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<b>Version / Amendment History</b>	Version	Date	Author	Reason
	1	2009	Anne Johnson	Review of Policy
	2	December 2009	Pam Twine	Reformatted to Trust standard
	3	April 2010	Anne Johnson	Update following DOH guidance
	4	August 2010	Cathy Bratt	Widening policy to include all staff groups
	4.1	April 2011	Cathy Bratt	Amended following further consultation
	4.2	October 2014	Helen Forrest / Jim Murray	Review and Update
	4.3	June 2015	Helen Forrest	Amended following further consultation
	4.4	December 2016	Helen Forrest	Amended following further consultation
	5	December 2018	Helen Forrest	Amalgamation of Burton and Derby policies
	5.1	October 2019	Helen Forrest	Minor amendment to policy
<b>Intended Recipients:</b> All Trust staff, including contracted services and volunteers				
<b>Training and Dissemination:</b> Dissemination will be via the Intranet.				
<b>To be read in conjunction with:</b> Trust Policy and Procedure for Disciplinary of Employees Excluding Medical Staff HR/2009/002				

Trust Policy and Procedure for Disciplinary of Medical/Dental Staff  
 Trust Policy and Procedures for Infection Control CL-RM/2008/024  
 Guidance and Protocol in Support of Smoke Free Hospital Arrangements PS9  
 Trust Equality, Diversity and Human Rights Policy  
 Trust Policy for Personal Protection Equipment CL-RM/2009/050  
 Trust Policy for Hand Hygiene CL 2008 043

**In consultation with and Date:**  
 Infection Prevention and Control Operational Group – October 2018  
 Theatre Risk Group – November 2018  
 Estates and Facilities  
 Volunteers  
 Staff Side  
 Inclusion Committee – October 2018  
 Infection Prevention and Control Committee – November 2018  
 Medical Advisory Committee – December 2018  
 Minor amendments agreed by Executive Chief Nurse, Director of Patient Experience, Infection Prevention and Control & Facilities Management – October 2019

<b>EIRA stage One Completed</b>	Yes
Stage Two Completed	No

<b>Trust Delivery Group Assurance and Date</b>	
<b>Approving Body and Date Approved</b>	
<b>Date of Issue</b>	January 2019
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<b>Contact for Review</b>	Director of Nursing (Operations) / Lead Nurse Infection Prevention and Control
<b>Executive Lead Signature</b>	Executive Chief Nurse, Director of Patient Experience, Infection Prevention and Control & Facilities Management
<b>Approving Executive Signature</b>	Chief Executive Officer

# TRUST POLICY RELATING TO UNIFORM / DRESS CODE

## Contents

### Section

1. **Introduction**
2. **Purpose and Outcomes**
3. **Definitions Used**
4. **Implementation of the Dress Code / Uniform Policy**
  - 4.1 ***Part One:- The General Appearance of All Trust Staff***
    - 4.1.1 Professional Image
    - 4.1.2 Identification Badges
    - 4.1.3 Allowance on the grounds of religious or cultural beliefs
    - 4.1.4 Headwear
    - 4.1.5 Footwear
    - 4.1.6 Tattoos
    - 4.1.7 Bare Below the Elbow
    - 4.1.8 Neck Ties
    - 4.1.9 Hair
    - 4.1.10 Cosmetics and Perfume
    - 4.1.11 Jewellery and Body Adornments
    - 4.1.12 PPE (Personal Protective Equipment)
    - 4.1.13 Healthcare Associated Infection (HCAI)
    - 4.1.14 Dress Code When in the Clinical Environment
  - 4.2 ***Part Two:- Staff Wearing Uniforms***
    - 4.2.1 Uniforms
    - 4.2.2 Changing Out of Uniform
    - 4.2.3 Protective Clothing
    - 4.2.4 Footwear
    - 4.2.5 Jewellery and Wrist Watches
    - 4.2.6 Hair
    - 4.2.7 Cosmetics and Perfume
    - 4.2.8 Laundry of Uniforms

**Section**

- 4.3**        ***Part Three:- Theatre Wear***
- 4.3.1        Operating Theatre Attire
- 4.3.2        Attire Outside of Theatre
- 4.4**        **Part Four:- Trust Volunteers**
- 5.**         **Monitoring Compliance and Effectiveness**
- 6.**         **References**
- 7.**         **Key Responsibilities**

## TRUST POLICY RELATING TO UNIFORM / DRESS CODE

### 1. Introduction

Whilst at work staff represents the Trust and as such their appearance should uphold the reputation and enhance the image of the Trust at all times. When participating in duties within the Trust staff are expected to dress in such a way as to maximise patient safety, project a professional image and inspire public confidence in the level of care that they will receive.

Not all staff wear a uniform and there is limited evidence to show that uniforms / work clothes are a significant source of cross infection. Nevertheless, the way staff dress sends an important message to patients and the public.

A professional appearance is reassuring to patients, relatives and visitors to the hospitals.

Whilst the Trust is aware that fashions, hair styles etc change, members of staff should remember that their overall presentation whilst at work should be professional.

The Dress Code policy is necessary for patients, visitors and employees in order to:

- Minimise the risk of cross infection
- Minimise the risk of injury to patients and employees
- Comply with Health and Safety regulations
- Provide a professional corporate image
- Enhance Trust Security arrangement

Any professional group requesting to wear clinical uniform outside of Trust premises for formal occasions or where promoting the Trust must be authorised by the Executive Chief Nurse, or nominated Deputy.

This policy is divided into four sections:-

**PART ONE:** Relates to the general appearance of **all Trust staff** regardless of whether they are provided with a uniform or not.

**PART TWO:** Relates to the specifics of Trust staff wearing uniforms.

**PART THREE:** Relates to the specifics of Trust staff wearing theatre scrubs.

**PART FOUR** Relates to the specifics for Trust volunteers

This policy reflects the Trust inclusion, infection prevention, PRIDE and CARE values. It applies to all Trust staff, including students, temporary staff, contracted staff and those on honorary contracts.

## 2. Purpose and Outcomes

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

The policy provides managers with standards to monitor and manage their own and staff appearance accordingly. The Line Manager and Divisional Management team are responsible for embedding and monitoring compliance with this policy.

In some areas of the Trust there are legal requirements under Health and Safety legislation in terms of personal protective equipment. The core standards that make up this policy may therefore be supplemented but not replaced by Codes of Safe Practice that must be adhered to by all staff where the wearing of protective apparel is indicated.

The impact of Healthcare associated infections (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, directions and guidelines as stated by the Health and Safety Executive and the Department of Health. The Trust recognises and values diversity of cultures, religions and disabilities of its staff 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 of certain articles and/or clothing is not permissible, and priority will be given to health and safety, security and infection prevention and control. Healthcare workers who feel their legal characteristics could affect compliance with this policy must discuss their concerns with their line manager, for instance, a healthcare worker may perceive the policy impacts on aspects of their religion and beliefs in relation to wearing articles of faith. Managers will initiate a risk assessment where necessary with appropriate Human Resources and Infection Prevention and Control advice. Any proposed alterations with this policy must be agreed by the Executive Chief Nurse / Executive Medical Director

**All staff at University Hospitals Derby and Burton NHS Foundation Trust are required to comply with this policy. Breaches of this policy will result in disciplinary action.**

## 3. Definitions Used

<b>Staff:</b>	Refers to <b>ALL</b> members of Trust staff
<b>Clinical Environment</b>	Refers to environments where patients are cared for and includes all staff members within that environment e.g. nurses, doctors, therapists, receptionists, housekeepers, healthcare cleaners etc.
<b>Lapel Badge</b>	A badge that is worn on the lapel, detailing name and profession
<b>Identification Badge</b>	A badge that serves to identify the person wearing it
<b>Direct Patient Contact</b>	'Hands on' to provide patient care e.g. person hygiene, ANTT procedures etc.

## **4. Implementation of the Uniform / Dress Code Policy**

### **4.1 PART ONE - General Appearance of All Trust Staff**

#### **4.1.1 Professional Image**

Staff are expected to display a professional image at all times, to be smart and well groomed and are expected to take reasonable measures to ensure a good standard of personal hygiene.

Staff are reminded that whilst sponsored by the Trust when attending courses or events, internally or externally organised, that they are an ambassador for the Trust and their appearance must reflect a suitable image. When staff attend training they should wear clothing appropriate for the training being delivered.

The following items of clothing are examples of unacceptable clothing, either on grounds of health and safety or the Trusts public image:

- Track suits
- Leisure shorts
- Overly tight, transparent or revealing clothes
- Clothing bearing inappropriate slogans
- Ripped or torn clothing
- Skirts / trousers that are sufficiently long that they touch the ground when walking
- • Tops that show a bare midriff, allow an inappropriate amount of cleavage to be visible, or have 'spaghetti' straps.

Skirts/dresses should be of a length that allows an appropriate range of movement and should not hinder staff during moving and handling procedures.

#### **4.1.2 Identification Badges**

All Trust staff must wear an easily visible identity badge and lapel badge at all times. Only two professional badges are acceptable.

Identity badges and lapel badges must not be worn outside of the Trust in public areas except whilst on Trust business or in normal day to day working e.g. community staff.

Identity badges worn on lanyards should be tucked in / secured when` caring for / in direct contact with a patient. It is the individual staff member's responsibility to ensure these are clean.

### **4.1.3 Allowance on the grounds of religious or cultural beliefs**

The wearing of items arising from cultural or religious norms is in most circumstances welcomed by the Trust, providing that the health and safety and security of patients is not compromised.

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

Henna tattoos are permitted as long as hand, wrist, and forearm can be adequately washed.

### **4.1.4 Headwear**

Turbans, kippots, and headscarves are supported on religious grounds. The latter should be above the shoulder, tucked in if worn with a uniform and worn unadorned, and secured neatly so as not to interfere when delivering direct patient care, or working with equipment. There is no requirement for these to be plain blue or black

### **4.1.5 Footwear**

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. Staff are reminded that in the workplace very high heels or unsupported sandals can create a risk. Flip flop style sandals should not be worn.

### **4.1.6 Tattoos**

Visible tattoos should not be offensive to others. Where they are deemed to be offensive they should be appropriately covered.

### **4.1.7 Bare Below the Elbow Rule**

When in a clinical area the bare below the elbow rule, i.e. short sleeved shirts and blouses, or rolled-up above the elbow sleeves to be worn, no wrist watches, no stoned or ridged rings, and no bracelets or nail varnish/nail art, will be adhered to.

This will apply to all staff involved in the clinical care of patients, members of the ward team, including ward receptionists and staff members in:

- outpatient areas, including any treatment areas and consulting rooms, and all inpatient areas; but not at reception desks or administration back offices
- clinical departments where patients have diagnostic procedures, or receive treatment, e.g. Imaging, Department of Clinical Measurement, Physiotherapy, Radiotherapy etc.

**This applies to all staff when in the clinical environment**

### **4.1.8 Neck Ties**

Neck ties (other than bow ties) should be removed, or safely tethered e.g. tucked into the shirt, when in direct contact with a patient.

#### **4.1.9 Hair**

Hair must be kept clean, neat and tidy at all times. Hair should be tied back at all times when in clinical areas.

Facial hair must be well groomed.

#### **4.1.10 Cosmetics and Perfume**

Make-up should be discreet. Perfume and after-shave must be subtle to prevent exacerbation of nausea or respiratory distress in patients and other staff members, particularly those receiving treatments such as chemotherapy, asthmatic patients, etc.

Staff should ensure that nail varnish, when allowed, is well maintained and of a discreet colour. Nail varnish, false nails or gel nails should not be worn by any staff member in a clinical area.

#### **4.1.11 Jewellery and Body Adornments**

Jewellery, if worn, must be discreet, compatible with the maintenance of safety in the work area and not compromise the safety of the wearer or patients. Necklaces or dangling earrings must not be worn in clinical areas or in areas where there is the risk of contact with machinery. Medi-alert bracelets may be worn under clothing on a necklace after line management agreement. Transdermal implants (singlepoints) are not to be worn.

#### **4.1.12 Personal Protective Equipment (PPE)**

This consists of items of clothing e.g. gloves, visors, shoes with protective toe caps/non slip soles, aprons or other items worn on the person which protect the wearer from hazard. Plastic aprons and gloves, used for clinical care must not be worn outside of clinical areas and must always be removed when exiting a clinical area (when hands should be washed).

#### **4.1.13 Healthcare Associated Infections (HCAI)**

Health care professionals have a responsibility to minimise the spread of HCAIs by wearing appropriate clothing in clinical settings, including personal protective equipment. Pathogenic micro-organisms can contaminate clothing, particularly ties and cuffs and this can represent a potential source of HCAI in the clinical setting.

Maximum contamination occurs in areas of greatest hand contact ie pockets and cuffs, re-contamination may therefore reoccur after handwashing.

#### **4.14 Dress code when in the Clinical Environment**

One plain metal band may be worn, other jewellery, including wrist watches must be removed and all staff should be "bare below the elbows" at all time.

Nails must be short. False nails/gel nails or nail varnish must not be worn.

Short or rolled-up-above-elbow sleeves must be worn when in clinical areas. If, for religious reasons a member of staff is required to cover their arms, they may wear three quarter length sleeves. These should be rolled / pushed up to the elbow when delivering care and when performing hand decontamination, to ensure effective practice takes place.

Wrist watches, fit bits or similar items and bracelets must be removed. In 2010 the Department of Health relaxed its rules prohibiting jewellery so that Sikh members of staff can wear their Kara providing it is pushed up the arm while treating patients and when performing hand hygiene. Individual staff members must ensure that their Kara is clean.

Neck ties (other than bow ties) should be removed, or safely tethered, when in clinical areas.

## **4.2 PART TWO – Staff Wearing Uniforms**

### **4.2.1 Uniforms**

**Staff in uniform must be bare below the elbows, including not wearing wrist watches, fit bits or similar items, bracelets, stoned/ridged rings. Nail varnish/false nails is NOT permitted for staff who have contact with patients in any capacity.**

Where uniforms are required they must fit correctly and always be worn fully fastened and in the way they have been designed to be worn. Trousers must be full length, shorts, leggings or Capri style trousers are not permitted. Trousers must not 'drag' on the floor when worn.

If belts and buckles are worn with the uniform dress they should be removed for direct clinical care / any contact with patients. It is the responsibility of the staff member to ensure belts and buckles are clean.

Sweaters and cardigans in a colour that matches the uniform and in keeping with a professional image may be worn. These should be removed when in clinical areas, or undertaking any form of direct clinical care / contact with patients. No logos other than professional logos or the Trust 'Exceptional care together' logo are allowed.

Staff who are pregnant must liaise with their Manager who will authorise the supply alternative uniforms when relevant.

Uniforms should be changed at the earliest opportunity if they become soiled or contaminated.

All staff are required to ensure that their uniforms are clean, maintained and kept in good condition.

### **4.2.2 Changing out of uniform**

Where changing facilities are provided, staff should change into uniform at work and out of uniform before they leave work premises to go home.

Where this is not possible uniform **must** be fully covered when not on Trust premises. This includes using public transport, the cross site bus and when travelling in uniform, including when walking home.

Uniforms do not need to be covered when walking between the Royal Derby Site and the Manor car park or the Queens Hospital site and the Education Centre.

Staff **must not** enter commercial premises outside the Trust wearing uniform, even if covered (e.g. supermarkets, shops or public houses). It is permitted to visit retail areas inside the Trust e.g. coffee shops whilst in uniform.

Trust staff who work in a community setting are exempt from this and they are permitted to visit retail establishments during their working day in uniform, e.g. petrol stations and shops to buy lunch etc. This group of staff are also exempt from covering their uniform when travelling by car for work purposes. Lanyards and name badges must be removed prior to entering retail establishments.

#### **4.2.3 Protective Clothing**

This consists of items of clothing e.g. gloves, visors, shoes with protective toe caps/non slip soles, aprons or other items worn on the person which protect the wearer from hazard. Plastic aprons and gloves, used for clinical care must not be worn outside of clinical areas and must always be removed when exiting a clinical area (when hands should be washed).

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 or body fluids.

Aprons must be removed and disposed of 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.

Where required the appropriate head covering must be worn.

#### **4.2.4 Footwear**

Low heeled, soft soled, closed toe shoes or approved “professional clogs” supplied by the Trust in black or navy must be worn in all clinical areas. Where clogs are worn the supporting heel strap must be in place. Shoes should be cleanable have non slip soles and heels no higher than 2.5cm (1 inch). Trainers where worn with trousers should be plain, easy to clean and either black or white or to match uniform. Canvas style footwear or pumps are not permitted.

Where staff have foot/limb related health issues, recommendations must be sought from Occupational Health regarding appropriate footwear that meets health and safety regulations, which should be agreed directly with the individual's line manager and documented in the personal file.

Antistatic footwear is required to be worn in specific areas and is provided by the Trust for staff protection

Plain flesh coloured/black tights must be worn with a uniform dress / skirt. Relaxation of this policy will be applied during summer months. This will be sanctioned by agreement of the Executive Chief Nurse, or appointed Deputy.

#### **4.2.5 Jewellery and Wrist watches**

Staff in uniform or working within a clinical environment must not wear jewellery, with the exception of one plain band. Visible piercings must be small, discrete studs.

Bracelets or stoned/ridged rings should not be worn when within the clinical area.

Wristwatches should not be worn in the clinical area. A fob watch is acceptable, but must be worn in an area on the uniform where it will not pose a risk to patient safety or injury.

Medi-alert bracelets may be worn on a necklace under the uniform following agreement with line manager.

#### **4.2.6 Hair**

Facial hair must be well groomed.

When in uniform hair must be tied back so that the hair is always clear of the face, in a style that does not require frequent re-adjustment. Devices to secure/tie the hair should be discrete. Where required an appropriate head covering will be provided and must be worn.

#### **4.2.7 Cosmetics and Perfumes**

Make-up, perfume and after-shave must be subtle to prevent exacerbation of nausea in some patients, particularly those receiving treatments such as chemotherapy.

#### **4.2.8 Laundry of Uniforms**

On the advice of the Microbiologists, clinical staff are advised that uniforms worn at work should be suitable for washing at 40°C in a domestic washing machine and should be tumble dried and/or ironed. Uniforms can be mixed with other items being washed, unless soiled, when they should be laundered alone.

Uniforms must be returned to the linen room, as appropriate, when employment with the Trust ceases.

### **4.3 PART 3 - THEATRE WEAR**

The use of “theatre scrubs” has been taken into consideration bearing the following factors in mind:

- The need to protect staff against contamination from blood and bodily fluids, taking into account the need to reduce cross infection and cross contamination.
- The need to promote a clean environment.
- The need to promote a professional image.

#### **4.3.1 Operating Theatre Attire**

Clean scrubs should always be worn. Any item of uniform must be changed as soon as possible when contaminated with blood or bodily fluids.

All jewellery must be removed. One plain metal wedding band is permitted. Visible piercings must be small, discrete studs.

All hand jewellery must be removed prior to scrubbing.

A fresh mask should be worn correctly for each procedure where aerosolised blood or bodily fluids are present.

Each theatre department supplies clean disposable headwear for medical, nursing, health professionals, visitors and support staff, which confines all hair, and completely covers the ears, scalp skin, sideburns and beards. Staff are not permitted to wear their own cloth hats, scarves or bandannas as headwear. Staff who wear headwear for

religious reasons or cultural reason must ensure their headwear is clean, tucked into theatre attire and covered sufficiently with disposable headwear. Hood type headwear is available in all theatre departments.”

#### 4.3.2 Attire outside of Theatre

Staff who work in any high risk area, e.g. Theatre/cardiac catheter labs/endoscopy/day case areas and who are provided with special clothing must **not leave the clinical area in theatre hats, masks or soiled clothing. Specialist footwear such as theatre clogs must not be worn outside the clinical area. Staff must not visit the Faith Centre, restaurants, cafés or shops within the Trust in scrubs. Staff must not wear scrubs outside the hospital building, including on the cross site bus.**

The exception to this is where staff are required to attend an emergency situation and patient safety would be compromised as a result or Recovery staff when collecting equipment / returning patients to a ward environment. Staff entering an operating theatre must change into a clean set of scrubs.

#### 4.4 VOLUNTEERS

Trust Volunteers that have clinical contact, e.g. breast feeding advisors, with patients should adhere to the bare below the elbows rule, e.g. no watches, bracelets, stoned rings etc.

Trust volunteers that have social contact with patients and undertake low risk activities, such as making tea and passing blankets etc should maintain a smart image, but are not required to be bare below the elbows.

#### 5.0 Monitoring Compliance and Effectiveness

Monitoring Requirement :	To ensure compliance with the agreed Dress Code Uniform Policy which includes: <ul style="list-style-type: none"> <li>Accepted dress codes for staff in uniform and those not required to wear uniform.</li> </ul>
Monitoring Method:	Monthly dress code audits to be undertaken by all clinical areas. These will include staff members in uniform and those not required to wear uniform. Non-compliance will be addressed by the: <ul style="list-style-type: none"> <li>Sister / clinical lead, if non-compliance continues escalate to</li> <li>Business unit Matron / Clinical Director, if non-compliance continues escalate to</li> <li>Divisional Nurse Director / Divisional Medical Director, if non-compliance continue escalate to</li> <li>Executive Chief Nurse / Executive Medical Director</li> </ul>
Report Prepared by:	Business Unit Matrons / clinical leads
Monitoring Report	Infection Control Operational Group

presented to:	
Frequency of Report	Monthly.

## 6.0 References

Salisbury et al American Journal of Infection Control	1997	The effect of rings on the microbial load of health care workers hands. p24-27
Royal College of Nursing	2005	Wipe it Out-RCN Campaign on MRSA
Royal College of Nursing	2009	Guidance on Uniforms and clothing worn in the delivery of patient care
Department of Health	2010	Uniforms and Workwear: guidance on uniform and workwear policies for NHS employers
Equality and Human Rights Commission	2010	Guidance on the wearing of Sikh articles of faith in the workplace and public spaces

## 7. Key Responsibilities/Duties

### **Managers/Matrons/Heads of Department/ Senior Staff**

Managers/Matrons/Heads of Department/Senior Staff have a responsibility to ensure staff understand and comply with the Dress Code /Uniform Policy and to present themselves as role models.

They are responsible for discussing with staff any problems with uniforms and will give authorisation for the Sewing Room to undertake any alterations/exchanges that are appropriate.

### **Trust Staff/ Students / Trust Volunteers**

All Trust staff/students/Volunteers working within the organisation must adhere to this policy. Breaches of this policy will result in disciplinary action.