

## Uniform, Dress Code and ID Badge Policy (N-069)

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VALIDITY – All policies should be accessed via the Trust internet to ensure the current version is used

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## 1. INTRODUCTION

This policy applies to all staff. It has been introduced to protect the safety of both patients and staff by ensuring that staff uniform and dress code is compliant with infection prevention and control requirements and Health and Safety legislation. The policy also ensures that staff present a clean, smart and professional image at all times.

The policy accommodates personal and cultural diversity where this does not compromise the safety of patients or staff or damage the professional standing of the individual or the Trust. Adjustments to accommodate disability will be determined on an individual basis, with advice and support from Occupational Health and Human Resources.

This policy supports the compliance with the Care Quality Commission Regulation 12 Point 8 “Assessing the risk of and preventing, detecting and controlling the spread of infections including those that are health care associated”

## 2. SCOPE

This policy applies to all Trust employees and contractors in line with the Equality Act 2010. Whilst the Trust recognises the diversity of cultures, religions and disabilities of its employees, and will endeavour to take a sensitive approach when this affects dress and uniform requirements, priority will be given to health and safety, security and infection control considerations. All employees will be treated in a fair and equitable manner recognising any special needs of individuals where adjustment may need to be made. No member of staff will suffer any form of discrimination, inequality, victimisation, harassment or bullying as a result of implementing this policy.

## 3. POLICY STATEMENT

The policy describes standards for all staff and specific standards for staff directly involved in clinical practice. As well as the general standards, there are additional, more stringent requirements for those staff providing clinical care, these staff may, or may not, be required to wear uniform. These requirements relate to particular issues around infection prevention and control and the health and safety of staff and patients. In order to comply with this policy, all clinical staff must have enough (i.e., sufficient for daily changes) sets of uniforms to facilitate good practice in the areas of infection prevention and control and health and safety.

The aim of the policy is to ensure that all Trust staff are clear on the standard of dress expected while at work, whether uniform or non-uniform. The dress code details the standards and image which the Trust wishes to convey to all patients/clients, partners and members of the public. In all cases, the following principles should be supported and promoted, in order to adhere to the recognised legal framework:

- Health, safety, and well-being of patients
- Health, safety, and well-being of staff
- Infection prevention and control
- Public confidence and professional image
- Professional accountability, as defined by professional bodies/councils

The objectives of this policy are:

- To ensure staff maintain a positive professional image
- To enable easy identification of role and profession
- To ensure staff wear clothing in line with the principles of this policy

- To ensure that infection prevention and control and health and safety issues are addressed particularly during a period of outbreak or pandemic

## 4. DUTIES AND RESPONSIBILITIES

### Chief Executive

To assure the Board that this policy is acted on through delegation to the appropriate business units and committees.

### Trust Board

To ensure that this policy is acted on through delegation of responsibility for the development and implementation of the policy to the appropriate directors and committees. To ensure the policy, procedure and guidelines comply with UK law requirements. To ensure the policy and procedures are monitored and reviewed formally through the appropriate committees, e.g. TCNC.

### Directors and Assistant Directors

To ensure that this policy is acted on through a process of policy dissemination and implementation in collaboration with Trust senior managers.

### Senior Managers, Managers and Clinicians

To ensure all staff within their area of responsibility are informed about the contents of this and other associated policies and procedures. Managers must ensure:

- An initial set of uniforms is ordered, dependent upon the role and hours worked
- Employees are aware of the standard of dress within the policy
- Replacement uniforms are provided as required and in agreement with the line manager
- Policies are implemented, monitored and enforced

### Human Resources

The team will provide appropriate technical advice and support.

### Employees

It is the employee's responsibility to:

- Adhere to the standards of dress and personal appearance appropriate to their staff group at all times
- Inform their manager in a timely manner should their uniforms need replacing
- Comply with this and any other associated policy and procedures

**It is every member of staff's responsibility to ensure that this policy is upheld. The Trust has the right to expect that the standards in this policy are adhered to, and line managers will regularly monitor adherence.**

## 5. PRINCIPLES OF THE UNIFORM POLICY

In order to promote a professional image Humber Teaching NHS Foundation Trust requires that all staff achieve certain standards of appearance. Clinical and catering staff are required to achieve additional standards to reduce the risks of staff or patients being harmed, and to improve and assist cleanliness.

## 5.1 Clinical Staff

### 5.1.1 Clinical Staff who are required to wear a uniform

All Nurses, AHPs and Health Care Assistants working within an in-patient clinical setting, GP practices, community nursing services (North Yorkshire), Urgent Treatment Centre, ECT and Clozapine department, Crisis and Intervention Team for Older People (CITOP), Urgent Treatment Centre (UTC) are required to wear a uniform. See appendices for uniform specifications.

For all other clinical teams and professions, the wearing of a uniform will be at the discretion of the divisional managers ensuring bare below the elbow and infection prevention and control standards can be maintained during direct patient care activity, particularly in relation to good hand hygiene. During an outbreak or pandemic there may be a requirement for staff in these areas to wear a uniform or scrubs and national guidance should always be followed.

Those that are required to wear a uniform are required to do so for one or more of the following reasons as outlined by NHS England [Uniforms and workwear: guidance for NHS employers \(england.nhs.uk\)](https://www.nhs.uk/england/uniforms-and-workwear-guidance-for-nhs-employers/)

#### **Patient Safety**

Effective hygiene and preventing infection transmissions are absolutes in all healthcare settings. Although there is no conclusive evidence that uniforms and workwear play a direct role in spreading infection, the clothes that staff wear should facilitate good care practices and minimise any risk to patients. Uniforms and workwear should not impede effective hand hygiene and should not unintentionally come into contact with patients during direct patient care activities. Similarly, nothing should be worn that could compromise patient or staff safety during care, for example any nails products, rings (single plain metal ring is allowed i.e., wedding band), earrings other than studs, and necklaces.

#### **Public Confidence**

Patients and the wider public should have complete confidence in the cleanliness and hygiene of their healthcare environment. The way staff dress is an important influence on people's overall perceptions of the standards of care they experience. Uniforms must be clean at all times and professional in appearance. In addition, although there is no evidence that wearing uniforms outside work adds to infection risks, public attitudes indicate it is good practice for staff to change at work or cover their uniforms as they travel to and from work.

Patients and visitors also like to know who staff are. Uniforms and name badges can help with this.

#### **Staff comfort**

As far as possible, subject to the overriding requirements of patient safety and public confidence, staff should feel comfortable in their uniforms. This includes being able to dress in accordance with their cultural practices. For example, although exposure of the forearm is a necessary part of hand hygiene during direct patient care activity this policy local allows for covering of the forearm at other times.

Healthcare professionals working in the Nursing Directorate or in the Training and Development Team will wear uniforms when in clinical areas.

## 5.1.2 Good Practice Uniforms and Workwear

[Uniforms and workwear: guidance for NHS employers \(england.nhs.uk\)](https://www.england.nhs.uk/uniforms-and-workwear-guidance-for-nhs-employers/)

### Washing uniforms and workwear

All elements of the washing process contribute to the removal of micro-organisms on fabric. Detergents (washing powder or liquid) and agitation release any soiling from the clothes, which is then removed by sheer volume of water during rinsing. Temperature also plays a part.

Scientific observations and tests, literature reviews and expert opinion as stated in the 2007 suggests that:

- There is little effective difference between domestic and commercial laundering in terms of removing micro-organisms from uniforms and workwear
- Washing with detergents at 30°C will remove most Gram-positive micro-organisms, including methicillin-resistant *Staphylococcus aureus* (MRSA)
- A ten-minute wash at 60°C is sufficient to remove almost all micro-organisms. In tests, only 0.1% of any *Clostridioides difficile* spores remained. Microbiologists carrying out the research advise that this level of contamination on uniforms and workwear is not a cause for concern

### Good practice - evidence based

These are recommended good practices based on evidence from the literature reviews, testing and effective hand hygiene procedures.

Good practice - evidence based	Why
Wear short-sleeved tops and do not wear white coats during patient care activity.	Cuffs at the wrist become heavily contaminated and are likely to come into contact with patients.
Change immediately if uniform or clothing becomes visibly soiled or contaminated.	Visible soiling may present an infection risk and will be disconcerting for patients.
Dress in a manner which inspires patient and public confidence.	People may use appearance as a proxy measure of professional competence.
Change into and out of uniform at work or cover uniform completely when travelling to and from work.	There is no evidence of an infection risk from travelling in uniform, but many people perceive it to be unhygienic.
Wear clear identifiers.	Patients like to know the names and roles of staff who are caring for them.
Wash uniforms and clothing worn at work at the hottest temperature suitable for the fabric (trusts should take this into account before purchasing uniforms that can only be washed at low temperatures or are dry clean only).	A wash for ten minutes at 60°C removes almost all micro-organisms. Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms.
Clean washing machines and tumble	Regular cleaning and maintenance will protect the

driers regularly, in accordance with manufacturer's instructions.	machine's washing efficiency. Dirty or underperforming machines may lead to contamination of clothing, although there is no published evidence that this presents an infection risk.
Have clean, short, unvarnished fingernails.	Clean nails are hygienic and look professional. Long nails are harder to keep clean and are a potential hazard.
Tie long hair back off the collar.	Patients prefer to be treated by staff who have tidy hair and are smartly presented.

Poor practice – evidence based	Why
Go shopping in uniform or engage in other activities outside work.	Even though there is no evidence of infection risk, people perceive there is one.
Wear false nails during patient care activity.	False nails harbour micro-organisms and make effective hand hygiene more difficult.
Wear any jewellery, including a wrist-watch, on the hands or wrists during direct patient care activity (local policies may allow a plain ring such as a wedding ring).	Jewellery and watches can harbour micro-organisms and make effective hand hygiene more difficult.

These are examples of good practice which need no evidence base. They simply serve the three objectives of patient safety, public confidence, and staff comfort.

Good practice – common sense	Why?
Wear soft-soled shoes, closed over the foot and toes.	Closed shoes offer protection from spills and dropped objects. Open shoes risk injury or contamination for staff. Soft soles reduce noise in wards.
Have at least enough uniforms available for staff to change each day.	Enables staff to start each day with a clean uniform.
Put on a clean uniform at the start of every shift.	Presents a professional appearance.
Do not overload the washing machine.	Overloading the machine will reduce wash efficiency.
Wash heavily soiled uniforms separately.	Separate washing will eliminate any possible

	cross-contamination from high levels of soiling and enable the uniform to be washed at the highest recommended temperature.
Use posters or other visual aids to show who wears which uniform.	Patients and their visitors like to know who is looking after them. Uniforms will help them identify who they may wish to speak to.
Where, for religious reasons, members of staff wish to cover their forearms or wear a bracelet when not engaged in patient care, ensure that sleeves or bracelets can be pushed up the arm and secured in place for hand washing and direct patient care activity *.	Hand hygiene is paramount, and accidental contact of clothes or bracelets with patients is to be avoided
Headscarves must be worn unadorned and secured neatly	Headwear, for example, turbans and kippot, veils (Christian or niqab) and headscarves are permitted on religious grounds, provided that patient care, health and safety, infection control and security and safety of patients and staff is not compromised

\*staff may express a preference for disposable over-sleeves – elasticated at the wrist and elbow – to cover forearms during patient care activity. Disposable over-sleeves can be worn where gloves are used, but strict adherence to washing hands and wrists must be observed before and after use. Over sleeves must be discarded in exactly the same way as disposable gloves

Poor practice – common sense	Why?
Wear neckties/lanyards (other than bow-ties) during direct patient care activity.	Ties have been shown to be contaminated by pathogens and can accidentally come into contact with patients. They are rarely laundered and play no part in patient care.
Carry pens, scissors or other sharp or hard objects in outside breast pockets.	They may cause injury or discomfort to patients during care activity. They should be carried inside clothing or in hip pockets
Wear jewellery while on duty other than a smooth ring or plain stud earrings.	Necklaces, long or hoop earrings and rings present possible hazards for patients and staff.
Wear numerous badges.	One or two badges denoting professional qualifications or memberships may be acceptable. Any more looks unprofessional and may present a safety hazard.
Dress untidily and in an unprofessional	Patients and visitors may equate untidy



manner.	appearance with low professional competence and poor hygiene standards.
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### 5.1.3 Supply of Uniform

Full-time nursing staff will be issued with either three dresses or three tunics and three pairs of trousers (or a combination). Part-time staff will have up to two tunics/dresses and two pairs of trousers. Bank should utilise existing uniforms available at base.

Uniforms should be smart, safe and practical and should provide the wearer with mobility and comfort. Stockings, tights and socks (must be blue, black or neutral etc.) should not detract from the overall appearance of the uniform.

Uniforms will be durable enough to withstand water temperatures to minimise the risks of cross infection. They will be purchased with the client group in mind, reflecting the type of work undertaken. Male staff should not wear neck ties during any care activity which involves patient contact. Washable cardigans may be worn but not when in clinical areas and/or when attending to patients. These are not provided by the Trust and, if required, must be provided by the individual.

All Uniforms must be clean, ironed and presentable on commencement of shift. Staff should have access to a spare uniform in case of accidental contamination by blood, body fluids or other noxious/toxic substances.

All clinical staff, when they are on duty, should wear their regulation uniform, in compliance with this policy. This will also project a professional image and encourage public trust and confidence, as well as contribute to the corporate image that all staff and the trust wish to present (RCN, 2005).

**Old uniforms must be returned and will be recycled to other staff after laundering. The Matron is tasked with checking standard and condition of recycled uniform.**

A summary of the application of this Uniform, Dress Code and ID Badge Policy in relation to staff groups is set out in the table below:

### 5.1.4 Clinical Staff Non-Uniform – Dress for Work

Healthcare workers wearing their own clothes (i.e. non-uniform) should ensure that they are suitable for work purposes; are clean and in a good state of repair and should look professional at all times. Examples of clothing, accessories and personal appearance which may be considered inappropriate or not fitting with a professional image are stated below. It should be noted that this list is not exhaustive

- Shorts, Lycra cycling shorts or leggings
- Miniskirts
- Transparent or see-through blouses, dresses or shirts, low cut t-shirts or blouses
- Track suits and football shirts (except when participating in sporting activities/events)
- Clothing with holes, tears or rips
- Denim clothing
- Crop tops and low waisted trousers exposing midriff
- Items of clothing bearing large logos or any logo of an unacceptable nature

When healthcare workers are working alongside children appropriate clothing should be

chosen for their work environment. For example jeans, hoodies and trainers may be more suitable for physical activities or to prevent any barriers to engagement.

Healthcare workers in non-uniform must abide by the Bare Below the Elbows principles when delivering direct patient care.

### **5.1.5 All Clinical Staff - The use of Personal Protective Equipment (PPE)**

All body fluids pose a potential risk of transmitting infection therefore it is important that a PPE risk assessment is completed to assess any likely exposure and ensure PPE is worn that provides adequate protection against the risks associated with the procedure or task being undertaken.

PPE is worn in addition to uniforms and normal clothing and is designed to protect both the patient and the healthcare worker. It is important to note that a standard uniform is not PPE.

Protective clothing (plastic aprons and disposable gloves) must always be worn when there is a risk of exposure to blood, body fluids or cleaning chemicals or when caring for a patient with a potentially communicable infection.

Full body, fluid repellent gowns or coveralls should be worn when there is a risk of extensive splashing of any of the above-mentioned body fluids, when dealing with high-risk pathogens or when dealing with heavily contaminated environments such as when a dirty protest has occurred. Additional national guidance will be followed during a pandemic situation.

### **5.1.6 Bare Below the Elbow Principles – all clinical staff delivering direct patient care**

Bare Below the Elbows (BBTE) is a Department of Health and Social Care-led initiative to improve patient safety by ensuring that all hand hygiene practice is undertaken effectively to reduce the risk of infection to both patients and staff. It is based on research that has shown that the wearing of hand/wrist jewellery in the clinical setting can harbour micro-organisms and can reduce compliance with hand hygiene.

In accordance with NICE guidelines direct patient care is defined as 'hands on' or 'face-to-face' contact with patients (any physical aspect of the healthcare of a patient, including treatments, self-care and administration of medication) (NICE Clinical Guidelines CG 139, 2017).

The Trust supports the stance that all staff must be bare below the elbow whenever they are in a clinical area where they can reasonably expect to deliver direct patient care in line with the NICE guidance above.

In order to achieve this, hands and wrists need to be fully exposed and should be free of long-sleeved clothing. Long sleeves prevent thorough hand hygiene procedures and are more likely to become contaminated during work activities.

This also includes:

- **No watches or wrist jewellery** (Dancer 2009). Wristwatches and other jewellery worn on the hands and wrists become contaminated during work activities.
- **No artificial nails.** A number of small-scale observational studies have demonstrated that wearing false nails is associated with increased carriage of micro-organisms and in some cases, linked to the carriage of outbreak strains (epic 3, 2014). Natural fingernails harbour micro-organisms. Artificial nails and

nail extensions harbour higher levels of micro-organisms than natural fingernails, and these micro-organisms are not removed easily

during hand hygiene. It should be noted that artificial fingernails can also fall off, and this may pose an added risk.

- Nails should be kept short and clean.
- **No nail varnish** (White 2013). Nail products should not be worn as chips may harbour a greater number of bacteria and thus represent an infection risk.
- **No rings** that have stones or settings present (Henderwick et al 2000). Rings, particularly with stones become contaminated during work activities. In addition, they prevent thorough hand hygiene procedures.

Any staff who do not work routinely in a clinical environment but may need to enter to provide any hands-on care as part of their role will need to practice in accordance with this policy.

Any staff employed by other organisations that enter Trust premises for work purposes must be provided with information on what is expected.

All clinical managers are expected to lead by example and adhere to these requirements, particularly when visiting inpatient units.

## 5.2 Non-Clinical Staff – Dress for work

### Acceptable/Unacceptable Dress

The Uniform, Dress Code and ID Badge Policy is designed to guide managers and employees on the Trust Standards of dress and appearance. The policy is not exhaustive in defining acceptable and unacceptable standards of dress and appearance and staff should use common sense in adhering to the principles underpinning the policy. A sensible approach should be taken to ensure the spirit of the code is applied.

For non-clinical staff and those not required to wear a uniform the following items of clothing are examples of acceptable and unacceptable dress, either on the grounds of health and safety or for the Trust's public image:

Acceptable	Unacceptable
Smart/casual trousers/jacket/suits	Denim jeans or denim skirts (all colours and styles)
Skirts	Skirts that are so long that they touch the ground when walking are not acceptable on safety and hygiene grounds
Trousers	Combat trousers, leggings, tracksuits, sportswear (except when engaging in activity with patients)
Shirts/blouses	Underwear should not be visible (avoid low- slung trousers and sheer blouses)

Smart t-shirts and tops	Overly tight or revealing clothes (including miniskirts, tops revealing the midriff). Clothing bearing inappropriate slogans (subject to local agreement), strapless
Smart jumpers and sweatshirts	
Jackets and blazers	High-fashion clothing incorporating rips, tears or excessive studding
Dresses	Baseball caps/hats
Footwear – sensible and safety compliant	Flip flops, fashion mules/clogs with holes in

In hot weather, alternative dress may be agreed locally, e.g. smart chino shorts.

### 5.3 Requirements – All staff

#### Personal Hygiene

All staff should maintain a high level of personal hygiene and appearance.

#### Make-up and Nails

Make up, if worn should be minimal/unobtrusive. Nails should be clean and nail varnish, where it is worn, should be in good condition. The use of deodorants, perfumes and aftershave should be used to assist an acceptable standard of personal hygiene but these should not be overpowering.

#### Jewellery

Staff should ensure that their jewellery does not pose a risk to themselves or others. Facial piercing should remain discreet and facial jewellery should be plain and flat in order to avoid potential harm. Staff working with machinery with moving parts must not wear loose jewellery and rings must be removed or taped. Employees must fully co-operate with their employer in meeting their legal responsibilities in relation the Health and Safety at Work Act 1974.

#### Health and Safety

Clothing and footwear should be appropriate for the type of work individuals carry out, and not expose oneself or others to unnecessary risk. Potential hazards relating to clothing worn should be considered as part of the risk assessment process. Staff issued with personal Protective Equipment (PPE) or clothing for their safety must ensure they are worn, stored, used, cleaned, maintained, serviced, and disinfected as appropriate and in accordance with the manufacturer's recommendations (The Personal Protective Equipment Regulations, 2002).

Where there is a risk of harm from children/patients mouthing or biting forearms, long sleeves maybe worn by staff. However, they should be button free to enable quick access for decontamination purposes.

#### Identification Badges

A visible photo identity name badge should be clearly displayed at all times in all areas of the organisation for security and identification purposes. Outside the organisation and whilst taking a lunch break or at the end of the working day, the ID badge should be covered or removed for personal safety reasons.

All members of staff will be issued with an identification badge which includes a photographic image of the member of staff, trust logo name and title. This identification badge will be issued on commencement of employment by the human resources and

diversity directorate.

Staff must wear their identification badge in a clearly visible manner at all times whilst on duty unless the specific clinical situation suggests otherwise, and the manager agrees. In such circumstances staff should carry and have their ID badge available for inspection if requested.

Staff are required to show their identification badge to any person who has reasonable cause to ask. As a matter of good security practice, staff should request sight of identification badges for staff that are unknown to them, especially in patient areas and other areas where security is important. Where it is suspected that someone who is not wearing an identification badge and does not appear familiar as being a member of Trust staff is attempting to access Trust premises, all staff have a responsibility to inform their manager and security staff immediately.

Where staff believe that having their first and second name on the badge would put them at risk there is an option to use an alternative, such as a first name and personal number.

All identification badges remain the property of the Trust. Managers are responsible for the safe return of identification badges on termination of employment to Human Resources.

Managers will arrange for any changes to identification badges to be undertaken, e.g. change of name or job title.

Where staff identification badges are lost, misplaced or suspected to have been stolen this should be reported and reported to the line manager immediately who will notify, if appropriate, the relevant security department and arrange for a replacement badge to be issued.

#### **Identification Badges for Visitors, Contractors and Others**

All NHSP and agency staff must wear their relevant agency identification badge at all times when they are on Trust premises. The badge must include a photograph of the NHSP/agency worker.

Each of the Trust's service areas have locally determined arrangements to ensure that the status of visitors, voluntary workers and contractors is clearly identified.

Staff are reminded to be vigilant regarding individuals who may wish to gain access to NHS premises while posing as a member of staff or unauthorised visitor. Staff are encouraged to report any concerns immediately to their manager or a senior member of staff.

For non-clinical staff, staff can wear the snap release safety neck ribbons/lanyards.

For staff delivering procedural/direct patient care, ID badges must be of the clip variety for practical reasons. These are available from the recruitment team. Please note this excludes areas whereby a breakable lanyard is issued as per local guidance, e.g. Forensics.

Any badge lanyard must be washed/decontaminated daily as a minimum requirement.

#### **5.4 Clinical Staff – Additional Requirements**

This applies to all staff engaged in direct patient contact.

Staff who wear their own clothes rather than a uniform (e.g. CPNs, health visitors; school nurses specialist nurses; speech and language therapists, dietitians; medical staff etc.), when working in a clinical environment should adhere to the general principles of standards set out as above. They should ensure that their clothes, shoes and jewellery worn do not pose a potential hazard to themselves, patient/clients and other staff from both an infection control and health and safety perspective. It is recommended that clothes worn should be separated into items worn for work and items worn outside of work. Clothes can then be easily separated out for washing into potentially contaminated workwear and clothes worn at home for normal laundering.

For staff who wear a uniform when working in clinical practice, the following must be observed:

### **Uniforms**

All healthcare workers are required to wear the uniform provided and agreed by the organisation. Uniforms should allow sufficient hip and shoulder movement for the safe moving and handling requirements of the job.

Uniforms should be smart, safe and practical and provide the wearer with mobility and comfort. Stockings, tights and socks (blue, black or neutral etc.) should not detract from the overall appearance of the uniform.

Uniforms purchased, should be durable enough to withstand water temperatures required to minimise the risk of cross infection. They should be purchased with the client group in mind, reflecting the type of work undertaken. Male staff should not wear neck ties during any care activity which involves patient contact. Washable cardigans may be worn but not when in a clinical area and/or attending patients. These are not provided by the Trust and, if required, must be provided by the individual.

Pens/scissors or other sharp instruments should not be carried in uniform pockets as they could cause potential injury to the staff member or a patient when delivering direct patient care. All uniforms must be clean, ironed and presentable on commencement of shift. Staff should have access to spare uniforms in case of accidental contamination of blood, body fluids or other noxious/toxic substances.

They must be taken off before leaving the clinical area and the hands should be washed in accordance with the Trust infection control guidance.

All staff, when they are on duty, should wear their regulation uniform, in compliance with the uniform policy. This will also project a professional image and encourage public trust and confidence, as well as contribute to the corporate image that staff and the trust wish to present.

### **Hair**

Hair should be clean, well groomed, and tidy and off the collar, to reduce the incidence of bacterial growth around the collar. Clinical staff should have their hair tied back if longer than shoulder length. This applies to all hairstyles and types, including extensions, wigs etc. Where hair clips are worn, they must not have the potential to injure staff or patients and must comply with health and safety. Where hairbands are worn, they should be appropriate. Beards and moustaches should be clean and neatly trimmed.

### **Jewellery**

Jewellery should be discreet, appropriate, not cause offence or be a health and safety

hazard. Healthcare workers must not wear items of jewellery other than:

- One pair of stud earrings (no hoop earrings)
- Plain wedding band

Necklaces must not be worn unless covered by clothing. Exceptions may be made for medical alert bracelets. No visible body piercing or tongue studs. Badges should be limited to only three professional badges. As they have the potential to cause injury. Special care should be taken where staff are required to regularly handle babies and infants and/or undertake manual handling or close contact care.

### **Tattoos**

Staff should consider the image projected and the impact on service users, carers, colleagues and the public perception of body art and piercings and where possible, tattoos and body art should be covered during working hours. If this is not possible the employee's line manager must agree a plan/risk assessment with them.

This policy is not exhaustive. Line managers should use common sense in adhering to the principles underpinning this policy and an individual risk assessment should be undertaken if tattoos are unable to be covered by clothing. This should be done on an individual basis.

## **5.5 Footwear**

Footwear must be safe, maintained in good order, with a sole that provides suitable grip and made of material that is easily cleanable.

Staff should have regard for nature of the work they are undertaking, giving consideration to:

- Degree and nature of manual handling activities undertaken
- The frequency of movement around the Trust
- Frequency and use of step ladders/kick stools or similar
- Interaction/use of wheeled equipment
- Prevalent type of flooring in the area worked
- Likelihood of encountering wet flooring
- Use of sharps and exposure to body fluids

**Healthcare workers** – shoes must be suitable for the work task, leather/leather type with a rubber or crepe non-slip sole (to minimise disruption of patients when sleeping), and low heel (no higher than 1 inch/2.5 cm) provide adequate support and be strong enough to prevent damage to toes should anything be dropped on the feet. They should be a lace up or slip-on full shoe. These are provided by the individual. Shoes must be made of a wipeable material (therefore trainers and suede shoes are not acceptable as they cannot be effectively cleaned) and must enclose the whole foot. Open-toed shoes/sandals and clogs/mules style is not permitted as these constitute a hazard as they provide no protection from injury (Manual Operations Regulations, 1992).

If alternative footwear is required for medical purposes, the individual will be required to provide medical evidence.

**Catering/Estates and Facilities staff** should follow the guidance above for clinical staff. Where protective shoes are required such as steel-toed caps, these will be provided by the Trust following a role specific assessment.

**Admin and clerical staff** should ensure their footwear is suitable for the activities they undertake and the environments they work in. Any footwear worn should adhere to the

underlying principles of this policy.

## **5.6 Mobile Phones and Bleeps**

Staff engaged in clinical activity within the community setting should keep their mobile phones and or bleeps silent or vibrate whilst giving direct patient care, and only deal with a call between clinic/patients visits. Exceptions are medics and staff on call or standby.

## **5.7 No Smoking Policy**

All staff must uphold the Trust's No Smoking Policy. Staff must not smoke in a public area when in uniform.

## **5.8 Bank, Locum, Agency and Ad Hoc staff (including Students)**

Any Bank staff undertaking bank work should wear the official uniform that reflects the position they are working in. Although students have their own university uniform, they are nevertheless expected to comply with the principles of this dress code whilst working on placement with Trust staff, and therefore demonstrate a lean and tidy appearance, observing rules on jewellery and smoking

## **5.9 Maternity Clothing**

Suitable work clothing will be provided for pregnant clinical staff as required. These must be returned following maternity leave.

## **5.10 Laundering and Care of Uniforms and Scrubs**

The Trust does not provide a routine laundry service.

A changing facility should be identified for staff to change into their uniforms must be identified within each clinical area. If you are deemed to be a location-based worker (for example those who work in a hospital, GP, surgery, clinic, etc.) and you wear a uniform you must travel to work in your own clothes and take a uniform in a plastic bag to change into once on site.

Staff should wear freshly laundered uniform or scrubs every day and should be worn in a clean and presentable fashion. Sufficient uniforms or scrubs will be provided to staff to ensure this can be achieved.

Any uniform that becomes soiled with body fluids, e.g. blood, must be changed immediately. If grossly contaminated they must be destroyed and disposed of via the Trust clinical waste stream.

Once the workday is completed the uniform or scrubs must be put back in a plastic bag or a Dissolvo bag suitable for a cold wash and taken home. If possible, uniform must be washed immediately and dispose of the plastic bag in the normal waste stream.

- Uniforms and scrubs should be washed separately from general household laundry.
- Washed at the maximum temperature the fabric will allow (see manufacture instructions on the label)
- Placed in a load not more than half the machine capacity;
- Wash at the maximum temperature the fabric can tolerate, then ironed or tumble-



dried. Uniforms or workwear can be tumble dried with other household laundry as correct washing will remove any infectious micro-organisms on the uniform).

Clean and dirty uniforms must be kept separate.

For those health care workers who do not wear a uniform (for example some community mental health staff, health visitors, etc.) it is recommended that clothing is designated into clothes that are worn for work and items worn outside of work. Clothes can then be easily separated out for washing into potentially contaminated workwear and washed in accordance with the guidance above.

### **5.11 Changes to Uniforms Policy in Extreme Weather Conditions**

There may be circumstances where the wearing of all or part of the uniform may cause difficulties to staff, e.g. within extremely hot or cold weather. Changes to uniform may be allowed at local level and following discussions with staff, managers have discretion to agree such changes. However, this must be professional and respect the general principles specified throughout the policy.

ID badges must be worn at all times. All staff are expected to use their discretion and judgement in deciding with their manager the appropriate dress for the task they are to carry out.

It is essential that healthcare workers should not wear scrubs when travelling to and from work or between hospital sites.

### **5.12 Tax Relief**

Staff can claim tax relief in respect of laundry costs by writing to the local Inland Revenue office, with National Insurance number and details of cost. More information is available at [Claim tax relief for your job expenses: Uniforms, work clothing and tools - GOV.UK \(www.gov.uk\)](https://www.gov.uk/claim-tax-relief-for-your-job-expenses-uniforms-work-clothing-and-tools)

### **5.13 Religious or Other Considerations**

The Trust values the diversity of its staff and aims to create an environment where the beliefs of all, whether cultural, religious, non-religious or philosophical are respected. The wearing of items arising from cultural or religious norms is in most circumstances welcomed by the Trust, providing that the health and safety, infection prevention, and security of patients or staff are not compromised. The wearing of hijabs and jilabs are permitted provided that they do not affect health and safety or prevent the employee from doing their job effectively. Turbans and kippots, veils (Christian or nikab) and headscarves are supported on religious grounds. The latter should be shoulder length and must be worn unadorned and secured neatly. However, where staff are working directly in a therapeutic environment with patients and service users the Trust expects that full facial veils will not be worn. This is to develop and preserve a trusting and therapeutic alliance.

### **5.14 Failure to Comply with the Trust Uniform Policy and Corporate Dress Code**

Staff who are deemed by a line manager to be contravening this policy will be asked to adhere to the recommendations as soon as practicably possible. Repeated noted incidents of a member of staff failing to comply will result in the action the Disciplinary Policy.

## 5.15 Termination of Employment

Uniforms remain the property of the Trust and must be handed in by staff who leave or retire. ID badges must be returned before leaving employment.

## 6. EQUALITY AND DIVERSITY

An Equality and Diversity Impact Assessment has been carried out on this document using the Trust-approved EIA and the changes identified have been incorporated into the policy.

## 7. IMPLEMENTATION

This policy will be disseminated by the method described in the Policy and Procedural Documents Development and Management Policy.

## 8. MONITORING AND AUDIT

This policy will be monitored to ensure equity and parity across the Trust. The policy will be reviewed after three years, or earlier if required by legislation or other changes occur.

All managers are responsible for the monitoring and audit of this policy. Compliance with this policy to be monitored as follows:

- Via feedback from managers
- Audit of HR casework/complaints and/or concerns arising from staff and managers  
Procurement auditMyAssurance

## 9. REFERENCES/EVIDENCE/GLOSSARY/DEFINITIONS The Legal Framework

The main legislation that affects an organisation's response to the transmission of infections via uniforms or work wear is outlined below:

- The Health and Safety at Work etc. Act 1974 sections 2 and 3. Section 2 covers risks to employees and Section 3 to others affected by their work, e.g. patients.
- The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH). Further information about COSHH and its applicability to infection control can be found at [www.hse.gov.uk/biosafety/healthcare.htm](http://www.hse.gov.uk/biosafety/healthcare.htm).
- Management of Health and Safety at Work Regulations 1999 (Management Regulations), that extend the cover to patients and others affected by microbiological infections and include control of infection measures.
- Department of Health (2015) *The Health and Social Care Act 2008: Code of Practice for the Prevention and Control of Healthcare Associated Infections*. London: Department of Health
- Department of Health (2016) HTM 01-04: Decontamination of linen for health and social care: Management and provision London: Department of Health

## 10. REFERENCES

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Royal College Of Nursing (2013) Wipe it Out: One chance to get it right. Guidance on uniforms and work wear. Royal College of Nursing: London

Royal College of Nursing (2020) Uniform and Workwear Guidance <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2020/april/009-245.pdf?la=en>

## 11. RELEVANT POLICIES/PROCEDURES/PROTOCOLS/GUIDELINES

No Smoking Policy

Hand Hygiene Policy

## Appendix 1: Clinical Staff Uniform Specifications:

All in-patient wards/units, Community Nursing Services (North Yorkshire), Integrated Hospital Team, Corporate, Crisis and Intervention Team for Older People (CITOP), Urgent Treatment Centre (UTC), ECT and Clozapine Clinic and GP Practices

Traditional nurses' buckles can restrict movement and cause injury to patients, as well as harbour pathogens. For this reason, the Trust does not allow buckles and belts to be part of the standard uniform. **N.B. NHS logo to be applied on clothing where appropriate. As the uniforms are not unisex, women's and men's styles have been stipulated throughout.**

### Corporate nursing staff (including training and occupational health)

- Black short-sleeved dress or black short-sleeved shirt, or short-sleeved tunic with white trim
- Black trousers
- Black winter jacket/fleece

### Band 8a and above

- Navy short-sleeved dress (HMB006NR) or short-sleeved tunic (women's: HMB007NR; men's: HMB001NR) with red trim
- Navy short-sleeved shirt (men's: HMB137NA)
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

### Band 8a Matrons

- Navy short-sleeved mandarin collar dress (HMB014NR) or short-sleeved mandarin collar tunic (women's: HMB007NR) with red trim
- Navy short-sleeved tunic (men's: HMB001NR) with red trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

### Band 7 staff

- Navy short-sleeved dress (DF0871261E) or navy short-sleeved tunic (women's FT1870066E; men's GT7340682E) with amethyst trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

### Band 6 staff

- Navy short-sleeved dress (HMB006NA) or navy short-sleeved tunic (women's HMB007NA; men's HMB001NA) with white trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

**Band 5 staff** Royal blue short-sleeved dress (HMB006RO) or royal blue short-sleeved tunic (women's HMB007RO; men's HMB001RO) with white trim

- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

#### **Band 4 Nursing Associates**

- Hospital blue short-sleeved dress (HMB150HN) or hospital blue short-sleeved tunic (women's HMB298HN; men's HMB151HN) with navy trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

#### **Band 4 Assistant Practitioners**

- Pale blue short-sleeved dress (HMB006PB) or pale blue short-sleeved tunic (women's HMB007ZX; men's HMB103BX) with navy trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

#### **Band 2 and 3 Health Care Assistants and Band 2 Phlebotomists**

- Pale blue short-sleeved dress (HMB006PB) or pale blue short-sleeved tunic (women's HMB007PB; men's HMB001PB0) with white trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

#### **Band 2 Phlebotomists (in GP practices)**

- Pale blue short-sleeved dress (HMB006PB) or pale blue short-sleeved tunic (women's HMB007PB; men's HMB001PB0) with white trim
- Navy trousers (women's LT2000001; men's: MT6000008)
- Navy winter jacket/fleece (unisex: HMB437NA) (not applicable to ward-based staff)
- Humber interactive parka (unisex: HMB562NA) (not applicable to ward-based staff)

#### **Staff with a dual role in community nursing and health visiting**

- As above, depending on which group they are working with

## **Appendix 2: Physiotherapy/Occupational Therapy/Podiatry/Transport Driver**

### **Physiotherapy – Male**

- White polo shirt or white short-sleeved shirt
- White or navy sweatshirt or cardigan
- Navy trousers (tailored)
- Navy tailored shorts may be worn during the period of British Summer Time
- Navy sweatshirt/fleece jacket

### **Physiotherapy – Female**

- White short-sleeved tunic top with navy trim; or
- White short-sleeved dress with navy trim; or
- White polo shirt
- White or navy sweatshirt or cardigan
- Navy trousers (tailored)
- Navy tailored shorts may be worn during the period of British Summer Time
- Navy sweatshirt/fleece jacket

### **Physiotherapist Assistants – all bands**

- Pale blue short-sleeved top or
- Pale blue polo shirt
- Pale blue cardigan or sweatshirt
- Navy trousers (tailored)
- Navy tracksuit bottoms may be worn in clinical situations, e.g. exercise sessions and mat work
- Navy tailored shorts may be worn during the period of British Summer Time
- Navy sweatshirt/fleece jacket

### **MSK/Advanced Practitioners**

- Blue/navy polo shirt
- Navy trousers

### **Occupational Therapy Service**

- White polo shirt with “Occupational Therapist” embroidery; or
- White short-sleeved tunic top with bottle green trim
- Navy blue short-sleeved shirt (Community Ward Band 6/7)
- Plain bottle green trousers
- Bottle green sweatshirt/fleece jacket

### **Occupational Therapist Assistants – all bands**

- Plain white polo shirt
- Plain bottle green trousers
- Bottle green sweatshirt/fleece jacket

### **Transport Driver**

- Blue short-sleeved shirt with black tie and black trousers
- Black socks and shoes
- High visibility jacket

### **Generic Therapy Assistants (all Bands)**

- Pale blue short-sleeved top or
- Pale blue polo shirt or

- Pale blue tunic (as per appendix 1)
- Pale blue cardigan or sweatshirt
- Navy trousers (tailored)
- Navy tracksuit bottoms may be worn in clinical situations, e.g. exercise sessions and mat work
- Navy tailored shorts may be worn during the period of British Summer Time
- Navy sweatshirt/fleece jacket

Additional or more expensive items like cardigans or sweatshirts (without a hood) may be purchased by individual staff directly from the supplier.

### **Appendix 3: Speech and Language (children's teams only and/or where agreed by manager), Health Trainers and Community Link/Support workers**

#### **Speech and Language Therapists**

White tunic top with light blue, oasis trim  
Black trousers

#### **Dietetics (excluding mental health and eating disorders)**

Dieticians

White short-sleeved dress or white short-sleeved tunic with turquoise trim  
Navy trousers

Dietetic Assistants

White short-sleeved tunic (no trim)  
Navy trousers

#### **Health Trainers**

Black or red polo shirt  
Black trousers/skirt  
Black shoes (if trainers, need to be black)

#### **Community Link/Support Workers**

Turquoise polo shirt  
Black trousers/skirt  
Black shoes



## **Appendix 4: Out of Hours Service – Uniform Specification**

### **Technicians**

- .12 Navy polo shirt
- .13 Bottle green trousers/skirt
- .14 Bottle green fleece
- .15 Yellow high-visibility jacket

## **Appendix 5: Administration and Clerical Staff within GP Practices**

### **Administration and Clerical**

- Navy and white blouse
- Navy skirt or trousers

### **Health Trainers**

- Black or red polo shirt
- Black trousers/skirt
- Black shoes (if trainers, need to be black)

### **Community Link/Support Workers**

- Turquoise polo shirt
- Black trousers/skirt
- Black shoes

## **Appendix 6: Scrubs**

- Navy Midweight Scrub Tunic HP900M
- Navy Midweight Scrub Trousers HP901M
  
- Navy Lightweight Scrub Tunic HP900
- Navy Lightweight Scrub Trousers HP901
  
- Navy Midweight Scrub Set HP902M
- Navy Lightweight Scrub Set HP902

## Appendix 7: Document Control Sheet:

Document Type	Policy – <b>Uniform, Dress Code and ID Badge Policy</b>		
Document Purpose	The policy was introduced to protect the safety of both patients and staff by ensuring that staff uniform and dress code is compliant with infection prevention and control requirements and Health and Safety legislation. The policy also ensures that staff present a clean, smart and professional image at all times.		
Consultation/ Peer Review:	Date:	Group / Individual	
<i>list in right hand columns consultation groups and dates -&gt;</i>	Nov-21	IPC team	
	Dec-21	QPaS	
Approving Committee:	EMT	Date of Approval:	February 2018
Ratified at:	Trust Board	Date of Ratification:	2018
Training Needs Analysis: <i>(please indicate training required and the timescale for providing assurance to the approving committee that this has been delivered)</i>	There are no training requirement for this document	Financial Resource Impact	There are no financial resource impacts
Equality Impact Assessment undertaken?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/> Rationale:
Publication and Dissemination	Intranet <input checked="" type="checkbox"/>	Internet <input type="checkbox"/>	Staff Email <input checked="" type="checkbox"/>
Master version held by:	Author <input type="checkbox"/>	HealthAssure <input checked="" type="checkbox"/>	
Implementation:	<i>Describe implementation plans below</i>		
	Implementation will consist of: <ul style="list-style-type: none"> <li>• Ratified policy to be shared with Executive Directors for sharing across directorates and with lead authors highlighting the new process</li> <li>• All staff email highlighting the key changes with a link to the full policy</li> <li>• Sub-committees to add approval of policies to their work-plan</li> </ul>		
Monitoring and Compliance:	Monitoring and compliance of the policy will be evidenced through the process of consultation, approval and ratification of policies.		

<b>Document Change History:</b>			
Version Number / Name of procedural document this supersedes	Type of Change i.e. Review / Legislation	Date	Details of Change and approving group or Executive Lead (if done outside of the formal revision process)
2.01	Review	March 2014	Minor changes
2.02	Review	July 2014	Updated following advice and guidance from Nursing Staff and Managers. New colour scheme for integrated hospital team uniforms
2.03	Review	March 2016	Full Review
2.04	Review	May 2016	Mental Health (incl. OPMH) and Learning Disabilities – Uniforms for clinical staff
2.05	Review	July 2017	Review of policy to recognize service changes within the Trust Updated following consultation at TCNC and EMT
2.06	Review	3 April 2020	Document refreshed to include additional details in the laundering and management of work wear during a pandemic in accordance with newly refreshed guidance from the RCN and Public Health England.

2.07		November 2020	<i>All in-patient staff who wear a uniform or scrubs must change into their uniform on arrival at work before going on duty and change out of uniform their uniform before going off duty. There may be exceptional circumstances when this is not possible and staff may be permitted to wear their uniform off site as long as it is fully covered by a coat or outwear. It is strongly recommended that this should not occur during a period of an outbreak or pandemic when the risk of transmission of infection from the workplace to home or vice versa is high.</i>
2.08		17 August 2021	<i>Appendix 1 updated to incorporate ACP and GP uniforms and product codes</i>
2.09		8 October 2021	<i>Policy and IEA amended to include gender identity and gender expression. Approved at QPaS 14 December 2021</i>
2.10	Review	August 2022	<i>Updates to reflect all clinical staff on in-patient units/wards are required to wear a uniform. Updated the CQC Regulation requirement Added the NHSE Good practice guidance re Uniform and workwear Up dated link to tax relief Revised the lay out, removal of section 6.12 and 6.13 (as per version 2.09) Approved at QPaS – 18/08/22.</i>

## Appendix 8: Equality Impact Assessment (EIA)

**For strategies, policies, procedures, processes, guidelines, protocols, tenders, services**

1. Document or Process or Service Name: **Uniform, Dress Code and ID Badge Policy**
2. EIA Reviewer (name, job title, base and contact details):, **Sadie Milner**
3. Is it a Policy, Strategy, Procedure, Process, Tender, Service or Other? **POLICY**

<b>Main Aims of the Document, Process or Service</b>		
<p>It has been introduced to protect the safety of both patients and staff by ensuring that staff uniform and dress code is compliant with infection prevention and control requirements and Health and Safety legislation. The policy also ensures that staff present a clean, smart and professional image at all time.</p>		
<p>indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the proforma</p>		
<p>Equality Target Group</p> <ol style="list-style-type: none"> <li>1. Age</li> <li>2. Disability</li> <li>3. Sex</li> <li>4. Marriage/Civil Partnership</li> <li>5. Pregnancy/Maternity</li> <li>6. Race</li> <li>7. Religion/Belief</li> <li>8. Sexual Orientation</li> <li>9. Gender reassignment</li> <li>10. Gender identity</li> <li>11. Gender expression</li> </ol>	<p>Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?</p> <p>Equality Impact Score                      Low = Little or No evidence or concern (Green)                      Medium = some evidence or concern (Amber) High = significant evidence or concern (Red)</p>	<p>How have you arrived at the equality impact score?</p> <ol style="list-style-type: none"> <li>a) who have you consulted with</li> <li>b) what have they said</li> <li>c) what information or data have you used</li> <li>d) where are the gaps in your analysis</li> <li>e) how will your document/process or service promote equality and diversity good practice</li> </ol>

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
<b>Age</b>	Including specific ages and age groups: Older people Young people Children Early years	Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy.
<b>Disability</b>	Where the impairment has a substantial and long-term adverse effect on the ability of the person to carry out their day-to-day activities:  Sensory Physical Learning Mental health (including cancer, HIV, multiple sclerosis)	Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy
<b>Sex</b>	Men/Male Women/Female	Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy
<b>Marriage/Civil Partnership</b>		Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
<b>Pregnancy/ Maternity</b>		Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy
<b>Race</b>	Colour Nationality Ethnic/national origins	Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy
<b>Religion or Belief</b>	All religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	Headwear associated with religion or belief has been addressed specifically in the policy, as such there is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy
<b>Sexual orientation</b>		Low	There is no evidence that this protected characteristic will be negatively impacted through the implementation of this policy.
<b>Gender Reassignment</b>	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	Consideration needs to be given to supporting staff to change in and out of uniform that are gender-neutral or under going gender re-assignment
<b>Gender Identity</b>	Someone's personal and intimate sense of their own gender.	Low	Consideration needs to be given to supporting staff's gender identify
<b>Gender Expression</b>	How a person chooses to express their gender identity.	Low	Consideration needs to be given to supporting staff's gender expression

### Summary

Please describe the main points/actions arising from your assessment that supports your decision. Other than the issues regarding gender-specific changing areas the policy would not discriminate against any individual with a protected characteristic.	
EIA Reviewer: Sadie Milner	
Date completed: 10 August 2022	Signature: S.Milner