



Ashford and St. Peter's Hospitals  
NHS Foundation Trust

# TRUST DRESS CODE POLICY (INCLUDING PERSONAL HYGIENE)

**Compiled by: Human Resources Department**

**Executive Lead: Director of Workforce Transformation**

**Status:** Approved: February 2022

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Review date: February 2025

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## History

Issue	Date Issued	Brief Summary of Change	Approved by
1	Jun 1999	New Policy	Trust Board
2	Apr 2010	Update and revision of policy	Trust Board
3	Oct 2012	No reference to personal hygiene Section 4 added.	Trust Board
4	Oct 2014	General review and revision. Reference to Hand Hygiene Policy added in section 5.8.	Trust Board
5	May 2018	Update and Revision of Policy.	TEC
6	Feb 2022	Update and Revision of Policy	TEC

For more information on the status of this document, please contact:	HR Business Partners, HR Advisors, Employee Relations Manager
Policy Author	HR Business Partners & Advisors , Employee Relations Manager
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Ratified by	TEC Feb 2022
Audience	All Trust staff and employees

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## **1. Introduction**

- 1.1 As representatives of the service, employees, bank staff, agency staff and Trust volunteers where applicable should endeavour to maintain the highest standards which encompass uniform and personal hygiene. This policy allows for individual needs, specialist areas, cultural and religious obligations and applied to all staff irrespective of protected characteristics.
- 1.2 Consideration should always be given to infection control, the operation of machinery, the identification of staff and clear communication with patients. The professional image presented by us at Ashford and St Peter's is an important component in the way we are perceived by colleagues, patients and the public.
- 1.3 The Dress Code Policy is necessary in order to:
- Convey a professional image of the Trust and individual
  - Give patients confidence
  - Support infection control
  - Have regard to health and safety considerations
  - Comply with the professional codes of practice
  - Reduce the likelihood of injury to staff, patients and visitors
- 1.4 The Trust recognises the diversity of cultures, religions, disabilities and beliefs of its employees and will take a fair approach when this affects dress and uniform requirements. For example, this includes the wearing of a hijab or cross. Despite this priority will be given to health and safety, security and infection control. Guidance from the Department of Health can be found in Appendix 1.

## **2. Aims and Scope of the Policy**

- 2.1 This policy forms a part of Ashford & St Peter's Hospitals NHS Foundation Trust (ASPH) people strategy to being a great place to work and be a patient, where we listen, empower and value everyone.
- 2.2 The Trust is committed to being an employer of choice, offering modern employment practices which support staff to develop their skills and knowledge and promote career progression, understanding that they can benefit both the organisation and its staff in a range of ways:
- Allowing recruitment and retention of valuable skills and experience
  - Promotion of equality of opportunity
  - Improving staff morale and productivity
  - Enabling the Trust to become an employer of choice
  - The aim of this policy is to provide a clear and consistent dress code framework for all employees
- 2.3 The Trust has a duty to promote equality of opportunity and the removal of discrimination where it is found to exist and will apply this policy fairly and consistently irrespective of race, disability, gender, sexual orientation, religion or belief, age, transgender status, caring responsibilities, flexible working status, pregnancy, relationship status, staff association or trade union activity.
- 2.4 The policy sets out the expectations of the Trust in relation to uniformed and non-uniformed staff. This includes all workers including bank, agency, volunteers, students and staff

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working with honorary contracts. This policy follows in full the Department of Health (DOH) guidance: Uniforms and workwear policies for all NHS staff. All staff are expected to comply with the principles and requirements of this policy.

- 2.5 This policy is designed to guide managers and employees on the Trust standards of dress and appearance. The policy is not exhaustive in defining acceptable and unacceptable standards of dress and appearance and staff should use common sense in adhering to the principles underpinning the policy. A sensible approach should be taken to ensure the spirit of the code is applied.

### **3. Key Points and Responsibilities**

- 3.1 The Trust Executive Committee (TEC) is responsible for developing and reviewing the policy.
- 3.2 The policy adopts the DOH '*Bare below the elbow*' policy for any staff working in a clinical area. This means no wrist watches are permitted and only plain wedding bands without stones. Wedding bands should be removed to facilitate hand washing.
- 3.3 Where the term '*clinical area*' is used in this policy it refers to **all** places where patients are receiving clinical attention. For example wards, clinics, theatres, therapies, medical imaging and phlebotomy.
- 3.4 All individuals working in the Trust will be supplied with a name badge and an identity security badge. These must be worn and visible at all times when on duty and acting in an official capacity. These can only be removed if they pose a danger to staff or patients. ID badges must not be worn on lanyards in clinical areas or when patient contact is involved.
- 3.5 Staff are expected to dress in clean clothes every time they start work.
- 3.6 Managers are responsible for ensuring this policy is adhered to, in respect for the individuals that they are responsible for in the work environment.
- 3.7 Failure to adhere to the Trusts standards of dress, appearance and personal hygiene guidance may constitute misconduct and result in formal disciplinary proceedings under the Trusts Disciplinary Policy.

### **4. Personal Hygiene**

- 4.1 Maintaining a comfortable environment in which all employees can work in is an important part of being an employer. However, sometimes poor hygiene from employees can affect the overall performance of a team or impact on their colleagues and other people, particularly patients, with whom an individual comes in to contact.
- 4.2 Keeping clean is essential for good health; poor hygiene can cause skin complaints, unpleasant smells and bacterial or parasitic infections. Poor dental care can also give rise to bad breath. Unwashed clothes are often a source of undesirable smells. Staff should come to work having attended to their personal hygiene each day with clean clothes and hair and free from unpleasant odours.
- 4.3 Clean uniform should be worn each day and replaced if it becomes soiled during a shift.

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## 5. **Dress Code for Non-Uniformed Staff**

5.1 For staff not required to wear uniform, examples of **acceptable** staff clothing include:

- Skirts or dresses of appropriate length, culottes, suits and trousers
- Smart shirts or tops, jumpers, jackets, cardigans, and blazers

For staff not required to wear uniform the following are examples of **unacceptable** staff clothing, either on the grounds of Health and Safety or the Trusts public image:

- Track suits, combat trousers, jeans or denim.
- Hot pants, leggings, miniskirts.
- Sports tops, low cut tops, or clothing with inappropriate slogans.
- Flip flops, crocs, trainers or open toe shoes in clinical areas. Smart trainers or soft soled/rubber soled shoes at night may be worn.

5.2 Footwear must be safe, sensible stable and in good order. Footwear should be smart and clean and have regard to Health and Safety considerations. Certain jobs require staff to wear protective footwear. These staff must wear the correct footwear for undertaking their work and if staff are uncertain they must check with their line manager. All considerations are at the managers' discretion in line with the appropriate guidance.

5.3 Each manager must ensure that Personal Protective clothing and Equipment (PPE) is available to the employee in accordance with the Control of Substances Hazardous to Health (COSHH) regulations and local/statutory recommendations. Staff in roles that require protective clothing are required to wear this whilst carrying out their duties in accordance with health and safety requirements. If individuals are unsure about such requirements they should discuss this with their manager. PPE is not suitable to wear to formal meetings.

5.4 Visible tattoos may need to be covered where possible, should they cause offense to patients, relatives or other staff. Professional judgement should be utilised in such situations. Tattoos on the forearms or hands must however be left uncovered during patient activity for hygiene reasons.

5.5 Jewellery and piercings should be discreet and appropriate and not cause offence or be a health and safety or an infection control hazard. Any items of jewellery and piercing that create the potential for injury or present the possibility for entanglement (e.g. large hoops) must be covered or removed during working hours or when working within a clinical setting.

5.6 Hair should be clean, neat and tidy at all times. In clinical areas hair should be worn above the collar or tied back if it falls below the shoulder. When visiting clinical areas, fingernails should also be clean and tidy. Nail varnish and false nails are not permitted.

5.7 Bare below the elbows applies when visiting clinical areas or where patient contact is involved (e.g. wards and outpatients), all staff should dress and wear clothing that makes hand hygiene both easy and satisfactory. This means no long sleeves (e.g. jackets) and shirts are either short sleeved or that shirt sleeves are rolled up to the elbow. White coats for doctors should not be worn. Please see Hand Hygiene Policy for Healthcare Workers <http://trustnet/trustpolicies/INF13.pdf>

5.8 Wrist watches are permitted except when working in clinical areas. Watches should be removed to facilitate good hand washing practices.

5.9 PPE is to be worn in accordance with the Standard Precautions Policy.

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- 5.10 In any clinical area or in activity involving patient contact, ties (other than bow-ties) should not be worn as they perform no beneficial function in patient care, are laundered rarely but often worn daily and have been shown to be colonised by pathogens.
- 5.11 When moving patients pens and scissors should be carried in hip pockets or inside breast pockets, to avoid causing injury.
- 5.12 Staff who are pregnant should continue to observe the dress code.
- 5.13 Staff who wear facial coverings for religious reasons are expected to remove them while on duty in clinical environments for health and safety and infection control compliance as well as to aid communication

**6. Other Health Professional Groups**

- 6.1 This group includes: Pharmacists, Clinical Scientists, Medical Physics, and Laboratory staff.
- 6.2 Staff are expected to comply with the Policy and also comply with regulatory and good practice requirements. This reflects the individual environment and materials handled.

**7. Dress Code for Clinical and Uniformed Staff**

- 7.1 Requirements for all uniform wearers (where appropriate these requirements override those laid out in the personal hygiene section).
- 7.2 Uniform should be worn in a clean and presentable fashion, all staff must have access to a spare uniform in case one becomes soiled during the shift. Shoes must be black, closed toe, low heel with a non-slip sole and should have low noise soles in clinical areas sandals and flip-flops are not allowed. These are in line with health and safety guidelines and with upholding the professional reputation of the Trust. No clogs are to be worn except when wearing scrubs. Suede and canvas shoes are not acceptable.
- 7.3 Jewellery and piercings should be discreet and appropriate and not cause offence or be a health and safety or an infection control hazard. Any items of jewellery and piercing that create the potential for injury or present the possibility for entanglement (e.g. large hoops) must be covered or removed during working hours or when working within a clinical setting.
- 7.4 The uniforms issued may be altered by the individual within acceptable limits, this cost is your own personal responsibility.
- 7.5 Maternity clothing will be provided in line with the normal uniform for the role.
- 7.6 The wearing of Trust uniform when off duty/ out of hospital premises is not acceptable unless travelling to and from work.
- 7.7 If a uniform is worn on the journey to and from work it must be covered by a coat or suitable garment. If at all possible it is preferable for staff to change in and out of their uniform before and after their shift.
- 7.8 Hair should be neat and tidy at all times and arranged off the face and collar. Beards should be short and neatly trimmed or secured to avoid patient contact.
- 7.9 Where facial coverings are worn health and safety guidelines must be adhered to.

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- 7.10 Make up can be worn discreetly.
- 7.11 Nail varnish (including clear nail varnish) and false nails are not permitted. Nails should be sufficiently short to ensure safe patient contact and infection control.
- 7.12 ASPH is a smoke free Trust and smoking in uniform may affect patient care due to the smell and possible infection control issues. If staff do smoke off site they have to ensure their uniform is fully covered and failure to comply with this instruction will be treated as misconduct and may result in disciplinary action being taken.
- 7.13 Uniforms need to be washed at the hottest temperature suitable for the fabric. A ten- minute wash at 60 degrees Celsius removes almost all micro-organisms (DOH 2007) Washing with detergent at lower temperatures down to 30 degrees Celsius eliminates MRSA and most microorganisms.

**8. Nurses and Midwives**

- 8.1 The Nursing and Midwifery Council (NMC) Code of Conduct requires professional staff to, '*justify public confidence*'. One area of this is first impressions for people who are vulnerable, ill and frightened. The appearance of staff will help the patient to feel at ease and in safe hands.
- 8.2 Uniforms are supplied by the Trust. This includes dresses, tunics, trousers, polo shirts. Staff supply their own tights/stockings/socks and shoes.
- 8.3 Cardigans must not be worn when attending to patients. Black or dark blue cardigans can only be worn at night when working at the desk or off the ward.

**9. Radiology, Occupational Therapists, Physiotherapists, Pharmacy Technicians, Dietetics & Speech and Language Therapists**

- 9.1 Radiographers, Occupational Therapists, Physiotherapists and Pharmacy Technicians will be issued with appropriate sets of uniforms, with a choice of tunic/trousers, polo shirts or dresses, or a combination. Due to the nature of therapy, OT and Physiotherapists may wear training shoes that are smart, clean and plain white or black only.

**10. Estates and Facilities Staff**

- 10.1 Some staff within this directorate have specific clothing requirements based upon the need for:
  - Personal safety
  - Statutory regulatory requirement
  - Work environment (including outside working)
  - Infection control
- 10.2 All domestic, laundry, portering and driving Staff must wear their issued uniform at all times whilst on duty.

**11. Clinical Staff Wearing Scrubs**

- 11.1 Scrubs and clogs can only be worn in designated areas:

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- Theatres, including Endoscopy suites
- Intensive Care Unit and High Dependency Unit
- Labour Ward
- Neonatal Unit

11.2 Scrubs and clogs that are worn must be clean at the beginning of every shift and changed each time they become stained with blood or body fluids. They should also be changed or cleaned (for clogs) if worn elsewhere within the Trust on return to the designated area.

11.3 If it is necessary to leave a designated 'scrubs area' the staff member should ideally change out of the scrubs or change on return to the designated area.

## **12. Theatre Staff**

12.1 In addition to the guiding principles the following will apply:

12.2 Staff should wear well-fitted dedicated operating approved theatre footwear in line with the Policy. These must be cleaned/decontaminated daily, particularly when visibly dirty or when contaminated with blood or body fluids. Theatre management should ensure that local mechanisms are in place for these procedures to take place. All theatre staff and visitors to theatres should comply with theatre policy on the use of PPE.

12.3 All theatre staff and visitors should comply with the theatre policy on the use of PPE.

12.4 Clinical staff in scrubs who visit areas outside the theatre complex and then return to theatre must change into a clean pair of scrubs on their return. Theatre staff must not wear their scrubs when they are not in the hospital building.

## **13. Visitors to Theatres**

13.1 Theatre staff will guide all visitors to the operating theatres on what wear. Any visitor entering an operating theatre must change into scrubs and suitable footwear.

## **14. Dissemination and implementation**

14.1 This policy will be stored in the employment policies section of the Trust Intranet and thus available to all staff when needed. Clinical staff will be informed of the correct clothing at their induction and **all staff** will be advised on correct hand washing at induction.

## **15. Review**

15.1 Policies will be reviewed when statutory requirements/ best practice guidelines dictate, or no longer than three years after the previous/initial ratification.

## **16. Archiving Arrangements**

16.1 Archiving is managed by the Quality Department who can be contacted to request master/archived copies.

## **17. Uniform Policy**

17.1 Areas covered in this document are:

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- Wards
  - Coronary Care
  - Imaging
  - Outpatients
  - Accident & Emergency,
  - Pre assessment Nurses
- Other nursing
  - Discharge Facilitator
  - CSNP / Deputy CSNP
  - Matron
- Clinical Practitioner Educators
  - Practitioners
  - Advanced and Specialist
  - Ophthalmology OPD/DSU

17.2 For uniforms worn in the below areas please see local nurse uniform sheet:

- Theatres
  - Critical care
- Medical Unit
  - Maternity services
- Children's services

17.3 Uniform for staff in the following areas is as per Table 1 below:

Post	Male	Female	Dress / Tunic	Trousers	Area	
Care Assistant		x	White	Navy	<ul style="list-style-type: none"> <li>• Wards</li> <li>• Coronary Care</li> <li>• Accident and Emergency</li> <li>• Pre-assessment</li> <li>• Imaging</li> <li>• Outpatients</li> <li>• Ophthalmology</li> </ul>	
	x		White	Dark grey or black		
Senior Care Assistant (NVQ Level 3)		x	White	Navy		
	x		White	Dark grey or black		
Staff Nurse Preceptee		x	Navy Stripe	Navy		
	x		White	Dark grey or black		
Staff Nurse PFG		x	Navy Stripe	Navy		
	x		White	Dark grey or black		
Deputy Sister		x	Royal Blue	Navy		
	x		White	Dark grey or black		
Matron		x	Red with navy trim	Navy		All areas
	x		White	Dark grey or black		
Deputy CSNP'S		x	Navy	Navy		
	x		White	Dark grey or black		
CSNP'S		x	Navy	Navy		
	x		White	Dark grey or black		
Advanced & Specialist Practitioners		x	Navy	Navy		
	x		White	Dark grey or black		
Clinical Practitioner Educator		x	Navy	Navy		
	x		White	Dark grey or black		

## Appendix B

### Advice from Muslim Spiritual Care Provision in the NHS (MSCP)\*

Exposure of the forearms is not acceptable to some staff because of their Islamic faith. In response to these and other concerns, the MSCP convened a group including Islamic scholars and chaplains and multi-faith representatives as well as Department of Health policy-makers and external experts in infection prevention. Based on these group discussions, the MSCP prepared a list of recommendations to ensure that local dress code policies are sensitive to the obligations of Muslims and other faith groups whilst maintaining equivalent standards of hygiene.

Incorporating any of these recommendations into trust policy will have to be agreed in conjunction with clinical managers and the local infection prevention and control team:

- Uniforms may include provision for sleeves that can be full length when staff are not engaged in direct patient care activity.
- Uniforms can have three-quarter length sleeves.
- Any full or three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity.
- Disposable over-sleeves, elasticated at the elbow and wrist, may be used but must be put on and discarded in exactly the same way as disposable gloves. Strict procedures for washing hands and wrists must still be observed.

Use of hand disinfection gels containing synthetic alcohol does not fall within the Muslim prohibition against natural alcohol (from fermented fruit or grain).

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## **APPENDIX 2 – Equality Impact Assessment Summary**

**Name of Author:** Employee Relations Manager  
**Policy/Service:** Dress Code Policy

<b>Background</b> <ul style="list-style-type: none"><li>• Description of the aims of the policy/service</li><li>• Context in which the policy/service operates</li></ul>
<p>This policy sets out the expectations of the Trust in relation to dress code of those representing the Trust. This includes those who are required to wear uniforms as part of their role, and those who are not required to wear uniform. The policy is applicable to all individuals who are working for the Trust including employees, bank workers, agency workers, volunteers, students and staff working under honorary contracts.</p> <p>The policy is designed to guide individuals on the Trust's standards in relation to dress code and appearance whilst at work.</p>
<b>Methodology</b> <ul style="list-style-type: none"><li>• A brief account of how the likely effects of the policy was assessed (consider race and ethnic origin, disability, gender, culture, religion or belief, sexual orientation, age) outlining the data sources and any other information used</li><li>• The consultation that was carried out (who, why and how?)</li></ul>
<p>The likely effects of the policy were assessed by initially reviewing an internal database of employee relations cases for the previous 12 months. There were no formal or informal cases involving the application of this policy. Therefore there is no information to suggest that any equalities groups have been adversely impacted by this policy. The policy does make reference to the Department of Health Guidance on Uniform and Workwear Policies for Staff (2010) and contains advice from the Muslim Spiritual Care Provision in the NHS (MSCP) to ensure individuals take into account requirements of those who follow the Islam Faith in relation to dress code and uniform.</p> <p>This policy was reviewed and updated by members of the HR Team (HR Business Partners, HR Advisors, Employee Relations Manager). Consultation has involved the Heads of Nursing, Therapy Leads, Assistant Directors of HR, members of the Policy Sub-Group, Employee Partnership Forum (including Staff Side) and members of the Trust Executive Committee.</p>
<b>Key Findings</b> <ul style="list-style-type: none"><li>• Describe the results of the assessment</li><li>• Identify if there is adverse or a potentially adverse impacts for any equalities groups</li></ul>
<p>At present there is no evidence that the policy adversely impacts on particular equalities group.</p>
<b>Conclusion</b> <ul style="list-style-type: none"><li>• Provide a summary of the overall conclusions</li></ul>
<p>In conclusion there are no equalities groups that are adversely affected as a result of this Policy.</p>
<b>Recommendations</b> <ul style="list-style-type: none"><li>• State recommended changes to the proposed policy/service as a result of the</li></ul>

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impact assessment

- Where it has not been possible to amend the policy/service, provide the detail of any actions that have been identified
- Describe the plans for reviewing the assessment

There are no significant amendments to the policy as part of this review, therefore no significant impact on whether the policy adversely affects the equalities groups. The Policy does however have a further review date and ongoing monitoring of employee relations cases will take place to assess whether any staff from equalities groups are adversely impacted by the application of this policy.

## Guidance on Equalities Groups

<b>Race and Ethnic origin</b> (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)	<b>Religion or belief</b> (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)
<b>Disability</b> (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)	<b>Sexual orientation including lesbian, gay and bisexual people</b> (consider whether the policy/service promotes a culture of openness and takes account of individual needs)
<b>Gender</b> (consider care needs and employment issues, identify and remove or justify terms which are gender specific)	<b>Age</b> (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)
<b>Culture</b> (consider dietary requirements, family relationships and individual care needs)	<b>Social class</b> (consider ability to access services and information, for example, is information provided in plain English?)