## Standards of Dress, Uniform and Personal Appearance Policy

### Version 3

**Summary:**
This policy sets the standard that Southern Health NHS Foundation Trust staff must adhere to in regards to their standards of dress, uniform and personal appearance.

**Keywords (minimum of 5):**
(To assist policy search engine)
- Standards
- Uniform
- Dress
- Appearance
- Infection
- Prevention
- Control
- Health and Safety
- Professional
- Corporate
- Identity
- Equality and Diversity

**Target Audience:**
All clinical, non-clinical, frontline and corporate staff employed by Southern Health NHS Foundation Trust.

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**Approved and Ratified by:**
Staffside Policy Scrutiny Group Joint Consultative and Negotiating Committee

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Change Record

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Standards of Dress, Uniform and Personal Appearance Policy

1. Introduction

1.1. Southern Health NHS Foundation Trust (the ‘Trust’) recognises the importance of appearance in creating a positive and professional image that enhances the confidence of patients, their families, other staff and visitors to the Trust. In addition, in a healthcare and social care setting some issues of health and safety, infection control and security are very closely linked to dress and appearance. The Trust however also recognises that for some services working within the community a uniform would not be appropriate, and so therefore the general standards of dress and personal appearance would apply.

1.2. The Trust respects a natural desire for a certain amount of individuality and discretion in how people dress and present themselves. This policy has therefore been designed to support good practice with regard to health and safety, infection control and security, as well as to promote a code of appearance that will engender a positive and professional image without being unreasonably prescriptive.

1.3. The image that the Trust wishes to portray as an organisation involves the following elements:

- High-quality service
- Competence
- Professionalism
- Inclusive
- Respect for all consumers of the service (i.e. service users, visitors and commissioners).
- The type of work/activities undertaken

1.4. The adoption of corporate standards for the wearing of uniforms, clothing worn and personal appearance at work is an important issue for the Trust for the following reasons:

- it reflects a corporate identity which demonstrates a smart and professional image for patients, their relatives and staff;
- it can provide a consistency of identification within Southern Health for anyone using the services;
- it offers a protection to staff by ensuring that the uniform codes and non-uniform codes adhere to health and safety principles and guidelines; and
- the carrying/wearing of a current identity badge assists in ensuring the security of both staff and patients.

2. Scope

2.1. This policy will apply to all corporate and non-clinical staff as well as clinical staff directly employed by the Trust other than when specific conditions may apply e.g. to Medical and Dental staff. This also includes trainees, students on placement, secondees and staff on honorary contracts or on joint contracts with the Trust and another employer.
3. **Policy Statement**

3.1. This policy is intended to provide guidance to staff and managers. It is not intended to deny the rights of staff to reflect their individuality, but this should be seen in the context of the need for smart and professional appearance, the need to comply with health and safety requirements and infection control.

3.2. The Trust believes that the development and adoption of standards of dress and personal appearance is an important aspect of delivering high standards of service to service users, relatives and visitors. This is important whether or not individuals are required as part of their job to wear a uniform provided by the Trust. Whilst undertaking their contractual duties all staff and/or when in uniform are acting as representatives of the Trust, who can be easily identified to enable immediate engagement with service users, and so must ensure that The Trust standards for dress and appearance are maintained.

3.3 Issues of dress and appearance can be highly subjective and emotive. The Trust considers that where there are no objective criteria affecting dress or appearance (e.g. health and safety or infection control), a consensus view of what constitutes professional appearance should guide the implementation of this policy.

4. **Roles and Responsibilities**

4.1. **Trust**

4.1.1. The Trust has overall responsibility to have processes in place to ensure that all clinical, non-clinical frontline and corporate staff are aware of this policy and adhere to its requirements.

4.2. **Managers**

4.2.1. Managers’ responsibilities include the following:

- Senior leaders and managers must reinforce the standards within the parameters of this policy. This should be disseminated to all members of their teams and managers must ensure that teams understand and adhere to local protocol and the policy requirements.

- To monitor the standards of dress for staff when on duty. Where standards are not met, commensurate with their job role, Line Managers must follow the process outlined in Section 8 ‘Compliance with this policy’.

- To only purchase uniforms from the approved Trust supplier or where appropriate to wear those issued by the academic institution.

4.3. **Staff**

4.3.1. Clinical, non-clinical frontline and corporate staff responsibilities include the following:

- Maintain awareness and comply with this policy. The standards of dress and presentation of individuals are naturally the responsibility of each individual.

- Staff should maintain high standards in respect of their presentation when representing the Trust; this is particularly relevant for clinical staff in uniform where appearance is important to convey professionalism to our patients.
4.4. Human Resources

4.4.1. The Human Resources Team has a responsibility to ensure that the policy is followed, fairly and consistently. Their duties will involve:

- ensuring the effective implementation and embedding of the policy through education and monitoring activity; and
- ensuring that the policy are maintained and updated accordingly in line with any organisational changes or legislative changes.

5. Clinical Uniforms

5.1. The policy statement (see Section 3) outlines the rationale of staff wearing the Trust uniform. Furthermore, it is important to emphasise that the decision, made by the relevant Director and senior managers, on whether teams should wear clinical uniforms or be non-uniformed will be predominantly dependant on enabling engagement and empowerment of different service user groups and the protection of staff and patients/ service users.

5.2. Provision of Uniforms for Clinical Staff

The Trust provides approved uniform for clinical staff based on the following principles:

- The adoption of standardised uniforms allows the trust to facilitate efficient ordering, purchase the correct products manage the supply chain, and obtain value for money.

- Standard clinical uniforms across the Trust facilitate movement of staff between teams and a consistent image reflecting grade and specialty.

- The uniform should be as comfortable as possible and well-fitting whilst looking smart and professional in accordance to this policy.

- Uniform must conform to health and safety requirements and guidance (Health and Safety at Work Act 1974).

- Hand washing of laundry is ineffective and unacceptable and must not be undertaken. Clinical garments should be washed at 60 degrees for microbial disinfection and be crease free. Heavily soiled uniforms must be washed separately. This includes your fabric lanyard issued from HR Recruitment Smartcard team.

- A clean unstained uniform must be worn each day to ensure best practice with regard to infection prevention and control. Sufficient uniforms will be provided by the Trust to readily allow for this in accordance to the individual’s job role.

- Uniform provided may, on occasion, be second hand but will be of good quality and determined to be at the required Trust standard. This ensures the best use of the Trust resources.

- You may be able to claim tax relief on the cost of cleaning your uniform, for further information please visit https://www.gov.uk/tax-relief-for-employees/uniforms-work-clothing-and-tools.

5.3. The Standard of Clinical Uniform

5.3.1. The aim is that all staff will appear professional and smart. Staff will wear colours typically associated with their profession as follows:
Senior Nursing/ AHPs (Director of Nursing and AHPs, Associate Director of Nursing and AHPs, Professional Leads, Non-Medical Consultants)

Dress or Tunic - red

**Nursing**

Dress or Tunic
- Band 8: Navy with white trim
- Band 7: Navy with red trim
- Band 6: Royal blue with white trim
- Band 5: Hospital blue with white trim
- Band 4: Pale blue with white trim
- Band 2/3 Pale grey with white trim

Trousers: Navy
Cardigan/ Sweatshirt: Navy

Note: Multi-disciplinary Team Leaders (at Band 8/7) that have an AHP background may retain their professional uniform when working clinically or may choose to wear the above Navy uniform and display their professional badge.

**Training Nursing Associate & Pre Registration Nursing Students**

To wear the uniform provided by their academic institution

**Physiotherapy**

- Physiotherapist: White tunic with navy trim /white polo shirt with 'Physiotherapist' embroidery in navy, navy trousers, navy sweatshirt, navy knee length shorts
- Rehabilitation Assistant: White polo shirt with 'Physiotherapy Assistant' embroidery in navy, navy trousers, navy knee length shorts.

**Occupational Therapy**

- Band 5 & 6 - Occupational Therapist: White tunic with bottle green trim, white polo shirt with "Occupational Therapist" in bottle green, bottle green trousers, green shorts, green cardigan/sweatshirt, green cardigan/sweatshirt
- Band 3 & 4 - Rehabilitation Assistant: White polo shirt with 'Occupational Therapy Assistant' bottle green embroidery, bottle green trousers, green shorts, green cardigan/sweatshirt [dual trained can wear either a Nursing or OT uniform].

**Radiology Staff**

- Radiographers: White shirt or tunic with sailor navy trim, black trousers
- Radiology Assistant Practitioner: White tunic with pale grey trim, black trousers
- Radiology Assistant: Pale grey tunic with white trim, black trousers

**Podiatrists:**

- White polo shirt or scrub tunic, navy trousers “podiatrist” embroidery

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1 The Trust is seeking to work with the academic institutions to move towards a standardised approach to student uniforms.
Rehabilitation Assistants (not in Occupational Therapy or Physiotherapy)

- White tunic, navy trousers

Staff regularly visiting patient homes/ various sites (not in-patient staff):

- Fleece/Coat Navy

Pharmacy

- Bottle green smart scrub tunic or dress, white trim.

5.3.2 Maternity Wear

- White tunic and trousers or dress

Maternity uniforms are recycled in order to be able to promptly and cost effectively supply. Staff should return parcelled up laundered maternity uniforms to the Lymington Store Room via the internal mail. Staff requiring maternity uniforms should place an order as usual via the SBS ordering system but will be offered second hand uniform where this is available in their size.

5.3.3 For full uniform details, including maternity wear and light weight versions, please refer to the Shared Business Service ordering system and the catalogue.

5.3.4 If a member of staff has any special fitting or material specific requirements on medical grounds then an Occupational Health referral and advice is be required to review and make recommendations.

5.3.4 Inpatient teams staff by colleagues in uniform should display a ‘uniform colours for patients’ poster, to help patients and their families understand what the differences mean in respect of the variety of healthcare professionals they may come into contact with.

5.4 Uniform Allowance Guideline

5.4.1 The uniform allowance for staff is as follows:

- Full time staff: 5 uniforms
- Part time/bank staff: Minimum of 2 and maximum of 5 uniforms (depending on hours worked and local discretion).

This should include consideration of orders for light weight versions.

5.4.2 Badges which carry the Trust’s name must be worn.

5.4.3 Trust issued Lanyards with a 3 point break must be worn.

5.5 Purchase of Uniform

5.5.1 Any request by an individual to purchase a uniform must be authorised via the Line Manager in accordance with the ordering procedures/ guidelines. The lead time for standard sizing is 1-2 weeks; this can be up to 8 weeks for non-standard items. Managers are therefore advised to ordered uniforms as soon as start dates are confirmed with new starters.

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2 Suppliers don’t offer maternity wear in any other colours.
5.5.2. The purchase of any items of uniform can only be undertaken through the Trust selected supplier, using the Shared Business Service system and the catalogue.

5.5.3 Special orders may be allowed only in cases where a member of staff has a medical condition that requires a variation to the standard as cited in 5.3.3.

5.6. Delays in Supply of Uniform

5.6.1. If due to supply chain issues uniform does not arrive in time for a new staff member’s start date they may wear their uniform from their previous job (if available) or their student uniform rather than delay their start date with the Trust. This decision should be made collaboratively with the manager and new member of staff.

5.7. Wearing Uniform outside NHS Premises

5.7.1. Where possible staff should change into their uniform on reaching their place of work and change out of it at the end of the shift, if their place of work has suitable changing facilities. Staff that have to wear uniform when travelling to and from work must ensure that their uniform is covered when going into public places to maintain professional appearance and cleanliness.

5.8. Contaminated Uniforms

5.8.1. In cases of contaminated uniforms, guidance from the Line Manager must be sought for current arrangements and local guidance. If uniforms are visibly soiled or contaminated the uniform must be changed immediately or as soon as is practical. In the case of gross contamination the uniform must be disposed of and replaced.

5.9. Employees Leaving the Trust

5.9.1. Uniforms provided by The Trust must be returned to the Line Manager, laundered and with all personal belongings removed. Staff leaving a substantive post but remaining on the Staff Bank may not need to retain all of their uniform and may need to return some items. This will be agreed with the line manager at the exit interview.

5.10. Loss of Uniforms

5.10.1. All staff who lose an item of uniform must report this to their Line Manager. Due to the potential security issues arising from the use of uniforms by non-employees of the Trust, loss of uniform must be recorded as an incident through the Trust’s Incident Reporting Procedure (Ulysses Safeguard via the Trust intranet).

5.11. Replacement of Uniform

5.11.1. Staff who have been provided with a uniform and require a replacement must contact their Line Manager and request a replacement, if and when one is required.

5.11.2. Once the complement has been acquired by the new member of staff, this will not be changed unless contracted hours or working pattern changes, nor will there be any alterations made to the combination after the day of fitting. Any staff wishing to change their combination must notify their Line Manager, who will consider the change in exceptional circumstances.

5.11.3. The expected refresh rate for uniforms is replacement is approximately every 2-3 years.
6. **General Standards of Dress and Personal Appearance when Providing Direct Clinical Care**

6.1. When providing direct clinical care to patients, all individuals, whether wearing a uniform or not, must adhere to the principles outlined in the Health and Social Care Act 2008 and the RCN ‘Wipe it Out’

In particular this requires the clothing worn by staff when carrying out their duties is clean and fit for purpose and should specifically enable good hand hygiene.

6.2. **Appearance**

6.2.1. Fingernails must be kept short at all times to protect the patient from any scratching and any infection. No nail extensions, overlays or varnish of any description are permitted.

6.2.2. If hair is longer than shoulder length it should be tied back sufficiently to ensure that it does not fall over the face or over a clinical area. Hair must be tied back with simple, matching hair bands that reflect the uniform or the colour of the hair.

6.2.3. The wearing of ‘temporary’ false eyelashes in not permitted.

6.2.4. Badges must be avoided other than The Trust identity badge as they can restrict the movement in relation to moving, handling and can cause injury to patients and clients and staff. If a professional badge or other badge (e.g. hospital training badge, role specific) is worn then consideration must be given to whether this is safe in the clinical environment. They must be wipeable or disposed of daily (e.g. stickers). This decision must be made by the clinical line manager.

6.3. **Clothing**

6.3.1. Arms must be ‘bare below the elbow’ to allow for cleanliness and enable easy hand cleaning as per the Department of Health’s ‘Bare Below the Elbows’ guidance. Please refer to the Trust’s Hand Hygiene Procedure: Infection Prevention and Control Policy, Appendix 6 (SH CP 12).

6.3.1.1. Long sleeves prevent thorough hand hygiene procedures and are more likely to become contaminated during work activities. Staff must remove long sleeved clothing or roll up long sleeves before undertaking any direct ‘hands on’ care.

6.3.1.2. In a learning disability/mental health in-patient setting, ‘Bare Below the Elbows’ is advised unless following a risk assessment, if there is a risk of scratching or other physical injuries being inflicted, in which case, sleeves can be rolled down, but they must be rolled up to facilitate hand hygiene when necessary in accordance with the Trust’s Hand Hygiene Procedure.

6.3.2. No cardigan or jumper must be worn in the clinical area when undertaking direct clinical duties with a patient/ service user.

6.3.3. Buckles or belts must not be worn apart from when required for securing trousers or carrying a personal alarm (i.e. Personal Infrared Transmitter (PIT)) or security keys.

6.3.4. Tights and socks must be black, grey, navy or neutral.

6.3.5. Bare legs are permitted in warm weather/excessively hot environments.

6.3.6. In extreme weather conditions where the Trust has issued a weather alert staff should follow the Trust-wide advice, in respect of any deviation from the normal uniform policy or guidance about ordering light weight uniforms.
6.3.7 When undertaking direct clinical care, scarves and ties must be secured so that they do not cause an infection risk or present an article to be accidentally pulled by a patient. Staff must consider:

- removing the tie/scarf, especially if in an in-patient setting where there is a risk of violence and aggression and the clothing items present potential ligatures,
- securing ties in the shirt, or
- using a tiepin or clip on ties so that it is safe for the patient.

6.4. Footwear

6.4.1. In addition to the requirement for footwear to be smart as part of the Trust’s image, the following safety provisions apply:

- In keeping with safety at work, footwear must be appropriate to the work of the employee and such that damage to feet would be minimal in the event of an accident. Therefore, it is a requirement to wear shoes appropriate to the environment and duties (closed shoes will offer more protection than open shoes from risk of contamination or injury from spills or dropped objects/ low heel will offer greater stability and manoeuvrability). Open toed/ sling back shoes are therefore not permitted for staff working in clinical environments.
- All staff delivering direct patient care should wear shoes that can be cleaned with a disposable wipe or washed in a washing machine and should be black or white.
- When working in areas where safety shoes are required, these should be worn at all times.

6.5. Body Piercings, Tattoos and Jewellery

6.5.1. Any potentially offensive and/or intimidating tattoos should be covered as long as this complies with the Trust’s Hand Hygiene Procedure as wearing long sleeves prevents thorough hand hygiene procedures and are more likely to become contaminated during work activities.

6.5.2. **Rings:** one plain metal band only may be worn. No rings with stones should be worn when dealing directly with patient care as scratches and abrasions to the skin could occur.

6.5.3. **Wristwatches, bracelets and other hand adornments:** these may not be worn when providing direct patient care or in the clinical environment. Wristwatches and other jewellery worn on the hands and wrists become contaminated during work activities. In addition they prevent thorough hand hygiene procedures (see the Trust’s Hand Hygiene Procedure).

6.5.4. **Necklaces:** these must not be worn for direct patient care.

6.5.5 **Piercings:** are only an infection risk when new and not healed when they should be covered. Piercings are allowed so long as when worn continue to portray a professional image to patients and carers and do not present a safety and risk in the particular work area.

Local protocols may be developed in light of local risk assessment.

Staff in clinical areas must not wear any facial piercings; studded earrings are permitted.

6.5.6. No other visible jewellery may be worn for direct patient care.

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3 This also applies to items of religious dress as these may present an infection prevention and control or safety risk.
6.6 Stethoscopes and Other Hard and Sharp Objects

6.6.1. Stethoscopes should not be worn around the neck or waist as a matter of course. They must be concealed in a pocket or kept in the clinical environment until required, and used in accordance with the Infection Control Policy. This ensures safety for both the patient and staff member.

6.6.2. Pens, scissors or other sharp and hard objects must not be carried in the outside breast pocket as this may cause injury or discomfort to patients during care activity. They should be carried inside clothing or in hip pockets.

6.6.3 For staff working in Mental Health services please refer to local security guidelines as these objects are likely to be prohibited due to risk to patients, staff and visitors.

6.7 Theatres

6.7.1. When scrubs are worn in identified clinical areas, this must be with the agreement of the senior manager of the area and only for the following reasons:

- to reduce infection risk
- the area is too warm for usual clothing in order to meet the needs of the patient.

6.7.2. Clean scrubs must be worn each day and changed at the first safe clinical opportunity if visibly soiled.

6.7.3. Scrubs must not be worn outside the clinical area if rules specify, unless covered by a clean uniform overcoat which is fully fastened. Scrubs should not be worn outside the clinical area, unless in emergency situations. Different shoes should be worn for outside of theatre.

6.7.4. Scrubs must not be worn outside the hospital other than for retrieval purposes of patients to critical care areas and emergency situations.

6.7.5. Areas wearing scrubs must wear a different colour to that of theatre personnel for identification purposes.

6.7.6. Theatre footwear: Footwear worn in theatres should be for that use only and should be cleaned in accordance to the Infection Prevention and Control policy. The use of a washer-disinfector is preferable for the decontamination of footwear, and this must be used where provided. Footwear should not be left in a contaminated state or on changing room floors. Footwear should be cleaned and stored ready for use. The use of overshoes is not recommended, except in anticipation of grossly contaminated cases, as these have been shown to increase floor bacterial counts, as well as the numbers of bacteria on the hand when applied or removed.

7. General Standards of Dress and Personal Appearance

7.1. The current Trust identity badge must be with staff at all times. Where identity badges are worn, identity badge holders must be on a lanyard with a breakaway anti-ligature clasp for clinical staff or a Trust lanyard for non-patient facing role.

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4 For staff working in Mental Health services please refer to local security guidelines as these objects are likely to be prohibited due to risk to patients, staff and visitors.

5 Reference ‘Behaviours and Rituals in the Operating Theatre’ (Hospital Infection Society Working Party, 2005)
7.2. Individuals must be clean and well-presented.

7.3. Staff in direct clinical contact with patients service users and clients, and housekeepers and porters who work in a clinical environment, must follow standard infection control precautions (see Section 6) and take reasonable care to protect themselves and patients by wearing the appropriate Personal Protective Equipment (PPE) (e.g. gloves and plastic apron) following a risk assessment (Please refer to the Trust’s Standard Precautions Procedure: Infection Prevention and Control Policy, Appendix 5 (SH CP 19).

7.4. Hair must be clean, tidy, and style should be worn as appropriate to the role.

7.5. Offensive logos indicating endorsement of a product are not permitted on any clothing item or on diary covers etc.

7.6. Glasses lanyards should be plain and easy to clean, and should have a breakaway anti-ligature clasp on them.

7.7. Attire for dress down days must adhere to the principles of this policy for standards of dress. Agreement to participate in dress down days must be obtained from service managers.

7.8. Staff not required to wear a uniform must be smart and presentable.

7.9. Weekends/night duty/bank holidays/training events – given the nature of the service and the contact with the general public, no distinction is made at these times and staff will be expected to maintain the standards of dress as outlined in this policy. No distinction is made for training events unless the organiser specifies a particular mode of dress consistent with the course objectives.

7.10. Therapeutic activities – where therapeutic activities with patients/service users have been planned, e.g. day trips, sporting/recreational activities, or in supported living, staff must wear clothing appropriate to the task.

7.11. Consideration must also be given so that clothing and appearance does not provide offence.

7.12. The following provided some examples of inappropriate clothing:

- Jeans with offensive/large logos, holes, patches or is in a dirty or untidy condition; leggings; patterned/military style combat trousers.
- Clothing bearing offensive logos or wording (e.g. alcohol related, sexual, etc.)
- Skirt length shorter than just above the knees
- Bare midriff
- Tops that are low cut or leave significant bare skin (e.g., halter tops, strappy vest tops etc.)
- Training shoes/plimsolls/deck shoes (unless required by the role)
- Flip flops
- Casual printed t-shirts (other than those printed only with small motifs) and sweat shirts/rugby shirts
- Tracksuits
- Clothing that has holes, patches or is in a dirty or untidy condition
- If shorts are worn they must be knee length and of a tailored quality
- High heeled shoes/ open toes shoes when providing clinical or social care interventions in non-uniformed environments
7.13. The Trust has a ‘Smoke free Trust’ Policy which states that staff may not smoke in any of the Trust buildings, premises or grounds. Staff must also ensure they do not smell of smoke when coming into work.

7.14. In learning disability and mental health services, where agreed in local protocols by senior leaders and managers (see Section 4.2.1), smart looking trouser/jeans (i.e. with no offensive/large logos, no holes, no patches and not in a dirty/untidy condition) with heavy duty material maybe worn to provide effective protection for physical interventions and to enable personal alarms to be carried in the heavy duty pockets/belt loops.

7.15. Respect for Diversity

7.15.1. Individuals who require to wear something that potentially contravenes this policy, for example for religious reasons (please note, the Department of Health provides specific advice on ‘Muslim Spiritual Care Provision in the NHS’), culture or perhaps due to a disability, should discuss this in confidence with their Line Manager. Agreement for the way forward must be confirmed in writing and must comply with all policies relating to infection prevention (See Appendix 2).

7.15.2 The Trust believes that it is important to recognise and support equality in employment and due consideration will be given. However, health and safety and infection control issues are paramount.

7.16 Damage to clothing

7.16.1. The Trust would not normally consider itself liable to recompense staff for damage to property or clothing caused by a work-related incident. If, in exceptional circumstances, it is recognised that an ex gratia payment is appropriate this will be made in accordance with the Trust’s Losses and Special Payments Guidance.

8. Compliance with this Policy

8.1. All individuals identified in Section 2 of this policy are expected to adhere to the standards set within this policy.

8.2. Senior leaders and managers must agree local protocol for the standards of dress, within the parameters of this policy. This must be disseminated effectively to their teams and managers must ensure (through local induction for new staff and team meetings for existing staff) that teams understand and adhere to local protocol and the policy requirements.

8.3. If an individual does not comply with the standards, Line Managers will discuss the issue informally and agree a way forward.

8.4. In addition, staff may be asked to return home to change. In such circumstances, staff will usually be expected to make up any time lost. Alternatively, staff may be informed that certain items are not acceptable and should not be worn again.

8.5. If despite these measures, an individual continues not comply with the policy and local standards, the issue will be addressed through the Trust’s Disciplinary Policy and Procedure.

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9. **Monitoring the Effectiveness of this Policy**

   9.1. The effectiveness of this policy will be monitored through the following mechanisms:

   - Outcomes of patient and staff survey
   - Overview of any disciplinary and grievance issues
   - Complaints

10. **Policy Review**

   10.1. The policy contained in this document will be in place for three years following ratification. An earlier review can take place should exceptional circumstances arise or new guidance is issued resulting in part or all of this policy being insufficient for purpose.

11. **Associated Documents**

   - Disciplinary Policy and Procedure
   - Grievance Policy and Procedure
   - Infection Prevention and Control Policy
   - Hand Hygiene Procedure: Infection Prevention and Control Policy Appendix 6 Hand (SH CP 12)
   - Losses and Special Payments Guidance
   - Smoke Free Trust Policy
   - Standard Precautions Procedure: Infection Prevention and Control Policy, Appendix 5 (SH CP 19)
   - The Health and Safety at Work Act 1974
   - Standard Clinical Uniform and Procurement Codes
   - Wipe it Out - Guidance on Uniforms and Work Wear (RCN 2013)

12. **Supporting References**

   - [www.dh.gov.uk](http://www.dh.gov.uk) The Department of Health provides strategic leadership for public health, the NHS and social care in England. Its purpose is to improve England’s health and well-being and in doing so achieve better health, better care, and better value for all.

   - [www.his.org.uk](http://www.his.org.uk) The Healthcare Infection Society is a charity whose objectives are to advance knowledge of, foster scientific interest in and disseminate information about the prevention and control of hospital and other healthcare associated infections, to medical and allied professionals for the benefit of the public.

Appendix 1: Equality Impact Assessment

The Equality Analysis is a written record that demonstrates that you have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by the Equality Act 2010.

Stage 1: Screening

<table>
<thead>
<tr>
<th>Date of assessment:</th>
<th>January 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Policy/Procedure/Process</td>
<td>Standards of Dress, Uniform and Personal Appearance Policy</td>
</tr>
<tr>
<td>Name and job title of person completing the assessment:</td>
<td>Ricky Somal: Head of Engagement and Wellbeing</td>
</tr>
<tr>
<td>Responsible department:</td>
<td>Human Resources</td>
</tr>
</tbody>
</table>

Intended equality outcomes:
This policy sets the standard that Southern Health NHS Foundation Trust staff should adhere to in regards to their standards of dress, uniform and personal appearance. It is important that all staff dress codes adhere to the following principles:
- Comply with infection control policies
- Comply with relevant health and safety policies
- Support a secure and safe environment
- Be respectful and reassuring for patients, carers and visitors
- Maintain staff dignity
- Promote the Trust as a competent, trustworthy and professional organisation.

Who was involved in the consultation of this document?

Please describe the positive and any potential negative impact of the policy on service users or staff.

In the case of negative impact, please indicate any measures planned to mitigate against this by completing stage 2. Supporting Information can be found be following the link: www.legislation.gov.uk/ukpga/2010/15/contents

<table>
<thead>
<tr>
<th>Protected Characteristic</th>
<th>Positive impact</th>
<th>Negative impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>The policy demonstrates due regard to the requirements of the public sector equality duty.</td>
<td>None identified, as the impact is expected to be positive in providing a fair, consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Disability</td>
<td>Southern Health has achieved the ‘Disability Confident 2019’ accreditation and will respond positively to requests for reasonable adjustments. Advice can be sought from the trust HR team and Occupational health. The Trust launched a Staff Disability Network in December 2018.</td>
<td>None identified, as the impact is expected to be positive in providing a fair, consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Gender reassignment</td>
<td>This policy aims to be fair and promote equality opportunity so that we provide high quality safe services that are person and patient centred. Staff may have different expectations of the uniform and dress code policy. Staff who are in process or have undertaken gender-re-assignment can dress as their chosen gender, including any uniform.</td>
<td>None identified, as the impact is expected to be positive in providing a fair, consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Marriage &amp; civil</td>
<td>This policy aims to embed a process that is open, fair and transparent so that</td>
<td>None identified, as the impact is expected to be positive in providing a</td>
</tr>
<tr>
<td>Partnership</td>
<td>we provide high quality safe services that are person and patient centred.</td>
<td>fair; consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------</td>
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<tr>
<td>Pregnancy &amp; Maternity</td>
<td>This policy aims to embed a process that is open, fair and transparent so that we provide high quality safe services that are person and patient centred. Specialist Maternity wear can be purchased.</td>
<td>None identified, as the impact is expected to be positive in providing a fair; consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Race</td>
<td>Southern Health provides an interpreting and will respond to proving information in alternative formats upon request.</td>
<td>None identified, as the impact is expected to be positive in providing a fair; consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Religion</td>
<td>Exposure of the forearms is not acceptable to some staff in regard to their Islamic faith. The (Muslim Spiritual Care Provision) MSCP convened a group including Islamic scholars and chaplains and multi-faith representatives as well as Department of Health policy-makers and external experts in infection prevention. Based on these group discussions, the MSCP prepared a list of recommendations to ensure that local dress code policies are sensitive to the obligations of Muslims and other faith groups whilst maintaining equivalent standards of hygiene. Incorporating any of these recommendations into trust policy will have to be agreed in conjunction with clinical managers and the local infection prevention and control team: - Uniforms may include provision for sleeves that can be full length when staff are not engaged in direct patient care activity. - Any full or three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity. - Disposable over-sleeves, elasticated at the elbow and wrist, may be used but must be put on and discarded in exactly the same way as disposable gloves. Strict procedures for washing hands and wrists must still be observed. Use of hand disinfection gels containing synthetic alcohol does not fall within the Muslim prohibition against natural alcohol (from fermented fruit or grain).</td>
<td>It is recognised that some uniforms may be in conflict with the dress codes of specific religions or cultures (e.g. head coverings, jewellery, long sleeves etc.). In particular, there is evidence that adopting 'bare below the elbows' has presented difficulties for some Muslim female healthcare workers and students. Indeed, it has been reported that some staff had had such difficulty with those dress code provisions as to find that they could no longer continue in their jobs.</td>
</tr>
<tr>
<td>Sex</td>
<td>This policy aims to embed a process that is open, fair and transparent so that we provide high quality safe services that are person and patient centred.</td>
<td>None identified, as the impact is expected to be positive in providing a fair; consistent; transparent and accessible process for all employees.</td>
</tr>
<tr>
<td>Sexual</td>
<td>This policy aims to embed a process</td>
<td>None identified, as the impact is</td>
</tr>
</tbody>
</table>
Stage 2: Full impact assessment

<table>
<thead>
<tr>
<th>What is the impact?</th>
<th>Mitigating actions</th>
<th>Monitoring of actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is evidence that wearing of hand or wrist jewellery compromises the undertaking of effective hand hygiene. DH guidance makes it clear that it is poor practice to wear any jewellery, including a wristwatch, on the hands or wrists during direct patient care activity. Southern Health is aware that there will be instances where, for religious reasons, members of staff may wish to wear a bracelet (for example the Sikh Kara) when they are not engaged in direct patient care activities. In these circumstances it is good practice to ensure such bracelets can be pushed up the arm and secured in place for hand washing and direct patient care activity.</td>
<td>Bare Below the Elbow: The Trust hand hygiene appendix supports the pushing up of long sleeves.</td>
<td>Policy review</td>
</tr>
</tbody>
</table>
Appendix 2


Consideration of Equality and Diversity regarding Standards of Dress, Uniform and Personal Appearance

1. The Trust believes that it is important to recognise and support equality in employment to retain a diverse workforce, and due consideration will be given. However, health and safety and infection control issues are paramount.

2. The Trust recognises that the wearing of religious dress and symbols can be an important expression of an individual’s religious identity.

3. Individuals who wish to wear something that potentially contravenes the Standards of Dress, Uniform and Personal Appearance Policy, for example for religious reasons, culture or perhaps due to a disability, should discuss this in confidence with their Line Manager. A compromise can often be found.

4. Request to accommodate a religious expression/requirement, culture or a disability and/or a reasonable adjustment

When a Line Manager receives such a request, they should:

• Consider requests with respect to an individual’s disability/right to express their cultural/religious identity.

• Consider each situation on an individual basis in the context of the particular job:

• Avoid being too prescriptive in the application of a dress code and consider circumstances on a case-by-case basis.

• In each case, the Line Manager needs to consider two key questions: a) Is there a legitimate health or safety requirement for this dress code?

b) Does the adjustment proposed affect the person’s ability to meet the requirements of the job?

If the answer is "no" to question ‘a’ and ‘b’ then the request should be agreed.

If ‘yes’, to question ‘a’ only, then the proposed adjustment must be reviewed and further adjustments made, if needed, to meet the health and safety requirements as well requirements of the job (See Section 5).

If ‘yes’, to both questions or question ‘b’ only, then further reasonable adjustments need to be considered (see Section 5).

• A written record of the request, outcome and the rationale for the outcomes should be retained in the staff members’ local personal file and a copy provided to the member of staff

5. Examples of reasonable adjustments are provided:

• There is evidence that adopting ‘bare below the elbows’ has presented difficulties for some Muslim female staff. Disposable over-sleeves to cover forearms during direct patient care activity can be utilised with strict adherence to washing hands and wrists observed before and after use and that over-sleeves must be discarded in exactly the same way as disposable gloves. The Trust Hand Hygiene Policy also supports the pushing up of long sleeves.
• There is evidence that wearing of hand or wrist jewellery compromises the undertaking of effective hand hygiene. However, the Trust is aware that there will be instances where, for religious reasons, members of staff may wish to wear a bracelet (For example the Sikh Kara) when they are not engaged in direct patient care activities. The Trust recognises that in these circumstances it is good practice to ensure such bracelets can be pushed up the arm and secured in place for hand washing and direct patient care activity. These references have been shared with organisations representing Hindu and Sikh interests and no objections have been raised.

6. Further help and advice

Ricky Somal, Head of Engagement and Wellbeing
Email: ricky.somal@southernhealth.nhs.uk
Sarb Birk; Diversity and Inclusion Lead
Sarbjit.Birk; @southernhealth.nhs.uk