



STAFF APPEARANCE AND STANDARDS POLICY

1. INTRODUCTION

- 1.1 The aim of this policy is to specify the standards of staff appearance that apply across the Trust, and to provide a clear basis for consistency.

2. POLICY STATEMENT

- 2.1 This policy applies to all staff groups whether they wear a uniform or not, including students on placement.
- 2.2 The standards described below are designed to maintain the confidence of patients and visitors in the professionalism of the Trust and its staff.
- 2.3 This policy is aligned with the Trust's Proud to CARE values (Compassion, Achievement, Relationships, Environment). Further information on the Trust's values is available on the intranet.

3. EQUALITY IMPACT ASSESSMENT

- 3.1 The Trust aims to design and implement services, policies and measures that meet the diverse needs of services, the population and workforce, ensuring that none are placed at a disadvantage over others.
- 3.2 Therefore, this policy and procedure applies to all Trust employees irrespective of age, race, colour, religion, belief, disability, nationality, ethnic origin, sexual orientation or marital status, carer status, social and employment status, HIV status, gender reassignment, political affiliation or trade union membership. All employees will be treated in a fair and equitable manner.
- 3.3 The Trust will take account of any specific access or specialist requirements for individual employees during the implementation of this policy.

4. GENERAL APPEARANCE OF ALL TRUST STAFF

- 4.1 Staff must ensure that their appearance will maintain the confidence of patients and visitors in the professionalism of the Trust and its staff at all times; whilst adhering to Health and Safety and Infection Prevention and Control guidelines.
- 4.2 All members of staff should ensure that they visibly display their ID card at all times when on duty, in line with the Staff Identification Policy, worn so staff name and designation can be easily read.
- 4.3 Staff who have contact with patients, carers, visitors or customers must not chew gum whilst on duty unless this is required for therapeutic reasons for example nicotine replacement, in which case this must be agreed with the appropriate line manager and avoided during direct communication with patients.

5.0 ATTENDANCE AT COURSES

- 5.1 Staff are reminded that whilst sponsored by the Trust to attend courses, including essential training, events or meetings on or off site they are doing so on behalf of the Trust and

therefore should reflect a professional image at all times.

- 5.2 When attending training courses on site, clinical /ward staff should wear their uniform so that they are able to report for duty in the event of a medical emergency.

6.0 STANDARDS FOR STAFF IN UNIFORM

- 6.1 Uniforms must not be worn in a public place outside working time; whenever it is possible staff should change into and out of uniform at work, before starting and after finishing their shift. It is permissible to travel directly to and from work in uniform but then a coat, cardigan etc should be worn over the uniform. It is recognised that staff who work in the community will be in their uniform in public places during working hours. Smoking whilst in uniform is not acceptable.

- 6.2 Whilst wearing uniform, staff should recognise that they are acting as ambassadors for the Trust and as such patients and members of the community have no way to know if a person is 'on duty' or not. Staff are asked to consider their professional appearance and behaviours which reflect not only on themselves but also the Trust and their profession.

- 6.3 All staff who have regular contact with patients, patients environments or members of the public, and who are issued with a uniform, will be required to wear their uniform whilst at work and undertaking such duties. Staff uniforms must not be personalised in any way.

- 6.4 Any staff who deliver direct patient care and are not in uniform should ensure they are bare below the elbow and should not allow neck ties, where worn, to dangle loose.

- 6.5 Identification cards should be securely clipped to the uniform, so clearly visible. In addition, fob watches and Trust approved badges, promoting professional qualifications or affiliations, may be pinned to the uniform. E-cigarettes must not be worn around the neck.

- 6.6 Hair must be worn either no longer than shoulder length or be tied back off the face and shoulders. Hair must be kept clean, neat and tidy at all times.

- 6.7 Staff who are in direct contact with patients must ensure that fingernails are kept short and clean. Nail varnish, false nails and nail jewellery are not appropriate in clinical or food preparation and serving areas.

- 6.8 Staff should ensure that their footwear is clean, compliant with health and safety legislation, and is appropriate for a professional image. For example dark coloured, closed toe, quiet sole, non-slip and unadorned. Tights/stockings should be plain.

- 6.9 A plain wedding band, a plain watch, medical talisman or jewellery worn for religious reasons is permitted provided that there are no Health & Safety, Food Safety, or Infection Control implications; any piercings must be of stud type.

- 6.10 Cardigans, fleeces etc should be in keeping with the relevant uniform colours to present a professional image.

- 6.11 If protective clothing is needed or provided for particular duties, it must be worn when these duties are carried out.

7.0 STANDARDS FOR STAFF NOT IN UNIFORM

- 7.1 Staff need to consider the role they perform and their dress and ensure that this is suitable for their position.

- 7.2 Identification cards should be clearly visible at all times. Lanyards should be clean. Only NHS approved, or plain, lanyards should be worn.

- 7.3 Staff should wear footwear that complies with the Health and Safety requirements of their

post and is appropriate for the environment in which they work.

8.0 GENERAL STANDARDS

8.1 Staff should not use MP3 Players, i-pods, mobile phones, whilst on duty unless these are appropriate for role. In some circumstance it would be acceptable for mobile phones to be needed for personal use with reasonable judgement.

8.2 Reasonable adjustments may be agreed for those who are unable to fully comply to these standards due to health or religious grounds. Please speak to Human Resources for guidance if you are unsure.

9. ROLES AND RESPONSIBILITIES

9.1 All staff will be responsible for following the requirements of this policy.

9.2 All line managers are responsible for ensuring that staff adhere to this policy.

9.3 Human Resources will provide advice and guidance to all staff and line managers where necessary.

10. TRAINING REQUIREMENTS

10.1 Staff will be informed of the requirements of this policy at departmental induction.

11. MONITORING

11.1 All managers should ensure adherence to this policy, with guidance from their line manager Human Resources and Infection Control

12. KEYWORDS

12.1 Uniform; Appearance; Image

13. REFERENCES

13.1 Department of Health (2007) Uniforms and Workwear: An evidence base for developing local policy (TVU1, TVU2, UCLH)

Centres for Disease Control and Prevention, Guidelines for Hand Hygiene in Health-Care Settings: Recommendations of the Healthcare Infection Control Practices Advisory Committee and the ICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMRW 2002;51 (No. RR-16) (CDCP)

The Health and Safety at Work etc Act 1974

The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH)

Management of Health and Safety at Work Regulations 1999

'Securing Health Together'; Health and Safety Executive (HSE) long term strategy for occupational health

Health Act 2006 Code of Practice, Duty 4

14. RELATED POLICIES

- 14.1 Staff Identification Policy
- Infection Control Policies Manual
- Health and Safety Policy and Codes of Practice Manual
- Disciplinary Policy
- Equal Opportunities Policy

Date ratified:	Staff Partnership Committee – September 2016
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For review by:	Professional Standards Group
Director responsible:	Director of Nursing and Patient Care Medical Director

EQUALITY IMPACT ASSESSMENT APPENDIX 1

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	<ul style="list-style-type: none"> • Race 	No	
	<ul style="list-style-type: none"> • Ethnic origins (including gypsies and travellers) 	No	
	<ul style="list-style-type: none"> • Nationality 	No	
	<ul style="list-style-type: none"> • Gender 	No	
	<ul style="list-style-type: none"> • Culture 	No	
	<ul style="list-style-type: none"> • Religion or belief 	No	
	<ul style="list-style-type: none"> • Sexual orientation including lesbian, gay and bisexual people 	No	
	<ul style="list-style-type: none"> • Age 	No	
	<ul style="list-style-type: none"> • Disability – learning disabilities, physical disability, sensory impairment and mental health problems 	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	Is so can the impact be avoided?	NA	
6.	What alternative are there to achieving the policy/guidance without impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	

GUIDANCE FOR WASHING UNIFORMS AT HOME APPENDIX 2

The empirical evidence (UCLH) looked at the removal of deliberate contamination from swatches of uniform material held in the pockets of uniforms, and at the removal of contaminants during the uncontrolled washing of uniforms in a nurse's home laundry.

Wash uniforms at the hottest temperature suitable for the fabric. A wash for ten minutes, at 60C, removes most micro-organisms

Clean washing machines and tumble driers regularly and maintain according to manufacturer's instructions. Dirty or under-performing machines can result in contamination with environmental micro-organisms. There is no published evidence that this is an infection control risk, but it is prudent to avoid it.

Provide sufficient uniforms for the recommended laundry practice. Staff who have too few uniforms may be tempted to reduce the frequency of laundering.

Where necessary in order to avoid overloading wash uniforms separately from other clothes. No evidence of cross-contamination, but overloading the machine will reduce wash efficiency. Staff may be tempted to wash mixed loads at lower temperatures than recommended.