

## Dress Code / Uniform Policy

<b>For use in (clinical areas):</b>	All areas
<b>For use by (staff groups):</b>	All staff groups and students within the organisation
<b>Document owner:</b>	Nursing & Governance Directorate
<b>Status:</b>	Approved TMT

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### 1. Introduction

**This is a corporate policy outlining the minimum core standards to be adhered to by all members of staff within the organisation.**

Individual departments / professions may have additional requirements which will be outlined within their departmental policies.

### 2. Purpose of the Guideline

This policy is designed to ensure that the dress code and the wearing of uniforms is consistent across the Trust and that **all** staff portray an image designed to promote the confidence of patients and the public. It outlines standards staff are expected to adhere to when at work. Staff have a professional responsibility to comply with the standards outlined in this policy, and this will be reviewed on an ongoing basis.

Uniform policy and dress code exists to:

- Provide protection in the workplace
- Portray a professional appearance and public confidence
- Promote a corporate identity

There are a set of general principles, which apply to **everyone** working in the Trust, and additional standards for those in a patient environment.

### 3. Rationale for main recommendations

Maintain staff and patient safety:

- To ensure that clothing is appropriate for the work undertaken and the working environment.
- To ensure uniform is compatible with safe moving and handling, and infection prevention, minimising the risk of infection transfer.
- To provide appropriate protection for staff from hazards.

Maintain professional image:

- To reassure patients, relatives and visitors to the Trust that staff take pride in their appearance and portray a positive image.
- To ensure that staff adhere to the Uniform Policy at all times when wearing their uniform, including when off the Trust premises. Uniform must always be appropriately covered when off site.

### 4. Standard

All staff within the organisation portray a professional image and appearance, and comply with the Trust's Uniform and Dress Code Policy.

#### 4.1 General principles for all staff members

- A Trust identity badge and name badge must be worn and be clearly visible while in the Trust, but this must be removed when leaving the Trust.
- Work clothes must be smart, clean and practical. Excessively short skirts, exposed midriffs or exposed underwear are not acceptable, as they do not portray a professional image and may cause embarrassment to others.
- Casual wear i.e. denim, football shirts and T-shirts with offensive logos or writing are not permitted
- All footwear must be closed in clinical areas (no crocs) and firmly attached to the wearer's foot and should be low heeled. Open toe sandals may be worn in non-clinical areas where there are no manual handling operations and at the discretion of the manager of the area.
- Protective footwear must be worn when required for high risk activities such as moving / handling operations.
- Hair must be clean, neat and tidy. Hair must not be brightly coloured artificially, and any hair fastenings should be discreet, and plain.
- Facial hair must be neat and tidy
- Head coverings must be secure and washed daily.

- Make up and jewelry must be discreet.
- Body piercings must be discreet and should be removed or covered with the uniform. If the member of staff is unable to remove or cover the piercing then this is subject to the discretion of the manager.
- Staff must not chew gum when at work or during professional forums / meetings.
- Non-uniform professionals may wear a corporate approved lanyard with only their ID badge attached to the lanyard. No other items should be attached.
- Where members of staff smoke in a public place they must ensure that their uniform is covered, that their ID badge is not visible and it is not otherwise apparent that they are an NHS employee. Smokers should be aware that the smell of cigarette smoke on clothing can be abhorrent to a non-smoker and if, on return to work, the member of staff is in close proximity to a patient, may even cause them to feel nauseous. (No Smoking Policy PP004)

#### **4.2 Wearing face veils in the workplace (i.e. burqa and niqab)**

The Trust recognises the need to balance patient safety alongside religious views and practices.

The Trust has given careful consideration to this issue, and has decided to introduce the following guidance:

To ensure effective communication and minimise infection risks, clothing which covers the face (veil, niqab, burqa) would not be permitted for any staff in contact with patients, carers or visitors or for staff in other roles where clear face to face communication is essential, for example, training.

Training includes both those staff attending training courses and those delivering the training

Staff who wish to wear a veil when they were not working – such as in breaks, or during their lunch, or walking around the buildings are allowed to do so. However staff should be prepared to remove their veil if asked to check their identity against their ID badge.

#### **4.3 Additional rules for staff working in the patient environment**

##### **4.2.1 Clinical staff non-uniform**

- To be compliant with bare below the elbow principles clinical staff not in uniform may only wear one plain band ring and must not wear a wrist watch whilst in the clinical area.
- Nails must be clean, short, neatly manicured.
- Where, for religious reasons, members of staff wish to cover their forearms or wear a bracelet when not engaged in patient care must ensure that sleeves or bracelets can be pushed up the arm and secured in place for hand washing and direct patient care activity.
- Ties act as a vector for transmission of infection; where ties are worn they must be changed daily and tucked away when in contact with patients.
- Lanyards must not be worn when undertaking patient activity.
- Where a member of staff is required to wear a medical identification/alert tag, it is recommended that it should be a necklace rather than a bracelet.
- Non-uniform professional may wear a corporate approved lanyard with ID badge only on the lanyard, no other items to be attached.



#### 4.2.2 Clinical staff in Uniform

- Clean uniforms / scrubs must be worn daily. Uniforms can be washed at 40°, but must then be tumble-dried or ironed. Otherwise uniforms must be washed at 60°. It is recommended that staff change into and out of uniform at work, or cover uniform completely when travelling to and from work.
- If wearing a nursing or midwifery uniform lanyards are NOT permitted and ID badges are to be clipped onto pockets so as not to fall into or brush onto patients / objects etc.
- All other uniforms and non-uniform professionals may wear a corporate approved lanyard with ID badge only on the lanyard, no other items to be attached.
- When patient contact is taking place the lanyard is to be removed.
- Lanyards depicting roles have been agreed, the list as follows:
  - Consultant
  - Doctor
  - E-Care Super User
  - Pharmacist
  - Nutrition and dietetics
  - WSFT brand only
- Jewellery is restricted to a maximum of one plain band ring and one pair of small stud earrings.
- Hair must be worn off the face and collar e.g. not in a long pony tail, and, in a style that does not require frequent readjustment, hair fastenings must be discrete and plain.
- No more than three professional / official badges may be worn, and these should be worn in an appropriate way so that they cannot cause injury to patients.
- Wristwatches must not be worn unless pinned to the inside pocket of the uniform.
- Nails must be clean, short and varnish free.
- Piercings must be removed or covered.
- Shoes must be black for nursing staff, low heeled, with quiet soles. No open toe sandals / shoes should be worn. No other footwear is permissible on duty, except for specified areas where protective footwear or clogs may be required.
- Plain tights / stockings must be worn (black for nursing staff) unless in extremely hot weather (this does not apply in air conditioned units where tights / stockings should be worn at all times). Direction will be given by the Nursing Directorate if weather conditions warrant non-wearing of tights / stockings Woolly tights are not permissible. Plain dark socks must be worn with trousers.
- Cardigans / pullovers must be plain and dark and may be worn in non-patient areas only; a cardigan must not be worn when attending to patients or when undertaking clinical activities.
- Uniforms must be worn complete with the appropriate belt or epaulettes where they form part of the uniform, which must be clean. Belts may be

removed while moving patients and during pregnancy. Buckles must not be worn for close patient contact and must be clean.

- Dress lengths must be below the knee.
- Male staff tunic tops must be fastened at all times.
- Theatre staff – uniforms specifically allocated to this area must not be worn outside of the area unless in an emergency and, where possible, appropriately covered.
- Uniforms must not be visible outside of the trusts grounds unless on official duties. When escorting a patient to another hospital / to the car park a cardigan or coat may be worn.

## 5. Recommendations and procedures

All staff have a responsibility to ensure that they adhere to the Dress Code / Uniform Policy

The Dress Code / Uniform Policy audit tool (appendix 1) should be used to audit staff appearance and compliance with the policy.

All line managers are responsible to ensure that their staff comply with the policy and have the responsibility for auditing compliance with the policy for their own staff.

Staff in breach of the policy should be challenged and reported to their line manager

Repeated disregard of the Dress Code / Uniform Policy will be considered as misconduct and could lead to disciplinary action being taken in line with the Trust Disciplinary Policy / Procedure.

## 6. References

Babb JR, Davies JG, Ayliffe GA (1983) Contamination of protective clothing and nurse uniforms in an isolation ward. *Journal of Hospital Infection*, 4, pp. 149-157

British Medical Association (2006) *Healthcare associated infections. A guide for healthcare professionals* London

Patel SN, Murrey-Leonard J, Wilson APR (2006) Laundering of hospital staff uniform at home. *Journal of Hospital Infection* 62, pp. 89-97.

Perry C, Marshall R, Jones E (2001) Bacterial contamination of uniforms. *Journal of Hospital Infection*, 48, pp.238-241

Royal College of Nursing (2005) *Guidance on uniforms and clothing worn in the delivery of patient care*. London: RCN. Publication code: 002 724

Royal College of Nursing (2005) *Uniform approach: Key points for nursing staff*, London: RCN. Publication code: 002 723

## 7. Development of the guideline

This policy was developed in consultation with different Trust directorates and professional groups and has been approved by TMT.

### 7.1 Statement of clinical evidence

The recommendations in this guideline are based on the evidence from published research and literature as indicated by the references.

### 7.2 Contributors and peer review

Infection Prevention I Team

## 8. Distribution list/dissemination method

Sent to the following Department / Service Leads for comment and review prior to agreement and dissemination as a Trust Policy:

Executive Director of Resources  
Executive Director of Human Resources  
Executive Chief Nurse  
Medical Director  
Trust General Managers  
Trust Council  
Trust Management Team

## 9. Document Format

<b>Author(s):</b>	<b>Head of Nursing for Medicine</b>
Other contributors:	Infection control team and distribution list Directorate of Nursing and Governance Human Resources Workforce Directorate
Approvals and endorsements:	Trust Management Team
Consultation:	Nursing & Midwifery Policies & Practices Committee Trust Council Union Representatives
Issue no:	3
File name:	(S:) / Policies & Procedures / PP(16)215 Trust Uniform Policy & Dress Code
Supercedes:	Nursing / Midwifery Uniform Code (C3)
Equality Assessed	Yes
Implementation	Implementation, compliance and effectiveness of this policy will be the responsibility of each department / profession (section 4. Recommendations & Procedures)
Monitoring: (give brief details how this will be done)	Compliance with the policy will be monitored by use of the attached audit tool (appendix 1)
Other relevant policies/documents & references:	No Smoking Policy PP004
Additional Information:	

## **Dress Code / Uniform policy audit tool**

Standard: All staff within the organisation portrays a professional image and appearance, and comply with the Trust's Dress Code / Uniform Policy.

### **Instructions for completion:**

- All elements must be met to achieve a 'yes' score
- Check 10 members of staff at random
- Following audit of 10 staff members, complete tally sheet (appendix 2)

<b>Auditor:</b>	<b>Ward / department:</b>	<b>Date:</b>	
<b>State staff group audited:</b>			
	<b>Observations</b>	<b>Yes</b>	<b>No</b>
1	Uniforms clean and neat?		
2	For staff working in the patient environment, hair off the face and collar, clean and neat?		
3	For staff with hands on patient contact: fingernails clean, short, and neatly manicured without nail varnish or nail extensions?		
4	Jewellery limited to one plain band ring and one pair of stud earrings?		
5	Body piercing removed or covered?		
6	A wristwatch not worn in the clinical area?		
7	An identification badge worn and clearly visible? (A maximum of 3 are acceptable.)		
8	A uniform belt worn (if required)?		
9	The uniform belt is clean?		
10	Appropriate footwear worn in the clinical area?		
11	No chewing gum		
	<b>Questions</b>		
12	Staff aware that uniforms should be changed daily?		
13	Staff follow hospital guidelines for washing their uniforms? (wash at 60° or 40° if tumble dried and/or ironed)		
14	Staff aware of the policy for wearing uniform outside the Trust?		

Total \_\_\_\_\_  
14



## **Advice from Muslim Spiritual Care Provision in the NHS (MSCP)**

Exposure of the forearms is not acceptable to some staff because of their Islamic faith. In response to these and other concerns, the MSCP convened a group including Islamic scholars and chaplains and multi-faith representatives as well as Department of Health policy-makers and external experts in infection prevention. Based on these group discussions, the MSCP prepared a list of recommendations to ensure that local dress code policies are sensitive to the obligations of Muslims and other faith groups whilst maintaining equivalent standards of hygiene.

Incorporating any of these recommendations into trust policy will have to be agreed in conjunction with clinical managers and the local infection prevention and control team:

- 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 wrists, may be used but must be put on and discarded in exactly the same way as disposable gloves. Strict procedures for washing hand and wrists must still be observed.

Use of hand disinfection gels containing synthetic alcohol does not fall within the Muslim prohibition against natural alcohol (from fermented fruit or grain)

Department of Health (2010) *Uniforms and workwear: Guidance on uniform and workwear policies for NHS employers*

## **The legal context**

Local policies on uniforms and work-wear should take account of legislation which specifically addresses work clothing and transmission of infection, principally:

- **The Health and Safety at Work Act 1974, Sections 2 and 3.** Section 2 concerns risks to employees. Section 3 concerns risks to others affected by their work.
- **The Control of Substances Hazardous to Health (COSHH) Regulations 2002.** Information about the relevance of COSHH regulations for infection control is available at [www.hse.gov.uk/biosafety/healthcare.htm](http://www.hse.gov.uk/biosafety/healthcare.htm)
- **The Management of Health and Safety at Work Regulations 1999.** These regulations cover patients and others exposed to microbiological infections, and include infection control measures.
- **Securing Health Together, the Health and Safety Executive (HSE) long-term strategy for occupational health.**
- **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.

Employers should also be aware of the provisions of equality and diversity legislation. Valuable guidance on this issue is available at [www.nhsemployers.org/EmploymentPolicyAndPractice/EqualityAndDiversity](http://www.nhsemployers.org/EmploymentPolicyAndPractice/EqualityAndDiversity).

Department of Health (2010) *Uniforms and work-wear: Guidance on uniform and work-wear policies for NHS employers*