leads, Matrons and Senior Sisters/Senior Charge Nurses**

The Associate Directors of Nursing and Allied Health Professionals, Directors of Operations, Divisional Directors, Clinical Service Leads, Heads of Departments and Professional Leads, Matrons and Senior Sisters/Senior Charge Nurses will:

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

4.5 **Line managers**

Line managers will:

- 4.5.1 Ensure all staff are aware of, know how to access and comply with this policy and its associated procedural document;
- 4.5.2 Ensure adherence to this policy within their areas of responsibility;
- 4.5.3 Ensure all staff have uniforms if required;
- 4.5.4 Act as good role models;
- 4.5.5 Set out the particular requirements for areas where there are legal requirements under Health and Safety legislation in terms of personal protection equipment. They will ensure that such local Codes of Safe Practice are compliant with this policy and the associated Dress Code and Uniform Standards and must ensure that staff working in such areas do wear the protective apparel specified;
- 4.5.6 Manage failure to adhere to this policy and its associated procedures using the disciplinary processes if required.

4.6 **All Staff**

All staff must:

- 4.6.1 Ensure that they are fully conversant with this policy and its associated procedural documents.
- 4.6.2 Comply with the requirements of this policy and the Dress Code or Uniform Standards that apply to them;
- 4.6.3 Raise any issues that may prevent them from complying with this policy with their line manager so they can be managed on an individual basis and follow Health and Safety advice as required.
- 4.6.4 Assume the responsibility of ensuring colleagues are compliant with the policy and challenge or report to their line manager if unable to address any breaches.

5. Implementation and Monitoring

5.1 Implementation

This policy and its associated procedures are available on the Trust intranet and will be disseminated to staff through the Divisional management and internal team structures within the Trust.

5.2 Monitoring

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

6. References and Bibliography

Care Quality Commission (2016) **The fundamental standards**

<http://www.cqc.org.uk/content/fundamental-standards>

[Accessed 30.08.16]

Department of Health September (2010) **Uniforms and Workwear; Guidance on uniform and workwear policies for NHS Employers** The Stationary Office, London.

<http://www.westhampshireccg.nhs.uk/downloads/categories/infection-prevention/963-department-of-health-uniforms-and-workwear-2010/file>

[Accessed 26.08.16]

Department of Health (2007) **Saving Lives: reducing infection, delivering clean and safe care**

http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_078134

[Accessed 26.08.16]

Department of Health (2015) **The Health and Social Care Act. Code of practice on the prevention and control of infections and related guidance.**

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/449049/Code_of_practice_280715_acc.pdf

[Accessed 30.08.16]

The Equality Act 2010

<http://www.legislation.gov.uk/ukpga/2010/15/contents>

[Accessed 30.08.16]

Equality and Human Rights Commission Guidance. (2010) Guidance on the wearing of Sikh articles of faith in the work place and public space.

http://dera.ioe.ac.uk/1986/1/sikh_articles_of_faith_guidance_final.pdf

[Accessed 30.08.16]

Food Safety (General Food Hygiene) Regulation 1995

<http://www.legislation.gov.uk/uksi/1995/1763/made>

[Accessed 30.08.16]

Health and Safety Executive (2015) **Personal Protective Equipment at Work Regulations 1992. Guidance on Regulations**

<http://www.hse.gov.uk/pUbns/priced/l25.pdf>

[Accessed 30.08.16]

Health and Social Care Act (2008) (England only)

<http://www.legislation.gov.uk/uksi/2014/2936/contents/made>

[Accessed 30.08.16]

Human Rights Act 1998

<http://www.legislation.gov.uk/ukpga/1998/42/contents>

[Accessed 09.11.16]

Ionising Radiation Regulations 1999

<http://www.legislation.gov.uk/uksi/1999/3232/contents/made>

[Accessed 30.08.16]

Management of Health and Safety at Work Regulations (1999)

<http://www.legislation.gov.uk/uksi/1999/3242/contents/made>

[Accessed 30.08.16]

Manual Handling Operations Regulations (1992)

<http://www.legislation.gov.uk/uksi/1992/2793/contents/made>

[Accessed 30.08.16]

Mitchell A, Spencer M, Edmiston C (2015) Role of healthcare apparel and other healthcare textiles in the transmission of pathogens: A review of the literature. **Journal of Hospital Infection** 91(3) pp 285-292.

Royal College of Nursing (2013) **Guidance on uniforms and work wear.** Royal College of Nursing, London.

<https://www.rcn.org.uk/professional-development/publications/pub-002724>

[Accessed 30.08.16]

Salisbury et al [1997] The effect of rings on microbial load of health care workers' hands. **American Journal of Infection Control** (25) pp24-27

Workplace (Health and Safety and Welfare) Regulations (1992)

<http://www.legislation.gov.uk/uksi/1992/3004/contents/made>

[Accessed 30.08.16]

7. **Associated Policy and Procedural Documentation**

Infection Prevention and Control Policy

Disciplinary Policy

Dress Code

Smoke Free Policy

Uniform Standards

Appendix A

Monitoring Matrix

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/ GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Line managers of all wards/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, such as Back to the Floor	Divisional Management Teams	Senior Manager Corporate Risk	Audit	As required

Appendix B

Dress and Uniform Policy Audit Tool: Staff not wearing a uniform. This audit tool should be completed following observation and questioning staff who are not wearing a uniform.

Date:	1	2	3	4	5	6	7	8	9	10
Department:										
Completed by:										
Clothing Should project the professional status of the member of staff. Neck line and hemlines should be of an 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 must be professional in image, be supportive. All footwear worn within clinical areas must be soft soled and quiet.										
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.										
Makeup, perfume and aftershave: Must be discreet and acceptable to others.										
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

Appendix C

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

Date:	1	2	3	4	5	6	7	8	9	10
Department: Completed by:										
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. Clogs are permitted in theatre environments and must be clean and stain free.										
Identification badge: Should be on display and easily visible, lanyards may not be worn.										
Hair: Hair must be clean, neat and tidy and must be worn up or tied back off the collar and must not fall onto the face. Hair colour must be discreet.										
Wristwatches: Must not be worn in clinical and personal care situations. 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, eye brow or stretchers are permitted. Tattoos must not be offensive.										
Makeup, perfume and aftershave: Must be discreet and acceptable to others: no false eyelashes										
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 degrees in a domestic washing machine, tumble dried or ironed. A clean uniform must be worn every shift/working day.										
Score										
Total possible score	10	10	10	10	10	10	10	10	10	10