

Trust Headquarters
Russell's Hall Hospital
Dudley
West Midlands
DY1 2HQ

Ref: FOI-082024-0001032

Date: 21/08/2024

Address / Email:

Dear

Request Under Freedom of Information Act 2000

Thank you for requesting information under the Freedom of Information Act 2000.

Request

- Full copy of your most recent staff uniform/ dress code policy.
- If there is a separate uniform policy for surgical theatres, please can you send this by email too.

Response

Please find attached policies as per your request, please note our Uniform and Workwear Policy is currently under consultation.

If you are dissatisfied with our response, you have the right to appeal in line with guidance from the Information Commissioner. In the first instance you may contact the Information Governance Manager of the Trust.

Information Governance Manager
Trust Headquarters
Russell's Hall Hospital
Dudley
West Midlands
DY1 2HQ
Email: dgft.dpo@nhs.net

Should you disagree with the contents of our response to your appeal, you have the right to appeal to the Information Commissioners Office at.

Information Commissioners Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF
Tel: 0303 123 1113
www.ico.org.uk

If you require further clarification, please do not hesitate to contact us.

Yours sincerely

**Freedom of Information Team
The Dudley Group NHS Foundation Trust**

THEATRES UNIFORM STANDARD OPERATING PROCEDURE	DOCUMENT TITLE:	THEATRES UNIFORM STANDARD OPERATING PROCEDURE	
	Name of Originator/Author /Designation & Specialty:	[REDACTED] – Theatre Manager	
	Local / Trust wide	Local	
	Statement of Intent:	Provide staff, medical and nursing, with clarity in regard to the standards expected in theatre uniform	
	Target Audience:	Medical staff (Consultant surgeons and anaesthetist, and all appropriate junior medical staff), Nursing staff (Day case & Inpatient theatres, arrivals lounge)	
	Version:	3	
	Name of Group and Date when Recommended for Ratification	This was virtually reviewed and approved for ratification by all relevant groups	Date: 02 November 2021
	Name of Division and Date of Final Ratification:	Surgery Women and Children: GAME	Date: 10 December 2021
	Review Date:	31 st December 2024	
	Contributors: <i>Individuals involved in developing the document.</i>	Designation: Designation: [REDACTED] Clinical Director Theatres, Anaesthetics, Critical Care and Pain [REDACTED] – Infection Control Team [REDACTED] – Chaplaincy	
The electronic version of this document is the definitive version			

CHANGE HISTORY

Version	Date	Reason
V1.0	February 2016	This is a new document.
V2.0	March 2018	Review and amendments in practice.
V3.0	November 2021	Review and amendments in practice.

A translation service is available for this document. The Interpretation/Translation Policy, Guidance for Staff is located on the intranet under Trust-wide Policies.

THE DUDLEY GROUP NHS FOUNDATION TRUST

THEATRE UNIFORM STANDARD OPERATING PROCEDURE

1 STANDARD OPERATING PROCEDURE SUMMARY

This standard of practice sets out the Trusts expectations in relation to the wearing of scrub uniforms in the clinical and non-clinical areas.

This standard is necessary in order to:

- Support infection prevention and control and minimise the potential spread of healthcare associated infections.
- To minimise health and safety risks.
- Conveys a professional image of the Trust and the individual.
- To inspire patients, public and colleague confidence.

This guideline should be read in conjunction with the Trusts wide:
[Uniform And Work Wear Policy](#)

2 STANDARD OPERATING PROCEDURE DETAIL

2.1 Uniform standard

2.1.1 The department standard uniform for all theatres at The Dudley Group NHS FT is blue scrub suit with a colour coded theatre hat system to indicate categories of staff. The uniform described in this document may also be adopted by Critical Care staff given the close working between the two clinical areas.

- Colour Coded Hat System:
- Blue – Medical Staff
- Green – All Theatre Staff
- Yellow – All visitors including students, visiting medical staff, company representatives

If the colour coded hats are not available, staff may wear their own material theatre hat as long as it is worn only for the one shift and then washed at 60 degrees. Hats **MUST NOT** be shared between staff.

All Team Leaders and Specialty Managers will be in dark blue scrubs to indicate their designation within the theatre complex.

2.1.2 Theatre hats must be worn at all times when involved in direct patient care within the operating department. - this will include within operating theatres, anaesthetic rooms and recovery areas.

2.1.3 Theatre shoes must be worn at all times by staff wearing scrub suits when in the operating department. They must be non-slip with a closed toe and are provided by the individual practitioner. Theatre shoes must be kept free of soiling and regularly cleaned.

2.1.4 No jewellery, with the exception of a plain wedding band and stud earrings, should be worn as to do so could compromise patient safety. One discreet facial piercing is able to be worn but not in conjunction with stud earrings. All other facial and dermal piercings must be covered up at all times. Any jewellery worn specifically for Religious purposes must be agreed with their line manager.

2.1.5 Appropriate facemasks specific to procedures must be worn i.e., if performing an AGP (Aerosol Generating Procedure), an FFP3 masks or Respirators must be worn; this should be one that has been face fit tested to the individual. Eye protection must also be worn when performing AGP's.

2.1.6 Face masks must be removed when leaving the operating theatre and replaced with a new FRSM (Fluid Resistant Surgical Mask). The exception to this is if collecting a known Covid infected, intubated or patient on high flow oxygen, from ITU/HDU, then an appropriate face fit tested FFP3 mask should be worn. (Staff needing to wear respirators ideally should not be sent).

2.1.7 All Staff ID badges should be on retractable pocket clips- lanyards are only acceptable if they are black or with a Trust logo with a safety clasp. All lanyards must be tucked in during all periods of direct patient care to prevent a risk of transmitting infection.

2.1.8 All staff must display an appropriate name badge. A maximum of three badges denoting professional qualifications or memberships are acceptable but they must not be worn in an area that could cause a safety hazard to patients and other staff members.

2.1.9 If staff are visiting other clinical areas, they are not required to remove hats or wear a cover up jacket. This includes, for example, wards, outpatient clinics and administrative areas where staff would not expect to interact with members of the public. However, it is essential that these staff ensure that their shoes are clean. **Theatre wellies or blood-spattered shoes should not be worn out of the department and should be cleaned as soon as possible when surgery is finished.**

2.1.10 If visiting public areas such as the reception areas, hospital canteen, South Block and library, staff should ensure hats are removed and cover up jackets are worn. These

should be removed and, if disposable, discarded in bins provided. Coverings should not be worn in the theatre and hats should be replaced on return to the Theatres Department.

2.1.11 If staff are unsure whether, when leaving theatres, they may attend a public area (as listed above) they should cover their scrubs and remove hats to ensure compliance with point 2.1.10 above.

2.1.12 Staff attired in theatre scrubs are not permitted to enter or exit the hospital grounds.

2.1.13 If attending a clinical emergency staff must attend to the needs of the patient prior to adhering to the standard operating procedure. Once it is safe to do so staff must then make a full change of scrub attire.

2.1.14 If soiling occurs, including bodily fluids or prep splatter, on any part of the scrub attire this should be changed/removed at the next available opportunity.

2.1.15 Staff who work in the Recovery area and Arrivals Lounge will wear theatre scrubs with the appropriate theatre hat.

2.2 Leaving the department during breaks

2.2.1 Staff leaving the department to purchase food from the hospital restaurant must remove theatre hat and cover blue theatre scrub suit with a cover up jacket, they should also change out of theatre shoes.

2.2.2 Staff eating in the hospital restaurant or leaving the hospital building must change completely into their own clothes.

2.2.3 Staff leaving the department to smoke must change completely into own clothes – covering scrub suits with own clothes is not permitted.

Note: staff not complying with this will be subject to disciplinary procedure.

2.3 Dress code and religious beliefs

2.3.1 In order to balance the rights of individuals against the interests of safety and infection control guidelines, the following will apply.

2.3.2 Individuals observing operations and other aseptic procedures will be allowed to wear headscarves as long as the scarf is clean that day and is covered by an orthopaedic hood.

2.3.3 Individuals observing operations and other aseptic procedures must wear standard theatre blue scrub suits and appropriate hat. Any individual assisting in or performing an operation should remove their headscarf and wear either a theatre hat, orthopaedic hood or disposable Hijab (please ask the Theatre Manager for a supply) or if they wish, they may wear their own material hat/Hijab; this must be changed and washed at 60 degrees

after every shift. If wearing their own material Hijab, it must be for theatre use only and must not be so large that it hangs over the sterile gown when scrubbed.

2.3.4 Individuals assisting at operations and other aseptic procedures must wear a

2.3.5 Short-sleeved (above elbow) blue scrub top to perform the scrub procedure and a sterile long-sleeved gown.

2.3.6 Individuals with beards must wear beard covers when assisting during surgery.

3. DEFINITIONS/ABBREVIATIONS

None

4. TRAINING/SUPPORT

A knowledge and understanding of this process will form part of the induction competencies of all staff working in theatres.

5. REFERENCES

None

Appendix 1

Standard Operating Procedure

Equipment (IF APPLICABLE)

Record any equipment required for the procedure in the chart below

STANDARD OPERATING PROCEDURE DETAIL	
TITLE	
STEPS	
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UNIFORM & WORK WEAR POLICY	DOCUMENT TITLE:	UNIFORM & WORK WEAR POLICY
	Name of Originator/Author /Designation & Specialty:	██████████ - Infection Prevention and Control Team ██████████ – Deputy Chief Nurse
	Director Lead:	Chief Nurse
	Target Audience:	This policy applies to all staff (clinical and non-clinical i.e. ward clerks, receptionists, Clinical Coding, Physiotherapists / Occupational Therapists, Doctors, Nurses and Midwives). This includes temporary bank and students employed within the Trust.
	Version:	7.0
	Date of Final Ratification:	November 2019
	Name of Ratifying Committee:	Clinical Quality Safety and Patient Experience
	Review Date:	30/11/2022
	Registration Requirements Outcome Number(s) (CQC)	Safe Well Led
	Relevant Documents /Legislation/Standards	Health & Social Care Act 2015
	Contributors:	Chief Nurse Deputy Chief Nurse Surgical Consultant Lead Nurse Emergency Assessment Unit Ward Clerk Emergency Assessment Unit Infection Prevention and Control team. Head of Facilities and Property Management Health and Safety Lead
	The electronic version of this document is the definitive version	

CHANGE HISTORY

Version	Date	Reason
1.0	August 2008	Updated from previous policy and reviewed.
2.0	Jan 2009	Updated from previous policy and reviewed.
3.0	April 2013	Updated from previous policy and reviewed. Format reflects Trust format
4.0	March 2014	Updated from previous policy and reviewed. Updates throughout the document
5.0	March 2017	Full review
6.0	Sept 2017	Full review
6.1	October 2019	Minor amendments
7	November 2019	Full Review

A translation service is available for this document. The Interpretation/Translation Policy, Guidance for Staff is located on the intranet under Trust-wide Policies.

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THE DUDLEY GROUP NHS FOUNDATION TRUST

UNIFORM AND WORKWEAR POLICY

1. INTRODUCTION

This policy sets out the Trust's expectations in relation to the corporate dress code and the wearing of uniforms in both clinical and non-clinical areas.

This policy is necessary in order to:

- Ensure a professional image of the Trust and the individual inspiring patient and public confidence
- Support infection prevention and control and minimise the potential spread of healthcare associated infections
- To support the specific requirements of the Health & Social Care Act 2015¹
- To minimise health and safety risks arising from wearing inappropriate clothing or footwear

2. STATEMENT OF INTENT

The legal context

Legislation affecting uniforms and workwear has two main areas of focus:

- A primary concern with health and safety, along with the requirement to prevent the spread of infections; and
- Employment equality for staff in terms of age, disability, gender, sexual orientation, race and ethnicity, religion or belief, human rights.

This policy defines acceptable and unacceptable standards of dress and appearance.

The Trust has taken into account, in the review and development of this policy, the diversity of cultures, religions, disabilities and beliefs of its employees and will take a sensitive approach when this affects uniform and dress requirements. Some members of staff will require a more individual approach to their workwear, for example, pregnant women, staff who have a physical disability and those individuals whose cultural and religious practices need to be respected.

The expectation is that this policy can be adhered to in the majority if not all situations. However, priority **will** be given to health and safety, infection control and security considerations.

Any variation from this policy must be addressed through a documented risk assessment carried out by the individuals line manager and supported by the relevant expertise e.g. Occupational Health, Infection Prevention and Control

¹ Section 9.3 x. Uniform and workwear policies ensure that clothing worn by staff when carrying out their duties are clean and fit for purpose. Particular consideration should be given to items of attire that may inadvertently come into contact with the person being cared for. Uniform and dress code policies should specifically support good hand hygiene.

and Health and Safety. Any decision will be made based on the risk assessment and must be agreed by a Director in the organisation.

All employees are supplied with a Trust identity security badge with a photo ID. This must be worn and visible at all times when on duty or acting in an official capacity representing the Trust.

3. DEFINITIONS/ABBREVIATIONS

Uniform is distinctive clothing, provided by the Trust and worn by members of the same organisation or body/group of staff to identify them, i.e. Physiotherapists, Occupational Therapists, Nurses and Midwives.

Workwear is clothing worn at work but not provided by the Trust (person's own clothes).

4. DUTIES AND RESPONSIBILITIES

All Trust employees must maintain the reputation of the organisation and their relevant professional body.

Failure to comply with the policy can lead to disciplinary action in line with the Trusts disciplinary policy.

4.1 Chief Executive.

The Chief Executive, supported by the Trust Board, is responsible for ensuring that there are agreed standards for uniforms and workwear and that the agreed policy is adhered to by all staff.

4.2 The Director of Infection Prevention and Control (DIPC).

The DIPC is the Trust's lead for Infection Prevention and Control (IP&C) and:

- Oversees local infection control policies, including the uniform and workwear policy, and their implementation
- Reports directly to the Chief Executive (not through any other officer) and the Board of Directors

4.3 Infection Prevention and Control team (IP&CT).

Have a responsibility for:

- Ensuring that this policy is updated in respect of infection prevention and control guidance by the review date or earlier if clinical evidence/guidance or new legislation dictates.
- Provide training and support to the ward/departmental areas in the implementation of this policy and provide additional training in response to audit results relating to infection prevention and control.

4.4 Medical Heads of Service/ Divisional Chief Nurses/Head of Midwifery/Matrons/Senior Managers.

Have a responsibility within their area:

- To implement the policy effectively within their areas of responsibility
- To monitor the application of the infection prevention and control policies within their areas of responsibility in respect of uniform and workwear outlined in this policy.

- To ensure that any incidents concerning infection prevention and control issues are reported in line with the [Incident Reporting policy](#)
- To ensure new employees receive local induction as identified in the [Staff Induction Policy](#) ensuring that uniform and workwear expectations and compliance to this policy are clearly outlined.

4.5 Line Managers/Clinical Leads/Lead Nurses/Lead Midwives.

Have a responsibility within their area for:

- Implementing the policy effectively within their areas of responsibility
- Monitoring the application of Infection Control practices within the ward/department
- Ensuring any adverse incidents concerning infection prevention and control issues are reported in line with the [Incident Reporting policy](#)
- Ensuring new employees attend corporate Trust induction, as identified in the [Staff Induction Policy](#)
- Ensure all staff comply with the standards outlined in this policy

4.6 Trust Employees.

Have a responsibility for:

- Ensuring that in wearing their uniform they uphold the values and reputation of the Trust and demonstrate professionalism at all times.
- Ensure that they wear appropriate footwear that meets infection control and health and safety requirements as outlined in this policy
- Ensuring that they maintain an acceptable level of personal hygiene.
- Reporting any incidents concerning non adherence to this policy in line with the Incident reporting policy.

5 PATIENT SAFETY

The clothes that staff wear should facilitate good practice and minimise any risk to patients. Uniforms and workwear should not impede effective hand hygiene, and should not unintentionally come into contact with patients during direct patient care activity. Nothing must be worn that could compromise patient or staff safety/confidence during care, for example false/long/varnished nails, bracelets, watches, necklaces, earrings (other than simple studs) necklaces and rings (other than a plain ring, such as a wedding ring).

6 PUBLIC CONFIDENCE.

Patients and the wider public should have complete confidence in the cleanliness and hygiene of their healthcare environment. The way staff dress is an important influence on the public's overall perceptions of the standards of care they experience. Uniforms and workwear should be clean at all times, and professional in appearance.

It is expected that staff are only seen in uniform within the hospital or in the community setting when delivering care.

The Trust supports this good practice and expects that hospital based staff change into their uniform at work. **The wearing of uniforms to and from**

work is not permitted. Staff who wear a uniform must not be seen in external public places wearing uniform or clinical scrubs. This includes the wearing of clinical scrubs by theatre staff.

Staff accessing external public places during breaks only, must ensure that their uniforms are fully covered. If this is not possible staff must change out of their uniform.

For staff working in the community, the Trust expects staff to cover their uniform when accessing external public places outside of their work commitments.

Patients and visitors also benefit from knowing who is in the care team. Uniforms, security passes and name badges can help with this identification so must be worn at all times.

7 GOOD PRACTICE – EVIDENCE-BASED

All staff must comply with the following examples of good practice. Failure to comply with the policy can lead to disciplinary action in line with the Trust's [Disciplinary Policy](#).

Good practice	Why
Wear short-sleeved tops or long sleeves rolled up during patient care activity or potentially having patient contact All staff must be bare below the elbows (see Appendix 1 for examples).	Cuffs at the wrist become heavily contaminated and could come into contact with patients.
Change immediately if uniform or clothing becomes visibly soiled or contaminated.	Visible soiling may present an infection risk and will be disconcerting for patients.
Hospital staff must change into and out of uniform at work. Staff in the community cover uniforms when accessing external public places.	Although there is no evidence of an infection risk from travelling in uniform, or accessing external public places, the general public may be concerned that this is the case.
Wear clear identifiers including magnetic identification badge and security pass, which must not be worn with a lanyard when delivering direct clinical care.	Patients like to know the names and roles of staff who are caring for them.
Taking uniforms home to wash. Wash uniforms and clothing worn at work at the hottest temperature suitable for the fabric, tumble dry and iron (on a hot temperature) before putting into a clean bag. If no tumble drier is available then rapid drying before ironing. On the rare occasion that uniforms become heavily contaminated with blood or bodily fluids the Trust will provide the staff with a soluble bag and instructions on how to wash them safely at home.	Hospital laundries have to comply with Regulations CFFP 01-04 Decontamination of linen for health and social care A wash for 10 minutes at 60°C removes almost all micro-organisms. Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms.

These are examples of good practice; they simply serve the three objectives of patient safety, public confidence and staff comfort and we expect staff to follow them.

Good practice	Why?
All clinical staff in patient areas (outside of theatres) wear soft-soled shoes, closed over the foot, heel and toes, not trainers or CROCS™.	Closed shoes offer protection from spills and dropped objects. Open shoes risk injury or contamination for staff. Soft soles reduce noise in wards.
Clinical staff in uniform when wearing hosiery must ensure that this is appropriate e.g. plain socks with trousers, plain tights/stockings with dresses.	Presents a professional appearance
Put on a clean uniform at the start of every shift. Ensure uniform fits well and looks smart	Presents a professional appearance.
Hair must be neat and off the face and shoulders; this includes ponytails which should be tied up out of the way and not draped over the shoulders. Beards / moustaches should be neatly trimmed	A professional appearance reassures patients and public that they will be treated in a professional and competent manner.

8 POOR PRACTICE

The Trust will not allow the following:

Poor practice	Why?
Wearing unrestrained neckties/lanyards (eg not tucked in, or no tie clip) during direct patient care activity (See Appendix 2).	Unrestrained ties and lanyards may come into contact with patient wounds etc. posing a contamination risk
Carry pens, scissors or other sharp or hard objects in outside breast pockets when having direct clinical contact.	They may cause injury or discomfort to patients during care activity. They should be carried inside clothing or in hip pockets.
Staff carrying out clinical care for patients Wearing jewellery while on duty other than a smooth ring or plain stud earrings.	Necklaces, long or hoop earrings, rings and wrist watches are possible hazards for patients and staff. Conspicuous jewellery can be a distraction and at odds with presenting a professional image.
Wear numerous badges, with the exception of name badges which are compulsory.	A maximum of three badges denoting professional qualifications or memberships are acceptable. Any more looks unprofessional and may present a safety hazard.
Wear prominent facial piercings (a single discreet (2mm x 2mm max) facial stud is permissible however not in addition to a single ear stud) or have tattoos that are deemed offensive. Staff with stretched earlobes should wear flesh coloured closed ear stretchers whilst at	The issue here is patient attitude and confidence in their care team. For many, particularly older patients, facial piercings and tattoos can be unsettling and distracting. However, tattoos on the forearms and hands must be left uncovered for hand hygiene during direct

Poor practice	Why?
work.	patient care activity. Having tattoos that are visible when bare below the elbow and that are offensive to others (eg homophobic or racist) is not compatible with continued employment at Trust.
Dress untidily and in an unprofessional manner. This includes: <ul style="list-style-type: none"> • Wearing jeans of any colour • Wearing hoodies in the clinical area • Wearing sportswear in the clinical area • Wearing trainers 	Patients and visitors may equate untidy appearance with low professional competence and poor hygiene standards. In addition this may affect patient attitude and confidence in their care team

9. SCRUB WEAR

The wearing of scrubs is limited to theatre and areas that have had approval for scrub wear i.e. ED, Sonography.

The wearing of blues scrubs in areas other than theatres is not permitted.

10. NON-UNIFORMED STAFF

Clinical and non-clinical staff not required to wear a uniform must adhere to professional workwear standards at all times. This includes:

- Not wearing jeans of any kind
- Wearing skirts or dresses that do not exceed 10 cms above the knee
- Not wearing maxi dresses that trail across the floor causing a possible trip hazard
- Not wearing tops/blouses that expose cleavage to an extent that may cause embarrassment or offence.
- Not wearing garments that have the potential to expose underwear
- Footwear should be of an appropriate heel height (not exceeding 8 cms). The wearing of trainers and flip-flops is not permitted.

11. REQUESTING CHANGES TO UNIFORMS

In order to keep uniforms in line with corporate requirements, any changes to existing uniforms must first be agreed via the Trusts Uniform Group. To enable this, Appendix 3 should be completed and sent to the chair of the uniform group for review and approval. If approval is given then appendix 3 should be signed by the chair of the uniform group and forwarded to the Trusts PFI variation in box (██████████). On receipt, the Trusts Facilities and Property Management Team will raise a service variation via the PFI contract for official costing to be provided. All costs for changes in uniforms have to be funded by the requesting ward or department”

12. TRAINING/SUPPORT

Infection prevention and control training is mandatory for all staff on a three yearly basis following Trust induction. Both Trust induction and mandatory refresher sessions contains information regarding uniform and workwear.

All staff are given a local induction which should include their responsibilities on wearing uniform or workwear.

Additionally in response to monthly audits carried out by the IP&CT within the clinical areas the IP&CT will facilitate sessions where additional support/education is required.

13. PROCESS FOR MONITORING COMPLIANCE

	Lead	Tool	Frequency	Reporting arrangements	Action on Recommendations & Lead(s)	Change in Practice and Lessons to be shared
All staff are required to adhere to the uniform and workwear policy and procedures of the Trust	Managers/ Matrons	Matrons audit tool	Monthly	Local reporting via ward meetings	Managers/matrons for the clinical areas	Ward meetings Huddle board meetings

14. EQUALITY

The Dudley Group NHS Foundation Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.

15. REFERENCES

Health and Safety at Work etc. Act 1974. Chapter 37.
<http://www.legislation.gov.uk/ukpga/1974/37/contents> [accessed 25/09/2017]

The Control of Substances Hazardous to Health Regulations 2002.
http://www.legislation.gov.uk/uksi/2002/2677/pdfs/uksi_20022677_en.pdf [accessed 25/09/2107]

Health and Safety Executive (HSE) Healthcare
www.hse.gov.uk/biosafety/healthcare.htm [accessed 25/09/2017]

The Management of Health and Safety at Work Regulations 1999.
<http://www.legislation.gov.uk/uksi/1999/3242/contents/made> [accessed 25/09/2017]

Health and Safety Commission (2000) Securing Health Together: A long-term occupational health strategy for England, Scotland and Wales. London: Health and Safety Executive.

Health and Social Care Act 2008 Chapter 14

http://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga_20080014_en.pdf

[accessed 25/09/2017]

Department of Health (2015) [The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance.](#)

[accessed 25/09/2017]

Direct patient care activity

The detail of how staff are dressed is most important during patient care activity involving direct contact with patients and their close environment. This includes activity in the following settings:

On the ward

- In the patient area.
- In any activity that involves patient contact.
- It is acceptable to not be Bare below the elbow (BBE) to enter a ward to talk to staff members, where there is absolutely no potential for patient contact; it is not acceptable to perform any patient contact unless staff are BBE.

In out-patient clinics

Any activity that involves patient contact, for example:

- examining patients;
- wound care; and
- collecting samples for testing

In treatment and minor surgical procedure rooms

At all times when patients are being treated

In clinical areas with specific dress requirements

- In operating theatres.
- In intensive/critical care units.
- A&E departments.

Hand hygiene during direct patient care activity requires washing/disinfection*


- before patient contact;
- before aseptic tasks;
- after risk of body fluid exposure;
- after patient contact; and
- after contact with a patient's surroundings

*Based on the *My 5 moments for Hand Hygiene*, www.who.int/gpsc/5may/background/5moments/en/index.html © World Health Organization 2009. All rights reserved.

Appendix 2

Summary of Trust Uniform and Workwear Policy	Rationale
<p>Uniform and Dress</p> <p>The Trust policy complies with the 'Bare Below the Elbows' campaign</p> <ul style="list-style-type: none"> • Sleeves must be short and above the elbow when performing direct patient care activities • Cardigans where worn must be black or navy and removed when carrying out any direct patient care activities. • Hoodies are not allowed. • Socks should be of a discreet colour preferably navy or black • Tights or stockings should be plain (it is acceptable for legs to be uncovered) • Ensure epaulettes, where appropriate are worn • Unrestrained ties are not permitted 	<ul style="list-style-type: none"> • DOH directive (implicit within the Health & Social Care 2015) • To inspire patient and public confidence • To minimise the potential of infection risk • To minimise health and safety risk to employees
<p>Hair</p> <ul style="list-style-type: none"> • Hair must be clean, neat and off the face and shoulders. This includes ponytails which should be tied up out of the way. • Any fastenings must be discreet without adornment • Head coverings should be black or white • Beards / moustaches should be neatly trimmed 	<ul style="list-style-type: none"> • Potential for wound contamination from loose hair • To promote a professional appearance • To inspire patient and public confidence
<p>Jewellery</p> <ul style="list-style-type: none"> • Stoned rings must not be worn when undertaking direct patient care activities • Wristwatches must not be worn when undertaking direct patient care activities • Necklaces and/or bangles should not be worn in the clinical area • Piercings – earring studs must be discreet; as must be other visible body piercings 	<ul style="list-style-type: none"> • To minimise the potential of infection risk • To comply with effective hand hygiene practices • To minimise health and safety risk to staff • To promote a professional appearance • To inspire patient and public confidence
<p>Badges</p> <ul style="list-style-type: none"> • Identity badges must be worn at all times with the name and photograph visible • Professional badges should be kept to a minimum • Lanyards may be worn if black / Trust and must have a safety clasp 	<ul style="list-style-type: none"> • To inspire patient and public confidence • To comply with Trust security policies and procedures

<p>Footwear</p> <ul style="list-style-type: none"> • Footwear must be clean and not worn outside of the work environment (clinical staff only) • Shoes worn in the clinical area should have a closed toe and heel • Shoes worn with uniform must be black/blue, non-fabric/canvas and non-patent • Trainers are not permitted • Theatre footwear must be health and safety approved 	<ul style="list-style-type: none"> • To prevent risk of contamination from spillages etc • To promote a professional appearance
<p>Tattoos</p> <ul style="list-style-type: none"> • Tattoos need not be covered. However if tattoos are offensive then this would be individually considered and dealt with via the disciplinary policy. 	<ul style="list-style-type: none"> • To inspire patient and public confidence
<p>Nails</p> <ul style="list-style-type: none"> • Staff within the clinical area should ensure that nails are kept short, clean and without nail varnish. False nails are not permitted for staff working in clinical areas 	<ul style="list-style-type: none"> • To avoid transferring bacteria under fingernails • To reduce the risk of trauma when involved in direct patient contact

 The Dudley Group NHS Foundation Trust		
UNIFORM CHANGE REQUEST FORM		
Ward/Department		
Date		
Ward/Department Lead		
Current uniform description		
Requested uniform description		
Reason for request		
Signature (Ward/Department Lead)		
Office use only		
Approved	Yes	No
Date		
Signature (Chair of the uniform group)		

If approved copy to be sent to the Trusts PFI variation in box



THEATRES UNIFORM STANDARD OPERATING PROCEDURE	DOCUMENT TITLE:		THEATRES UNIFORM STANDARD OPERATING PROCEDURE	
	Name of Originator/Author /Designation & Specialty:		██████████ – Theatre Manager	
	Local / Trust wide		Local	
	Statement of Intent:		Provide staff, medical and nursing, with clarity in regard to the standards expected in theatre uniform	
	Target Audience:		Medical staff (Consultant surgeons and anaesthetist, and all appropriate junior medical staff), Nursing staff (Day case & Inpatient theatres, arrivals lounge)	
	Version:		3	
	Name of Group and Date when Recommended for Ratification		This was virtually reviewed and approved for ratification by all relevant groups	Date: 02 November 2021
	Name of Division and Date of Final Ratification:		Surgery Women and Children: GAME	Date: 10 December 2021
	Review Date:		31 st December 2024	
	Contributors: <i>Individuals involved in developing the document.</i>		Designation: Designation: ██████████ Clinical Director Theatres, Anaesthetics, Critical Care and Pain ██████████ – Infection Control Team ██████████ – Chaplaincy	
The electronic version of this document is the definitive version				

CHANGE HISTORY

Version	Date	Reason
V1.0	February 2016	This is a new document.
V2.0	March 2018	Review and amendments in practice.
V3.0	November 2021	Review and amendments in practice.

A translation service is available for this document. The Interpretation/Translation Policy, Guidance for Staff is located on the intranet under Trust-wide Policies.

THE DUDLEY GROUP NHS FOUNDATION TRUST

THEATRE UNIFORM STANDARD OPERATING PROCEDURE

1 STANDARD OPERATING PROCEDURE SUMMARY

This standard of practice sets out the Trusts expectations in relation to the wearing of scrub uniforms in the clinical and non-clinical areas.

This standard is necessary in order to:

- Support infection prevention and control and minimise the potential spread of healthcare associated infections.
- To minimise health and safety risks.
- Conveys a professional image of the Trust and the individual.
- To inspire patients, public and colleague confidence.

This guideline should be read in conjunction with the Trusts wide:
[Uniform And Work Wear Policy](#)

2 STANDARD OPERATING PROCEDURE DETAIL

2.1 Uniform standard

2.1.1 The department standard uniform for all theatres at The Dudley Group NHS FT is blue scrub suit with a colour coded theatre hat system to indicate categories of staff. The uniform described in this document may also be adopted by Critical Care staff given the close working between the two clinical areas.

- Colour Coded Hat System:
- Blue – Medical Staff
- Green – All Theatre Staff
- Yellow – All visitors including students, visiting medical staff, company representatives

If the colour coded hats are not available, staff may wear their own material theatre hat as long as it is worn only for the one shift and then washed at 60 degrees. Hats **MUST NOT** be shared between staff.

All Team Leaders and Specialty Managers will be in dark blue scrubs to indicate their designation within the theatre complex.

2.1.2 Theatre hats must be worn at all times when involved in direct patient care within the operating department. - this will include within operating theatres, anaesthetic rooms and recovery areas.

2.1.3 Theatre shoes must be worn at all times by staff wearing scrub suits when in the operating department. They must be non-slip with a closed toe and are provided by the individual practitioner. Theatre shoes must be kept free of soiling and regularly cleaned.

2.1.4 No jewellery, with the exception of a plain wedding band and stud earrings, should be worn as to do so could compromise patient safety. One discreet facial piercing is able to be worn but not in conjunction with stud earrings. All other facial and dermal piercings must be covered up at all times. Any jewellery worn specifically for Religious purposes must be agreed with their line manager.

2.1.5 Appropriate facemasks specific to procedures must be worn i.e., if performing an AGP (Aerosol Generating Procedure), an FFP3 masks or Respirators must be worn; this should be one that has been face fit tested to the individual. Eye protection must also be worn when performing AGP's.

2.1.6 Face masks must be removed when leaving the operating theatre and replaced with a new FRSM (Fluid Resistant Surgical Mask). The exception to this is if collecting a known Covid infected, intubated or patient on high flow oxygen, from ITU/HDU, then an appropriate face fit tested FFP3 mask should be worn. (Staff needing to wear respirators ideally should not be sent).

2.1.7 All Staff ID badges should be on retractable pocket clips- lanyards are only acceptable if they are black or with a Trust logo with a safety clasp. All lanyards must be tucked in during all periods of direct patient care to prevent a risk of transmitting infection.

2.1.8 All staff must display an appropriate name badge. A maximum of three badges denoting professional qualifications or memberships are acceptable but they must not be worn in an area that could cause a safety hazard to patients and other staff members.

2.1.9 If staff are visiting other clinical areas, they are not required to remove hats or wear a cover up jacket. This includes, for example, wards, outpatient clinics and administrative areas where staff would not expect to interact with members of the public. However, it is essential that these staff ensure that their shoes are clean. **Theatre wellies or blood-spattered shoes should not be worn out of the department and should be cleaned as soon as possible when surgery is finished.**

2.1.10 If visiting public areas such as the reception areas, hospital canteen, South Block and library, staff should ensure hats are removed and cover up jackets are worn. These

should be removed and, if disposable, discarded in bins provided. Coverings should not be worn in the theatre and hats should be replaced on return to the Theatres Department.

2.1.11 If staff are unsure whether, when leaving theatres, they may attend a public area (as listed above) they should cover their scrubs and remove hats to ensure compliance with point 2.1.10 above.

2.1.12 Staff attired in theatre scrubs are not permitted to enter or exit the hospital grounds.

2.1.13 If attending a clinical emergency staff must attend to the needs of the patient prior to adhering to the standard operating procedure. Once it is safe to do so staff must then make a full change of scrub attire.

2.1.14 If soiling occurs, including bodily fluids or prep splatter, on any part of the scrub attire this should be changed/removed at the next available opportunity.

2.1.15 Staff who work in the Recovery area and Arrivals Lounge will wear theatre scrubs with the appropriate theatre hat.

2.2 Leaving the department during breaks

2.2.1 Staff leaving the department to purchase food from the hospital restaurant must remove theatre hat and cover blue theatre scrub suit with a cover up jacket, they should also change out of theatre shoes.

2.2.2 Staff eating in the hospital restaurant or leaving the hospital building must change completely into their own clothes.

2.2.3 Staff leaving the department to smoke must change completely into own clothes – covering scrub suits with own clothes is not permitted.

Note: staff not complying with this will be subject to disciplinary procedure.

2.3 Dress code and religious beliefs

2.3.1 In order to balance the rights of individuals against the interests of safety and infection control guidelines, the following will apply.

2.3.2 Individuals observing operations and other aseptic procedures will be allowed to wear headscarves as long as the scarf is clean that day and is covered by an orthopaedic hood.

2.3.3 Individuals observing operations and other aseptic procedures must wear standard theatre blue scrub suits and appropriate hat. Any individual assisting in or performing an operation should remove their headscarf and wear either a theatre hat, orthopaedic hood or disposable Hijab (please ask the Theatre Manager for a supply) or if they wish, they may wear their own material hat/Hijab; this must be changed and washed at 60 degrees

after every shift. If wearing their own material Hijab, it must be for theatre use only and must not be so large that it hangs over the sterile gown when scrubbed.

2.3.4 Individuals assisting at operations and other aseptic procedures must wear a

2.3.5 Short-sleeved (above elbow) blue scrub top to perform the scrub procedure and a sterile long-sleeved gown.

2.3.6 Individuals with beards must wear beard covers when assisting during surgery.

3. DEFINITIONS/ABBREVIATIONS

None

4. TRAINING/SUPPORT

A knowledge and understanding of this process will form part of the induction competencies of all staff working in theatres.

5. REFERENCES

None

Appendix 1

Standard Operating Procedure

Equipment (IF APPLICABLE)

Record any equipment required for the procedure in the chart below

STANDARD OPERATING PROCEDURE DETAIL	
TITLE	
STEPS	
1.	
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UNIFORM & WORK WEAR POLICY	DOCUMENT TITLE:	UNIFORM & WORK WEAR POLICY
	Name of Originator/Author /Designation& Specialty:	██████████ - Infection Prevention and Control Team ██████████ – Deputy Chief Nurse
	Director Lead:	Chief Nurse
	Target Audience:	This policy applies to all staff (clinical and non-clinical i.e.ward clerks, receptionists, Clinical Coding, Physiotherapists / Occupational Therapists, Doctors, Nurses and Midwives). This includes temporary bank and students employed within the Trust.
	Version:	7.0
	Date of Final Ratification:	November 2019
	Name of Ratifying Committee:	Clinical Quality Safety and Patient Experience
	Review Date:	30/11/2022
	Registration Requirements Outcome Number(s) (CQC)	Safe Well Led
	Relevant Documents /Legislation/Standards	Health & Social Care Act 2015
	Contributors:	Chief Nurse Deputy Chief Nurse Surgical Consultant Lead Nurse Emergency Assessment Unit Ward Clerk Emergency Assessment Unit Infection Prevention and Control team. Head of Facilities and Property Management Health and Safety Lead
	The electronic version of this document is the definitive version	

CHANGE HISTORY

Version	Date	Reason
1.0	August 2008	Updated from previous policy and reviewed.
2.0	Jan 2009	Updated from previous policy and reviewed.
3.0	April 2013	Updated from previous policy and reviewed. Format reflects Trust format
4.0	March 2014	Updated from previous policy and reviewed. Updates throughout the document
5.0	March 2017	Full review
6.0	Sept 2017	Full review
6.1	October 2019	Minor amendments
7	November 2019	Full Review

A translation service is available for this document. The Interpretation/Translation Policy, Guidance for Staff is located on the intranet under Trust-wide Policies.

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4	Duties and Responsibilities	5-6
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THE DUDLEY GROUP NHS FOUNDATION TRUST

UNIFORM AND WORKWEAR POLICY

1. INTRODUCTION

This policy sets out the Trust's expectations in relation to the corporate dress code and the wearing of uniforms in both clinical and non-clinical areas.

This policy is necessary in order to:

- Ensure a professional image of the Trust and the individual inspiring patient and public confidence
- Support infection prevention and control and minimise the potential spread of healthcare associated infections
- To support the specific requirements of the Health & Social Care Act 2015¹
- To minimise health and safety risks arising from wearing inappropriate clothing or footwear

2. STATEMENT OF INTENT

The legal context

Legislation affecting uniforms and workwear has two main areas of focus:

- A primary concern with health and safety, along with the requirement to prevent the spread of infections; and
- Employment equality for staff in terms of age, disability, gender, sexual orientation, race and ethnicity, religion or belief, human rights.

This policy defines acceptable and unacceptable standards of dress and appearance.

The Trust has taken into account, in the review and development of this policy, the diversity of cultures, religions, disabilities and beliefs of its employees and will take a sensitive approach when this affects uniform and dress requirements. Some members of staff will require a more individual approach to their workwear, for example, pregnant women, staff who have a physical disability and those individuals whose cultural and religious practices need to be respected.

The expectation is that this policy can be adhered to in the majority if not all situations. However, priority **will** be given to health and safety, infection control and security considerations.

Any variation from this policy must be addressed through a documented risk assessment carried out by the individuals line manager and supported by the relevant expertise e.g. Occupational Health, Infection Prevention and Control

¹ Section 9.3 x. Uniform and workwear policies ensure that clothing worn by staff when carrying out their duties are clean and fit for purpose. Particular consideration should be given to items of attire that may inadvertently come into contact with the person being cared for. Uniform and dress code policies should specifically support good hand hygiene.

and Health and Safety. Any decision will be made based on the risk assessment and must be agreed by a Director in the organisation.

All employees are supplied with a Trust identity security badge with a photo ID. This must be worn and visible at all times when on duty or acting in an official capacity representing the Trust.

3. DEFINITIONS/ABBREVIATIONS

Uniform is distinctive clothing, provided by the Trust and worn by members of the same organisation or body/group of staff to identify them, i.e. Physiotherapists, Occupational Therapists, Nurses and Midwives.

Workwear is clothing worn at work but not provided by the Trust (person's own clothes).

4. DUTIES AND RESPONSIBILITIES

All Trust employees must maintain the reputation of the organisation and their relevant professional body.

Failure to comply with the policy can lead to disciplinary action in line with the Trusts disciplinary policy.

4.1 Chief Executive.

The Chief Executive, supported by the Trust Board, is responsible for ensuring that there are agreed standards for uniforms and workwear and that the agreed policy is adhered to by all staff.

4.2 The Director of Infection Prevention and Control (DIPC).

The DIPC is the Trust's lead for Infection Prevention and Control (IP&C) and:

- Oversees local infection control policies, including the uniform and workwear policy, and their implementation
- Reports directly to the Chief Executive (not through any other officer) and the Board of Directors

4.3 Infection Prevention and Control team (IP&CT).

Have a responsibility for:

- Ensuring that this policy is updated in respect of infection prevention and control guidance by the review date or earlier if clinical evidence/guidance or new legislation dictates.
- Provide training and support to the ward/departmental areas in the implementation of this policy and provide additional training in response to audit results relating to infection prevention and control.

4.4 Medical Heads of Service/ Divisional Chief Nurses/Head of Midwifery/Matrons/Senior Managers.

Have a responsibility within their area:

- To implement the policy effectively within their areas of responsibility
- To monitor the application of the infection prevention and control policies within their areas of responsibility in respect of uniform and workwear outlined in this policy.

- To ensure that any incidents concerning infection prevention and control issues are reported in line with the [Incident Reporting policy](#)
- To ensure new employees receive local induction as identified in the [Staff Induction Policy](#) ensuring that uniform and workwear expectations and compliance to this policy are clearly outlined.

4.5 Line Managers/Clinical Leads/Lead Nurses/Lead Midwives.

Have a responsibility within their area for:

- Implementing the policy effectively within their areas of responsibility
- Monitoring the application of Infection Control practices within the ward/department
- Ensuring any adverse incidents concerning infection prevention and control issues are reported in line with the [Incident Reporting policy](#)
- Ensuring new employees attend corporate Trust induction, as identified in the [Staff Induction Policy](#)
- Ensure all staff comply with the standards outlined in this policy

4.6 Trust Employees.

Have a responsibility for:

- Ensuring that in wearing their uniform they uphold the values and reputation of the Trust and demonstrate professionalism at all times.
- Ensure that they wear appropriate footwear that meets infection control and health and safety requirements as outlined in this policy
- Ensuring that they maintain an acceptable level of personal hygiene.
- Reporting any incidents concerning non adherence to this policy in line with the Incident reporting policy.

5 PATIENT SAFETY

The clothes that staff wear should facilitate good practice and minimise any risk to patients. Uniforms and workwear should not impede effective hand hygiene, and should not unintentionally come into contact with patients during direct patient care activity. Nothing must be worn that could compromise patient or staff safety/confidence during care, for example false/long/varnished nails, bracelets, watches, necklaces, earrings (other than simple studs) necklaces and rings (other than a plain ring, such as a wedding ring).

6 PUBLIC CONFIDENCE.

Patients and the wider public should have complete confidence in the cleanliness and hygiene of their healthcare environment. The way staff dress is an important influence on the public's overall perceptions of the standards of care they experience. Uniforms and workwear should be clean at all times, and professional in appearance.

It is expected that staff are only seen in uniform within the hospital or in the community setting when delivering care.

The Trust supports this good practice and expects that hospital based staff change into their uniform at work. **The wearing of uniforms to and from**

work is not permitted. Staff who wear a uniform must not be seen in external public places wearing uniform or clinical scrubs. This includes the wearing of clinical scrubs by theatre staff.

Staff accessing external public places during breaks only, must ensure that their uniforms are fully covered. If this is not possible staff must change out of their uniform.

For staff working in the community, the Trust expects staff to cover their uniform when accessing external public places outside of their work commitments.

Patients and visitors also benefit from knowing who is in the care team. Uniforms, security passes and name badges can help with this identification so must be worn at all times.

7 GOOD PRACTICE – EVIDENCE-BASED

All staff must comply with the following examples of good practice. Failure to comply with the policy can lead to disciplinary action in line with the Trust's [Disciplinary Policy](#).

Good practice	Why
Wear short-sleeved tops or long sleeves rolled up during patient care activity or potentially having patient contact All staff must be bare below the elbows (see Appendix 1 for examples).	Cuffs at the wrist become heavily contaminated and could come into contact with patients.
Change immediately if uniform or clothing becomes visibly soiled or contaminated.	Visible soiling may present an infection risk and will be disconcerting for patients.
Hospital staff must change into and out of uniform at work. Staff in the community cover uniforms when accessing external public places.	Although there is no evidence of an infection risk from travelling in uniform, or accessing external public places, the general public may be concerned that this is the case.
Wear clear identifiers including magnetic identification badge and security pass, which must not be worn with a lanyard when delivering direct clinical care.	Patients like to know the names and roles of staff who are caring for them.
Taking uniforms home to wash. Wash uniforms and clothing worn at work at the hottest temperature suitable for the fabric, tumble dry and iron (on a hot temperature) before putting into a clean bag. If no tumble drier is available then rapid drying before ironing. On the rare occasion that uniforms become heavily contaminated with blood or bodily fluids the Trust will provide the staff with a soluble bag and instructions on how to wash them safely at home.	Hospital laundries have to comply with Regulations CFFP 01-04 Decontamination of linen for health and social care A wash for 10 minutes at 60°C removes almost all micro-organisms. Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms.

These are examples of good practice; they simply serve the three objectives of patient safety, public confidence and staff comfort and we expect staff to follow them.

Good practice	Why?
All clinical staff in patient areas (outside of theatres) wear soft-soled shoes, closed over the foot, heel and toes, not trainers or CROCS™.	Closed shoes offer protection from spills and dropped objects. Open shoes risk injury or contamination for staff. Soft soles reduce noise in wards.
Clinical staff in uniform when wearing hosiery must ensure that this is appropriate e.g. plain socks with trousers, plain tights/stockings with dresses.	Presents a professional appearance
Put on a clean uniform at the start of every shift. Ensure uniform fits well and looks smart	Presents a professional appearance.
Hair must be neat and off the face and shoulders; this includes ponytails which should be tied up out of the way and not draped over the shoulders. Beards / moustaches should be neatly trimmed	A professional appearance reassures patients and public that they will be treated in a professional and competent manner.

8 POOR PRACTICE

The Trust will not allow the following:

Poor practice	Why?
Wearing unrestrained neckties/lanyards (eg not tucked in, or no tie clip) during direct patient care activity (See Appendix 2).	Unrestrained ties and lanyards may come into contact with patient wounds etc. posing a contamination risk
Carry pens, scissors or other sharp or hard objects in outside breast pockets when having direct clinical contact.	They may cause injury or discomfort to patients during care activity. They should be carried inside clothing or in hip pockets.
Staff carrying out clinical care for patients Wearing jewellery while on duty other than a smooth ring or plain stud earrings.	Necklaces, long or hoop earrings, rings and wrist watches are possible hazards for patients and staff. Conspicuous jewellery can be a distraction and at odds with presenting a professional image.
Wear numerous badges, with the exception of name badges which are compulsory.	A maximum of three badges denoting professional qualifications or memberships are acceptable. Any more looks unprofessional and may present a safety hazard.
Wear prominent facial piercings (a single discreet (2mm x 2mm max) facial stud is permissible however not in addition to a single ear stud) or have tattoos that are deemed offensive. Staff with stretched earlobes should wear flesh coloured closed ear stretchers whilst at	The issue here is patient attitude and confidence in their care team. For many, particularly older patients, facial piercings and tattoos can be unsettling and distracting. However, tattoos on the forearms and hands must be left uncovered for hand hygiene during direct

Poor practice	Why?
work.	patient care activity. Having tattoos that are visible when bare below the elbow and that are offensive to others (eg homophobic or racist) is not compatible with continued employment at Trust.
Dress untidily and in an unprofessional manner. This includes: <ul style="list-style-type: none"> • Wearing jeans of any colour • Wearing hoodies in the clinical area • Wearing sportswear in the clinical area • Wearing trainers 	Patients and visitors may equate untidy appearance with low professional competence and poor hygiene standards. In addition this may affect patient attitude and confidence in their care team

9. SCRUB WEAR

The wearing of scrubs is limited to theatre and areas that have had approval for scrub wear i.e. ED, Sonography.

The wearing of blues scrubs in areas other than theatres is not permitted.

10. NON-UNIFORMED STAFF

Clinical and non-clinical staff not required to wear a uniform must adhere to professional workwear standards at all times. This includes:

- Not wearing jeans of any kind
- Wearing skirts or dresses that do not exceed 10 cms above the knee
- Not wearing maxi dresses that trail across the floor causing a possible trip hazard
- Not wearing tops/blouses that expose cleavage to an extent that may cause embarrassment or offence.
- Not wearing garments that have the potential to expose underwear
- Footwear should be of an appropriate heel height (not exceeding 8 cms). The wearing of trainers and flip-flops is not permitted.

11. REQUESTING CHANGES TO UNIFORMS

In order to keep uniforms in line with corporate requirements, any changes to existing uniforms must first be agreed via the Trusts Uniform Group. To enable this, Appendix 3 should be completed and sent to the chair of the uniform group for review and approval. If approval is given then appendix 3 should be signed by the chair of the uniform group and forwarded to the Trusts PFI variation in box (). On receipt, the Trusts Facilities and Property Management Team will raise a service variation via the PFI contract for official costing to be provided. All costs for changes in uniforms have to be funded by the requesting ward or department”

12. TRAINING/SUPPORT

Infection prevention and control training is mandatory for all staff on a three yearly basis following Trust induction. Both Trust induction and mandatory refresher sessions contains information regarding uniform and workwear.

All staff are given a local induction which should include their responsibilities on wearing uniform or workwear.

Additionally in response to monthly audits carried out by the IP&CT within the clinical areas the IP&CT will facilitate sessions where additional support/education is required.

13. PROCESS FOR MONITORING COMPLIANCE

	Lead	Tool	Frequency	Reporting arrangements	Action on Recommendations & Lead(s)	Change in Practice and Lessons to be shared
All staff are required to adhere to the uniform and workwear policy and procedures of the Trust	Managers/ Matrons	Matrons audit tool	Monthly	Local reporting via ward meetings	Managers/matrons for the clinical areas	Ward meetings Huddle board meetings

14. EQUALITY

The Dudley Group NHS Foundation Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.

15. REFERENCES

Health and Safety at Work etc. Act 1974. Chapter 37.
<http://www.legislation.gov.uk/ukpga/1974/37/contents> [accessed 25/09/2017]

The Control of Substances Hazardous to Health Regulations 2002.
http://www.legislation.gov.uk/uksi/2002/2677/pdfs/uksi_20022677_en.pdf [accessed 25/09/2107]

Health and Safety Executive (HSE) Healthcare
www.hse.gov.uk/biosafety/healthcare.htm [accessed 25/09/2017]

The Management of Health and Safety at Work Regulations 1999.
<http://www.legislation.gov.uk/uksi/1999/3242/contents/made> [accessed 25/09/2017]

Health and Safety Commission (2000) Securing Health Together: A long-term occupational health strategy for England, Scotland and Wales. London: Health and Safety Executive.

Health and Social Care Act 2008 Chapter 14

http://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga_20080014_en.pdf

[accessed 25/09/2017]

Department of Health (2015) [The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance.](#)

[accessed 25/09/2017]

Direct patient care activity

The detail of how staff are dressed is most important during patient care activity involving direct contact with patients and their close environment. This includes activity in the following settings:

On the ward

- In the patient area.
- In any activity that involves patient contact.
- It is acceptable to not be Bare below the elbow (BBE) to enter a ward to talk to staff members, where there is absolutely no potential for patient contact; it is not acceptable to perform any patient contact unless staff are BBE.

In out-patient clinics

Any activity that involves patient contact, for example:

- examining patients;
- wound care; and
- collecting samples for testing

In treatment and minor surgical procedure rooms

At all times when patients are being treated

In clinical areas with specific dress requirements

- In operating theatres.
- In intensive/critical care units.
- A&E departments.

Hand hygiene during direct patient care activity requires washing/disinfection*


- before patient contact;
- before aseptic tasks;
- after risk of body fluid exposure;
- after patient contact; and
- after contact with a patient's surroundings

*Based on the *My 5 moments for Hand Hygiene*, www.who.int/gpsc/5may/background/5moments/en/index.html © World Health Organization 2009. All rights reserved.

Appendix 2

Summary of Trust Uniform and Workwear Policy	Rationale
<p>Uniform and Dress</p> <p>The Trust policy complies with the 'Bare Below the Elbows' campaign</p> <ul style="list-style-type: none"> • Sleeves must be short and above the elbow when performing direct patient care activities • Cardigans where worn must be black or navy and removed when carrying out any direct patient care activities. • Hoodies are not allowed. • Socks should be of a discreet colour preferably navy or black • Tights or stockings should be plain (it is acceptable for legs to be uncovered) • Ensure epaulettes, where appropriate are worn • Unrestrained ties are not permitted 	<ul style="list-style-type: none"> • DOH directive (implicit within the Health & Social Care 2015) • To inspire patient and public confidence • To minimise the potential of infection risk • To minimise health and safety risk to employees
<p>Hair</p> <ul style="list-style-type: none"> • Hair must be clean, neat and off the face and shoulders. This includes ponytails which should be tied up out of the way. • Any fastenings must be discreet without adornment • Head coverings should be black or white • Beards / moustaches should be neatly trimmed 	<ul style="list-style-type: none"> • Potential for wound contamination from loose hair • To promote a professional appearance • To inspire patient and public confidence
<p>Jewellery</p> <ul style="list-style-type: none"> • Stoned rings must not be worn when undertaking direct patient care activities • Wristwatches must not be worn when undertaking direct patient care activities • Necklaces and/or bangles should not be worn in the clinical area • Piercings – earring studs must be discreet; as must be other visible body piercings 	<ul style="list-style-type: none"> • To minimise the potential of infection risk • To comply with effective hand hygiene practices • To minimise health and safety risk to staff • To promote a professional appearance • To inspire patient and public confidence
<p>Badges</p> <ul style="list-style-type: none"> • Identity badges must be worn at all times with the name and photograph visible • Professional badges should be kept to a minimum • Lanyards may be worn if black / Trust and must have a safety clasp 	<ul style="list-style-type: none"> • To inspire patient and public confidence • To comply with Trust security policies and procedures

<p>Footwear</p> <ul style="list-style-type: none"> • Footwear must be clean and not worn outside of the work environment (clinical staff only) • Shoes worn in the clinical area should have a closed toe and heel • Shoes worn with uniform must be black/blue, non-fabric/canvas and non-patent • Trainers are not permitted • Theatre footwear must be health and safety approved 	<ul style="list-style-type: none"> • To prevent risk of contamination from spillages etc • To promote a professional appearance
<p>Tattoos</p> <ul style="list-style-type: none"> • Tattoos need not be covered. However if tattoos are offensive then this would be individually considered and dealt with via the disciplinary policy. 	<ul style="list-style-type: none"> • To inspire patient and public confidence
<p>Nails</p> <ul style="list-style-type: none"> • Staff within the clinical area should ensure that nails are kept short, clean and without nail varnish. False nails are not permitted for staff working in clinical areas 	<ul style="list-style-type: none"> • To avoid transferring bacteria under fingernails • To reduce the risk of trauma when involved in direct patient contact

 The Dudley Group NHS Foundation Trust		
UNIFORM CHANGE REQUEST FORM		
Ward/Department		
Date		
Ward/Department Lead		
Current uniform description		
Requested uniform description		
Reason for request		
Signature (Ward/Department Lead)		
Office use only		
Approved	Yes	No
Date		
Signature (Chair of the uniform group)		

If approved copy to be sent to the Trusts PFI variation in box

