

UNIFORMS AND WORKWEAR POLICY

Document Reference No.	KMPT.HR.013.07
Replacing document	KMPT.HR.013.06
Target audience	All Staff
Author	Deputy Director of Nursing Human Resource Manager
Group responsible for developing document	Nursing and Governance Workforce
Status	Authorised
Authorised/Ratified By	Workforce and OD Committee
Authorised/Ratified On	September 2022
Date of Implementation	September 2022
Review Date	September 2025
Review	This document will be reviewed prior to review date if a legislative change or other event otherwise dictates.
Distribution date	October 2022
Number of Pages	
Contact Point for Queries	kmpt.policies@nhs.net
Copyright	Kent and Medway NHS and Social Care Partnership Trust 2022

DOCUMENT TRACKING SHEET

UNIFORMS AND WORKWEAR POLICY

Version	Status	Date	Issued by to/approved by	Comments
V1.0	Approved	July 07	HR Workforce Planning committee	
V2.0	Approved	29 April	HR Workforce Planning committee	Replaces Dress code Policy
V2.1	Approved			
V3.0	Approved	August 11	JNF	
V4.0	Draft	October 12	JNF	Approved
V4.0			Workforce & OD Committee	
V5.0	Updated	August 15		
V6.0	Updated	January 17	Joint Negotiating Forum	Approved
V6.1	Approved	November 17	Policy Manager	Separated the Equality Impact Assessment screening from document. Amended 'service line' to 'care group' throughout document.
V6.2	Updated	February 2022		Amendments by Cheryl Cramer, to reinforce infection control protocols. Uniforms list updated by Mark Qusted, as well as other minor corrections.
V7.0	Final	September 2022	Workforce and OD Committee	Approved

REFERENCES

Equal Opportunities Commission
Equality Direct
East Cheshire NHS Trust – Uniform/ Dress Code Policy
Loveday, H.P. Wilson, J.A. Hoffman, P.N and Pratt R.J. (2007) Public Perception and the social and microbiological significance of uniforms in the prevention and control of healthcare-associated infections: an evidence review. British Journal of Infection Control.
NHS Employers Dress Code and Discrimination (accessed December 18) http://www.nhsemployers.org/your-workforce/plan/building-a-diverse-workforce/need-to-know/dress-codes-and-discrimination
Department of Health 2007 – Uniforms and Workwear Guidance- https://webarchive.nationalarchives.gov.uk/20130123201551/http://www.dh.gov.uk/en/Publicationandstatistics/Publications/PublicationsPolicyAndGuidance/DH_114751
The Health and Safety at work Act 1974 – sections 2 and 3
The Control of Substances Hazardous to Health Regulations 2002
Management of Health and Safety at Work Regulations 1999
Securing Health Together

RELATED POLICIES/PROCEDURES/protocols/forms/leaflets

Disciplinary Policy	KMPT.HR.007
Infection Control for Inpatient, Residential and Community Services Policy	KMPT.CliG.005

SUMMARY OF CHANGES

Date	Author	Page	Changes (brief summary)
Jan 2017			New sections added regarding the wearing of uniforms on the wards and types to purchase.
Feb-Sep 2022			References updated. 5.1 added 5.7 added 9.1 expanded to state excessive jewellery can be an infection control risk. Plain band and stud earrings only 9.3 added 10.2 expanded to state if participating in direct patient and client care artificial nails and varnish are not permitted 11.1 amended 11.3 FFP3 clause added 11.4 added 12.2 added 14.4 added 20- tables removed 26 lead nurses changes to HoNs and DHoNs Appendix C-Types/categories of uniform updated Appendix D, E, F, G added.

CONTENTS

1	INTRODUCTION.....	1
2	PURPOSE	1
3	DUTIES.....	1
4	POLICY STATEMENTS	2
5	CLOTHING	3
6	UNACCEPTABLE CLOTHING.....	3
7	RELIGIOUS WEAR/ FACIAL COVERINGS.....	4
8	FOOTWEAR	4
9	JEWELLERY AND PIERCING	4
10	NAILS	4
11	HAIR AND BEARDS	4
12	TRUST IDENTIFICATION BADGES	5
13	TRUST CLINICAL UNIFORMS	5
14	MOVING AND HANDLING	5
15	CATERING STAFF.....	5
16	ESTATES AND FACILITIES STAFF.....	5
17	COMPENSATION FOR PERSONAL CLOTHING.....	6
18	ATTENDANCE AT COURSES.....	6
19	SENIOR STAFF.....	6
20	IMPLEMENTATION INCLUDING TRAINING AND AWARENESS.....	6
21	STAKEHOLDER, CARER AND USER INVOLVEMENT.....	6
22	CONSULTATION.....	6
23	EQUALITY IMPACT ASSESSMENT SUMMARY	6
24	HUMAN RIGHTS	7
25	MONITORING COMPLIANCE WITH AND EFFECTIVENESS OF THIS DOCUMENT	7
26	EXCEPTIONS.....	7
	APPENDIX A PERSONS/GROUPS INVOLVED IN THE DEVELOPMENT AND.....	8
	APPROVAL OF THIS DOCUMENT.....	8

APPENDIX B	STAFF UNIFORMS (TUNICS/DRESSES) - MALE/FEMALE	9
APPENDIX C –	DIRECT PATIENT CARE ACTIVITY	16
APPENDIX D	BARE BELOW THE ELBOWS	17
APPENDIX E	ADDITIONAL RELEVANT DOCUMENTS.....	19

1 INTRODUCTION

- 1.1 The purpose of this document is to set out the Trust's policy with regards to staff and uniforms and to clarify the situation in relation to non-uniform arrangements. The policy is aimed at staff in clinical areas or in roles that require them to be in uniform for their roles.
- 1.2 The possibility of transmitting infections via uniforms and Workwear is an important issue for all staff and patients within the Trust.
- 1.3 The Department of Health Working Group on Uniforms and Workwear has put together an evidence base on the wearing and laundering of uniforms for staff who are providing direct clinical care to patients. This policy outlines the existing legal requirements and current findings, to support and advise employees in all areas.
- 1.4 In indicating standards for wearing Uniforms and Workwear by employees of Kent and Medway NHS and Social Care Partnership Trust, the following five key rationales should be used in deciding the appropriateness of dress:
 - 1.4.1 As employees of a public service, staff are required to present a positive professional image as part of their responsibilities.
 - 1.4.2 Working on behalf of all of the Trusts service users requires our staff to enhance the profile of mental health services and demonstrate a positive image at all times.
 - 1.4.3 Every employee has a responsibility to minimise the risk of injury and ill health to patients, other persons and themselves whilst at work. Therefore risks associated with items of clothing or accessories must be considered in relation to activities being carried out whether clinical or non-clinical.
 - 1.4.4 Kent and Medway NHS and Social Care Partnership Trust is committed to promoting diversity and equality of opportunity within the workforce and will therefore respect an individual's preference or requirement for customary dress, subject to the minimisation of the health and safety risks required.
 - 1.4.5 Working on behalf of all of the Trusts service users requires staff to promote dignity and professionalism which should be reflected in the clothes worn.
- 1.5 The Trust considers the way employees dress and their appearance is of significant importance in portraying a professional image to all users of its services, whether patients, visitors, clients or colleagues.

2 PURPOSE

- 2.1 The standards are intended to help each member of staff to understand precisely what is expected of them. They provide supervisors and managers with a set of guidelines to monitor staff appearance.

3 DUTIES

- 3.1 This policy applies to all staff, including those with honorary contracts, agency, workers, volunteers and students when working on Trust premises.
- 3.2 Failure to follow the policy may put the employee or a service user / client at risk of injury or infection and may lead to disciplinary action being taken.

- 3.3 Employees who do not adhere to the policy will be asked to return home to change into more suitable clothing and to pay back the time at the end of the shift.
- 3.4 Employees wearing uniform must ensure that their garments are presentable, of good fit and are suitable wear for their roles and responsibilities.
- 3.5 Employees
 - 3.5.1 All staff are expected to uphold the principles in this policy. If you are unsure of the suitability of a particular item please check with your manager.
 - 3.5.2 Employees are individually responsible for their general presentation, appearance and personal hygiene and have a responsibility to consider how their appearance may be perceived by others.
 - 3.5.3 Employees are responsible for following the standards of Uniform/Workwear and appearance laid down in this policy and must understand how this policy relates to their working environment, health and safety, infection control, particular role and duties and contact with others during their course of employment
- 3.6 Managers
 - 3.6.1 Managers are responsible for ensuring the Policy and Dress code is adhered to at all times in respect of the employees they manage.
 - 3.6.2 All managers will be required to make informal assessments of Uniform/Workwear and appearance. Their assessment should be influenced by the following indicators of hazard and risk. For example:
 - a) The degree of lifting and handling necessary within the job.
 - b) Any risk of violence or aggression towards staff.
 - c) The degree of personal care, requiring awareness of infection control issues.
 - d) Whether the overall image presented is professional and positive.
 - 3.6.3 Any concerns regarding dress code or appearance of staff including clothing, footwear, jewellery, tattoos or body piercing, that may be offensive towards others, should be discussed with them in the first instance. A letter confirming this informal discussion should be given to the individual and a copy kept in the member of staff's personal file. If the concern raised by the manager constitutes a health and safety risk the individual will be required to make the appropriate changes immediately.
 - 3.6.4 Failure to uphold and/or adhere to appropriate standards of Uniform/Workwear may result in formal disciplinary action being taken.

4 POLICY STATEMENTS

- 4.1 The Uniform and Workwear policy is designed to guide managers and employees in the Trust's standards of dress and appearance. All employees' appearance must be professional at all times both within the workplace and when representing the Trust either internally or externally.
- 4.2 The Trust recognises the diversity of cultures, religions and disabilities of its employees and will take a sensitive approach when this affects dress and uniform requirements. However, priority must be given to health and safety, security and infection control considerations. Risk assessment will take place as appropriate.

5 CLOTHING

- 5.1 Workwear should not be worn to and from work in clinical areas
- 5.2 All clothing should be neat, clean, and without holes, slogans or numbers.
- 5.3 Clothing should be safe, having regard to the activity being carried out at the time. Employees must comply with the Health and Safety regulations to ensure personal safety and that of the clients.
- 5.4 Employees are expected to use discretion in choosing appropriate attire. Clothing that is too tight or see through may be interpreted as provocative by service users and should not be worn on duty.
- 5.5 Unless an exemption is agreed at local level by the Heads of Service/Care Group Director, denim clothing will not be worn for work purposes. Where it is agreed that denim clothing can be worn, the clothing will be dark, smart and in good repair. Faded, worn, frayed and torn denim clothing is not acceptable at any time.
- 5.6 Staff working in direct patient care roles or whose job means they visit direct patient care areas are reminded to wear clothing that allows you to be 'bare below the elbows' so as to facilitate good hand washing techniques. Jackets, shirts, jumpers etc must be short sleeved or capable of being fully rolled up above the elbow. Staff must change their clothing daily and wear clothes washed at the hottest temperature suitable for the fabric.
- 5.7 Workwear should be washed at a minimum of 60 degrees separately from other household linen.

6 UNACCEPTABLE CLOTHING

- 6.1 The following items of dress are considered to be unacceptable either for Health and Safety reasons or because they are considered to be unacceptable for the Trust's public image. These items apply to both male and female employees.
 - 6.1.1 Frayed, torn, dirty clothes, including denim.
 - 6.1.2 Sports clothing (i.e. tracksuits, jogging bottoms, football shirts (particular exceptions may apply dependant on the clinical areas).
 - 6.1.3 Leggings and skin-tight clothing.
 - 6.1.4 Tops/T-Shirts that are low cut or cropped bottomed.
 - 6.1.5 T-Shirts with written messages, logos or distracting advertising.
 - 6.1.6 Micro/very short mini skirts, dresses or shorts (shorts may be worn if carrying out physical activities with clients such as football etc).
 - 6.1.7 No Excessively high-heeled shoes, open toes, or military style footwear should be worn. Open toe shoes can be worn in non-clinical areas only.
 - 6.1.8 Training shoes should be leather or water resistant ,all black with non-marking soles

7 RELIGIOUS WEAR/ FACIAL COVERINGS

- 7.1 Wearing of Head Scarves (Hijabs) and Turbans are permitted on religious grounds.
- 7.2 Staff who wear facial coverings for religious reasons are expected to remove them whilst on duty. This will ensure that the member of staff is identifiable and priority will be given to health and safety, clear communication (for staff and service users who make use of or require lip reading) security and infection control considerations.

8 FOOTWEAR

- 8.1 Sensible footwear must be worn, and should be viewed as protection to feet.
- 8.2 Employees must be able to respond to any emergency situation without placing themselves at risk, therefore, the wearing of opened toed or open backed types of footwear, high heeled shoes and flip flops should not be worn in clinical areas.
- 8.3 These items apply to both male and female employees.

9 JEWELLERY AND PIERCING

- 9.1 Staff are reminded that jewellery can be an infection control risk and/or a health and safety hazard and should not be excessive. A plain wedding band and stud earrings only.
- 9.2 If in a clinical environment, any items of jewellery or facial/body piercing that creates the potential for an act of violence, the possibility for entanglement (e.g. large hoops in earlobes), may cause harm to a service user when in situations involving restraint or when assisting a service user the item must be covered or removed during working hours.
- 9.3 Staff must be 'bare below the elbows' when undertaking clinical care. This includes the taking of clinical observations. Any jewellery must be able to be removed. The Trust can take no responsibility for these items. It is recommended that only a plain wedding band be worn.

10 NAILS

- 10.1 Particular attention should be paid to nails for those working in clinical areas and food handling areas.
- 10.2 If participating in direct patient and client care, artificial nails (gel or acrylic) and/or nail varnish are not permitted as they discourage vigorous hand washing. Artificial nails are a source of contamination. Nail polish can flake and itself become a source of contamination.
- 10.3 Nails should be kept short and particular attention paid to them when washing hands.

11 HAIR AND BEARDS

- 11.1 Should be neat and clean. Long hair should be tied back when in clinical areas.
- 11.2 Hair accessories must be discreet.
- 11.3 Facial Hair must be well groomed. Please be mindful that beards inhibit the correct fitting of FFP3 masks.

11.4 False eyelashes are prohibited.

12 TRUST IDENTIFICATION BADGES

12.1 All staff when working shall be able to identify themselves and their discipline. This may be a name badge worn in such a way to prevent it being obscured from clients and visitors view, or staff must carry photo identification at all times during working hours, and should produce this on request.

12.2 Lanyards, if worn, should be washed regularly at 60 degrees and are discouraged at times of outbreak.

13 TRUST CLINICAL UNIFORMS

14.1 A decision to wear uniform will be taken by the care groups on a team by team basis.

13.1 Where uniforms are issued by the Trust they remain the property of the Trust and staff must take responsibility to ensure good care is taken of them.

13.2 Staff must ensure they return any uniforms issued to them on their termination of their employment with the Trust.

13.3 Uniforms must always be worn in a clean and presentable fashion.

14.4 It is recommended that Uniforms be washed separately from general household laundry at the hottest temperature suitable for the fabric but no less than 60 degrees

14.5 Only uniforms as described in Appendix C are to be worn by staff.

14 MOVING AND HANDLING

14.1 The uniform/dress code must permit the healthcare professional to have full and unrestricted freedom of movement. All postures should be able to be undertaken safely without compromising the dignity of either the health professional or patient.

14.2 The healthcare professional must be able to perform all clinical duties comfortably & safely.

15 CATERING STAFF

15.1 All Catering staff involved in the preparation and service of food must wear the appropriate uniform, headwear and safe sensible footwear and have regard to health and safety considerations. Where provided, protective shoes must be worn.

15.2 Staff working in a kitchen environment must ensure that their hair is kept covered at all times, and beards must be covered with an appropriate facial mask when preparing food.

16 ESTATES AND FACILITIES STAFF

16.1 Some staff within this directorate have specific clothing requirements and will be provided with the items as appropriate based upon the need for:

16.1.1 Personal Safety

16.1.2 Hygiene

16.1.3 Statutory regulatory requirements

16.1.4 Work environment (include outside working)

16.1.5 Infection Control

17 COMPENSATION FOR PERSONAL CLOTHING

- 17.1 Staff are required to adopt a common-sense approach with regard to clothing, jewellery, glasses etc that they wear to work in terms of expense.
- 17.2 The Trust does not consider it appropriate that staff should provide care to patients while wearing expensive or expensive-looking items of clothing. It is also not appropriate to wear such clothing where there is a risk of it being torn or damaged should it be necessary to restrain a patient. Staff wear such clothing at their own risk. The Trust will only consider a claim for loss or compensation after damage whilst on duty to the value of “non designer” equivalent.

18 ATTENDANCE AT COURSES

- 18.1 Staff are reminded that whilst sponsored by the Trust to attend courses they are representing the Trust, and appearance should reflect a suitable image.

19 SENIOR STAFF

- 19.1 Senior staff have a responsibility to demonstrate themselves as good role models.

20 IMPLEMENTATION INCLUDING TRAINING AND AWARENESS

- 20.1 All staff including volunteers must be made aware of this policy and although there are no direct training implications, the uniforms and Workwear policy must be incorporated within local Inductions programmes.

21 STAKEHOLDER, CARER AND USER INVOLVEMENT

- 21.1 This policy formalises the processes and procedures that are currently in operation across the Trust regarding the use of uniforms and the acceptable standard for workwear. The policy will have a full review in October 2016 to ensure that it fully reflects best practice guidance and is practical to implement across all services.

22 CONSULTATION

- 22.1 Professional Leads, Modern Matrons and Staff Side across the Trust were consulted to confirm the processes and procedures that were in use regarding Uniforms and Workwear.

23 EQUALITY IMPACT ASSESSMENT SUMMARY

- 23.1 The Equality Act 2010 places a statutory duty on public bodies to have due regard in the exercise of their functions. The duty also requires public bodies to consider how the decisions they make, and the services they deliver, affect people who share equality protected characteristics and those who do not. In KMPT the culture of Equality Impact Assessment will be pursued in order to provide assurance that the Trust has carefully considered any potential negative outcomes that can occur before implementation. The Trust will monitor the implementation of the various

functions/policies and refresh them in a timely manner in order to incorporate any positive changes.

24 HUMAN RIGHTS

24.1 The Human Rights Act 1998 sets out fundamental provisions with respect to the protection of individual human rights. These include maintaining dignity, ensuring confidentiality and protecting individuals from abuse of various kinds. Employees and volunteers of the Trust must ensure that the trust does not breach the human rights of any individual the trust comes into contact with.

25 MONITORING COMPLIANCE WITH AND EFFECTIVENESS OF THIS DOCUMENT

<i>What will be monitored</i>	<i>How will it be monitored</i>	<i>Who will monitor</i>	<i>Frequency</i>	<i>evidence to demonstrate monitoring</i>	<i>Action to be taken in event of non-compliance</i>
Staff awareness of the document and associated requirements	an audit will be undertaken to confirm that: Document is available on website Staff induction has been implemented	Policy lead	Within six months of implementation	▪list of policies checked	Raise awareness through Heads of Nursing and Deputy Heads of nursing (HONs and DHONs) Article in newsletter
Investigate ongoing current practices across all sites	Review of practice by on site audit and questionnaire	DONS and DHONS	annual	▪results of audit ▪updated policy	Follow up by nursing director and training and awareness enhanced

26 EXCEPTIONS

26.1 There are no exceptions to this policy

APPENDIX A PERSONS/GROUPS INVOLVED IN THE DEVELOPMENT AND APPROVAL OF THIS DOCUMENT

Level of involvement:

HR Managers *Review and comment*

HR Officers	Review and comment
1. <i>HR Officer 1</i> 2. <i>HR Officer 2</i> 3. <i>HR Officer 3</i> 4. <i>HR Officer 4</i> 5. <i>HR Officer 5</i> 6. <i>HR Officer 6</i> 7. <i>HR Officer 7</i> 8. <i>HR Officer 8</i> 9. <i>HR Officer 9</i> 10. <i>HR Officer 10</i> 11. <i>HR Officer 11</i> 12. <i>HR Officer 12</i> 13. <i>HR Officer 13</i> 14. <i>HR Officer 14</i> 15. <i>HR Officer 15</i> 16. <i>HR Officer 16</i> 17. <i>HR Officer 17</i> 18. <i>HR Officer 18</i> 19. <i>HR Officer 19</i> 20. <i>HR Officer 20</i> 21. <i>HR Officer 21</i> 22. <i>HR Officer 22</i> 23. <i>HR Officer 23</i> 24. <i>HR Officer 24</i> 25. <i>HR Officer 25</i> 26. <i>HR Officer 26</i> 27. <i>HR Officer 27</i> 28. <i>HR Officer 28</i> 29. <i>HR Officer 29</i> 30. <i>HR Officer 30</i> 31. <i>HR Officer 31</i> 32. <i>HR Officer 32</i> 33. <i>HR Officer 33</i> 34. <i>HR Officer 34</i> 35. <i>HR Officer 35</i> 36. <i>HR Officer 36</i> 37. <i>HR Officer 37</i> 38. <i>HR Officer 38</i> 39. <i>HR Officer 39</i> 40. <i>HR Officer 40</i> 41. <i>HR Officer 41</i> 42. <i>HR Officer 42</i> 43. <i>HR Officer 43</i> 44. <i>HR Officer 44</i> 45. <i>HR Officer 45</i> 46. <i>HR Officer 46</i> 47. <i>HR Officer 47</i> 48. <i>HR Officer 48</i> 49. <i>HR Officer 49</i> 50. <i>HR Officer 50</i> 51. <i>HR Officer 51</i> 52. <i>HR Officer 52</i> 53. <i>HR Officer 53</i> 54. <i>HR Officer 54</i> 55. <i>HR Officer 55</i> 56. <i>HR Officer 56</i> 57. <i>HR Officer 57</i> 58. <i>HR Officer 58</i> 59. <i>HR Officer 59</i> 60. <i>HR Officer 60</i> 61. <i>HR Officer 61</i> 62. <i>HR Officer 62</i> 63. <i>HR Officer 63</i> 64. <i>HR Officer 64</i> 65. <i>HR Officer 65</i> 66. <i>HR Officer 66</i> 67. <i>HR Officer 67</i> 68. <i>HR Officer 68</i> 69. <i>HR Officer 69</i> 70. <i>HR Officer 70</i> 71. <i>HR Officer 71</i> 72. <i>HR Officer 72</i> 73. <i>HR Officer 73</i> 74. <i>HR Officer 74</i> 75. <i>HR Officer 75</i> 76. <i>HR Officer 76</i> 77. <i>HR Officer 77</i> 78. <i>HR Officer 78</i> 79. <i>HR Officer 79</i> 80. <i>HR Officer 80</i> 81. <i>HR Officer 81</i> 82. <i>HR Officer 82</i> 83. <i>HR Officer 83</i> 84. <i>HR Officer 84</i> 85. <i>HR Officer 85</i> 86. <i>HR Officer 86</i> 87. <i>HR Officer 87</i> 88. <i>HR Officer 88</i> 89. <i>HR Officer 89</i> 90. <i>HR Officer 90</i> 91. <i>HR Officer 91</i> 92. <i>HR Officer 92</i> 93. <i>HR Officer 93</i> 94. <i>HR Officer 94</i> 95. <i>HR Officer 95</i> 96. <i>HR Officer 96</i> 97. <i>HR Officer 97</i> 98. <i>HR Officer 98</i> 99. <i>HR Officer 99</i> 100. <i>HR Officer 100</i>	1. <i>Review and comment</i> 2. <i>Review and comment</i> 3. <i>Review and comment</i> 4. <i>Review and comment</i> 5. <i>Review and comment</i> 6. <i>Review and comment</i> 7. <i>Review and comment</i> 8. <i>Review and comment</i> 9. <i>Review and comment</i> 10. <i>Review and comment</i> 11. <i>Review and comment</i> 12. <i>Review and comment</i> 13. <i>Review and comment</i> 14. <i>Review and comment</i> 15. <i>Review and comment</i> 16. <i>Review and comment</i> 17. <i>Review and comment</i> 18. <i>Review and comment</i> 19. <i>Review and comment</i> 20. <i>Review and comment</i> 21. <i>Review and comment</i> 22. <i>Review and comment</i> 23. <i>Review and comment</i> 24. <i>Review and comment</i> 25. <i>Review and comment</i> 26. <i>Review and comment</i> 27. <i>Review and comment</i> 28. <i>Review and comment</i> 29. <i>Review and comment</i> 30. <i>Review and comment</i> 31. <i>Review and comment</i> 32. <i>Review and comment</i> 33. <i>Review and comment</i> 34. <i>Review and comment</i> 35. <i>Review and comment</i> 36. <i>Review and comment</i> 37. <i>Review and comment</i> 38. <i>Review and comment</i> 39. <i>Review and comment</i> 40. <i>Review and comment</i> 41. <i>Review and comment</i> 42. <i>Review and comment</i> 43. <i>Review and comment</i> 44. <i>Review and comment</i> 45. <i>Review and comment</i> 46. <i>Review and comment</i> 47. <i>Review and comment</i> 48. <i>Review and comment</i> 49. <i>Review and comment</i> 50. <i>Review and comment</i> 51. <i>Review and comment</i> 52. <i>Review and comment</i> 53. <i>Review and comment</i> 54. <i>Review and comment</i> 55. <i>Review and comment</i> 56. <i>Review and comment</i> 57. <i>Review and comment</i> 58. <i>Review and comment</i> 59. <i>Review and comment</i> 60. <i>Review and comment</i> 61. <i>Review and comment</i> 62. <i>Review and comment</i> 63. <i>Review and comment</i> 64. <i>Review and comment</i> 65. <i>Review and comment</i> 66. <i>Review and comment</i> 67. <i>Review and comment</i> 68. <i>Review and comment</i> 69. <i>Review and comment</i> 70. <i>Review and comment</i> 71. <i>Review and comment</i> 72. <i>Review and comment</i> 73. <i>Review and comment</i> 74. <i>Review and comment</i> 75. <i>Review and comment</i> 76. <i>Review and comment</i> 77. <i>Review and comment</i> 78. <i>Review and comment</i> 79. <i>Review and comment</i> 80. <i>Review and comment</i> 81. <i>Review and comment</i> 82. <i>Review and comment</i> 83. <i>Review and comment</i> 84. <i>Review and comment</i> 85. <i>Review and comment</i> 86. <i>Review and comment</i> 87. <i>Review and comment</i> 88. <i>Review and comment</i> 89. <i>Review and comment</i> 90. <i>Review and comment</i> 91. <i>Review and comment</i> 92. <i>Review and comment</i> 93. <i>Review and comment</i> 94. <i>Review and comment</i> 95. <i>Review and comment</i> 96. <i>Review and comment</i> 97. <i>Review and comment</i> 98. <i>Review and comment</i> 99. <i>Review and comment</i> 100. <i>Review and comment</i>

Associate HR Director Review and comment

Associate HR Director	Review and comment
HR Director	Review and comment

Infection prevention and Control Review and comment

Other:

Joint Negotiating Forum (JNF) Policy Group	Review and approval/ratification
---	----------------------------------

HR Workforce and Remuneration Committee

Nursing Workforce

Head of AHP

APPENDIX B
STAFF UNIFORMS (TUNICS/DRESSES) - MALE/FEMALE

Director of Nursing/ Deputy Director of Nursing	Locality/Area Managers & Clinical Service Managers/Matrons	Heads of Nursing
Female	Female	Female
		
Red/Navy Trim	Navy Pinstripe/White Trim	Burgundy with white stripe
Male	Male	Male
		
Red/Navy Trim	Navy Pinstripe/White Trim	Burgundy with white stripe

Band 7 Physical Health Team	Band 5 Physical Health Team
Female	Female
	
Charcoal/Red Trim	Turquoise/ White Trim
Male	Male
	
Charcoal/Red Trim	Turquoise/ White Trim

Band 3 Physical Health Team	Occupational Therapist	Quality Specialist Leads
-----------------------------	------------------------	--------------------------

Female	Female	Female
		
Lilac/White Trim	White/Green Trim	Grey/White Trim
Male	Male	Male
		
Lilac/amethyst trim	White/bottle trim	Grey/White Trim

Band 6 Physical Health Inpatient Nurses	Band 5 Physical Health Inpatient Nurses	Band 7 Practice Placement Facilitator
Female	Female	Female
		
Fine Stripe in Navy/ Navy Trim	Charcoal/White Stripe	Navy/White Spot and Trim
Male	Male	Male
		To be decided
Fine Stripe in Navy/ Navy Trim	Grey pinstripe/white trim	

Ward Manager	Deputy Ward Manager	Staff Nurse
Female	Female	Female
		
Navy/Red Trim	Navy/White Trim	Pale Blue/White Trim
Male	Male	Male
		
Navy/Red Trim	Navy/White Trim	Pale Blue/White Trim

Associate Practitioner Nurse	Occupational Therapist Assistant	Healthcare Worker/ Release Time to Care
Female	Female	Female
		
Purple/White Trim	Green/White Stripe	Lilac/White Trim
Male	Male	Male
		
Amethyst/White Trim	Green/White Trim	Lilac/Amethyst Trim

Nursing Associate		Infection Prevention and Control	
Female		Female	
			
Pale Blue/Sailor Navy Trim		Black/Red Trim	
Male		Male	
		To be decided	
Pale Blue/Sailor Navy Trim		Black/Red Trim	

APPENDIX C – 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.
- Moving between areas within a ward.

Home visits/ patient clinics

Any activity that involves patient contact, for example:

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

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

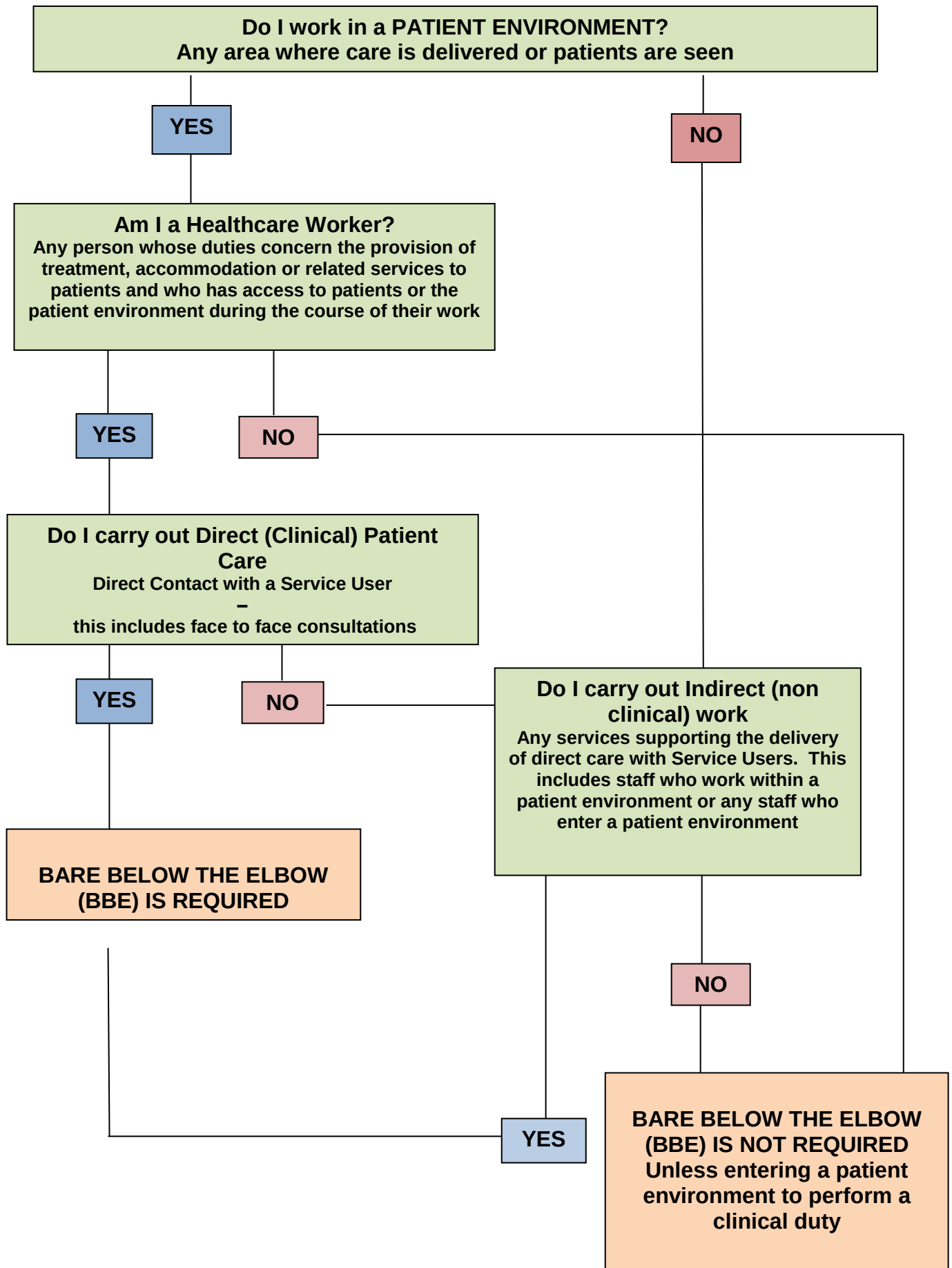
- before patient contact;
- before aseptic tasks;
- after risk of body fluid exposure;
- after patient contact; and
- after contact with a patient's surroundings.

*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 D**BARE BELOW THE ELBOWS****Bare below the elbows**

<u>Permissible Jewellery</u>	<u>Unacceptable Jewellery</u>
<u>Plain</u> band It is the employees' responsibility to ensure that all other rings are removed prior to commencing their shift or direct patient care.	Rings other than a plain band ▸ Engagement rings ▸ Eternity rings Ridges, stones or grooves harbour higher levels of micro-organisms & could potentially damage the integrity of a patient's skin
Kara bracelet A steel bracelet (usually worn on the right wrist) by members of the Sikh faith	Bracelets other than a Kara • Charity bracelets • Friendship bands • Silks loosely tied around the wrists by Hindus are not acceptable and must be removed. • Woven silk or cotton bracelets such as the Rakhis worn by Hindus and Jains for the festival of Raksha Bandhan will need to be removed for compliance with this policy.
Medic-Alert Bracelets- May be worn after consultation with Occupational Health. These must be non-fabric.	• Fitness Trackers • Dermal piercings

BARE BELOW THE ELBOW FLOW CHART



Infection Control A3 poster (KMPT publications reference KM1169)

This poster reinforces the following protocols:

- Long hair tied back
- Short clean nails
- Jewellery restrictions (plain wedding band and small stud earrings only)
- Forearms uncovered
- No nail varnish or artificial nails
- No false eyelashes

This Infection Control A3 poster can be obtained from the Communications Team by quoting publications reference code **KM1169**.

Pandemic Standard Operating Procedures (SOPs)

During a pandemic, there may be emergency Standard Operating Procedures in force, which may govern what uniforms or scrubs and Personal Protective Equipment should be worn.

During a pandemic, if staff are unsure of what uniform, scrubs, or any other form of workwear and personal protective equipment (PPE) should be worn, they should consult with the KMPT Infection Prevention and Control team.

Related Policies

- Disciplinary Policy
- Infection Control for Inpatient, Residential and Community Services Policy