

<b>POLICY NAME:</b>	<b>UNIFORM/DRESS CODE POLICY</b>
<b>POLICY REFERENCE:</b>	<b>TW13-005</b>
<b>VERSION NUMBER :</b>	<b>9.2</b>
<b>APPROVING COMMITTEE</b>	<b>CORPORATE QEG</b>
<b>DATE THIS VERSION APPROVED:</b>	<b>June 2020</b>
<b>RATIFYING COMMITTEE:</b>	<b>PARG (Policy Approval and Ratification Group)</b>
<b>DATE THIS VERSION RATIFIED:</b>	<b>JULY 2020</b>
<b>DATE THIS VERSION AMENDED</b>	Section 6.5 & 6.6 added April 2021. Section 2.13 & Appendix 1 section 11 & Appendix 4 Section 11 amended May 2022.
<b>AUTHOR(S)</b>	<b>PROFESSIONAL PRACTICE</b>
<b>DIVISION/DIRECTORATE:</b>	<b>CORPORATE</b>
<b>LINKS TO OTHER STRATEGIES, POLICIES, SOP'S, ETC.</b>	<b>SMOKE FREE POLICY, INFECTION CONTROL POLICY, RISK MANAGEMENT STRATEGY &amp; ASSOCIATED DOCUMENTS, INCLUSION &amp; DIVERSITY STRATEGY 2016-2020</b>
<b>CONSULTED WITH</b>	<b>Infection Prevention and Control Assistant Director</b>

<b>Date(s) previous version(s) approved:</b> (if known)	<b>Version:8</b>	<b>Date :2017</b>
<b>DATE OF NEXT REVIEW:</b>	<b>JULY 2023</b>	
<b>Manager responsible for review:</b>	<b>Deputy Chief Nurse</b>	

	<b>CONTENTS:</b>	<b>Page No.</b>
1	Policy Statement	2
2	Key Principles	2
3	Responsibilities	3
4	Wearing of uniform outside Trust premises	4
5	Contaminated uniforms	4
6	Bare Below the Elbow	4
7	Smoking	5
8	Queries	5
9	Human rights Act	5
10	Inclusion and Diversity Statement	5
11	Monitoring Review	5
12	Accessibility Statement	5
<b>Appendices:</b>		
1	Uniform requirements for all staff involved in direct clinical care	6
2	Dress requirements for all staff involved in direct clinical care / located in clinical environment	13
3	Dress requirements for all staff not involved in direct clinical care	15
4	Paediatric staff - Uniform requirements for all staff involved in direct clinical care	18
5	Equality Impact Assessment Form	19
6	Policy Review and Monitoring Arrangement	20

**AT ALL TIMES STAFF MUST TREAT EVERY INDIVIDUAL WITH RESPECT  
AND UPHOLD THEIR RIGHT TO PRIVACY AND DIGNITY**

**1 POLICY STATEMENT**

- 1.1 This Uniform/Dress Code Policy is intended to ensure that the staff of Wrightington, Wigan and Leigh NHS Teaching Hospitals Foundation Trust (WWL) present a professional and smart appearance to both patients and public when at work. All staff employed by the Trust are ambassadors for the organisation and should recognise that appearance acts as a visual measure of how the public views the Trust. This has an impact on the reputation and also the public's confidence of the organisation.
- 1.2 In adopting this Policy the Trust wishes to demonstrate its commitment to increasing public confidence and facilitating good hygiene practice.
- 1.3 The Policy adheres to the principles of risk management and infection prevention and control and encompasses both cultural and religious diversity. It also reflects the feedback received from patients and their carers, by either formal or informal routes.
- 1.4 The code is based on the Health and Safety at Work Act, 1974, the Human Rights Act, 1998, Workplace (Health, Safety and Welfare) Regulations 1992, Infection Prevention and Control policy and SOPs, NHS England's Standard infection control precautions: national hand hygiene and personal protective equipment policy and Patient Expectations as identified in feedback from patient surveys and complaints.
- 1.5 The principles within this policy apply to all staff that are employed or contracted by the Trust. Uniforms issued by Linen Services must only be worn whilst undertaking duties under the WWL NHS FT contract of employment.
- 1.6 Employees of the Trust who breach this code may be liable to disciplinary action.
- 1.7 Individual staff groups or services may develop supplementary guidance on the specific policy for staff but this guidance must adhere to the core principles included in this Policy.

**2 KEY PRINCIPLES**

- 2.1 This code applies to all staff employed or contracted by WWL. The following definitions are applied:-
  - 2.1.1 All staff – Anyone employed or contracted by the Trust. This includes bank and agency staff, students, volunteers and staff on honorary contracts.
  - 2.1.2 Staff involved in the delivery of direct clinical care and/or in the clinical environment – those staff engaged in personal, physical contact with patients.
  - 2.1.3 Designated uniform – The formal issue of uniforms by the Trust to be worn by the individual in the delivery of their duties.
- 2.2 Staff members who are issued with designated uniform and who are involved in delivering direct patient care must adhere to the relevant requirements set out in Appendix 1 of this policy.
- 2.3 Staff who are not issued with designated uniform but are involved in direct patient care must adhere to the requirements set out in Appendix 2 of this Policy.

- 2.4 Staff members who are issued with designated uniforms in a paediatric environment who are involved in delivering direct patient care must adhere to the relevant requirements set out in Appendix 4 of this policy
- 2.7 It is the responsibility of staff to abide by the Policy and line managers to ensure that the Uniform Policy is adhered to.
- 2.8 Staff working on agency or for another external organisation (e.g. NHSP) must not wear the WWL uniform at those times.
- 2.9 The replacement of uniforms will be conducted on a wear and tear basis only, and any such requests for replacement uniforms will be made at the discretion of Linen Services and Sewing Room staff.
- 2.10 The number of items of uniform issued to an individual will reflect the contracted hours for that individual. This decision will be at the discretion of Linen Services.
- 2.11 It is the sole responsibility of Linen Services to name designated suppliers of work uniforms. This will reflect cost and suitability of Trust uniforms. Any request for new uniforms must be done via Linen Services
- 2.12 The designated uniform provided by the Trust remains the property of the Trust and, as such, should be returned upon ceasing employment, change of role or change of uniform. It is the responsibility of staff to return their uniform. It is the responsibility of the line manager to assure this has been undertaken on termination of their contract. This action will prevent the misuse of uniform by unauthorised personnel.
- 2.13 Scrubs may be worn in clinical areas; these are tailored scrubs only provided by the linen service. As the scrubs need replacing a newer formal scrub will be provided. The cost of these scrubs will be bought by the division, unless specifically agreed otherwise with Linen Services

### **3 ROLES AND RESPONSIBILITIES**

#### **3.1 Trust Board**

The Board is responsible for ensuring that this Policy and its contents are disseminated throughout the organisation.

#### **3.2 Director of Medicine/surgery**

It is the responsibility for the Directors to ensure that all Professional Leads are aware of the uniform/Dress code Policy.

#### **3.3 Chief Nurse/Deputy Chief Nurse or equivalent**

It is the responsibility of the CN/DCN/equivalent to ensure that teams are aware of the Uniform/Dress Code Policy.

#### **3.4 Heads of Nursing or equivalent**

Heads of Nursing or equivalent are responsible for ensuring the dissemination of this Policy to their teams and enforcing adherence to it.

#### **3.5 Ward/Department Managers/community team co-ordinators**

3.5.1 Managers are responsible for ensuring that this Policy is adhered to at all times.

3.5.2 It is the responsibility of the managers to ensure that designated uniforms for new or existing staff are requested in both a timely and a cost-effective manner.

### **3.6 Linen Services**

- 3.6.1 It is the responsibility of Linen Services to provide staff with the appropriate uniforms.
- 3.6.2 Tailored Scrubs are permitted to be worn in the clinical areas.
- 3.6.3 The Trust recognises the religious and cultural requirements of members of staff in relation to the uniform they wear. These requirements will be handled with sensitivity and, wherever possible, an appropriate uniform will be provided, taking into account both infection control and risk management considerations. Further advice and guidance on individual cases can be obtained from Human Resources.
- 3.6.4 The Trust recognises that there are circumstances in relation to disability and pregnancy where reasonable adjustments to uniform may need to be considered. These requirements will be handled with sensitivity and, wherever possible, an appropriate uniform will be provided, taking into account both infection control and risk management considerations. Further advice on guidance on individual cases can be obtained from Human Resources.

### **3.7 Employee**

- 3.7.1 It is the responsibility of all staff to maintain a professional appearance at all times.
- 3.7.2 All staff are responsible for ensuring that they are familiar with, and adhere to, this policy.
- 3.7.3 All staff must wear a valid Trust ID Badge in a clearly visible position.
- 3.7.4 If the staff member undertakes clinical duties then ID badges must be secured using a clip only, not a lanyard. Staff members who do not undertake clinical duties may use either a lanyard or a clip to secure their ID badges. Trust ID badges must be removed when travelling to and from work.
- 3.7.5 On ceasing employment all ID badges must be returned to the Security Office and uniform must be returned to Linen Services.
- 3.7.6 All staff issued with a designated uniform must abide by the principles in this Policy.

## **4 WEARING OF UNIFORM OUTSIDE OF TRUST PREMISES**

- 4.1 The wearing of a designated uniform outside Trust premises is not permitted, unless on Trust business, or working within the community setting. Trusts uniforms are also not permitted when travelling to and from work to maintain a professional appearance, ID badges must not be visible.
- 4.2 For the purposes of this Policy, “appropriately covered” means that tunics and dresses must not be visible when outside of Trust premises.
- 4.3 Requests to wear uniform outside of the Trust premises for formal occasions must be made to the relevant Director.

## **5 CONTAMINATED UNIFORMS**

- 5.1 Under no circumstances should a visibly soiled uniform be worn inside or outside Trust premises. If a clinical uniform is accidentally soiled e.g. with blood or body fluids, it will be changed immediately. It must not be worn outside of the immediate work area for reasons of safety, infection control and public image. Scrubs can be obtained from the Linen Room.
- 5.2 In emergency circumstances e.g. out of hours; scrubs can be obtained from Theatres.

## **6 BARE BELOW THE ELBOW**

- 6.1 All staff must comply with “bare below the elbows” guidance when entering or working within clinical areas.
- 6.2 In a Health care setting the clinical area begins at the entrance to the ward or department. In a patient’s home staff should be BBE before commencing the task/touching the patient’s immediate surroundings.

- 6.3 All Health care staff need to be BBE before they perform hand hygiene. Hand hygiene is considered an important practice in reducing the transmission of infectious agents that cause health care associated infections and is part of standard infection control precautions. Standard precautions are to be used by all staff in all care settings at all times for all patients
- 6.4 “Bare below the elbows” is defined by either short sleeves or long sleeves (e.g. shirt sleeves) rolled up, no wrist watch or jewellery (other than plain band ring).
- 6.5 Staff can wear long sleeves underneath their uniforms for health or religious reasons, staff must be able to be roll or pull their sleeves back and keep securely in place during hand washing and direct patient care complying with “bare below the elbow” when delivering direct patient care.
- 6.6 Disposable over sleeves elasticated at the elbow and wrist may be used by staff with health or religious reasons, but these must be placed and discarded in exactly the same way as disposable gloves, hand washing steps must still be maintained.

## **7 SMOKING**

In accordance with the Trust’s Smoke Free Policy, paragraph 4.4 ‘If employees are smoking off-duty or off site, they must also ensure that uniform, protective clothing or Trust identity badges are not visible. In addition, in the interests of hygiene and personal comfort of staff, patients and visitors, etc, employees are asked to take whatever steps are necessary to ensure that tobacco odour is NOT present on their person or clothing/uniform, so maintaining a professional image at all times’.

## **8 QUERIES**

- 8.1 Any queries regarding this policy should be addressed to the Departmental Manager.
- 8.2 Any changes to uniform must be approved by the Chief Nurse.

## **9 HUMAN RIGHTS ACT**

Implications of the Human Rights Act have been taken into account in the formulation of this document and they have, where appropriate, been fully reflected in its wording.

## **10 INCLUSION AND DIVERSITY**

This policy has been assessed against the Equality Impact Assessment Form from the Trust’s Equality Impact Assessment Guidance, and, as far as we are aware, there is no impact on any protected characteristics.

## **11 MONITORING AND REVIEW**

- 11.1 Line managers will be responsible for the ongoing monitoring of staff in relation to compliance with this policy.
- 11.2 This code will be reviewed in response to emerging national guidance or within two years of the approval date.

## **12 ACCESSIBILITY STATEMENT**

This document can be made available in a range of alternative formats e.g. large print, Braille and audio cd.

For more details, please contact the HR Department on 01942 77(3766) or email [equalityanddiversity@wwl.nhs.uk](mailto:equalityanddiversity@wwl.nhs.uk)



**UNIFORM REQUIREMENTS FOR ALL STAFF INVOLVED IN DIRECT CLINICAL CARE/LOCATED IN CLINICAL ENVIRONMENT WHO ARE PATIENT FACING**

**UNIFORM REQUIREMENTS FOR ALL STAFF WHO WEAR TRUST UNIFORMS AND ENTRE CLINICAL ENVIRONMENTS**

**(Staff nurses, TNA's, NA's, support workers, AHP's, Ward Clark, Pharmacist, Physio/OT, Domestic, student nurses, Porters, Discharge team, Estates, catering staff, domestics, linen service, reception staff within a community setting, ward Clarks these are examples, this list is not an exhausted list)**

REQUIREMENTS	RATIONALE
<p><b>1. Finger nails:</b></p> <p>Nails must be short and clean, they should not exceed beyond the end of the fingertip. Nail varnish is not permitted whilst on duty. The wearing of false/acrylic nails is strictly prohibited.</p>	<p>Infection control/harm to patients from long nails.            Infection control, 'Evidence of Colonisation Of MRSA In False Nails' DoH, 2007 Patients Survey.</p>
<p><b>2. Hair:</b></p> <p>Must be clean, neat, off the face and off the shoulder, even as a ponytail. Only plain hair accessories should be worn.</p> <p>Staff should be clean shaven, or beards should be neat and tidy.</p> <p>Beards should be fully covered within specialist areas (such as Theatre) that require it.</p>	<p>Potential for wound contamination from loose hair. Providing hair is clean and tidy the risk of dispersal is minimal.            Health &amp; Safety requirements.</p>
<p><b>3. Head coverings:</b></p> <p>Turban and skull cap may be worn for religious reasons.</p> <p>All head garments must be clean, washed and changed daily.</p> <p>All head garments must be secured with discreet, unadorned pins.</p> <p>Any head covering worn should (where able to) be tucked into uniform and should be neat and tidy</p>	<p>To minimise infection risk and ensure health and safety standards are met.</p>
<p><b>4. Face coverings:</b></p> <p>Face coverings/veils should not be worn when delivering patient care.</p>	<p>To aid communication with patients and minimise infection risk. To also ensure the health and safety of the employee.</p>



<p><b>5. Piercing:</b></p> <p>Earrings: one pair of small plain metal studs only may be worn (in ears only) All other visible body piercing must be covered with a blue plaster until the wound has healed. Once the wound has healed, all associated piercing jewellery must be removed. No other visible piercings are allowed.</p> <p>Ear Gauges: flesh coloured, or clear ear gauges must be worn in the clinical environment</p>	<p>New wounds shed high levels of bacteria.</p> <p>Professional appearance is important for patient choice.</p> <p>Food Hygiene Regulations.</p>
<p><b>6. Jewellery:</b></p> <p>Only one plain metal band ring may be worn with uniform. (No jewels in ring allowed)</p> <p>No wristwatches are to be worn. A fob watch is permitted</p> <p>Medic-alert jewellery such as a necklace may be worn but must be approved by Occupational Health; this must be cleanable, plain and discreet.</p> <p>Necklaces and bracelets are not to be worn for health and safety purposes.</p> <p>Fitness tracker devices must not be worn on the wrist.</p>	<p>Jewellery may be hazardous for the following reasons:</p> <ul style="list-style-type: none"> <li>• Jewellery, even plain gold bands (wedding rings) have been shown to colonise with micro-organisms. (Hoffman et al 1985)</li> <li>• Rings with stones are hazardous and may cause trauma to patients.</li> <li>• Stones in jewellery may become dislodged.</li> <li>• Jewellery that is hanging e.g. necklaces and bracelets, could be dangerous to staff and patients in potentially violent situations.</li> <li>• Appropriate hand washing techniques are prevented by the wearing of wristwatches or bracelets.</li> </ul>
<p><b>7. Bare Below the Elbow:</b></p> <p>All uniforms provided to employees involved in direct clinical care will be short sleeved.</p> <p>No additional garments are allowed</p>	<p>Bare forearms and hands minimise the risk of cross infection and also encourages adherence to good infection control procedures.</p>
<p><b>8. Footwear:</b></p> <p>Shoes must be black with a rubber sole with a low/flat heel; give adequate support and be strong enough to prevent damage to feet. They should be a lace up or slip-on full shoe.</p> <p>Trainers are allowed but these must be all black, no logo visible and wipeable.</p> <p>Canvas shoes are not permitted</p> <p>Alternative types of foot wear may be required by certain work areas/professions (community only, in extreme weather circumstances, but must be black and wipeable) This will be agreed with the staff members manager.</p> <p>Approved theatre clogs may be worn in specialist areas</p>	<p>Shoes in a poor state of repair are a safety risk. Staff working in a clinical area must take noise issues into account regarding their footwear.</p> <p>Professional image, staff and patient safety.</p> <p>Health and safety statutory requirement.</p>

<p>(Endoscopy, theatre, interventional radiology) with permission of the line manager. No clogs to be worn outside these specialist areas.</p> <p>Occupational Health advice will be required for the wearing of other footwear.</p>	
<p><b>9. Belts:</b></p> <p><b>Do not</b> form part of the Trust uniform and, therefore, <b>must not</b> be worn.</p>	<p>Reduces risk of cross-infection. To prevent accidental harm to patients or self. To promote a professional image.</p>
<p><b>10. Tights/Stockings/Socks:</b></p> <p>Should be plain, navy or black and of a colour in keeping with the overall uniform.</p> <p>During excessively hot weather only, tights may be omitted (May, June / July &amp; August <b>only</b>)</p>	<p>To promote a professional appearance. Health &amp; Safety risks.</p>
<p><b>11. Designated uniform:</b></p> <p>Staff are permitted to wear scrubs, but these must be tailored or formal scrubs only from the linen service. Uniforms must only be exchanged if ware and tare is evident.</p> <p>Designated dresses must be below knee length, any alteration only to be made by the linen service</p> <p>Hoodies that have trust logo and staffs name embroider are not permitted.</p> <p>All staff are provided with staff uniforms. It is the responsibility of the user that all uniform is ideally to be washed at 60° or above.</p> <p>Additionally, staff to either tumble dry or hot iron garments to eliminate any remaining infection risk. In the case of heavily soiled/highly infectious garments – these will be sent to Synergy in accordance with the bagging procedure.</p>	<p>Reduces the risk of cross infection.</p> <p>Breaching uniform policy and NHS Copyright</p>
<p><b>12. ID Badge</b></p> <p>ID badges must be worn at all times using a clip style attachment, <b>not</b> a lanyard.</p>	<p>Reduces the risk of cross infection.</p>
<p><b>13. Clothes</b></p> <p>Staff who do not have a designated uniform must wear short sleeved tops/shirt when providing direct clinical care. Arms may be covered when not providing direct clinical care or washing hands, for religious purposes only</p>	<p>Professional appearance.</p> <p>Enables the appropriate hand-washing techniques to be</p>

<p>In some areas defined safety clothing should be worn to comply with legislation.</p> <p>No clothing (such as T shirts or other undergarments) should be visible underneath designated uniform.</p>	<p>undertaken and reduces the risk of cross infection.</p>
<p><b>14. Additional garments</b></p> <p><b>Fleece/cardigan</b> (if permissible to wear in the community.) <b>must not</b> be worn when delivering direct patient care. When worn, they must be of a plain dark colour, navy blue or grey, and of smart appearance. Ward Clarks are permitted to wear additional garments but must still comply with bare below the elbow</p> <p>Any such garments must be obtained from a WWL approved supplier (which should be done via the Linen Services department).</p> <p>If an employee is required to wear an article of faith (other than headwear or face coverings referred to above) such as a Kirpan, this should be risk assessed and documented on an individual basis as part of local induction processes.</p>	<p>Reduces the risk of cross infection.</p> <p>To comply with Trust Uniform standards.</p> <p>To comply with Inclusion &amp; Diversity standards.</p>

## Appendix 2

### DRESS REQUIREMENTS FOR ALL STAFF INVOLVED IN DIRECT CLINICAL CARE/LOCATED IN CLINICAL ENVIRONMENT THAT DO NOT HAVE AN ALLOCATED UNIFORM

(Health visitors, Palliative team, Consultants, Doctors, Dietician, Learning Disability team)

REQUIREMENTS	RATIONALE
<p><b>1. Finger nails:</b></p> <p>Nails must be short and clean, they should not exceed beyond the end of the fingertip. Nail varnish is not permitted whilst on duty. The wearing of false/acrylic nails is strictly prohibited.</p>	<p>Infection control/harm to patients from long nails.</p> <p>Infection control, 'Evidence of Colonisation Of MRSA In False Nails' DoH, 2007 Patients Survey.</p>
<p><b>2. Hair:</b></p> <p>Must be clean, neat, off the face and off the collar, even as a ponytail. Hair accessories should be discreet.</p> <p>Staff should be clean shaven, or beards should be neat and tidy.</p>	<p>Potential for wound contamination from loose hair. Providing hair is clean and tidy the risk of dispersal is minimal.</p> <p>Health &amp; Safety requirements.</p>
<p><b>3. Head coverings:</b></p> <p>Turban and skull cap may be worn for religious reasons.</p> <p>All head garments must be clean, washed and changed daily.</p> <p>All head garments must be secured using discreet pins.</p>	<p>To minimise infection risk and ensure health and safety standards are met.</p>
<p><b>4. Face coverings:</b></p> <p>Face coverings/veils should not be worn when delivering patient care.</p>	<p>To aid communication with patients and minimise infection risk. To also ensure the health and safety of the employee.</p>
<p><b>5. Piercing:</b></p> <p>Earrings: one pair of small plain metal studs only may be worn (in ears only) All other visible body piercing must be covered with a blue plaster until the wound has healed. Once the wound has healed, all associated piercing jewellery must be removed. No other visible piercings are allowed.</p> <p>Ear Gauges: flesh coloured, or clear ear gauges must be worn in the clinical environment</p>	<p>New wounds shed high levels of bacteria.</p> <p>Professional appearance is important for patient choice.</p> <p>Food Hygiene Regulations.</p>

<p><b>6. Jewellery:</b></p> <p>Only one plain metal band ring may be worn.</p> <p>No wristwatches are to be worn. A fob watch is permitted.</p> <p>Medic-alert jewellery such as a necklace may be worn but must be approved by Occupational Health; this must be cleanable, plain and discreet.</p> <p>Bracelets and necklaces are not to be worn for health and safety purposes.</p> <p>Fitness tracker devices must not be worn on the wrist</p>	<p>Jewellery may be hazardous for the following reasons:</p> <ul style="list-style-type: none"> <li>• Jewellery, even plain gold bands (wedding rings) have been shown to colonise with micro-organisms (Hoffman et al 1985).</li> <li>• Rings with stones are hazardous and may cause trauma to patients.</li> <li>• Stones in jewellery may become dislodged.</li> <li>• Jewellery that is hanging e.g. necklaces and bracelets, could be dangerous to staff and patients in potentially violent situations.</li> <li>• Appropriate hand washing techniques are prevented by the wearing of wristwatches or bracelets.</li> </ul>
<p><b>7. Bare Below the Elbow:</b></p> <p>All sleeves must either end above the level of the elbow or be rolled up to above the elbow.</p>	<p>Bare forearms and hands minimise the risk of cross infection and also encourages adherence to good infection control procedures.</p>
<p><b>8. Footwear:</b></p> <p>Shoes must be sensible, with a low/flat heel; give adequate support and be strong enough to prevent damage to feet. They should be a full shoe and impermeable to liquids</p> <p>Occupational Health advice will be required for the wearing of other footwear.</p>	<p>Shoes in a poor state of repair are a safety risk. Staff working in a clinical area must take noise issues into account regarding their footwear.</p> <p>Professional image, staff and patient safety.</p> <p>Health and safety statutory requirement.</p>
<p><b>10. Tights/Stockings/Socks:</b></p> <p>Should be plain and of a colour in keeping with the overall appearance.</p>	<p>To promote a professional appearance.</p> <p>Health &amp; Safety risks.</p>
<p><b>12. Clothes:</b></p> <p>If own clothes are worn these should be smart and in good repair and portray a professional image. Denim clothing is not permitted.</p> <p>An overall professional appearance should be maintained. Slogans which could be considered offensive must not be worn.</p>	<p>Professional appearance.</p> <p>Enables the appropriate hand-washing techniques to be undertaken and reduces the risk of cross infection.</p>

<p>Short sleeved tops/shirts to be worn when providing direct clinical care.</p> <p>Neck ties (other than bow ties) must be secure inside a waistcoat or tie pin in any activity which involves patient contact.</p>	
<p><b>13. ID Badge</b></p> <p>Trust ID Badge must be worn at all times in a clearly visible position, using a clip style attachment, <b>not</b> a lanyard.</p>	<p>To enable easy identification</p>
<p><b>14. Additional garments</b></p> <p><b>Fleece/cardigan</b> must <b>not</b> be worn when delivering direct patient care.</p> <p>If an employee is required to wear an article of faith (other than headwear or face coverings referred to above) such as a Kirpan, this should be risk assessed and documented on an individual basis as part of local induction processes.</p>	<p>Reduces the risk of cross infection</p> <p>To comply with Inclusion &amp; Diversity standards.</p>

### Appendix 3

#### DRESS REQUIREMENTS FOR ALL STAFF NOT INVOLVED IN DIRECT CLINICAL CARE AND NOT IN A CLINICAL ENVIRONMENT

Staff MUST follow appendix 2 if they are required to enter wards or departments as part of their duties.

(office staff, H/R)

REQUIREMENTS	RATIONALE
<p><b>1. Hair:</b></p> <p>Must be clean and neat, fastenings should be discreet.</p>	Corporate appearance.
<p><b>2. Fingernails:</b></p> <p>Nail varnish, acrylic nails and false nails must be discreet and enable the wearer to carry out their duties effectively.</p> <p>All fingernails should be no longer than fingertip length.</p>	<p>Corporate appearance.</p> <p>Excessively long nails can interfere with keyboard and other duties.</p>
<p><b>3. Jewellery:</b></p> <p>Jewellery should be discreet and in keeping with the overall appearance. Excessively long or hanging jewellery should be avoided.</p>	Corporate appearance.
<p><b>4. Clothes:</b></p> <p>All clothes should be smart and in good repair.</p> <p>Denim clothing is not permitted</p> <p>An overall professional appearance should be maintained.</p> <p>Slogans which could be considered offensive must not be worn.</p> <p>In some areas defined safety clothing should be worn to comply with legislation (detailed in local guidance).</p>	Corporate appearance.
<p><b>5. Piercing</b></p> <p>Should be discreet and within keeping with the overall appearance.</p>	Corporate appearance.
<p><b>6. ID Badge</b></p> <p>Trust ID Badge must be worn at all times in a clearly visible position using either a clip or lanyard style attachment.</p> <p>Volunteers should use a yellow lanyard.</p>	To enable identification.

<p><b>7. Footwear:</b></p> <p>Must be clean and in a good state of repair. Excessively noisy shoes should not be worn.</p> <p>In some area's safety boots/footwear must be worn to comply with legislation</p>	<p>Shoes in a poor state of repair are a safety risk. Any staff working within the main hospital site and patient areas must take noise issues into account regarding their footwear.</p>
--	---



**PAEDIATRIC STAFF UNIFORM REQUIREMENTS - ALL STAFF INVOLVED IN DIRECT CLINICAL CARE/LOCATED IN CLINICAL ENVIRONMENT WHO ARE PATIENT FACING**

**UNIFORM REQUIREMENTS FOR ALL STAFF WHO WEAR TRUST UNIFORMS AND ENTRE PAEDIATRIC CLINICAL ENVIRONMENT**

**(Staff nurses, TNA's, NA's, support workers, AHP's, Ward Clark, Pharmacist, Physio/OT, Domestic, student nurses, Porters, Discharge team, Estates, these are examples, this list is not an exhausted list)**

REQUIREMENTS	RATIONALE
<p><b>1. Finger nails:</b></p> <p>Nails must be short and clean, they should not exceed beyond the end of the fingertip. Nail varnish is not permitted whilst on duty. The wearing of false/acrylic nails is strictly prohibited.</p>	<p>Infection control/harm to patients from long nails.            Infection control, 'Evidence of Colonisation Of MRSA In False Nails' DoH, 2007 Patients Survey.</p>
<p><b>2. Hair:</b></p> <p>Must be clean, neat, off the face and off the shoulder, even as a ponytail. Only plain hair accessories should be worn.</p> <p>Staff should be clean shaven, or beards should be neat and tidy.</p> <p>Beards should be fully covered within specialist areas (such as Theatre) that require it.</p>	<p>Potential for wound contamination from loose hair. Providing hair is clean and tidy the risk of dispersal is minimal.            Health &amp; Safety requirements.</p>
<p><b>3. Head coverings:</b></p> <p>Turban and skull cap may be worn for religious reasons.</p> <p>All head garments must be clean, washed and changed daily.</p> <p>All head garments must be secured with discreet, unadorned pins.</p> <p>Any head covering worn should (where able to) be tucked into uniform and should be neat and tidy</p> <p>At you manager's discretion on special days / occasions throughout the year for example Christmas, Easter, and comic relief and world prematurity day – staff may wear character head garments – head bands/bobbles.</p>	<p>To minimise infection risk and ensure health and safety standards are met.</p> <p>To promote a child friendly environment</p>

<p><b>4. Face coverings:</b></p> <p>Face coverings/veils should not be worn when delivering patient care.</p>	<p>To aid communication with patients and minimise infection risk. To also ensure the health and safety of the employee.</p>
<p><b>5. Piercing:</b></p> <p>Earrings: one pair of small plain metal studs only may be worn (in ears only) All other visible body piercing must be covered with a blue plaster until the wound has healed. Once the wound has healed, all associated piercing jewellery must be removed. No other visible piercings are allowed.</p> <p>Ear Gauges: flesh coloured, or clear ear gauges must be worn in the clinical environment</p> <p>On special days / occasions throughout the year for example Christmas, Easter, comic relief world prematurity day – staff may wear character earrings. At your managers discretion</p>	<p>New wounds shed high levels of bacteria. Professional appearance is important for patient choice. Food Hygiene Regulations.</p>
<p><b>6. Jewellery:</b></p> <p>Only one plain metal band ring may be worn with uniform. (No jewels in ring allowed)</p> <p>No wristwatches are to be worn. A fob watch is permitted</p> <p>Medic-alert jewellery such as a necklace may be worn but must be approved by Occupational Health; this must be cleanable, plain and discreet.</p> <p>Necklaces and bracelets are not to be worn for health and safety purposes.</p> <p>Fitness tracker devices must not be worn on the wrist.</p>	<p>Jewellery may be hazardous for the following reasons:</p> <ul style="list-style-type: none"> <li>• Jewellery, even plain gold bands (wedding rings) have been shown to colonise with micro-organisms. (Hoffman et al 1985)</li> <li>• Rings with stones are hazardous and may cause trauma to patients.</li> <li>• Stones in jewellery may become dislodged.</li> <li>• Jewellery that is hanging e.g. necklaces and bracelets, could be dangerous to staff and patients in potentially violent situations.</li> <li>• Appropriate hand washing techniques are prevented by the wearing of wristwatches or bracelets.</li> </ul>
<p><b>7. Bare Below the Elbow:</b></p> <p>All uniforms provided to employees involved in direct clinical care will be short sleeved.</p>	<p>Bare forearms and hands minimise the risk of cross infection and also encourages adherence to good infection control procedures.</p>
<p><b>8. Footwear:</b></p> <p>Shoes must be sensible, black with a rubber sole with a low/flat heel; give adequate support and be strong enough to prevent damage to feet. They should be a lace up or slip-on full shoe.</p>	<p>Shoes in a poor state of repair are a safety risk. Staff working in a clinical area must take noise issues into account regarding their footwear.</p>

<p>Trainers are allowed but these must be all black, no logo visible and wipeable</p> <p>Canvas shoes are not permitted</p> <p>Alternative types of foot wear may be required by certain work areas/professions (community only, in extreme weather circumstances, but must be black and wipeable) This will be agreed with the staff members manager.</p> <p>Approved theatre clogs may be worn in specialist areas (Endoscopy, theatre, interventional radiology) with permission of the line manager. No clogs to be worn outside these specialist areas.</p> <p>Occupational Health advice will be required for the wearing of other footwear. If trainers are advised by Occupational Health these should be plain black without motifs.</p>	<p>Professional image, staff and patient safety.</p> <p>Health and safety statutory requirement.</p>
<p><b>9. Belts:</b></p> <p><b>Do not</b> form part of the Trust uniform and, therefore, <b>must not</b> be worn.</p>	<p>Reduces risk of cross-infection. To prevent accidental harm to patients or self. To promote a professional image.</p>
<p><b>10. Tights/Stockings/Socks:</b></p> <p>Paediatric Staff may choose to wear character socks, or plain navy or black in keeping with the overall uniform.</p> <p>Should be plain, navy or black or and of a colour in keeping with the overall uniform.</p> <p>Character tights are permitted for special events only at your manager's discretion.</p> <p>During excessively hot weather only, tights may be omitted (May, June / July &amp; August only)</p>	<p>To promote a professional appearance and maintain a child friendly environment.</p> <p>Health &amp; Safety risks.</p>
<p><b>11. Designated uniform:</b></p> <p>Staff are permitted to wear scrubs, but these must be tailored <b>or formal scrubs</b> only from the linen service. Uniforms must only be exchanged if ware and tare is evident.</p> <p>Designated dresses must be below knee length, any alteration only to be made by the linin service</p> <p>Hoodies that have trust logo and staffs name embroider are not permitted.</p> <p>All staff are provided with staff uniforms. It is the responsibility of the user that all uniform is ideally to be washed at 60° or above.</p> <p>Additionally, staff to either tumble dry or hot iron garments</p>	<p>Reduces the risk of cross infection.</p> <p>Breaching uniform policy and NHS Copyright</p>

<p>to eliminate any remaining infection risk. In the case of heavily soiled/highly infectious garments – these will be sent to Synergy in accordance with the bagging procedure.</p>	
<p><b>12. ID Badge</b></p> <p>ID badges must be worn at all times using a clip style attachment, <b>not</b> a lanyard.</p> <p>Character clips may be used with paediatrics</p>	<p>Reduces the risk of cross infection.</p> <p>To promote a child friendly atmosphere.</p>
<p><b>13. Clothes</b></p> <p>Staff who do not have a designated uniform must wear short sleeved tops/shirt when providing direct clinical care. Arms may be covered when not providing direct clinical care or washing hands, for religious purposes only</p> <p>In some areas defined safety clothing should be worn to comply with legislation.</p> <p>No clothing (such as T shirts or other undergarments) should be visible underneath designated uniform.</p> <p>At you managers discretion on special days / occasions throughout the year for example Christmas, Easter, comic relief, world prematurity day – staff may wear character T-shirts/ scrub tops, but these must remain short sleeved.</p>	<p>Professional appearance.</p> <p>Enables the appropriate hand-washing techniques to be undertaken and reduces the risk of cross infection.</p>
<p><b>14. Additional garments</b></p> <p><b>Fleece/cardigan</b> (if permissible to wear in the community.) <b>must not</b> be worn when delivering direct patient care. When worn, they must be of a plain dark colour, navy blue or grey, and of smart appearance. Ward Clarks are permitted to wear additional garments but must still comply with bare below the elbow</p> <p>Any such garments must be obtained from a WWL approved supplier (which should be done via the Linen Services department).</p> <p>If an employee is required to wear an article of faith (other than headwear or face coverings referred to above) such as a Kirpan, this should be risk assessed and documented on an individual basis as part of local induction processes.</p>	<p>Reduces the risk of cross infection.</p> <p>To comply with Trust Uniform standards.</p> <p>To comply with Inclusion &amp; Diversity standards.</p>



## Equality Impact Assessment Form

**STAGE 1 - INITIAL ASSESSMENT**

For each of the protected characteristics listed answer the questions below using  Y to indicate Yes and  N to indicate No	Sex (male / female / transgender)	Age (18 years+)	Race / Ethnicity	Disability (hearing / visual / physical / learning disability / mental health)	Religion / Belief	Sexual Orientation (Gay/Lesbian/)	Gender Re-Assignment	Marriage / Civil Partnership	Pregnancy & Maternity	Carers	Other Group	List Negative / Positive Impacts Below
Does the policy have the potential to affect individuals or communities differently in a negative way?	n	n	n	n	n	n	n	n	n	n	n	
Is there potential for the policy to promote equality of opportunity for all / promote good relations with different groups – Have a positive impact on individuals and communities.	y	y	y	y	y	y	y	y	y	y	y	
In relation to each protected characteristic, are there any areas where you are unsure about the impact and more information is needed?	n	n	n	n	n	n	n	n	n	n	n	If Yes: Please state how you are going to gather this information.

Job Title	Professional Practice Nurse			Date	May 2020
-----------	-----------------------------	--	--	------	----------

**IF 'YES an NEGATIVE IMPACT' IS IDENTIFIED - A Full Equality Impact Assessment STAGE 2 Form must be completed. This can be accessed via [http://intranet/Departments/Equality\\_Diversity/Equality\\_Impact\\_Assessment\\_Guidance.asp](http://intranet/Departments/Equality_Diversity/Equality_Impact_Assessment_Guidance.asp)**

Please note: As a member of Trust staff carrying out a review of an existing or proposal for a new service, policy or function you are required to complete an Equality Impact Assessment. By stating that you have **NOT** identified a negative impact, you are agreeing that the organisation has **NOT** discriminated against any of the protected characteristics. Please ensure that you have the evidence to support this decision as the Trust will be liable for any breaches in Equality Legislation.

## POLICY MONITORING AND REVIEW ARRANGEMENTS

## NAME OF POLICY/SOP or CLINICAL GUIDELINE:

Para	Audit / Monitoring requirement	Method of Audit / Monitoring	Responsible person	Frequency of Audit	Monitoring committee	Type of Evidence	Location where evidence is held
11.1	Ongoing monitoring of compliance	Via PDR, face to face feedback	Ward Managers, Matrons	Ongoing	Ward meetings	Minutes, written	On wards