

Brighton and Sussex University Hospitals

Dress Code Policy

Version:	1.1
Category and number:	HR025
Approved by:	Hospital Management Board
Date approved:	May 2015
Name of author:	Caroline Davies, Deputy Chief Nurse
Name of responsible committee/individual:	Clinical Management Board
Date issued:	July 2018
Review date:	October 2019
Target audience:	All Trust staff
Accessibility	This document is available in electronic format only

Contents

Section		Page
1	General statement of purpose	3
2	Scope and application	3
3	Principles	4
4	Identification	4
5	General presentation and appearance	4
6	Clothing	6
7	Uniform specifics	7
8	Scrubs as uniform	8
9	Staff working in Operating Theatre Departments	8
10	Wearing of uniforms and scrubs “off site”	10
11	Supply, cleaning and storage	10
12	Responsibilities	11
13	Tax Relief	11
14	Equality and Diversity	11
Appendices		
Appendix A	Definitions	12
Appendix B	Referencing	13
Appendix C	Due regard	14

1. General statement of purpose

- 1.1 We are committed to providing the best and safest care and ensuring our patients, their carers and the wider public trust and have confidence in us. It is imperative that the professional image of all employees of Brighton and Sussex University Hospitals reflects this and lives up to the expectations of the public. The general public associate the wearing of uniform and a smart professional appearance as being related to the prevention of infection (RCN 2013). The way we dress can impact on the image we present to the people who use our services and their confidence in us.
- 1.2 We are committed to reducing the number of avoidable infections in our hospitals and this policy has been designed to maximise good infection control practice. Furthermore, the general public associates the wearing of uniform and a smart professional appearance as being related to the prevention of infection (RCN 2013). The wearing of Personal Protective Equipment (PPE) will be as per clinical policies.
- 1.3 The professional image presented by staff is an important component in the way the professions are perceived by colleagues, patients and the public. When in uniform staff must behave in a professional manner to maintain public confidence. Activities such as smoking and drinking alcohol whilst in uniform in public (e.g. in the surrounding areas near the hospital, public houses or clubs) or within the hospital grounds are not acceptable.

2. Scope and application

The Policy applies to all staff working in BSUH who wear a uniform (including scrubs) and/or do not wear a designated uniform, as the same standards of professionalism apply whether working within a clinical area or outside clinical settings.

For the purpose of the policy a clinical area is defined as any area within the hospitals where patients receive treatment and care. This includes for example, (but is not exhaustive), wards, outpatients, diagnostic areas and theatres.

This policy also relates to students from all professional groups. Practice placement providers and universities must include a sufficient number of uniforms, provided at no cost to the nursing student, to ensure a clean uniform is available for each clinical duty.

Locum staff, bank and agency must comply with this uniform policy while working at BSUH.

It is expected that everyone will use common sense in applying the policy and in doing so will fully comply with the purpose and principles outlined below.

3. Principles

3.1 Uniforms and clothing must be smart, safe and practical. They should:

- Project a professional image to encourage public trust and confidence Minimise infection risks and withstand decontamination
- Contribute to staff identification by patients and the public
- Allow freedom of movement and comfort Reflect the type of work being undertaken.

4. Identification

4.1 A visible photo identity name badge should be worn with photo and personal details displayed at all times. For staff in direct patient contact the clip-on style must be worn to reduce the risk of contamination. For staff working in clinical areas it is also good practice to wear a name badge, as it is distinct from a photo ID badge, on a top pocket which clearly outlines the staff member's name.

Other staff not involved in direct patient contact may wear the "snap release" neck chain or ribbon. Any chain or ribbon must be non-offensive and non-promotional.

4.2 No more than two professional badges may be worn on the uniform to reflect membership of a trade union or qualification gained. Paediatric staff may wear an additional name badge suitable for the age group being cared for.

5. General presentation and appearance

5.1 Staff should look clean and tidy and have good standards of personal hygiene. Uniforms and clothes should be free from obvious dirt and stains. Staff working in clinical areas should be 'bare below the elbows' (i.e. no watch, jewellery, false nails or nail varnish). Staff working in clinical areas must be able to decontaminate hands and wrists unhindered, up to the mid forearm.

5.2 Hair

Hair should be clean, neat and tidy. Extreme hair colours are not acceptable. Long hair should be tied back when working in a clinical setting and not require frequent re-adjustment. For staff in direct contact with patients, hair that falls below the collar should be secured away from the face. If staff have long hair this must be secured so that a pony tail does not hang down the back or below the collar. Facial hair must be kept short, neatly trimmed or tidily secured. Hair fastenings must be discrete and black, brown or navy.

5.3 **Make-up**

Should be discreet.

5.4 **Tattoos**

If at all possible tattoos should not be visible. If the staff member does already have visible tattoos of which may cause offense, this needs to be discussed with their line manager and a decision made as to whether or not the staff member is able to work in clinical areas.

5.5 **Nails**

Nails must be clean and well-manicured. For clinical staff nails must be short and unvarnished. False nails must not be worn as they support fungal growth.

5.6 **Jewellery**

To ensure a professional image is maintained by all **clinical** staff the following should be adhered to:

- No rings except plain wedding band
- No wristwatches or bracelets (except medical alert bracelets) No visible neck chains
- No visible ankle chains
- No more than one pair of plain, discreet ear studs. It is not permitted for staff to wear spikes, rings or bars
- No more than one visible body piercing, other than for religious or cultural reasons.

For staff working in non-clinical areas, it is imperative that a professional image is maintained.

5.7 **Footwear**

For staff in uniform footwear must enclose the whole foot and have non-slip, soft soles, low heels, provide good support and must be smart and clean. Footwear must be leather, plastic and wipe able. Trainers are permitted but must be without decoration and wipeable. Footwear must be black (for the nursing teams) or a colour appropriate to the profession (for Health Professionals). Clogs / Crocs / Uggs / Plimsolls **must not** be worn.

Footwear for staff who do not wear uniform but who work in clinical areas should:

- Be clean and in good repair.
- Enclose the whole foot and be plain to facilitate cleaning. Open toe shoes or sandals are not permitted in clinical or non-clinical areas where heavy objects are moved around (e.g Porters, catering staff or medical records), as they provide no protection from injury.
- Provide good support, have a non-slip soft sole and have a

Policy in relation to dress code and uniforms and clothing worn in the delivery of patient care

- heel no higher than 2.5cm.
- If trainers are worn they should be plain and wipe able.

For staff who do not work in clinical areas footwear should:

- Be clean and in good repair.
- For clerical staff or those who do not have access to laboratory or clinical setting open toed shoes or sandals with straps are permitted. Flip-flops or other 'beach-style' footwear is not allowed.

5.8 **Hosiery/Socks**

Must be worn when wearing uniform dresses. It must be plain and black or flesh coloured. Stockings should not be visible whether in uniform or in own clothes.

5.9 **Veils**

In the context of clinical areas where staff are delivering care it is recognised that patients must have access to direct face to face contact and therefore it is not allowed for staff to wear veils. Head scarves can be worn for religious reasons, as long as the healthcare professionals face is visible and the scarf of an appropriate colour. Any permitted scarves must be tucked into uniform with no 'tail'.

6. **Clothing**

6.1 Staff must consider the patient/client group they work with when dressing to promote patient safety, professional image and promote public confidence. The Trust respects the right of staff to adhere to religious and cultural observances or adaptations necessary.

- Dresses/skirts should be of a 'reasonable' length (e.g. no mini or micro skirts).
- Tops/shirts or blouses must not be transparent, low cut or show a bare midriff. 'Vest style' or 'strap tops' are not permitted.
- Shirts/tops or blouses should be smart, short-sleeved or worn with the sleeves rolled up to facilitate effective hand hygiene. Shirts should be worn tucked in.
- Polo shirts are permitted to be worn by some health professions groups only as part of their uniform.
- T-shirts and clothing with visible slogans are not permitted.
- Ties can be worn in clinical areas however, they must be restrained and other loose items of clothing (e.g. scarves and wraps) should not be worn in clinical areas as they can easily become contaminated.
- White coats should not be worn unless it is lab wear or part of personal protective equipment (e.g. dental tunics) as they do not provide adequate protection from contaminants and do not facilitate effective hand hygiene
- Jackets are not to be worn in clinical areas to ensure effective

hand hygiene.

- Trousers should be tailored and smart. Jeans, ski pants, leggings, jeggings or combat style trousers are not permitted; neither are low-waist or unduly flared trousers. Track suit bottoms will only be worn by specific health professionals as part of an approved local departmental policy.
- Smart and professional shorts may be worn in summer months only (May to September) e.g. no patch pockets and knee length. Swimming shorts are not acceptable.
- Maternity wear. The same general principles stated above apply. Scrubs may only be worn by authorised staff groups. For infection prevention and control and to promote public confidence they **must not** be worn outside the hospital premises or in hospital restaurants and refreshment areas.
- Personal protective clothing should be worn as provided to ensure compliance with Health and Safety Regulations and infection prevention and control policies. This includes all staff adopting Standard Precautions and the single use of gloves and plastic aprons, where indicated for use.

7. Uniform specifics

- 7.1 Uniforms must be clean, neatly pressed and washed daily. They must fit appropriately and meet with health and safety requirements with respect to lifting and handling.
- 7.2 Cardigans and fleeces may be worn outside the clinical area but must be navy or black (for nursing teams) or appropriate to the colour of their uniform (for Health Professionals e.g. burgundy for radiographers) without motifs, except those of the department/professional college or trade union. They must not be worn in the clinical area or whilst giving direct patient care.
- 7.3 All uniform trousers must be smart and professional. They should be navy blue or black, unless there is a nationally recognised colour associated with a specific profession e.g. green for Occupational Therapists. The trouser style should not present a risk to the wearer or their delivery of patient care – e.g. they should not be flared, have superfluous pockets, flaps or decoration. Jeans are not acceptable. Smart and professional shorts may be worn during periods of extreme heat – this will be communicated via Trust Headquarters who will confirm timeframes and review for any heatwave plan.
- 7.4 The wearing of uniform belts and buckles is optional but if worn should not restrict movement or have sharp edges that could scratch patients. When delivering direct patient care the belt should be removed. The belt colour must be black or navy blue.
- 7.5 Nurse specialists and Nurse Consultants should wear uniforms when undertaking their role within clinical areas.
- 7.6 To help patients and visitors identify different nursing staff and other health

Policy in relation to dress code and uniforms and clothing worn in the delivery of patient care

professionals the colour of uniforms have been standardised and are set out in appendix A.

- 7.7 During pregnancy nurses will be provided with smocks of the same colour as their standard uniform. Other staff must seek the advice of their professional lead. It is the directorate leads responsibility to ensure appropriate uniform is worn.
- 7.8 For staff who may be unable to wear 'standard' uniform, consideration will be made to ensure it is suitable, fits well and enables the staff member to work unhindered.

8. 'Scrubs' as uniform

There are many departments now using scrubs as a uniform and as with all uniforms these must be clean, neatly pressed and fit appropriately. The following table outlines the staff groups permitted to wear scrubs and the colour coded system.

Department	Colour of scrubs permitted
SSD	Blue
ITU	Blue for nursing / Green for medical staff
A&E	Blue for nursing / Green for medical staff / red for A&E consultants
Maternity	Blue
Neonatal Units	Blue
Endoscopy	Blue
Plaster Technicians	Blue
Neonatal	Blue
Grant Ward	Grey
Fluoroscopy departments	Blue
Operating theatre departments	Raspberry

Scrubs are only permitted to be worn in these departments. They are not a uniform for medical staff to wear when on duty, at night or when on call.

9. Staff working in Operating Theatre Departments

- 9.1 Raspberry is the designated scrubs colour for all operating theatre departments. Access will not be granted to staff in any other colour scrub.
- 9.2 Theatre scrubs **must not be worn** outside the theatre departments except for theatre staff (medical, nursing, health professionals and support workers) on theatre related business e.g. escort duties or clinicians who are participating in an operating theatre session who need to review patients on the ward. Members of the theatre team must not

leave the department with a mask around their neck to protect public confidence.

- 9.3 Theatre scrubs **must not be worn** in hospital restaurants / canteens / coffee shops. Any member of staff wishing to leave the theatre department for breaks must change into their own clothes to do so.
- 9.4 Unless there are exceptional circumstances, theatre scrubs will not be provided to non theatre staff on an ad hoc basis due to soiling. It is staff member's responsibility to ensure they have a spare uniform with them. Medical staff cannot use theatre scrubs for their work on the wards for day or night shifts.
- 9.5 Theatre scrubs should not be worn with long-sleeved tee-shirts unless for religious reasons when a $\frac{3}{4}$ -length sleeve is acceptable.
- 9.6 Only blue, black or white theatre style clogs / shoes may be worn in theatre departments. These must be clean and in good repair. Clogs / shoes must enclose the whole foot and not have any holes on the upper part (e.g. Crocs), in order to prevent injury. Suede or leather shoes are not permitted as they cannot be effectively cleaned of contaminants. It is the responsibility of each member of the theatre team to ensure their shoes are clean.
- 9.7 Theatre-style clogs may be worn outside of the theatre area if on official departmental duties. They must always be free of any visible contaminate e.g. blood or iodine solution as these are an infection risk and can raise anxiety in patients and the public.
- 9.8 Each theatre department supplies clean disposable headwear for medical, nursing, health professionals, visitors and support staff, which confines all hair, and completely covers the ears, scalp skin, sideburns and nape of the neck (AORN 2017). Staff are not permitted to wear their own cloth scarves or bandannas as headwear. Staff who wear headwear for religious reasons, must ensure this is changed daily when their work commitments include being in theatres.
 - 9.8.1 Disposable headwear is preferable, however cloth hats are permissible if laundered and regularly inspected for holes and imperfections. The individual must ensure that their hat is changed each shift, and immediately changed when soiled with blood or body fluids. If individual theatre personnel choose to wear fabric hats, the individual is responsible for transporting their worn hats home and washing them, following guidance in section 11.3 of this policy.
 - 9.8.2 Staff may choose to have their hats embroidered with their name and role, to help us identify each other when gowned; this is shown to improve communication. Fabric hats displaying name and role are the preferred type of fabric hats for theatre staff (Patient Safety Network 2018, Kantsedikas and Jawad 2018).

10. Wearing of uniforms and scrubs “offsite”

- 10.1 The wearing of uniforms and scrubs in inappropriate situations or settings is unprofessional, and diminishes public confidence.
- 10.2 Staff **must not** travel to and from work in uniform for reasons of personal safety, and public confidence.
- 10.3 Staff must not smoke off site in an identifiable uniform.
- 10.4 If it is unavoidable to either travel to work to travel between sites in uniform, staff must ensure their uniform is completely covered by outerwear no matter what the weather. This includes walking to work, using public transport, travelling in a car, bicycles and motor cycles.

11. Supply, cleaning and storage

- 11.1 Line managers should provide all their staff, with a standard uniform to be used in a clinical setting. Full time staff will be issued with five pieces of uniform in total e.g. three tunics/dresses and two pairs of trousers, or a combination of these which will be discussed and agreed with the line manager.
 - Student Nurses and Health Professionals are provided with uniforms by their educational body
 - Assistant Practitioners and Technical Instructors will be provided with appropriate uniforms to the same standard as registered health professionals
 - Assessment of quality and need for replacement uniforms will be discussed between the staff member and their line manager
 - When a member of staff leaves the organisation their uniforms should be returned to their line manager.
- 11.2 Staff must wear clean and freshly laundered uniforms / scrubs each day and ensure they have a clean uniform / set of scrubs available in case they need to change as scrubs will not be provided if the uniform is soiled.
- 11.3 The Trust does not currently provide laundry facilities. Uniforms and scrubs should be washed separately from other items, on a hotter wash, dried and ironed.
- 11.4 Where changing facilities are provided staff should change into uniform or scrubs at the start of their shift and out of uniform or scrubs at the end of each shift (see Wearing of uniforms “offsite” – Section 10).
- 11.5 It is the responsibility of every staff member to comply with this policy and it is the responsibility of line managers to ensure this policy is adhered to. Failure to comply with this policy will be treated as a conduct issue.

12. Responsibilities

- 12.1 Delegated authority for this policy is from the Trust Board and lies with the Trust Council.
- 12.2 The local manager/ward or department manager is responsible for ensuring staff are aware of this Policy and adhere to it.
- 12.3 Everyone has the responsibility and authority to challenge, in an appropriate manner, colleagues who do not adhere to this policy.
- 12.4 Disregard for this policy will be treated as a conduct issue. The process will be a verbal warning for first transgression, a written warning for a second and if the individual still fails to comply, disciplinary action will be taken.

13. Tax relief

- 13.1 As the Trust does not provide laundry facilities, uniformed staff can claim tax relief for laundry costs where they have to pay for laundering their uniform or clothing worn in the delivery of patient care.
- 13.2 Further information, along with the appropriate form, can be obtained from a trade union representative or the local Inland Revenue office. The following link may also be helpful. <http://www.hmrc.gov.uk/manuals/eimanual/eim32485.htm>

14. Equality and Diversity

- 14.1 The Trust recognises the diversity of cultures, religions, disabilities and beliefs of its employees and would always expect managers to adopt a sensitive approach, exercising discretion, when this affects dress and uniform requirements. However, priority will be given to health and safety, security and infection prevention and control considerations.

Brighton and Sussex University Hospitals NHS Trust (BSUH) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and advances equal opportunities for all. The document has been assessed to ensure that no one receives less favorable treatment on the protected characteristics of their age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, or sexual orientation.

In carrying out its functions, BSUH must have due regard to the different needs of different protected equality groups in their area. This applies to all the activities for which BSUH is responsible, including policy development, review and implementation.

14.2 Advice can be sought from the Head of Equality, Diversity and Human Rights.

For example, with respect to the Islamic faith, staff may roll their sleeves only four inches back from the wrist as that 'rule of necessity' (they need to be able to wash hands thoroughly) takes precedent over the 'rule of law' (Islam). This has been agreed with our local Imam.

Appendix A:

Uniform colours by staff group

Rol	Colour of Uniform
Healthcare Assistant	Grey
Assistant Practitioner (nursing) Pre-registration Staff Nurse	Teal
Student Nurse	White
Staff Nurse	Light Blue
Senior Staff Nurse / Deputy Sister	Navy Blue
Sister / Ward Manger	Navy Blue with white piping and red Epaulets
Nurse Specialist / Senior Nurse	Navy Blue
Nurse Consultant	Navy Blue
Matron	Purple
Head of Nursing	Deep Purple with white piping
Chief Nurse / Deputy Chief Nurse	Deep Purple with whit piping
Occupational Therapy	White tunic with green trim and green Trousers
Physiotherapy	White polo shirt with physiotherapy logo or white tunic with navy trim & navy trousers
Radiography: diagnostic & therapeutic	White tunic/dress with burgundy trim & black trousers
Radiographic Assistant	Burgundy tunic/dress with white trim & black trousers
Cardiac physiologists	White tunic/dress with red trim & black trousers
Nuclear medicine technologists	White dress/tunic with green trim &black trousers
Neurophysiologists	Polo shirt with HWP logo & dark blue/black trousers
Health professional: students	Will vary according to training
Medical Staff	Own clothes
Chef	Chef Whites
Food Services Assistant and Food Supervisor	Polo shirt Charcoal Grey with Lime GreenFlashes with BSUH logo, Navy
Grounds Team	Polo shirt Charcoal Grey with Orange Flashes with BSUH logo, Navy Trousers.
Helpdesk Operative	Polo shirt Charcoal Grey BSUH logo Navy Trousers
House Keeping Managers and Duty managers	Tunic Peacock Trim / Pilot shirt with Peacock epaulettes for occasional wear Navy Trousers
Supervisors and Zone managers Housekeeping	Tunic Peacock Trim with epaulettes Navy Trousers
Housekeeping Assistants	Tunic Peacock Trim Navy Trousers

Policy in relation to dress code and uniforms and clothing worn in the delivery of patient care

Patient Catering Assistants	Tunic with Smoke Berry epaulettes Navy Trousers
Porter	Tunic with Seville Orange Trim Navy
Duty Manager Portering	Tunic Seville Orange Trim/Pilot shirt with trousers
Environmental Porters	Seville Orange epaulettes for occasional wear Navy Trousers Polo shirt Charcoal Grey with Orange
Drivers / Porters	Flashes with BSUH logo Navy Trousers Polo shirt Charcoal Grey with Orange
Management Team	Flashes with BSUH logo Navy Trousers Specialty tunic when with epaulettes when working with team, white shirt with epaulettes, on smart clothes on occasion
Receptionists	Black Suit white blouse and Burgundy neck tie
Retail Catering Assistants	Black short sleeve shirt, Burgundy apron black trousers
Stores distribution / Kitchen Stores Operative	Polo shirt lime green flashes with BSUH logo, Navy trousers

Appendix B:

Referencing

- | | |
|---------------------------------|--|
| Department of Health (2007) | Uniforms and Workwear: An evidence base for developing local policy |
| George, C et al (2006) | Healthcare associated infections: a guide for healthcare professionals BMA Science and Education Department and the Board of Science, British Medical Association. London. February 2006 |
| Match, O (2005) | Presenting a professional image
University of Hertfordshire, London |
| RCN 2013 | Wipe It Out – One chance to get it right. Guidance on uniforms and workwear
RCN London |
| Royal College of Nursing (2005) | Guidance on uniforms and clothing worn in the delivery of patient care RCN, London. |

Appendix C:

Due Regard Assessment Tool

		Yes/No	Comments
1.	Does the document/guidance affect one group less or more favourably than another on the basis of:		
	• Age	No	Ref 14.1
	• Disability	No	Ref 14.1
	• Gender	No	Ref 14.1
	• Gender identity	No	Ref 14.1
	• Marriage and civil partnership	No	Ref 14.1
	• Pregnancy and maternity	No	Ref 6.1
	• Race	No	Ref 14.1
	• Religion or belief	No	Ref 5.9, 6.1, 14.1
	• Sexual orientation, including lesbian, gay and bisexual people	No	Ref 14.1
2.	Is there any evidence that some groups are affected differently and what is/are the evidence source(s)?	No	
3.	If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the document/guidance likely to be negative?	No	
5.	If so, can the impact be avoided?	No	
6.	What alternative is there to achieving the document/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action and, if not, what, if any, are the reasons why the policy should continue in its current form?	N/A	
8.	Has the policy/guidance been assessed in terms of Human Rights to ensure service users, carers and staff are treated in line with the FREDA principles (fairness, respect, equality, dignity and autonomy)	Yes	