

Uniform & Dress Code Policy

LEAD EXECUTIVE DIRECTOR: Chief Nurse
POLICY APPROVED BY: PAG
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	Document Control Sheet
Policy Title	Uniform & Dress Code Policy
Purpose of Policy/ Assurance Statement	To provide clear information to everyone working at GOSH about dress, uniform, and other aspects of appearance.
Target Audience (Policy relevant to)	All members of staff and others working at GOSH
Lead Executive Director	
Name of Originator/ author and job title	Helen Cooke, Assistant Director of Organisation Development
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Amendments:	<p>A very significant number of amendments, mainly in order to reduce repetition, mean all the changes cannot be shown via track changes. Substantive changes to content are:</p> <p>Inclusion of advice on laundering uniforms Statement that lanyards should not be worn in clinical areas Statement that all nursing staff (except those in DCAMHS) should wear uniform when delivering clinical care Statements that uniform (including scrubs) must not be worn outside Trust clinical buildings Rules on “Bare below the elbows”</p> <p style="text-align: center;">Amendments to title – July 2014</p> <p>Inclusion of specific section relating to AHP staff wearing uniforms when in physical contact with patients August 17: change to</p> <ul style="list-style-type: none"> • Uniform laundry facilities • Wearing uniform between hospital buildings • Activity tracker wristbands not to be worn • Clarification regarding non-standard uniform for female Muslim staff in clinical areas
Links to other policies or relevant documentation	
If draft	[only complete remaining boxes]
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1. Assurance statement/policy scope

- 1.1. This policy clarifies for staff the rules and guidance on dressing safely and appropriately at work.
- 1.2. The policy applies to all GOSH staff members, irrespective of the nature of their contract and the nature of the work they carry out at GOSH; and people who are working at or for but not employed by GOSH. This includes substantive staff, staff on fixed term contracts, people on honorary contracts, bank staff, students, volunteers, contractors or agency staff.
- 1.3. This policy takes into account and reflects the Department of Health Guidance on Uniform and Workwear, March 2010.

2. Introduction

- 2.1. The Trust recognises the importance of appearance in creating a positive and professional image that enhances the confidence of children, their families, other staff and visitors to the Trust. In addition, in a healthcare setting some issues of health and safety, infection control and security are very closely linked to dress and appearance. However, the Trust also respects a natural desire for a certain amount of individuality and discretion in how people dress and present themselves.
- 2.2. This document recognises that some staff do not work in clinical areas and wear their own clothes; some work in clinical areas and wear their own clothes; and some wear uniform.
- 2.3. The Trust and its staff side have worked together to draw up this policy, and in doing so have taken considerable note of the opinions of staff and families.

3. Aims and objectives

- 3.1. The aims of this policy and guidance are to:
 - Provide clear information to all staff about what the rules regarding dress and appearance
 - Provide clear information to all staff who wear uniform about the rules that specifically apply to them
 - Provide clear information to all staff about the Trust's requirements with regard to acceptable dress and appearance
 - Provide wherever possible a rationale for the rules and guidance that the Trust is applying
 - Provide a reference point in disputes with regard to dress and appearance

4. Duties and responsibilities

- 4.1. **The Chair of the Policy Approval Group (PAG):** The Chair of the Policy Approval Group has the responsibility to ensure that the group maintains its remit of approving policies in a timely and effective manner and that all activity is documented accordingly. The role of Chair for the Group also includes granting ratification as part of the "Chairs actions" for policies requiring "minor" changes outside of the PAG meeting (those relating to document formatting). The Policy Approval Group Forum involves staff-side representatives in the review and implementation of operational policies, specifically in relation to HR policies. The responsibility for the approval of this policy lies with the Policy Approval Group.
- 4.2. **The Trust Compliance and Governance Manager** has the corporate responsibility for publishing all new and reviewed procedural documents which have been approved by the Policy Approval Group on the Trust Document Library.

4.3. **The Compliance and Governance Manager** and the **Clinical Unit or Non- Clinical Department Managers** will have the responsibility for notifying staff locally of any policy revisions and newly approved documentation.

4.4. **The Head of Operational HR and / or the Head of Workforce Planning and Development** will be responsible for the development and implementation of the Human Resources strategy, policy procedure and guidance and leaning on consultation with employee representatives through the Staff Partnership Forum. The SPF Policy Group involves staff-side representatives in the review and implementation of operational policies, specifically in relation to HR policies.

4.5. **The Working Lives Group** will be responsible for monitoring the effectiveness of the policy.

4.6. **All managers are expected to:**

- Read, understand and comply with the contents of all Trust HR policies, procedures, toolkits and frameworks and for ensuring that their staff are aware of and have access to them
- Set and maintain clear standards of dress and appearance for their staff
- Deal appropriately with breaches of rules relating to dress and appearance
- Refer to the policy and guidance from the HR Department if issues cannot be resolved locally

4.7. **All staff are expected to:**

- Manage their dress and appearance in line with the rules and guidelines in this document
- Engage constructively in discussions about dress and appearance

4.8. **HR will:**

- Be responsible for promoting best practice and for assisting managers with the interpretation of HR policies, procedures, toolkits and frameworks
- Provide advice and support to managers on addressing breaches or queries over dress and appearance
- Provide advice and support to staff on addressing breaches or queries over dress and appearance

4.9. **Health and Safety Team will:**

- Be responsible for providing advice on queries over dress and appearance which relate to health and safety

4.10. **Infection Prevention and Control Team will:**

- Be responsible for providing advice on queries over dress and appearance which relate to the prevention and control of infection

4.11. **The Chaplaincy Team will:**

- Be responsible for providing advice on queries over dress and appearance which relate to religious belief

5. Principles

5.1. Dress and appearance are important factors in promoting good health and safety, infection prevention and control and security for children and young people, their families, staff and visitors to the Trust. It is important to be aware of the impact clothing and appearance can make on others. In a healthcare organisation, whether or not staff are involved in direct

patient care, it is important to be mindful of the sensitive issues that are being dealt with and the need to project a level of reassurance and professionalism.

- 5.2. There are particular requirements for staff who work in clinical areas, especially in regard to health and safety, infection prevention and control and portraying a professional image.
- 5.3. Some faith groups may also have some beliefs that have an impact on dress and appearance. The Trust aims to treat everyone who works at Great Ormond Street Hospital with respect and deal with employment issues as equitably and as openly as possible. This policy / procedure will be applied fairly and consistently to all relevant staff employed by the Trust regardless race, disability, sex, age, sexual orientation, gender reassignment, marriage or civil partnership status, maternity or pregnancy, religion or belief socio-economic status, profession or number of hours worked. Please refer to sections 9 and 10 for guidance on making reasonable adjustments to uniform requirements that still fulfil the principles underpinning this policy.
- 5.4. Through its policies, procedures and practices and in accordance with the Personal Responsibility Framework, the Trust aims to encourage, value and manage diversity, and promote equality for all. All GOSH employment policies and procedures are drawn up in consultation with staff side and an equality impact assessment is undertaken on each one. Training is provided to ensure staff are managed fairly and are able to give of their best. The Trust undertakes monitoring of equality and diversity across the organisation, and action taken if inequality becomes evident. This information will be reported and discussed at the Staff Partnership Forum and Staff Equality and Diversity Group.

6. General Guidance for all staff

- 6.1. The policy supports staff and managers in ensuring that everyone who works at GOSH may be confident in their appearance and not unwittingly or otherwise cause risk, discomfort or concern to themselves or others.

6.2. Infection Prevention and Control

- 6.2.1. All staff, whatever their working environment must adhere to infection prevention and control requirements. Any member of staff who has direct contact with children and young people must be able to perform hand hygiene effectively.

6.3. 'Bare Below the Elbows'

All staff must be bare below the elbows as follows:

- a. Anybody (clinical or non-clinical) entering PICU, NICU or CICU
 - b. Clinical staff wearing a uniform in any clinical area
 - c. Clinical staff wearing a non-standard uniform (e.g. female Muslim staff) in any clinical area
 - d.. Anyone entering a patient's bed space or room
 - e.. When having clinical patient contact
 - f. This applies to all wards and departments including the Outpatient Department
- 6.4. It is essential that staff pay attention to personal hygiene. It is suggested that deodorant is applied daily to help control body odour. Perfume and aftershave should be discreet and not overpowering, as some patients and staff can find strong smells nauseating.
 - 6.5. All staff should wear clean clothes. Clinical staff should wear clean clothes / uniform for each shift, in order to minimise the possibility of spreading infections.
 - 6.6. For infection control and safety reasons lanyards must not be worn during direct patient care activity. Retractable belt clips can be obtained from the security desk and should be worn

instead. Clinical staff who have direct patient contact should attach their ID badge to their pockets with a belt clip and wear a name badge for easily visible identification purposes. Any staff member not involved in direct patient care activity may continue to wear a lanyard.

6.7. Health and Safety

All staff, whatever their working environment must be mindful of the health and safety risks they might encounter, either on a daily or ad hoc basis, and dress appropriately. The guidance and regulations in this policy are designed to protect staff from injury. Staff have a responsibility to ensure that they keep themselves safe in terms of their dress, and managers have a right and a responsibility to challenge staff whom they feel are causing a risk to themselves or others in terms of their dress or appearance.

6.8. Security

In order for GOSH, its staff, patients, families and visitors to be as safe and secure as possible, all staff must wear their Trust ID badge at all times whilst on the premises. Name badges are not sufficient, since these can be used by other people. Uniforms and identity badges must **NOT** be worn in public areas outside the Trust, e.g. on public transport, when travelling to and from work, in local shops and restaurants since they identify the wearer as a member of GOSH staff and this may compromise their safety and negatively impact on public perception of staff (in addition to the wearing of uniform outside Trust buildings being prohibited for reasons of public perception in regard to infection control – see section 4.2).

6.9. Clothing

6.9.1. The role that an individual member of staff is performing either regularly or on an ad hoc basis should inform the appropriacy of their clothing. For example, female staff who are involved in lifting & handling tasks should consider wearing trousers (see section 5.2).

6.9.2. Clothes that are clean and tidy are widely accepted as being important for a professional image, so torn or ripped clothes, even those fashion items that have been deliberately ripped, would not comply with this image and must not be worn.

6.9.3. Whilst many items of clothing might have discreet logos, larger logos or lettering can appear overly casual. Obviously, any form of wording, lettering or image that might be offensive to any individual or group would not be acceptable, and must not be worn. In the workplace slogans or advertising appearing on clothing should be managed with care.

6.9.4. Similarly, staff should be aware of issues of modesty with regard to how much of their bodies they expose. Very short skirts or shorts, low cut or low buttoned tops, clothes that show the midriff and transparent fabric can compromise the professional image that a member of staff is trying to achieve and, rightly or wrongly, can be distracting or even perceived as challenging or offensive by some cultures. For these reasons, they should not be worn.

6.9.5. For many people denim is a fabric that is used in 'casual wear'. Jeans and clothes made from denim need to be used with caution, and faded or "distressed" denim is likely to compromise a professional image or cause concern about infections and should not be worn. (Jeans for Gene's Day see section 6.13.1)

6.10. Footwear

6.10.1. The role that an individual member of staff is performing either regularly or on an ad hoc basis should inform the appropriacy of their footwear. For example, staff who are involved in lifting and handling tasks must wear shoes that are covered at heel and toe and have a low heel, in order to minimise the risk of accidents.

6.10.2. The line between trainers and "sensible" shoes is increasingly blurred, but multi-coloured trainers or those that are clearly intended as sportswear compromise a professional image and should not be worn.

6.11. Jewellery

6.11.1. Necklaces can cause a hazard if they get caught in machinery (e.g. a photocopier or shredder). They can also be used to grab an individual in a violent situation or by accident.

6.11.2. Large amounts of jewellery or very dramatic jewellery can compromise a professional image

6.12. Piercings and Tattoos

6.12.1. Staff should be extremely mindful of the impression given by piercings and tattoos. Tattoos should be covered wherever possible and any tattoo which may cause offence must be kept covered at all times. Where a potentially offensive tattoo is visible under the bare below the elbows rule, advice should be sought from a senior manager/HR.

6.12.2. For specific regulations on the wearing of earrings, please see section 6.11.2, which applies to all staff; and section 7.6.4 for additional rules for clinical staff. Other piercings must be discrete, minimal, and conform to rules relating to health and safety and infection control, i.e. small discrete facial piercings (e.g. nose, tongue, eyebrow etc) are permitted but these must consist of a small, plain stud, not a hoop.

6.13. “Dress down” or “Casual days”

6.13.1. The Trust and individual departments periodically hold “dress down” days (e.g. Jeans for Genes), which must be agreed in advance with line managers. The usual standards of professional dress are relaxed on these occasions, but staff need to consider the roles they are undertaking on these days and ensure that they are dressed appropriately e.g. staff involved in formal or public-facing meetings may need to maintain a more formal mode of dress.

6.14. Resolving Concerns

6.14.1. Where concerns over dress or appearance arise, it is important that local managers attempt to resolve these sensitively but equally feel able to raise their concerns with the relevant member of staff.

6.14.2. Where disparity between what is considered appropriate dress or appearance occurs and cannot be resolved locally, more senior manager should be involved along with other agencies such as the Human Resources Department.

6.14.3. Consideration of appropriateness of dress should include:

- Health and safety issues
- Infection prevention and control issues
- Security issues
- Professional presentation
- Religious belief

6.14.4. Managers at local level are entitled to set reasonable local rules about dress and appearance which their staff must follow. In general, and following guidance set out by Department of Health, managers should be able to explain their decision using the criteria set out in 6.14.3.

6.14.5. Some parts of this policy provide guidance and the Trust expects reasonable interpretation of these guidelines by staff and managers.

6.14.6. In other instances, this procedure sets out rules which must be followed. These are generally characterised by the use of the words “must” or “must not”.

6.14.7. Any queries as to what part of the policy constitutes a rule and what is intended as guidance should be referred in the first instance to the line manager, and if required to the HR Department.

6.14.8. Staff who fail to follow the rules set out in this procedure, or who are asked to revise their dress or appearance on reasonable grounds and who refuse to do so may be subject to disciplinary action under the Trust's Disciplinary Procedure. This is a measure of last resort and will only be taken when the situation cannot be resolved by other means.

7. Clinical Staff (i.e. staff with direct patient contact)

NB: These staff must also comply with the relevant paragraphs in Section 6.

7.1. Because of the environment in which clinical staff work, health and safety, infection prevention and control and moving and handling issues are very high priorities. There are therefore requirements in addition to those set out in Section 4 that are designed to protect staff, their colleagues, patients, families and visitors. Other requirements are to ensure a certain level of consistency in appearance that presents a professional image and allows easy recognition of clinical staff.

7.2. **ALL nursing staff and play staff** will be expected to wear clinical uniforms when in direct contact with patients to deliver clinical care in both in-patient and outpatient settings. There is currently one exception to this, in the Department of Child and Adolescent Mental Health, including Mildred Creak unit, in which staff may undertake direct clinical care when not wearing uniform in recognition of the clinical needs of the patients. All nursing staff, whether in uniform or not, must comply with the relevant paragraphs in Section 6.

ALL Medical staff, Allied Health Professional staff (that is Speech and Language Therapists, Occupational Therapists, Physiotherapists and for the purposes of this document also Dietetics staff) who have a consultation with a patient, whether in or out-patients, must follow the "bare below the elbow" rule. This means short sleeves, no jewellery, other than a plain wedding band, no wrist watches and no devices like activity tracker bracelets. AHP staff who are at arm's length from a patient while assessing and treating them, are not required to wear uniform. If an assessment or treatment requires handling a patient in any setting (including ward, gym or clinic), including lifting and holding the patient or sitting on a bed or plinth with them, a uniform/protective gown or apron should be worn.

7.3. Footwear

7.3.1. For health and safety reasons shoes should be covered both at the heel and toe and have low heels. Shoes should be soft soled to reduce noise within the clinical areas (DH 2010). To protect the feet from sharps injuries/spillages, shoes must be made of leather or other suitably robust and impervious material. Canvas is not acceptable.

7.3.2. For health and safety and infection prevention and control reasons, clogs may be worn in the theatre area only, and when transferring children to and from wards/theatre/recovery.

7.4. Shirts / blouses / tops

7.4.1. Short sleeved shirts / blouses or tops should be worn by all clinical staff to facilitate hand hygiene (Cuffs become heavily contaminated and are more likely to come into contact with patients; DH 2007).

7.5. Ties

7.5.1. Neck ties must either not be worn or tucked in when performing any care activity which involves patient contact. (Ties are rarely laundered but worn daily. They perform no beneficial function in patient care and have been shown to be colonised by pathogens, DH 2007).

7.6. Jewellery

For infection prevention and control and health and safety reasons:

- 7.6.1. Wristwatches, devices such as activity tracker bracelets and bracelets must not be worn in clinical areas since they prevent effective hand hygiene. Fob watches may be worn.
- 7.6.2. The wearing of rings is known to be associated with higher numbers of bacteria on the hands and can affect the effectiveness of hand hygiene techniques. This effect is pronounced if stoned or multiple rings are worn. The wearing of a plain wedding ring without stones is considered acceptable, but staff should be encouraged to manipulate rings during hand washing to ensure the skin under the ring is cleaned (RCN, 2013). (See GOSH clinical guideline 'Hand Hygiene').
- 7.6.3. Small discrete facial piercings (e.g. nose, tongue, eyebrow etc) are permitted but these must consist of a small, plain stud, not a hoop.
- 7.6.4. Earrings must be restricted to small plain studs, since hoops or other styles could catch and cause injury.
- 7.6.5. Necklaces are not permitted since these could catch and cause injury.

7.7. Hair

For health and safety and infection prevention and control reasons:

- 7.7.1. Hair must be clean and tidy and long hair should be tied back from the face and not able to fall into the patient during care.
- 7.7.2. Beards and moustaches should be kept trimmed and clean.

7.8. Nails

For health and safety and infection prevention and control:

- 7.8.1. Nail varnish must not be worn
- 7.8.2. Acrylic nails/nail extensions are not permitted
- 7.8.3. Nails should be kept short and neat

8. Staff wearing uniform (including Theatre Scrubs)

NB: These staff must also comply with the relevant paragraphs in Sections 6 and 7.

- 8.1. The requirements for staff who wear a uniform do not allow the same discretion as for staff who wear everyday dress for the following reasons:
 - 8.1.1. Members of staff particularly in clinical areas should be easily recognisable by other staff, patients, families and visitors.
 - 8.1.2. The type or grade of staff member needs to be evident from their appearance.
 - 8.1.3. Patients and families will very often deal predominantly with staff who wear uniform, and a consistent and professional approach in appearance is likely to help engender a sense of confidence in the organisation as a whole.

8.2. Wearing of Uniforms outside the Trust

Staff must not wear identifiable uniform (including theatre scrubs) outside Trust premises. Complaints have been received from families who are concerned that wearing clinical uniform outside the hospital premises is highly detrimental to infection control.

In order to publically demonstrate that we meet the highest possible standards in infection prevention and control, clinical uniform may only be worn within the hospital buildings.

Staff may travel between hospital buildings in a clinical uniform (but not theatre scrubs), if on work related duties, providing they **COMPLETELY COVER** their uniform tunic/top so that they cannot be identified. Hospital buildings include Russell Square House, Barclay House, Royal London Hospital for Integrated Medicine (RLHIM), Weston House, No 40 Bernard Street.

Theatre scrubs may **only** be worn within the main hospital building (see section below).

Clinical uniform, including scrubs, must not be worn outside the Trust in other circumstances: for example, on public transport, on the journey to and from work (unless travelling directly between GOSH-owned residences in the immediate environment); in or to shops, cafes, restaurants, banks or other non-GOSH premises. Staff must change out of clinical uniform in these circumstances.

8.3. Theatre Scrubs

Theatre scrubs must **not** be worn outside main site hospital buildings. Scrubs can be worn inside the main building when travelling directly between, specific designated areas (e.g. theatre / investigation suites and the anaesthetic department). Scrubs must not be worn at times when staff are not engaged in clinical activity or when they are not moving between sessions of clinical activity, for example, they must **not** be worn in non-clinical meetings, but they **can** be worn when moving between a clinical activity in Theatres and a ward area.

The Trust accepts that pressure of time means that staff cannot always change before going to the Lagoon for meal breaks. However, public perception is that theatre attire is worn in a sterile environment and seeing it outside this setting causes concern to our children and families about infection control practices in the Trust and staff are therefore asked to be mindful of this and if it is reasonable to change out of scrubs before going to the Lagoon they should do so.

Hats and face masks must **not** be worn outside the theatre environment in any circumstance.

8.4. Washing uniforms /clothes work in clinical areas

8.4.1. Uniforms / clothes worn in clinical areas may routinely be exposed to contamination by micro-organisms, as well as body fluids. It is essential that any risk of infection to patients, the wearer, other staff or visitors is kept to a minimum by regular laundering of the uniform/clothes. A clean uniform /clothes should be worn for each shift.

8.4.2. For routine laundering of staff uniforms, Infection Prevention and Control have issued a procedure for laundering uniforms at home, guidance below and documented in Appendix 3 of this Policy.

The following conditions for laundering are recommended to minimise the risk of cross-contamination:

- Uniforms should be segregated and washed separately from other personal clothing to prevent cross-contamination with pathogens.
- Laundry detergent must be used when laundering uniforms. Use a laundry detergent suited to your skin type.

- Uniforms should be machine laundered at a minimum temperature of 60°C.
- Tumble dry at 40°C or more for a minimum of 20 minutes (where possible).
- Adherence to the above will ensure the risk of cross-contamination from uniforms is kept to a minimum.

8.4.3. If clothing, including uniform, becomes contaminated with blood or body fluids during a shift, staff may obtain a set of scrubs from Theatres for the remainder of the shift.

8.4.4. Contaminated uniforms must be treated in the same way as contaminated linen. The recommended place for laundering heavily soiled uniforms is the hospital's laundry service, where uniforms are washed at over 80 C. The purpose of laundering at this temperature is to achieve thermal disinfection which kills the contaminants that may be on the uniform.

8.5. Trousers

All clinical staff in uniform are required to wear trousers (or shorts) to:

8.5.1. Protect staff: The wearing of trousers promotes mobility (RCN 1999) (unrestricted movement at the hip) and facilitates correct and safe posture when lifting an object from floor level.

8.5.2. Protect patients: 'Most infants, regardless of their physical ability, spend much of their waking time on the floor' (RCN/NBPA p.200), e.g. playing, and therefore facilitating staff to safely lift from the floor is also important to ensure the safety of infants.

8.5.3. Preserve modesty of staff particularly when playing or lifting at floor level ('bending or reaching should be able to be undertaken without compromising the dignity of the nurse or patient' RCN 1999).

N.B Where it has been agreed that staff will wear dresses for religious or other reasons, they should be particularly mindful of moving and handling issues and should seek appropriate advice from the moving and handling co-ordinator.

8.6. Cardigans / Jumpers

Within the main hospital site outside the clinical area, the uniform may be worn with a navy blue sweatshirt or plain jumper or a plain navy blue v-neck cardigan. . At night these can be worn within the clinical area, but these **must** be removed if undertaking direct patient care.

8.7. Footwear

Shoes must be plain and very dark coloured (e.g. black, dark blue). To protect the feet from sharps injuries/spillages, shoes must be made of leather or other suitably robust and impervious material. Canvas is not acceptable.

8.8. Socks or Tights / Stockings

Where these are visible (e.g. for staff wearing shorts or dresses/skirts) they should be black, dark blue, flesh-coloured or white.

8.9. Uniforms in hot weather

In exceptionally hot weather, (HSE guidance suggests this applies to temperatures above 30c (86f)) nursing staff within some ward areas are permitted to wear scrub tops. This move must be approved by the Chief Nurse (or her deputy/ CSPs out of hours). The ward must obtain

scrubs from the linen room. When the weather cools, staff must revert back to their usual uniform.

8.10. Uniform Procurement

8.10.1. The Trust has agreed exact specification for all clinical staff relating to the role, and banding (see 7.1 above) The Facilities department (with Linen Room support) raises all uniform orders to specification from the Trust nominated suppliers (Stock Management Policy).

8.10.2 The Facilities department will provide appropriate uniform for all clinical staff.

8.10.3 To action a uniform order the authorised manager should email the Linen room Supervisor with the name, department, and job title of the staff member. The member of staff will be requested to visit the Linen room for sizing

8.10.4 There are agreed service level agreements for the lead times for all new uniform procurement; this will be advised at time of order.

8.10.5. All uniforms supplied remain the property of the Trust and must be returned when leaving Trust employment. For further details regarding uniform procedures please see Procedures Policy for Issue & Return of Clinical Uniform.

9. Religious beliefs and uniform

9.1. The Trust is sensitive to the needs of individual and groups of staff with particular religious beliefs which may be at variance with the standard Trust uniform. The Trust has and will continue to work with representatives of faith groups in order to seek pragmatic and supportive solutions in these cases. For example, in conjunction with the Trust's Chaplaincy team the Trust facilitated a specific request from a female Christian nurse who wished to wear a dress rather than trousers and tunic. The overriding principles in these cases will be:

9.1.1. Ensuring good health and safety, infection prevention and control and security practices for the individuals concerned their colleagues, patients, families and other visitors to the Trust.

9.1.2. Ensuring the individual concerned is still immediately recognisable as a member of staff of the appropriate staff group and grade, and that their professional standing is in no way compromised by their dress or appearance.

9.1.3. Individual exceptions to the Uniform & Dress Code Policy must be negotiated and agreed with the appropriate Line Manager, with HR support, during the recruitment process.

9.2. Female Muslim Nurses who have specific dress requirements for religious reasons

9.2.1. A non-standard uniform for female Muslim nursing staff who wish to wear it has been developed in conjunction with faith representatives and staff themselves. It is consistent with the advice from Muslim Spiritual Care Provision in the NHS as it appears in the Department of Health Guidance on Uniform and Workwear policies for NHS employees, March 2010. Guidance around this uniform is included in this policy since it is currently worn by a very small number of staff and the Trust wishes to promote good understanding about its use. Any similar exception to the more standard uniform will be included in future revisions of this policy.

9.2.2. Female Muslim staff who are unable to wear the standard Trust uniform will be issued with a longer-length tunic style top, with full-length sleeves to the wrist which have popper fasteners at the cuff and upper arm to hold up the sleeve when performing hand washing. In common with all other clinical staff and for infection prevention and control reasons, staff wearing these uniforms **must roll up their sleeves and be bare below the elbows:**

- At all times when in any clinical area
- When entering a bed space or patient's room
- When having clinical contact with a patient (including outpatients)

These tunics must be worn over the standard Trust navy blue trousers.

9.2.3. Headscarves must be plain blue or black, be tucked firmly into the neck of the uniform tunic and secured without the use of open ended pins. As the uniforms, they should be laundered daily.

9.2.4. When observing in theatre female Muslim staff will be provided with a long sterile surgeon's gown to wear over the theatre scrub uniform in order to ensure full covering of the torso and upper legs. Headscarves are not permitted for infection prevention and control reasons, but the staff member will be offered the choice of wearing two theatre hats or a surgeon's balaclava hat to cover the face and neck.

9.2.5. All other elements of the Trust's uniform policy apply.

10. Staff with Disabilities

10.1. The Trust will work on an individual basis with staff who have a disability which has an impact on their ability to wear the standard uniform or affects their ability to comply with other provisions of the policy. Guidance from Occupational Health and other agencies as appropriate will be sought to seek pragmatic and supportive solutions in those areas. The overriding principles in these cases will be:

10.1.1. Ensuring good health and safety, infection prevention and control and security practices for the individuals concerned, their colleagues, patients, families and other visitors to the Trust.

10.1.2. Ensuring the individual concerned is still immediately recognisable as a member of staff of the appropriate staff group and grade, and that their professional standing is in no way compromised by their dress or appearance.

11. Process for implementation

11.1. The policy will be notified as updated in the GOSH Newsletter.

12. Monitoring arrangements

12.1. The duties of this policy will be reviewed on a three yearly basis as part of the policy review process.

12.2. The findings will be shared with managers as appropriate and used to make recommendations to improve the content and operation of the policy.

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangement	Acting on Recommendation	Change in practice and lessons to be learnt
Issues related to dress or appearance that are raised by staff	Assistant Director of OD	Direct contact and via H&S, Infection Control,	Annually	Assistant Director of OD	Incidents will be managed within the appropriate policy/procedure with any change in	

or managers		HR, Security			policy outside normal review process subject to PAG scrutiny.	
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13. Equality impact statement

13.1. See Appendix A.

14. Training

14.1. All Managers, supervisors and staff can seek assistance from their HR Lead for any guidance in this policy. No formal training has been identified.

15. References

1. RCN 1999 Working well initiative: taking a uniform approach.
2. Health & Safety Executive 1999 Manual Handling
3. RCN / National Back Pain Association 1999 The guide to the handling of patients.
4. DH 2010 – Uniforms and work wear, guidance on uniform and work wear policies for NHS employers
5. DH 2007 – Hand washing
6. RCN 2013 – ‘Wipe it out’ Guidance on uniforms and work wear

16. Appendices

16.1. This should include:

- 16.1.2. Policy Approval Group cover sheet – Appendix 1
- 16.1.3. Equality analysis form – Appendix 2
- 16.1.4. Laundering Staff Uniforms – Appendix 3

Appendix 1: Policy Approval Group Cover Sheet

Policy Approval Group	
February 2013	
Uniform & Dress Code Policy and Guidance	Attachment No:
Submitted on behalf of:	Ratified by:
Submitted on behalf of:	
Date:	
<p>Summary A very significant number of amendments, mainly in order to reduce repetition, mean all the changes cannot be shown via track changes. Changes to content are: Inclusion of advice on laundering uniforms Statement that lanyards should not be worn in clinical areas Statement that all nursing staff (except those in DCAMHS) should wear uniform when delivering clinical care Statements that uniform (including scrubs) must not be worn outside Trust clinical buildings Rules on "Bare below the elbows"</p>	
<p>Contribution to the delivery of NHS / Trust strategies and plans Controlling infection</p>	
<p>Financial implications None</p>	
<p>Legal issues None</p>	
<p>What consultation has taken place? A wide variety of individual consultation has taken place with this policy e.g. security, facilities, Deputy Director of Nursing, Infection Control, Asst. Director of Nursing and Director of Nursing via email. Final consultation will take place at the Policy Approval Group.</p>	
<p>Who needs to be told about the policy? All managers and staff, and people who are working at GOSH eg students, Bank and Agency staff, contractors, volunteers</p>	
<p>Who is accountable for the monitoring of the policy? Policy Approval Group</p>	
<p>Author and date Helen Cooke 28th February 2013</p>	

Appendix 2: Equality Analysis Form

TITLE OF DOCUMENT

Uniform & Dress Code Policy

COMPLETED BY

Helen Cooke, Head of Workforce Planning and Development

DATE COMPLETED

February 2013

SUMMARY OF STAKEHOLDER FEEDBACK

All stakeholder feedback has been incorporated into this policy.

POTENTIAL EQUALITY IMPACTS AND ISSUES IDENTIFIED

Protected group	Potential issues identified	Actions to mitigate/Opportunities to promote
Age	None	
Disability (including learning disability)	See section 10 of this policy.	See section 10 of this policy.
Gender re-assignment	Gender-specific uniforms	All staff who wear uniforms can wear trousers and uniforms are very largely non-gender specific. Any case will be dealt with in conjunction with the individual and following the principles set out in Section 5.
Marriage or civil partnership	None	
Pregnancy and maternity	Specific requirements for pregnant women	Availability of uniforms suitable for pregnant women
Race	None	
Religion or belief	See Section 9 of this policy.	See Section 9 of this policy.
Sex	None	
Sexual orientation	None	

Appendix 3 Laundering staff uniforms



Laundering Staff
Uniforms 2017.pdf