



# STAFF UNIFORM AND DRESS POLICY

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Responsible Director	Board Nurse Director
Approved by	Board Clinical Governance Forum
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## **STAFF UNIFORM AND DRESS POLICY**

### **POLICY COVERAGE AND OBJECTIVE**

The policy applies to all staff employed by NHS Greater Glasgow and Clyde (NHSGGC), students / trainees attached to NHSGGC services and any contracted workers. The term Health Care Workers (HCWs) is used throughout this document to cover all such staff working in clinical and non-clinical settings.

A clinical setting is defined as an area where an intervention requiring physical contact with a patient takes place. For community staff the requirements of this policy for clinical areas apply when they are making such intervention with patients in their own homes.

The aim of the Staff Uniform and Dress Policy is to provide a unified approach across NHSGGC which conveys a professional image and creates and maintains public confidence. The policy links to NHSGGC Infection Prevention and Control (IPC) and Health & Safety practices and policies which all staff should also refer to.

All HCWs are required to adhere to this policy and are responsible for ensuring that they do so. Managers are responsible for addressing any queries staff may have and ensuring consistent and fair application of the policy in their area.

## 1. INTRODUCTION AND RESPONSIBILITIES

### Introduction

The Staff Uniform and Dress Policy underpinned by CEL 42 (2010) National Uniform Policy, Dress Code and Laundering Policy provides HCWs and managers with information regarding the standard of dress and appearance required by NHSGGC. This policy sets very clear and explicit requirements for all HCWs but it is not possible to be completely exhaustive in defining acceptable and unacceptable standards of dress and appearance for every situation. Where there are any issues requiring judgement, managers will exercise that judgement within the terms and spirit of this policy.

We recognise that in integrated services there may be different staff uniform and dress policies and managers will need to ensure these are appropriately applied.

### Responsibilities

#### Health Care Workers (HCWs):

- Are responsible for adhering to this policy.
- Must wear uniform when working in a post in an area where uniform is designated by management to be worn and must not substitute issued items of uniform with own items of clothing.
- Should raise any queries or concerns about the policy with their line manager.

#### Managers:

- Are responsible for ensuring that this policy is followed.
- Must ensure that all new HCWs are aware of the policy and the requirements to achieve the required standard.
- Should initiate a risk assessment when required under the terms of this policy.

All members of staff are made aware of this policy and it will be a core part of staff induction. Adherence to the policy is mandatory. Failure to adhere to the policy will be dealt with in accordance with the appropriate NHSGGC Human Resources policies.

NHSGGC understands its roles and responsibilities in valuing and supporting the rich diversity of its HCWs. This policy is underpinned by NHSGGC's legal responsibilities as outlined in the Equality Act (2010) and supports protection against discrimination for HCWs with legally protected characteristics. To this end the policy will endeavour to approach any issues relating to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation, with sensitivity. However priority will be given to health and safety, security and IPC considerations.

HCWs who feel their legally protected characteristic(s) could affect compliance with this policy must discuss these concerns with their line manager. For instance a HCW may perceive the policy impacts on aspects of their religion and belief in relation to wearing articles of faith. Managers will initiate a risk assessment where necessary with appropriate Human Resources advice.

## 2. DRESS CODE

This section sets out the dress code which applies to all HCWs except where indicated otherwise.

<b>Badges</b>	<ul style="list-style-type: none"><li>• Visible name and photographic identification badge must be worn at all times. The specific identification will be issued by Facilities / Medical Illustration as appropriate to the work area.</li><li>• For staff working in clinical areas, badges will be clipped on, not on lanyards.</li><li>• It is the responsibility of every HCW to ensure they have the appropriate up to date identification and to raise any issues in that regard with their line manager.</li></ul>
<b>Hair / Eyelashes</b>	<ul style="list-style-type: none"><li>• All HCWs in clinical areas must wear their hair tied back off the face and up if it is at shoulder length or longer. Hair should not touch the collar and ponytails should be above the collar. Extremes of fashion should be avoided with regards to hairstyles / colour.</li><li>• False eyelashes should not be worn in clinical settings.</li></ul>
<b>Jewellery</b>	<ul style="list-style-type: none"><li>• For clinical settings and if in uniform, no jewellery may be worn except a single plain ring / wristwatch.</li><li>• Wristwatches must be removed for hand hygiene and when having physical contact with patients.</li><li>• For all other HCWs there is an expectation that jewellery will be appropriate and avoid extremes of fashion.</li></ul>
<b>Non-Uniform Guidance</b>	<ul style="list-style-type: none"><li>• HCWs not issued with uniforms should wear appropriate clothing. Tops should prevent any exposure of the midriff or cleavage.</li><li>• Footwear should be flat or medium heeled.</li><li>• Denims and shorts are not acceptable.</li><li>• Extremes of fashion should be avoided, e.g. very short skirts.</li><li>• Items of clothing with slogans are not acceptable.</li></ul>

<p><b>Nails, cosmetics, perfume and aftershave</b></p>	<ul style="list-style-type: none"> <li>• Nails should be kept clean. For HCWs in clinical settings nail tips must be short and without nail varnish, artificial fingernails or nail extensions.</li> <li>• For all HCWs make-up and perfume / aftershave should be discreet.</li> <li>• HCWs should have high standards of personal hygiene.</li> </ul>
<p><b>Sleeves and Ties</b></p>	<ul style="list-style-type: none"> <li>• Bare, below the elbow is compulsory for HCWs when delivering clinical care, i.e. sleeves should be rolled up.</li> <li>• If undertaking clinical care it is preferable that ties are not worn however if they are they should be tucked inside the shirt.</li> <li>• NHS issued cardigans / anoraks may be worn when provided as part of a uniform but removed when performing clinical care / procedures.</li> <li>• Where for religious reasons staff wish to cover their forearms during patient care activity, it is acceptable to wear disposable over-sleeves where gloves are used with strict adherence to hand and wrist washing before and after use. Over-sleeves must be disposed of as disposable gloves.</li> <li>• Where for religious reasons staff wish to cover their upper forearms during patient care activity, it is acceptable to wear three-quarter length sleeves. Three-quarter length sleeves must not be loose or dangling. They must be able to be rolled up or pulled back and kept securely in place during hand washing and direct patient care activity.</li> </ul>
<p><b>Footwear</b></p>	<ul style="list-style-type: none"> <li>• For HCWs issued with uniforms, flat shoes or trainers with discreet markings should be worn. Shoes or trainers should be black, white or navy.</li> <li>• Footwear should fully enclose the foot and should have no perforations or heel straps, and should be of a non-penetrable fabric. Staff should not wear “Crocs”.</li> <li>• Where footwear is issued to a HCW as part of their uniform it must be worn, e.g. theatre clogs, snow shoes.</li> </ul>

### 3. UNIFORM REQUIREMENTS

This section sets out the requirements for HCWs who are issued with a uniform.

#### General

- All staff **MUST** comply with the uniform selection guidance as per CEL 42 (2010) National Uniform Policy, Dress Code and Laundering Policy. Any queries should be directed to a line manager / supervisor in the first instance.
- Where changing facilities are available staff should change into and out of uniform at work and should change out of uniform at the earliest opportunity at the end of their shift. All staff (including community staff) should not undertake activities in public such as shopping whilst wearing their uniform except where such activities form part of their duties. Uniforms should be covered when travelling to and from work, particularly when using public transport.
- By following the Personal Protective Equipment (PPE) elements of the Standard Infection Control Precautions (SICPs) Policy, a uniform should be protected from contamination during healthcare activity.
- To further minimise contamination of the uniform staff should not sit on beds.
- HCWs who provide frequent, intimate and direct patient contact are most at risk of contamination of their uniforms. Therefore these HCWs must wear a clean uniform each day.

Further information on personal protective equipment and laundry advice can be found at:

<http://library.nhsgg.org.uk/mediaAssets/Infection%20Control/08.03.13%20-%20V2.1%2028%20Jan%20NIPCMannual%20-%20088-99-1010-1212.pdf>

#### White Coats

No white coats will be worn by any HCW except those working in laboratories or catering facilities. Laboratory coats should not be worn outside the laboratory.

#### Theatre Attire

The specific requirements of standard operating procedures (SOP) in relation to attire must be followed in each theatre area. Please also refer to local policy.

This section provides general guidance only.

- Clinical staff working in the operating theatres **MUST** wear the conventional theatre clothing provided, i.e. scrub, suit or dress.
- Theatre clothing stained with blood or body fluids must be changed as soon as possible, especially prior to leaving the department.
- A fastened / tied clean theatre gown may be worn by theatre staff transferring from one theatre department to another. No theatre clothes are to be worn in the canteen areas at any location in the hospital unless completely covered by a fastened theatre gown.
- Theatre clothes **MUST** not be worn outside the hospital building.
- Theatre footwear should be fully enclosed at the front to provide toe protection, and grip at the heel. Open-toed shoes are not to be worn. Theatre staff are responsible for cleaning their own footwear. Footwear contaminated with blood and body fluids should be decontaminated as per the NHSGGC Decontamination of Equipment and the Environment Policy. Where footwear is provided it must be worn. Theatre footwear should not be worn outside theatres.

<http://library.nhsgg.org.uk/mediaAssets/Infection%20Control/23.11.11-Decontamination%20V4-BICC%2021.11.11.pdf>

- Disposable caps or hoods must be worn within the operating theatres, and they must completely cover the hair. All caps / hoods must be removed on leaving the department.
- Disposable filtration masks (surgical masks) must be provided as required. Masks should not be handled except when being put on and taken off the face. Masks should be changed between procedures and when they become soiled. Mask must also be removed when leaving the operating theatre; they must not be left around the wearer's neck. Hands must be washed after removal of surgical masks.
- Goggles or visors must be worn when it is appropriate.
- A 'bare below the elbow' principle is to be adhered to in the department when in direct patient contact.

#### **4. PERSONAL PROTECTIVE CLOTHING (PPE)**

PPE is all equipment which is intended to be worn or held by a person at work and which protects the worker against one or more risks to the worker's health or safety. This also includes equipment worn to protect the patient from micro-biological agents.

In healthcare, PPE refers to a variety of barriers and respirators used alone or in combination to protect mucous membranes, airways, skin and clothing from contact with infectious agents.

PPE should be used in addition to normal clothing and uniforms to protect both the patient and the HCW. The type of PPE worn must be based on the assessed risk of the clinical intervention to be undertaken. Uniforms and normal clothing are not considered to be PPE. Advice on PPE can be obtained from IPC staff and Health & Safety practitioners or by following the link:

<http://library.nhsgg.org.uk/mediaAssets/Infection%20Control/08.03.13%20-%20V2.1%2028%20Jan%20NIPCMannual%20-%20088-99-1010-1212.pdf>

#### **5. LAUNDERING OF CLINICAL UNIFORMS AT HOME**

NHSGGC provide a national uniform for the majority of their staff who have a clinical remit. Staff are expected to launder their uniform at home unless they work in a theatre environment and are wearing theatre scrubs. There is no proven risk of cross-infection associated with laundering a uniform at home however care should be taken to ensure that any potential risks are reduced.

- Provided appropriate PPE is used in accordance with SICPs and Transmission Based Precautions (TBPs) there is no evidence that used uniforms pose any risk to HCWs or others. The appropriate use of PPE will therefore protect a uniform from contamination within the healthcare setting.
- If changing facilities are available do not wear your uniform travelling to and from home.
- Change your uniform daily.

- Uniforms should be laundered separately in detergent at the highest temperature suitable for the fabric as per the care label. Uniforms may be ironed or tumble dried as per the care label.
- Uniforms contaminated with blood and / or body fluids should be placed in a hospital soluble laundry bag then into a secondary clear plastic bag and sent to the NHS laundry as per contaminated linen **do not** launder at home.
- If uniforms are contaminated with blood and / or body fluids staff should change out of uniform immediately and wash and change into a new uniform.
- The IPC Team will give specific advice regarding uniforms during outbreaks of infection.

It is possible to claim tax relief for the laundering of uniforms at home. Further information on how to claim this can be found by clicking on the following link for HM Revenue & Customs:

<http://www.hmrc.gov.uk/incometax/relief-tools.htm>

## 6. PROVISION OF UNIFORM AND REPLACEMENT

### General

- Following interview and offer of a post being made and accepted, managers / heads of departments complete and authorise the appropriate staff uniform requisition or order via PECOS.
- A copy of all staff uniform orders will be retained by the head of department in staff personal files.
- Requests for issue of uniform are authorised by manager / head of department. The budget holder makes authorisation of the non-stock requisition.
- Problems pertaining to quality of garments or quantity issued are referred to line managers. The line manager and the respective procurement office must resolve these issues.
- When items of uniform require replacement, the member of staff approaches the line manager to request re-issue. The line manager must complete the appropriate staff uniform requisition or order via PECOS, refer to local policy.
- Procedures are in place to ensure that staff do not commence work without a uniform.

## **Re-Issue Programme**

- A programme of replacement of uniform to individual members of staff is scheduled to begin approximately three years from date of original issue. The appropriate manager / head of department will complete and authorise the staff uniform requisition or order via PECOS for the appropriate budget holder to initiate the order.
- Where a member of staff does not return the total issue of used uniforms, the manager / head of department is contacted by Sewing Room staff or local equivalent to alert them to this omission and to enable pursuance of balance of returns or written confirmation from staff member that uniforms are lost or non-returnable (local policy may apply).
- On issue of new uniform, recipient signs the "Issues Complete" section. Once issues and returns are complete, the form is passed to the employee's line manager for retention on personal file.

## **Termination of employment**

- On termination of employment from the organisation all items must be returned to employer. Failure to return is regarded as a serious breach of security.
- It is imperative that identity badges and uniforms are returned to line managers to prevent improper re-use. Identity badges are then returned to Human Resources.
- Returned uniforms should be sent to Facilities.

## 7. UNIFORM ALLOCATION

### Nursing Staff / Allied Health Professionals

Working Days	Tunics / Polo Shirts	Trousers	Cardigan (for community) / Sweatshirt
5	5	5 PRS	1
4	4	4 PRS	1
3	3	3 PRS	1
2	2	2 PRS	1
1	1	1 PR	1

### Facilities Staff

Working Days	Tunics / Polo Shirts	Trousers	Sweatshirt	Anorak	Shoes	Over Trousers
5	5	3 PRS	1	1	1 PR	1 PR
4	4	2 PRS	1	1	1 PR	1 PR
3	3	2 PRS	1	1	1 PR	1 PR
2	2	1 PR	1	1	1 PR	1 PR
1	1	1 PR	1	1	1 PR	1 PR

### Admin Staff

Working Days	Blouse / Shirt
5	5
4	4
3	3
2	2
1	1

PRS is pro rata number of working days as above. Where there are categories of staff who are fewer in number such as AHPs / PDNs / supervisors / porters, a base stock is not practical and items are ordered as required.

### Bank Staff

Issue pro rata their average number of days worked in week.

## Reference List

CEL 42 (2010) National Uniform Policy, Dress Code and Laundering Policy

[http://www.sehd.scot.nhs.uk/mels/CEL2010\\_42.pdf](http://www.sehd.scot.nhs.uk/mels/CEL2010_42.pdf)

HPS / NSS National Infection Prevention and Control Manual (2013) Standard Infection Control Precautions

<http://library.nhs.uk/mediaAssets/Infection%20Control/08.03.13%20-%20V2.1%2028%20Jan%20NIPManual%20-%2088-99-1010-1212.pdf>

Equality Act (2010) <http://www.legislation.gov.uk/ukpga/2010/15/contents>