

Document title: Dress Code and Uniform Policy
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Key points of this document

- Provides clarity for staff and managers regarding the required dress code and uniform standards for all employees of the Trust and visiting workers
- Includes evidence to support the required dress code and uniform procedure where this is available
- Identifies uniform colours to support identification of roles by patients, visitors and staff

Document version control schedule

Month/Year and Version Number	Author	Date Published on Document Library	Revisions from previous issue	Ratifying Committee	Date of Ratification
10/2018 1	Anne White		New Policy	NAC	2/11/18 Chairs action
11/2018 1.1	Anne White		Addition of detail on team names on name badges (9.2) Addition of laundry advice (14.5)		9/11/18 Chairs action
05/2019 1.2	Ivan Graham	03.05.2019	Minor amendments for the new RPH site	Q&R	03.05.2019
06/2019 1.2i	Ivan Graham	06.06.2019	Minor amendments (after one month on new site)		n/a
04/2020 1.3	Ivan Graham	27.04.2020	Minor amendments, including some definitions; also: Bare Below the Elbow (Section 6) Theatre hats (12.4.2) Wearing of scrubs (12.6.5) Monitoring of compliance (Section 20)	IPCC CPAC	23.01.2020 Chairs action 27.04.2020 (Section 20)
05/2020 1.3i	Ivan Graham	21.05.2020	Nursing Apprentice epaulettes added (p.18) Administration staff uniforms added (p.19)		n/a
07/2020 1.4	Ivan Graham	06.07.2020	Addition of 12.10: Donated scrubs (post COVID-19 Pandemic)	CPAC JSC CDC	18.06.2020 24.06.2020 26.06.2020

Summary of key points in this document

- The dress and presentation of all health care workers is perceived by our patients, carers and relatives to be an indication of the competence and professionalism of the individual who wears it, particularly those in uniform.
- All staff when in clinical uniform (this includes all types of 'scrubs' style uniforms) must be bare below the elbows at all times. This is to uphold public and professional expectations that staff in clinical uniforms will be bare below the elbow.
- Lanyards must not be worn.
- The Trust requires all staff to wear an official identification badge (badges with Trust logo and photographs) at all times whilst on duty or in the Trust.
- Trust wide standards of personal appearance are set out in Section 5.
- Uniforms are only to be used for official Trust duties inside or outside the hospital.
- Staff are not to wear white coats (with the exception of Laboratory staff where it is a requirement as part of their PPE).
- The Trust recognises the diversity of its employees relating to age, gender, marital status, sexual orientation, race, ethnicity, religion or belief and disability and will take a sensitive approach when this affects dress and uniform requirements. However, priority will be given to health and safety, security and infection control considerations.
- It is unacceptable for staff to go shopping or enter other commercial premises in uniform (there is acknowledgement that staff may use appropriate Biomedical Campus facilities when on duty).

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1. Introduction

- 1.1 The dress and presentation of all health care workers is perceived by our patients, carers and relatives to be an indication of the competence and professionalism of the individual who wears it, particularly those in uniform.
- 1.2 There is a body of evidence relating to dress code issues, particularly in relation to the prevention and control of infection agenda (Loveday et al, 2007; BMA, 2009; Department of Health, 2007 and 2010; and Royal College of Nursing, 2013).
- 1.3 While there is no conclusive evidence that uniforms or other work clothes pose a significant hazard in spreading infection, there is concern amongst the public that there is a risk.
- 1.4 The Trust recognises the diversity of its employees relating to age, gender, marital status, sexual orientation, race, ethnicity, religion or belief and disability and will take a sensitive approach when this affects dress and uniform requirements. However, priority will be given to health and safety, security and infection control considerations.

2. Purpose

The Dress Code and Uniform Policy is designed to:

- 2.1 Contribute to the projection of a positive image of the Trust and the staff working for it.
- 2.2 Readily identify staff to patients and visitors.
- 2.3 Support infection prevention and control measures.
- 2.4 Support health and safety working practices.
- 2.5 Give patients and visitors confidence.

3. Scope

- 3.1 This policy applies to all staff. It forms part of the terms and conditions of employment not just for those for whom a uniform is supplied. It also ensures that all staff have clear guidance on the standard of dress for their work area.
- 3.2 For the purpose of this policy, clinical staff are defined as all staff having direct contact with patients, to include, but not limited to, medical, nursing, pharmacy, Allied Health Professional, Health Care Scientist and radiography staff.
- 3.3 The clinical area is defined as all areas used to investigate, treat or consult with patients in order to deliver patient care and/or areas that are used for clinical preparations such as pharmacy areas. This includes office areas within clinical environments such as ward corridors, nurses station or doctor's office.

4. Duties and responsibilities

- 4.1 Appendix 1 outlines the duties and responsibilities for key personnel relating to this document. While the appendix identifies specific roles and responsibilities to key post holders, it is important to remember that **all staff** have a duty to read policy and procedural documents relevant to their practice and comply with them.

- 4.2 Failure to do so may result in performance or disciplinary action being taken. Staff should identify their training needs or any other needs in respect of policy or procedural documents and bring these to the attention of their manager.

5. Trust wide standards of personal appearance

- 5.1 All staff will present themselves for work in an appearance that is clean, tidy and in keeping with a professional image.
- 5.2 All staff are expected to wear shoes or other footwear suitable for their role. In clinical areas footwear must have
- 5.2.1 Enclosed toes and heels to protect the feet and a maximum heel height of 4cm to ensure shoes are stable for moving and handling and moving in a hurry
- 5.2.2 A smooth, non-porous surface without holes and be completely cleanable should they become soiled.
- 5.2.3 Quiet sole and heel to preserve a restful environment for patients
- 5.3 In non-clinical areas, footwear must be safe and present a professional image. Flip flops, platform soles and trainers are not acceptable footwear.
- 5.4 All staff must wear hair well groomed. Hair ornaments should be plain and practical for the purpose of keeping hair above the collar. Facial hair should be well groomed.
- 5.5 All staff, including those working in non-patient/non-public facing roles, should give consideration to promotion of a professional image, whether in uniform or non-uniform when considering hair colour.
- 5.6 Visible body piercing jewellery (including tongues, gums and dental piercings) other than one small plain earring stud in each ear must not be worn whilst on duty. This applies to all staff.
- 5.7 Make up and perfume, if worn, should be kept to a minimum.
- 5.8 Staff should give consideration to professional image when considering visibility of tattoos. If necessary, tattoos should be covered (where practical) so as not to offend others.
- 5.9 Staff will comply with the Trust No Smoking Policy (DN156). Smoking in uniform is strictly forbidden
- 5.10 Non-clinical staff may wear jewellery, (excluding body piercing jewellery as above), with approval of their manager, avoiding extremes of fashion. The general principle of sensible dress must be adhered to at all times. Staff wearing inappropriate jewellery will be asked to remove it.
- 5.11 It is not appropriate for non-uniformed staff to wear jeans or any form of denim.

6. Bare below the elbows

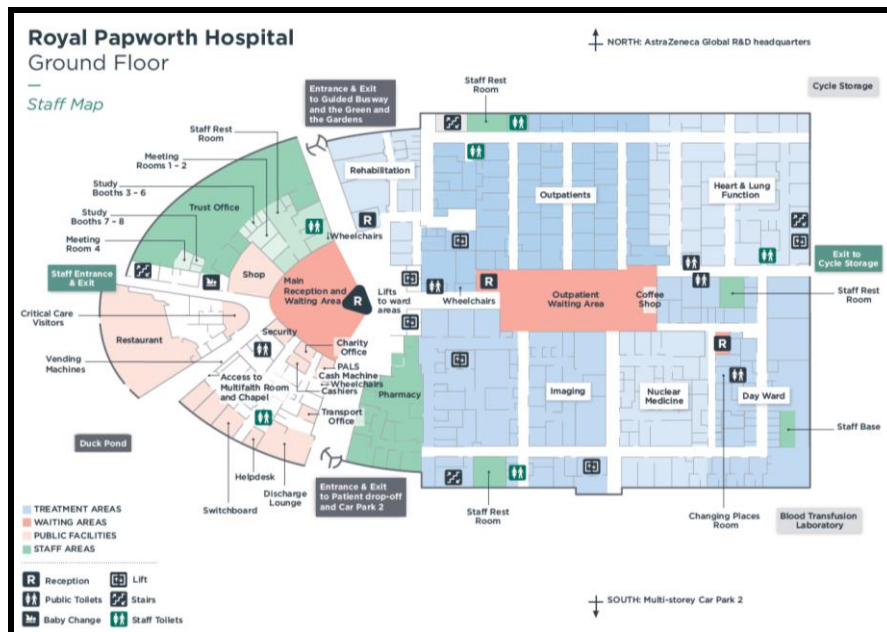
- 6.1 **All staff** working in clinical areas (including pharmacy, rehabilitation and outpatient department areas) must conform to the 'bare below the elbows' requirements.
- 6.2 For clarity, bare below the elbow means that nothing should be worn below the elbow. This includes Fitbits® (or other fitness bracelets); watches; jewellery; bobbles on the

wrist; charity bands or any other bracelet style round the wrist. (As noted in 7.3 below, one smooth wedding/plain band ring is permitted).

6.3 Staff wearing clinical uniforms, including scrubs, are to be bare below the elbow at all times and in all areas. This is to ensure appropriate messaging to patients and the public and appropriate role modelling for staff best practice. This includes wearing short sleeved shirts/blouses (or rolled up long sleeves) without neck ties (other than bow-ties or tucked in ties) and the avoidance of wearing white coats (DH, 2007). This will be particularly enforced in clinical and public areas.

6.4 For the purpose of this policy, clinical ('treatment') areas on the **ground floor** begin when you enter the main environment (for example, Outpatients when you enter the Outpatients cubicles area off the Waiting Area). Figure 1 shows a map of the ground floor with the clinical ('treatment') areas shaded blue. Please note that although not shaded blue, Pharmacy and the Discharge Lounge are also clinical areas.

Figure 1: Map of ground floor; clinical ('treatment') areas are shaded blue



6.5 Level 3 and above (all areas) are mostly clinical areas (level 2 is a plant floor, restricted area). Entry to the clinical areas is clearly indicated by access controlled doors on each of these floors. It is recognised that some staff, when outside of the ward areas on these floors (i.e. in the staff areas in the central corridor on each floor) might not bare below the elbows. A common sense approach should be applied to this. Staff must ensure that they are bare below the elbow when entering any clinical areas. Staff in uniform (including scrubs) should also note item 6.3 above.

6.6 For clarity (in response to staff feedback): it is not necessary for staff to be bare below the elbows in the ground floor meeting room (rehabilitation seminar room), **when used for non-clinical purposes** e.g. meetings or briefings.

6.7 It is acknowledged that at the start and the end of work, staff might have their uniforms / workwear covered, entering and leaving their areas within the hospital.

7. Additional requirements for clinical staff

- 7.1 Non-uniformed clinical staff are expected to adhere to the principles of smartness, professionalism and cleanliness, avoiding extremes of fashion, e.g. short skirts/shorts, see through tops and low cut necklines, trousers with low waists exposing underwear.
- 7.2 Clinical staff must wear hair off the collar. Hair must be suitably controlled whilst in direct patient contact. Hair ornaments should be plain and practical for the purpose of keeping hair above the collar. This means that if hair is worn in a ponytail, the bottom of the ponytail must not be lower than the collar. For clarity, this is shown in Figure 2 below. (Also note item 5.4 above).

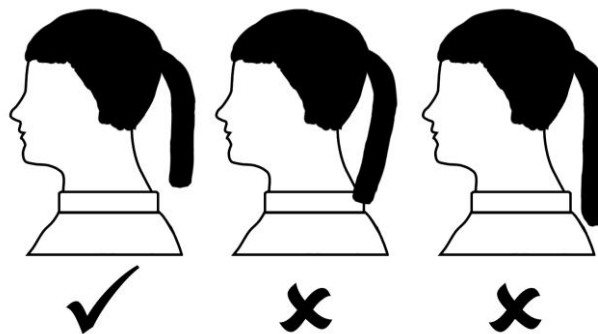


Figure 2 – picture to demonstrate item 7.2

- 7.3 Clinical staff, when in uniform, may wear the following jewellery: one smooth wedding/plain band ring and one pair of small plain ear studs, one in the lobe of each ear. Clinical staff are not permitted to wear wrist watches but may wear a fob watch.
- 7.4 Nails should be clean and well-trimmed when undertaking clinical care. False nails or extensions and varnish may not be worn by clinical staff.
- 7.5 False eyelashes may not be worn by clinical staff. Where these are semi-permanent, a decision will need to be made with the line manager regards appropriateness for the environment the staff member works.

8. Staff identification

- 8.1 The Trust requires all staff to wear an official identification badge displaying the Trust logo, staff members name, job title and photograph at all times whilst on duty or in the Trust.
- 8.2 Lanyards are not to be worn.
- 8.3 All staff having direct contact with patients will be provided with a Trust name badge stating their name and job title/role. The name of the employee's department should not be included on the name badge to leave more room for the name and job title to be clearer for the patients. Staff working in specialist teams should have the specialist team identified on the name badge if this is considered important for patient understanding. The team name must be meaningful to patients and not contain any abbreviations.

- 8.4 The minimum requirement for bank and/or agency staff is an official identification badge (with appropriate organisation logo, staff members name, job title and photograph) to be worn at all times whilst on duty.
- 8.5 ID card holders must be professional in style (i.e. no bright colours or designs that may cause harm through sharp edges) and the ID card holder design must not obscure the staff members photograph, name and job title on the front of the badge.
- 8.6 Lost photograph ID badges pose a risk to patient, staff and visitor security and must be reported to the Human Resources Department as soon as possible. Replacement ID badges should be obtained from the Human Resources Department. The loss of an ID badge should be reported on the Trust incident reporting system (Datix)
- 8.7 In addition to the ID badge, a limited number of professional/registration badges/union badges may be worn.
- 8.8 All badges must be removed in situations where they are likely to cause injury to patients, staff, and/or visitors.

9. Uniformed staff

- 9.1 Staff will be provided with the appropriate style of uniforms as set out in this policy.
- 9.2 Uniforms should not be altered in any way except by the Trust sewing room. Uniforms will only be adjusted to meet the Trust's requirements, not tailored to fit the individual.
- 9.3 Uniform dresses will be hemmed at 5cm below the knee and trousers hemmed to avoid contact with the floor
- 9.4 Damaged uniforms must be taken to the sewing room as soon as is practical.
- 9.5 Staff will be supplied with a set number of uniforms, according to current practice. It is the member of staff's responsibility to take reasonable care at all times with the supplied uniforms.
 - 9.5.1 The number of uniforms supplied for full time staff is (as a guide, this will usually be six items maximum). If part time or Flexible Staffing Service, the number is dependent upon the number of days worked per week (as a guide, this will usually be four items maximum).
 - 9.5.2 It is recognised that there may need to be some flexibility in the issue of uniforms at the discretion of an individual's line manager. For example, staff regularly working Monday to Friday (i.e. in uniform every day 5 days a week) may require a different allocation of uniforms depending on their role. While the number of uniforms at 9.5.1 remains the guide; with permission from their line manager, staff may have additional uniforms at no cost to themselves if required for work purposes.
- 9.6 Recognising the diversity of Trust staff relating to age, gender, marital status, sexual orientation, race, ethnicity, religion or belief and disability, changes to the dress code policy will be available on an individual request basis, and if appropriate the uniform will be adapted accordingly. This may, for example, include the provision of trousers and/or tunics and longer length sleeves if appropriate. Sleeves must be rolled up when undertaking clinical procedures and hand washing to conform with 'bare below the elbows' policy. Please see application for variation of dress code policy in Appendix 2.

When completed, a copy should be retained by the staff member and a copy should be placed on personal file.

- 9.7 In hot weather, ward/department managers may allow staff not to wear tights, where these are agreed as appropriate.
- 9.8 When not engaged in patient care, clinical staff may wear civilian clothing as agreed with their manager. However, when a member of staff is undertaking Trust business or attending any event in their capacity as a Trust employee, such as attending a study day, conference or external meeting they are expected to comply with these professional dress code standards.
- 9.9 At the manager's discretion and for a time/task limited period, the wearing of more casual clothing for undertaking 'dirty' duties e.g. moving offices is permitted.

10. Travelling in uniform and uniform outside of work

- 10.1 Uniforms are only to be used for official Trust duties inside or outside the hospital. Staff must not wear the Trust uniform when not engaged in official Trust duties.
- 10.2 When travelling to and from work it is best practice for uniform to be covered. There is no evidence of an infection risk from travelling in uniform, but many people perceive it to be unhygienic (DH, 2010, p.4).
- 10.3 It is unacceptable for staff to go shopping or enter other commercial premises in uniform (there is acknowledgement that staff may use appropriate Biomedical Campus facilities when on duty).
- 10.4 It is not necessary to cover uniform between Biomedical Campus buildings. Professional judgement should be used. Scrubs however, must not be worn outdoors (see Section 12 for full details).

11. Infection, prevention and control

- 11.1 Staff should wear a clean uniform on each shift.
- 11.2 Personal Protective Equipment (PPE) must be worn as per Trust Policy for Infection Prevention and Control. This is considered sufficient to protect uniforms from contamination and must be removed as soon as the episode of patient care is finished.
- 11.3 When a ward is closed due to an outbreak, staff working on the closed ward should not go to other in-patient areas if at all possible. When and where it cannot be avoided, staff should change into scrubs or a clean uniform before going from a 'closed' to an 'open' ward. Where possible, visiting the 'closed' ward at the end of their shift is preferable.
 - 11.3.1 Staff leaving a closed ward in their uniform should either have their uniform completely covered or change before going off duty.
- 11.4 All staff must not wear aprons or soiled/dirty uniforms in any public area in or outside the hospital.

12. Scrubs

- 12.1 The use of scrubs is restricted. Only 'hot floor' staff should be wearing scrubs.
- 12.2 Scrubs will be colour coded as follows:

12.2.1 Blue – all staff (with the exception of Healthcare Scientists)

12.2.2 Raspberry – Healthcare Scientists working on the ‘hot floor’

12.3 When **not** working on the hot floor, staff should wear their appropriate uniform (for doctors this is smart clothes, bare below the elbow).

12.4 In accordance with best practice guidance (Association for Perioperative Practice (AfPP), 2011), personnel should change into outdoor clothing before leaving the theatre environment. However, it is recognised that this is not always feasible.

Therefore, if it is necessary for theatre (and other hot floor) personnel to leave the hot floor environment without changing, this is permitted as follows:

12.4.1 As a single site hospital, staff in scrubs (if required to leave the hot floor) are able to move freely inside the hospital wearing scrubs. This includes the restaurant and public areas on the ground floor.

12.4.2 Masks should not be worn outside of theatres (unless necessary for a clinical procedure). It is also best practice to remove theatre hats when outside of theatres.

12.4.3 Staff are required to adhere to all elements of this policy as ‘staff in clinical uniform’ including bare below the elbow, jewellery restrictions and no lanyards.

12.4.4 Common sense must be applied to ensure that scrubs and footwear are in an appropriate condition to be in a public area. Remember the importance and value of patient and public perception and opinion.

12.5 Staff are not to wear white coats (with the exception of Laboratory staff where it is a requirement as part of their PPE).

12.6 Scrubs and theatre footwear must not be worn outside of the hospital:

12.6.1 Except in response to an emergency or where it is necessary to meet an ambulance for example, when common sense professional principles should apply.

12.6.2 For the purpose of this policy, the **modular build** is a clinical area and part of Royal Papworth Hospital. The link corridor to CUH is internal and part of Royal Papworth Hospital.

12.6.3 It is recognised that some ‘hot floor’ staff may be required to escort patients outside. In this circumstance, it would be best practice to cover the scrubs with a ‘theatre’ jacket. Staff should then give consideration to changing their scrubs on return to the hot floor environment and professional judgement must be used.

12.6.4 Hot floor staff transferring patients externally via ambulance may do so in their scrubs. Scrubs should be covered. Staff should then give consideration to changing their scrubs on return to the hot floor environment and professional judgement must be used.

12.6.5 In response to staff feedback: staff are allowed to sit outside in the staff areas **in the immediate vicinity** of the Royal Papworth Hospital building (for example adjacent to the staff restaurant). Please note 12.8 and 12.9 below.

12.7 Staff who do not need to be in scrubs, should change out of them.

12.8 Best practice remains that where possible, scrubs should be removed before leaving the hot floor environment and placed into an appropriate linen skip. Used theatre attire/scrubs should not be stored in lockers for further use.

- 12.9 When returning to the hot floor, professional judgement should be used to decide if it is necessary to change out of scrubs into fresh, clean scrubs. Any uncertainty should be discussed with the Matron, Manager or Clinical Lead from the hot floor. If there is any doubt, please change into fresh scrubs.
- 12.10 **Donated scrubs.** During the COVID-19 Pandemic, the general public, both locally and nationally were very generous in making and donating scrubs to the NHS. There are a number of bespoke designs. The feedback from the patients, public and staff has been extremely positive and as such it has been agreed that staff who wish to continue wearing these scrubs (who would usually be required to wear scrubs) can.
- 12.10.1 Staff should ensure they wear their name badge and ID card so that it is clear who they are. Consideration should also be given to the appropriateness of wearing the scrubs, for example, if breaking bad news, the member of staff should consider changing into plain NHS scrubs. This amendment to the Policy will remain under regular review, in line with staff, patient and public experience.

13. Maternity wear

- 13.1 Standard dress/uniform will be supplied to pregnant staff upon request. The uniform will be representative of the appropriate grade of staff.
- 13.2 Maternity uniforms are to be returned to the sewing room upon return to work or before going on maternity leave.

14. Laundering

- 14.1 Scrubs will be laundered by the Trust. Other uniforms will be laundered by staff, noting guidance in this Section (Section 14).
- 14.2 If uniform or clothing becomes visibly soiled or contaminated, staff must change their uniform or clothes immediately.
- 14.3 Scientific observations and tests, literature reviews and expert opinion suggest that there is little effective difference between domestic and commercial laundering in terms of removing micro-organisms from uniforms and workwear (DH, 2010).
- 14.4 It is good practice to wash uniforms and clothing worn at work at the hottest temperature suitable for the fabric. Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms. A wash for 10 minutes at 60°C removes almost all micro-organisms (DH, 2010, p.5).
- 14.5 Uniforms should be laundered separately from other garments to preserve colour integrity. Should a uniform become discoloured by a mixed wash incident, a replacement must be arranged via the linen room. The staff member may be required to pay for the replacement.
- 14.6 Where staff are issued epaulettes as part of their uniform, epaulettes should also be laundered in accordance with this Policy.

15. Variations to this policy

- 15.1 Members of staff, with their line manager's approval, may apply for a variation to specific policy statements to be considered where they feel this is safe and appropriate.

For example, statements around false nails or jewellery may be deemed unnecessary for members of staff having no contact with patients or visitors.

- 15.2 Applications for variations to this Policy must be made formally using the form in Appendix 2.

16. On leaving the Trust

- 16.1 Staff should return a complete set of uniforms to the Linen Room when they leave the Trust. Failure to do this may result in the recovery of the outstanding balance from their salary.

17. Health and safety

- 17.1 Any personal protective equipment (PPE) provided (which does not include uniform or foul weather gear) is to be issued, worn, maintained and replaced in accordance with the Personal Protective Equipment Code of Practice. PPE includes protective aprons, disposable gloves, eye protection, face masks, safety shoes etc.
- 17.2 All staff whether in uniform or not are required to wear clothes and footwear appropriate to the role for which they are employed to meet the requirements of Trust policy and procedure and current Health and Safety legislation.
- 17.3 Where safety clothing and equipment is provided by the Trust it must be worn and used as directed. This is an integral part of our employee's responsibilities and the Health and Safety Policy. Staff must immediately report any defect in clothing or equipment to their manager.

18. Ratification

- 18.1 This policy will be ratified by the Quality and Risk Committee.

19. Distribution

- 19.1 The Policy will be available in the Documents section of the Trust intranet.

20. Monitoring of compliance

- 20.1 Compliance with this policy will be monitored as part of business as usual, through daily and ongoing monitoring by all staff. Staff should challenge colleagues who are not compliant with the measures outlined in this policy.
- 20.2 Where staff are non-compliant and refuse to respond appropriately to the challenge, the member of staff should be reported to their line manager, who is responsible for addressing this with their colleague. If the case of repeated non-compliance arises, disciplinary action will be considered. This will be in line with the Trusts Performance/Capability Policy.
- 20.3 If it becomes necessary to monitor compliance in any given area, there is an audit tool available at Appendix 4. This is for monitoring and escalation if required within the Clinical Division and/or through to the Clinical and Professional Advisory Committee.

21. References

Association for Perioperative Practice (AfPP) (2011) Standards and Recommendations for Safe Perioperative Practice 3rd Edition

British Medical Association (2009) Tackling healthcare associated infections through effective policy action. London: BMA

Department of Health (2007) Uniforms and workwear: An evidence base for developing local policy. Leeds: Department of Health

Department of health (2010) Uniforms and Workwear: Guidance on uniform and workwear policies for NHS employees. Leeds: Department of Health.

Loveday H.P, Wilson J.A, Hoffman P.N and Pratt R.J, (Sep 2007) British Journal of Infection Control, Vol. 8 No.4, Public perception and the social and microbiological significance of uniforms in the prevention and control of healthcare-associated infections: an evidence review (pp.10-21)

NICE (2017) Surgical site infections: prevention and treatment. Clinical guideline (CG74). Published date: October 2008. Last updated: February 2017

North West Anglia NHS Foundation Trust (2018) Dress Code Policy

Royal College of Nursing (2013) Guidance on uniforms and workwear. London: RCN

Appendix 1

Duties and Responsibilities

1. Chief Nurse and Medical Director

- 1.1 Have executive responsibility for the implementation and monitoring of the Dress Code and Uniform Policy.
- 1.2 Accountable to the Trust Board for compliance with the Dress Code and Uniform Policy by their professional groups of staff.

2. Deputy Chief Nurse, Heads of Nursing (including Allied Health and Science equivalents), Deputy Medical Directors, Clinical Directors, Divisional Directors and their deputies/representatives or equivalents

- 2.1 Responsible for the compliance with the Dress Code and Uniform Policy by all staff members.
- 2.2 To support the Chief Nurse, Medical Director and Matrons with addressing non-compliance with the Dress Code and Uniform Policy.

3. Matrons

- 3.1 Responsible for ensuring compliance with the Dress Code and Uniform Policy.
- 3.2 Responsible for monitoring compliance with Dress Code and Uniform Policy for all disciplines and reporting to their Clinical Division meetings and to the Clinical Professional Advisory Committee.
- 3.3 To challenge and address non-compliance with the Dress Code and Uniform Policy and escalate where required.

4. Lead Nurses, Sisters, Charge Nurses, Managers and supervisors

- 4.1 Responsible for ensuring that all individuals adhere to the Dress Code and Uniform Policy at all times.
- 4.2 Monitoring the dress code and appearance of all their staff.

5. Employees

- 5.1 All employees have a duty to comply with the Dress Code and Uniform Policy and to project a professional image enabling public trust and confidence and contribute to the corporate image.

6. Bank Staff and Contractors

- 6.1 The general principles of the Dress Code and Uniform Policy must also be applied to all Bank Staffing employees, 'sub contractors', honorary contract holders and visitors working within the Trust.

Appendix 2

Application for variation to Dress Code Policy

Ward/department applying for variation:	
Person making request:	
Section of Dress Code Policy for which variation is being requested (please include numbered section):	
Reason for request:	
Detail of variation required (i.e. new wording of replacement clause):	
<p>Many of the clauses in the policy are included as they provide health and safety or infection prevention and control measures. Please consider the variation request you are making and complete a risk assessment using the form available on the intranet if relevant.</p> <p>Risk assessment completed: Yes/No</p> <p>(If yes, please attach a copy of the risk assessment document)</p>	
This variation request has been discussed with the following people (<i>insert name</i>):	
Manager (or Line Manager if applicable):	Date:
HR Business Partner/Advisor:	Date:
Occupational Health (optional / if required):	Date:
Trade Union representative (optional):	Date:

Signed by Manager (or Line Manager if applicable):

Date:

Signed by Employee (if applicable)

Date:

Copy to be retained by staff member with a copy placed on Personal File (if applicable)

Appendix 3

Staff uniforms

1. General

- 1.1** All dresses, trousers and tunics will be supplied so as to provide a reasonable fit, i.e. they will not be too tight or too loose and dresses will be supplied two inches below the knee. Alterations should only be undertaken through the Trust Sewing Room.
- 1.2** Footwear: In all cases footwear is to be plain black unless directed by department policy, with soft soles and enclosed at the heels and toes. Heels must not be higher than 4cm (1.5 inches). Canvas shoes and shoes with buckles are not appropriate.
- 1.3** Stockings/tights and socks:
- 1.3.1** Females: Black, nearly black or skin coloured tights; pop socks are not acceptable. Plain black/navy socks if wearing trousers.
- 1.3.2** Males: Plain black/navy socks.
- 1.4** Hijabs: If a Hijab is worn with uniform (these are not issued by the Sewing Room) it is to be plain and the colour should be appropriate to the uniform being worn. The Hijab should be laundered in accordance with guidance at Section 14 above.
- 1.5** Cardigans/Fleeces: Staff may purchase their own plain, navy/black cardigans or fleeces. These should not be worn while giving direct patient care and staff are reminded of the requirement to be bare below the elbow.
- 1.6** All staff are reminded that they should not be endorsing branded products i.e. no logos other than NHS or professional body.

2. Nursing uniforms

Nursing staff can choose to wear a dress or tunic with trousers. Trousers are navy blue unless stated below.

Staff group	Uniform colour
Chief Nurse / Deputy Chief Nurse Heads of Nursing Lead Nurses	Navy blue / navy piping
Matron	Navy blue with white dots / white piping
Sister Charge Nurse	Navy blue / white piping
Deputy Sister Deputy Charge Nurse	Royal blue / white piping
Staff Nurse	Hospital blue / white piping
Nursing Associate	Blue & white stripe / white piping

<ul style="list-style-type: none"> • Assistant & Associate Practitioner • Overseas nurses who have not yet achieved their assessments to obtain their UK registration • Senior HCSW • HCSW 	Pale blue / white piping
Patient Environment Assistants	Mint green / white piping
Nurse Consultant	Black / red piping / black trousers
<ul style="list-style-type: none"> • Clinical Nurse Specialists and nurses in specialist teams • Clinical Educators and nurses in the Education team • CPD educators • Resus Officers • Research nurses (or other registered healthcare professional) 	<p>Uniform colour by grade type with red piping i.e. band 7 = navy blue / red piping band 6 = royal blue / red piping</p> <p>Note: Clinical Educators who are not registered nurses should wear the uniform of their profession, with clear indication on the name badge (such as: Clinical Educator).</p>
ALERT nurses Advanced Nurse/Clinical Practitioners	Dark Grey / red piping
<ul style="list-style-type: none"> • Student Nurse • Return to Practice nurse • Nursing Apprentice 	<p>(ARU) Grey dress or tunic / white piping / black trousers.</p> <p>Grey epaulettes with one stripe for each year (i.e. first year = one stripe) or denoted as Return to Practice</p> <p>Berry epaulettes (Nursing Apprentice)</p> <p>Other universities: uniform as issued by the university. Compliance will be checked where required with the Clinical Education team.</p>
Trainee Nursing Associate	<p>(ARU) Grey dress or tunic / white piping / black trousers.</p> <p>Yellow epaulettes with one stripe for each year (i.e. first year = one stripe)</p>

3. Bank staff additional note:

Substantive Trust staff who also undertake Bank shifts should wear their usual issued Trust uniform. If this is felt not to be appropriate in the area they are working (for example a Specialist Nurse may not be undertaking Bank duties in their area of expertise), then substantive Trust staff can be issued with a Trust uniform of the appropriate grade at the discretion of their Line Manager. Any uncertainty can be discussed with the Deputy Chief Nurse or Head of Nursing.

4. All other Trust staff (in alphabetical order)

Staff group	Uniform colour
Administration staff	Female staff: short sleeve blue blouse (issued by sewing room), with black/navy skirt or trousers. Male staff: short sleeve blue shirt (issued by sewing room) with black trousers.
Allied Health Professional Assistants (all services)	White tunic / white piping / black uniform trousers
Cardiac Rehabilitation team	Nursing – as specialist teams Physio – as Physio Staff may change into navy polo shirts with CR and RPH logos navy uniform trousers for delivery of exercise classes only
Cath Lab staff	Blue Scrubs When not required to wear scrubs, staff may wear the uniform as applicable to their professional group.
Critical Care staff	Blue Scrubs When not required to wear scrubs, staff may wear the uniform as applicable to their professional group.
Dietician	White tunic / lilac piping / black uniform trousers
Estates and facilities administration	Burgundy shirt/blouse / black uniform trousers or skirt
Estates and Facilities Maintenance and Porters	Burgundy polo shirts / black uniform trousers
Health Care Scientist (all grades)	Red tunic / navy piping / navy uniform trousers Raspberry Scrubs (where applicable)
Housekeeper	Burgundy & grey tunics / black uniform trousers
Occupational Therapist	White tunic / bottle green piping / green uniform trousers
ODP student (when not in scrubs) There are occasions when Student ODP's work outside theatres on placement and are required to wear uniform.	White tunic / white piping / black uniform trousers or uniform provided by their university
Pharmacy Assistant (unregistered)	Green polo shirt with black uniform trousers

Pharmacy Technician	Green tunic / white piping / black uniform trousers
Physiotherapist	White tunic / navy piping / navy uniform trousers
Radiographer	White tunic / burgundy piping / black uniform trousers
Speech and Language Therapist	White tunic / red piping / black uniform trousers
Theatre staff	Blue Scrubs When not required to wear scrubs, staff may wear the uniform as applicable to their professional group.

5. Support / Partner services

5.1 For staff working in the support / partner services such as estates services, catering, portering, security and cleaning services (as examples), uniforms will be provided in accordance with their applicable employer guidelines.

5.2 Staff will be required to adhere to all elements of this policy such as bare below the elbow and no lanyards.

6. Hot floor staff

6.1 **Also note Section 12 above.** The use of scrubs is restricted. Only 'hot floor' staff should be wearing scrubs.

6.2 Scrubs will be colour coded as follows:

6.2.1 Blue – all staff (with the exception of Healthcare Scientists).

6.2.2 Raspberry – Healthcare Scientists working on the 'hot floor'

6.3 Scrubs will be provided for all staff working on the 'Hot floor' and staff must change in the changing rooms designated for the protected area.

6.4 Staff are required to adhere to all elements of this policy as 'staff in clinical uniform' including bare below the elbow, jewellery restrictions and no lanyards.

6.5 Theatre hats: single use disposable hats are provided for use on the hot floor.

6.5.1 The colour of hats does not denote grade or position with the following exception: Visitors = White hats; Cleaners = Yellow hats (*at the time of updating this Policy, the Theatre Matron is reviewing this for all staff in Theatres*).

6.5.2 It is acknowledged that some staff prefer to wear their own hats. Where this is the case, staff should launder their hats in accordance with this Policy (see Section 14 above). If there is any concern regards infection prevention and control of personally owned theatre hats, this should be raised professionally and staff should wear a disposable theatre hat.

6.6 Job roles of staff on the hot floor are denoted by name badges.

6.7 Footwear on the hot floor should provide adequate protection and be suitable for decontamination.

- 6.7.1 The purpose of such footwear is to provide antistatic properties in accordance with BS EN ISO 20347 (BSI 2004).
- 6.7.2 Footwear should be well fitting, supportive and protective. Shoes should provide protection from spillages and accidentally dropped equipment.
- 6.7.3 Footwear worn on the hot floor should be for that use only and should be cleaned regularly (using appropriate PPE) to remove any contaminants. The use of washer-disinfectors is preferable for the decontamination of footwear. Footwear suitable for washer-disinfectors will therefore be available to staff.
- 6.7.4 It is each individual health worker's responsibility to ensure that their footwear is decontaminated (AfPP, 2011).
- 6.8 If staff are required to wear uniform, it should be in line with the colour designated for their role and grade as detailed above.
- 6.9 Hair should be secured and completely covered by the disposable cap when in the protected environment. Facial hair must be covered when in the Operating Room, Catheter Lab or Preparation Rooms

Appendix 4: Dress Code Audit Tool

Ward / department: _____

Does the staff member adhere to the Dress Code and Uniform Procedure?												Action Taken at time
	Staff role	Hair	Jewellery And Piercings	Nails	Make up	Socks, Tights Footwear (& clean and polished)	General appearance (professional, clean & tidy)	ID card visible	Professional badges	Bare below the elbow	Non- uniformed staff dressed appropriately	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												

Person completing audit:

Name: _____ Sign: _____

Date: _____ Designation: _____

Insert into the above table	
Yes	✓
No	x
Not applicable	N/A

Appendix 5 –Monitoring and Reporting

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements	Acting on recommendations and Lead(s)	Change in practice and lessons to be shared
Compliance with dress code	Deputy Chief Nurse Heads of Nursing and Matrons and will monitor compliance by all staff disciplines at Royal Papworth Hospital Service Manager at Royal Papworth House will monitor and report on compliance at	Dress code audit tool (Appendix 4 of this document)	Ongoing monitoring. Audit tool can be used for an enhanced period of monitoring if required.	Compliance will be escalated within Clinical Divisions and/or to the Clinical Professional Advisory Committee (CPAC)	Matrons will escalate non-compliance to the Clinical Lead or Division Manager for medical staff or administrative staff respectively and to the Service Lead for other disciplines and agree actions to include in the report to CPAC and their Clinical Division report.	Discussion at CPAC and dissemination via Clinical Division and/or specific service management.

Further document information

<p>Approval – this is required for all documents. Approval should be by the relevant committee(s)*. State the name(s) of the committee(s) and the full date(s) of the relevant meeting(s):</p> <p>*In exceptional circumstances only, approval can be by Chair's Action or by appropriate ED or NED – state full date of approval</p>	<p>Quality and Risk Committee</p> <p>Chief Nurse approval for immediate publishing 03.05.2019 to comply with the move to the new site.</p>
<p>Approval date (<i>this version</i>) (Day, month, year):</p>	03.05.2019
<p>Ratified by Quality and Risk (required for Strategies and Policies only):</p>	Quality and Risk Committee
<p>Date (Day, month, year):</p>	28.05.2019
<p>This document supports:</p>	<p>Care Quality Commission, 2015, Guidance for providers on meeting the regulations (Health and Social Care Act 2008, Regulations 2014).</p> <p>Health and Social Care Act 2008, Code of Practice on the prevention and control of infections and related guidance (July 2015).</p>
<p>Key associated documents:</p>	<p>Trust Infection Prevention and Control Policy (DN015)</p> <p>Bare Below the Elbow Policy (DN326)</p> <p>Trust No Smoking Policy (DN156)</p>
<p>Counter Fraud In creating/revising this document, the contributors have considered and minimised any risks which might arise from it of fraud, theft, corruption or other illegal acts, and ensured that the document is robust enough to withstand evidential scrutiny in the event of a criminal investigation. Where appropriate, they have sought advice from the Trust's Local Counter Fraud Specialist (LCFS).</p>	