

Dress Code Policy

1. Introduction

This policy sets out the expectations for colleagues with regard to the wearing of uniforms and gives a dress code for those who are not required to wear a uniform.

2. Purpose

This policy aims to provide standards of dress expected of all staff working for Sheffield Teaching Hospitals NHS Foundation Trust that comply with health and safety, infection prevention and patient safety requirements. It is not intended to deny the rights of staff to reflect their individuality, culture or prevent them from feeling comfortable and safe at work. The Trust is committed to fair and equitable treatment of all staff irrespective of age, sex, religion or belief, disability, race, sexual orientation, gender reassignment, pregnancy and maternity, or marriage and civil partnership, which are all “protected characteristics” under the Equality Act.

3. Scope and exceptions

This policy applies to:

Setting	Trust Wide
Individuals	The policy applies to all staff working at Sheffield Teaching Hospitals NHS Foundation Trust including those with honorary contracts, agency workers, and volunteers and other people acting on behalf of or in conjunction with Sheffield Teaching Hospitals NHS Foundation Trust.
Speciality	Not applicable
Students	Students undertaking clinical or other placements are expected to adhere to the policies agreed between the Trust and the relevant education provider.
New Employees	Staff are advised of the dress code policy and requirements before they commence employment.

4. General Principles

The Dress Code Policy is necessary to:

- Present a smart and professional image, thereby increasing patient and public confidence
- Support infection prevention and control and minimise risks to patients
- Have regard to health and safety
- Represents the Trust's PROUD values and behaviours by being inclusive and culturally responsive to colleagues' identities, beliefs and religions

The Trust considers the way employees dress and their appearance to be of significant importance in portraying a corporate and professional image to all users of its services, whether patients, visitors, clients or colleagues wherever they are working on site, another location or remotely at home. The way people dress is an important influence on people's overall perceptions of the standards of care they experience.

The Trust recognises and values the diversity of cultures, religions, identities and disabilities of its employees and will take a sensitive approach where this affects dress and uniform requirements. However, there may be circumstances in which there are genuine occupational reasons as to why the wearing/not wearing of certain articles and/or clothing is not permissible.

Every effort has been made to reach assurance that this policy does not cause either offence or discrimination. However, individual cases will be considered on their merits.

The Dress Code Policy is designed to guide managers and employees on the application of Trust standards of dress and appearance. The policy is not exhaustive in defining acceptable and unacceptable standards of dress/appearance, and staff should use reasonable judgement in adhering to the principles underpinning the policy.

Any queries regarding changing the colour of or design of any clinical uniforms must be directed to the relevant Executive Director.

For the purposes of this policy, direct patient care and clinical areas are identified as:

- Direct patient care: may involve health care staff members or health care providers, who can reasonably expect to come into contact with patients or the immediate patient environment, to provide any aspects of health care of a patient, including treatments / investigations, counselling, self-care, patient education and administration of medication.

- Clinical area: Any area / environment where patients are treated or where direct patient care is provided.

4.1 Equality Considerations

Dress codes can be considered to be discriminatory on a number of grounds covered by the Equality Act 2010; therefore, equality and diversity has been considered throughout the policy and the principles should be applied consistently to all staff and to people of any sexual orientation.

- **Transgender staff** - colleagues can dress in accordance with the gender they identify as, unless they choose not to. It should also be considered that colleagues may have a fluid gender identity or choose not to dress in a way traditionally associated with their gender. Please refer to the [Supporting Trans Non-Binary and Gender Diverse Patients and Staff Guidance](#) for further practical advice.
- Pregnancy – pregnancy uniform options are available. Colleagues whose uniforms are ordered via the sewing room as outlined in Appendix 5 are advised to contact the sewing room for advice on the options available as soon as they are aware they are pregnant so uniforms can be ordered and received in good time. For colleagues where uniform is ordered locally within the service please speak to your line manager.
- Lightweight uniforms – some lightweight uniform options are available which may be beneficial for colleagues experiencing symptoms of menopause or other medical conditions. Colleagues are advised to contact the sewing room for advice on the options available and to arrange an order to be placed.
- Religious head coverings are permitted to be worn in clinical areas including theatres. Please refer to section 4.7.4. and section 4.9.
- Staff who wish to wear necklaces for religious or cultural reasons may do so. In these situations, they must be worn inside the clothing and be long enough to be obscured from view. If there is the risk of the necklace falling forward when bending and patient providing care they must be pinned to the inside of the clothing. Staff will be asked to remove the necklace if they breach these standards
- The hidden disabilities sunflower lanyard can be worn. Clinical staff must tuck this into the top pocket so it is not dangling when providing direct patient care.
- Any request for adjustments to the Dress Code standards should be requested and discussed with your line manager and will be considered on an individual basis.

4.2 Identity Badges

All employees are supplied with a Trust identity security badge which must be worn and visible and available when in clinical areas, and available at all times when on duty or acting in an official capacity representing the Trust.

Newly Registered Nurses and Newly Registered Midwives awaiting confirmation of NMC registration will also be issued with a badge (see picture below) on commencement of employment by their line manager which must be worn until their NMC registration is active. The new registrant must return the badge to their line manager once they have received their NMC PIN Number.



A lanyard must not be worn with a clinical uniform and must be removed when providing direct patient care, due to risks around infection, prevention and control, including cross contamination. The only exception is the hidden disabilities sunflower lanyard which can be worn and tucked into the top pocket so it is not dangling. The Trust advocates a clip-on pocket version only to display a security badge. For other staff, where a lanyard is worn, individuals have a responsibility to ensure that the lanyard is clean. Lanyards should be of three-point release designed to prevent injury and if a lanyard contains a logo, the logo must be a discreet NHS, Trust, Directorate or other Trust-approved logo.

Some employees have been issued with small corporate name badges. Trust identity security badges should still be worn even when such name badges are used.

4.3 Dress Code for Staff who do not wear Uniform

The standards of dress are set out below and summarised for all staff in Appendix 4.

4.3.1 Clothing

Unless part of a departmental uniform or Trust promotion, it is expected that staff will wear smart clothing that should be in good repair and clean, with due consideration given to health and safety and for the Trust's public image. Trousers or skirts that are of a length that they touch the ground when walking are not acceptable for safety and hygiene reasons. Smart shorts

are permitted for staff in non-clinical roles Jeans, must not be worn. Smart casual wear is acceptable when attending training courses.

Ties may be worn but must be removed or secured when providing direct patient care to reduce the risk of cross contamination. Ties are rarely laundered but worn daily. They perform no beneficial function in patient care and have been shown to be colonised by pathogens.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5878945/>

4.3.2 Footwear

Footwear must be safe, sensible, in good order, 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 staff who are uncertain must check with their line manager. Trainers are an acceptable alternative to a shoe providing they are able to be wiped clean or washed in the event of becoming contaminated. Ideally, trainers should be neutral or dark in colour and as plain as possible. The only alternative footwear permitted will be footwear required for health and safety reasons following a departmental risk assessment. Flip-flops, sliders or any shoes with a fully open back are not a permitted item of footwear for health and safety reasons. Sandals that are secured at the front and heel are permitted.

4.4 Dress Code for Staff who do not wear Uniform when providing direct Care

The standards of dress are set out below and summarised for all staff in Appendix 4.

In consultation with the relevant departmental managers authorisation of the non-wearing of uniform in specific specialist roles may be granted, i.e.

- The client-clinician relationship has the potential to be compromised by the wearing of a uniform
- The non-wearing of a uniform will not create unacceptable risk to safety and infection prevention and control

In these situations, staff are still required to comply with the Dress Code and the Hand Hygiene Policy.

http://nwww.sth.nhs.uk/STHcontDocs/STH_Pol/ClinicalGovernance/HandHygienePolicy.doc.doc

4.5 Bare Below the Elbow / False Nails, Gel and Nail Varnish

Staff not wearing a clinical uniform who are providing direct clinical care must comply with section 4.6.6 to remain compliance with Bare Below the Elbow (BBTE) infection prevention and control standards. This section details information in relation to nails and nail varnish.

4.6 Trust Clinical Uniform requirements (for Staff/Students required to wear a Uniform)

A summary of the clinical staff who are required to wear a uniform is available at Appendix 1. The standards of dress are set out below and summarised for all staff in Appendix 4.

4.6.1 General principles for Uniform wearers

All staff required to wear uniform should wear Trust issued uniforms which have been agreed for their staff group following the principles outlined in this policy.

The uniform should be clean, present a professional appearance and should be comfortable and allow for unrestricted movement. All clinical staff will be expected to wear a comfortably fitting Trust uniform, which denotes their role, when giving clinical care or undertaking administrative duties in a clinical setting (wards, departments and community settings). Appropriate uniform does not include wearing a cardigan or zip up fleeces when giving direct physical clinical care. Smart knee length shorts are permitted for staff in clinical roles, the colour of which should be in keeping with the uniform e.g. black, navy blue. Denim or sports shorts are not acceptable uniform items.

All staff must have access to a spare uniform in case one becomes soiled during the shift (either by keeping a spare in their locker or accessing through the auto-valet service). In the event of a uniform becoming contaminated, it should be changed immediately or as soon as possible if it occurs during a clinical emergency. In the unlikely event of the staff member not having a spare uniform, auto-valet at the Royal Hallamshire Hospital can provide access to shower facilities (24 hours) and access to an emergency uniform Monday to Friday 07:00 hours to 16:00 hours. The spare uniform must be returned at the end of the shift for laundering.

There are various changing facilities located across the Trust main sites (Northern General and Royal Hallamshire Hospitals, Jessop Wing, Weston Park and Charles Clifford Dental Hospitals).

Community / outreach staff should have access to a clean uniform within their work area and may return home for a shower if contamination occurs – following discussion with the line manager.

All hospital-based staff should **change** into uniform immediately before commencing duty and **change** out of uniform before going off duty. All staff who provide direct patient care should have sufficient uniforms to enable them to wear a freshly laundered uniform for each shift. The procedure for supply and return of uniforms is covered in Appendix 4.

4.6.2 Laundering of Uniforms

The Trust does provide a laundry service, and staff are encouraged to use it. However, staff who prefer to launder their uniforms themselves must ensure that uniforms worn for providing direct patient care are laundered in accordance with Infection Prevention and Control Policy for the Management of Linen and Laundry:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/ClinicalGovernance/LinenAndLaundry.doc

4.6.3 Travelling between Locations

Hospital and community-based staff travelling between external locations that are part of STH (inclusive of the five sites and community bases) are permitted to wear uniform where appropriate to do so including when using the shuttle bus or car. Where individuals are attending other external organisations / agencies permission should be sought from their line manager in relation to the wearing of uniforms. The wearing of the Trust clinical uniform in public places such as a supermarket is not acceptable. Hospital based staff who are required to make a home visit must wear uniform in accordance with Appendix 1.

Community / outreach staff visiting patients in their own homes are permitted to travel between home and work in their uniform as long as it is covered appropriately – it is acknowledged that community staff may not be able to fully cover their uniform in summer. Staff working in inpatient areas in

community settings e.g. SPARC at Beech Hill must follow the principles in Section 4.4. and Section 4.6.6.

4.6.4 Footwear

Footwear must be safe, sensible, in good order, smart and clean and have regard to health and safety considerations. Healthcare Professionals including Nurses and Support Workers should wear a soft soled full shoe closed over the foot and toes (containing no holes) to offer protection from spills and objects. Shoes should be clean, in good repair, plain, low heel (around 3cm), non-slip, and black or navy blue in colour. Trainers are an acceptable alternative to a shoe providing they are wipeable or washable materials. Ideally, trainers should be neutral or dark in colour and as plain as possible. There may be occasions when alternative footwear is required for example, Labour ward where regular decontamination is required, or where safety shoes are required due to the work environment, these should be agreed following completion of a risk assessment. Flip Flops, sliders or any shoes with a fully open back are not a permitted item of footwear for health and safety reasons. Sandals that are secured at the front and heel are permitted.

4.6.5 Tights

Tights should be plain black / navy blue, barely black, grey or neutral to individual skin tone.

4.6.6 Bare Below the Elbow (BBTE)

The requirement to be Bare Below the Elbow is defined in the STH Hand Hygiene Policy as follows:

All health care providers and those who provide goods and services to patients must:

- Comply with Bare Below the Elbow whilst in clinical uniform or whenever they are in a clinical area on STH premises in both acute and community settings, where they can reasonably expect to come into contact with patients or the immediate patient environment. This will include in-patient wards, theatres, out-patient departments and community settings.
- Staff who for religious reasons wish to keep their arms covered may wear full length sleeves for non-direct patient care, or three-quarter sleeves for

direct patient care on wards. Alternatively, disposable over sleeves provided by the Trust may be used and must be discarded in the same way. Strict handwashing procedures must still be observed.

- The Sikh Kara (bangle) may be worn and must be worn as high up the forearm as possible or removed when carrying out direct patient care. Alternatively, disposable oversleeves may be worn as per above.
- Keep fingernails clean and short, to ensure safe patient contact and in order to minimize potential transmission of pathogens.
- Not wear artificial nails, gels or wraps, as these may also harbour fungi and bacteria (refer to Section 4.5).
- Not wear nail polish or gel nails.
- Not wear hand jewellery other than one simple un-stoned plain band.
- Not wear wrist watches, fitness devices or any other wrist adornments
- Maintain their skin integrity: cover open cuts or sores on hands and wrists with waterproof dressings.

‘Health care provider’ for the purpose of the Hand Hygiene Policy means ‘any person who provides direct and / or indirect patient care in a clinical area as well as those providing goods / services in support areas (i.e. Administrative and Clerical staff, Pharmacy staff, Allied Health Professionals (AHP), Facilities, Estates)’. This is inclusive of all AHP staff, medical staff, catering and domestic staff, volunteers and other people acting on behalf of, or in conjunction with, Sheffield Teaching Hospitals NHS Foundation Trust.

NB If there is a cultural reason for the wearing of jewellery this should be discussed with the line manager to look at ways to ensure the staff member is compliant with BBTE to maintain patient safety.

4.7 Wearing of Accessories (All Staff and Students)

4.7.1 Cardigans

Staff who wear uniform may also wear black or navy-blue cardigans, jumpers or zip up fleeces which must be removed when providing direct clinical care.

A discreet Trust, Directorate or Trust-approved charity logo is permitted but no other logo. Community staff should wear the uniform coat provided.

4.7.2 Jewellery, Piercings, Badges and other Accessories

Any jewellery worn should be discreet, appropriate, and not cause offence or be a health and safety or infection control hazard.

Jewellery for staff who work in a patient-facing environment must be kept to a minimum, as outlined below:

- One un-stoned plain band. The ring must be mobile enough to allow the wearer to wash underneath the ring to comply with 'Bare Below the Elbow' (BBTE).
- To comply with 'Bare Below the Elbow' wrist watches and fitness trackers must not be worn in a clinical area.
- One pair of small plain stud earrings is permissible. A 'tunnel' or 'plug' if worn must be as close to natural skin tone for the individual and will count as the equivalent of one pair of plain earrings.

In addition, one discreet nose, tongue, ear or facial (stud only) piercing is permitted and must not present a health and safety or infection prevention and control risk i.e. contain stones. New visible body piercings should be covered with a blue plaster until the wound has healed. Once the wound has healed, the above principles apply.

No other jewellery, including neck chains, can be worn.

NB If there is a cultural reason for the wearing of jewellery this should be raised with the line manager to look at ways to ensure the staff member is compliant with BBTE to maintain patient safety.

Some people wear a necklace or bracelet to highlight a disability in case of an emergency. Medic-alert jewellery may be worn but must be cleanable, plain and discreet. A medical alert necklace should be worn in preference to a medical alert bracelet. Staff should make sure their line manager is aware of their medical alert situation.

Staff who wish to wear necklaces for religious or cultural reasons may do so.

In these situations they must be worn inside the clothing and be long enough to be obscured from view. If there is the risk of the necklace falling forward when bending and patient providing care they must be pinned to the inside of the clothing. Staff will be asked to remove the necklace if they breach these standards.

Badges denoting professional qualifications / memberships / Trust-approved badges are acceptable so long as they are not a health and safety or infection control hazard.

Carrying pens, and other sharp or hard objects in outside breast pockets may cause injury or discomfort to patients during care activity. They should be carried inside clothing or hip pockets.

4.7.3 Wearing of Religious Adornments

Staff members who wish to wear a visible faith symbol for religious reasons may wear a small and unobtrusive badge on the lapel or underclothing, as long as they do not present a risk either to the health and safety or a risk of infection to the individual wearing them or anyone else.

4.7.4 Hair and Headscarves / Turbans / Kippots / Hijab

Locs, Braids, Afro-textured, Natural twists, natural and relaxed hair are Acceptable, as are wigs, weaves and extensions however these must be secure as with all hair styles. Hair should be neat and tidy at all times and in the clinical environment long hair should be off the collar, tied back off the face and should not be able to fall forward and contaminate a patient's personal space or become caught in moving parts of machinery or equipment. Likewise, requirements for long hair to be tied up on health and safety or hygiene grounds should be applied consistently to all staff. A plain hair adornment is acceptable.

Staff working in certain environments, i.e. operating theatres, catering or a kitchen environment, must ensure that their hair is kept covered at all times with a clean, disposable hat which should be changed at least daily or on leaving the environment. Hats should be changed if they become contaminated. Beards should be short and neatly trimmed. It is recommended that longer beards should be covered with a beard net with a mask on top. In the theatre suite when hats are not worn, hair should comply with the above.

Headscarves, turbans, Kippah/Tichel and Hijabs worn for religious purposes are permitted on religious grounds in most areas, however there are specific arrangements in areas such as operating theatres (refer to section 4.6.6), where they could present a health and safety and cross-infection hazard. In the theatre environment they must not drape freely and must be tucked inside scrubs with an optional theatre hat or hood on top. If headscarves or hijabs are worn they should be neutral, black or navy-blue in colour or in keeping with the colour of the uniform worn, as small and neat as possible, shoulder length and should not have adornments attached (e.g. brooches, beads and tassels). Colleagues can wear their own item of headwear or one provided by the Trust as part of uniform provision. All items worn should comply with the Trust's Infection Prevention and Control Policy for the Management of Linen and Laundry, which is available at:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/ClinicalGovernance/LinenAndLaundry.doc

4.7.5 Facial Covers

To ensure effective identification and communication clothing, such as a veil or Niqab (a veil worn by some Muslim women in public, covering all the face apart from the eyes), is not permitted for staff in contact with patients, carers or visitors, or for staff in other roles where clear face to face communication is essential, such as when delivering or attending training. Staff who wear facial coverings for religious reasons are required to remove them whilst on duty. This is to ensure that the member of staff is identifiable, and to enhance engagement and communication with patients, visitors and colleagues. Staff may wear a veil when they are not working i.e. during breaks. Staff should be prepared to remove their veil if asked to check their identity against their ID badge.

4.7.6 Make-up, Perfume and Aftershave

The use of make-up, perfume and aftershave should be neutral discreet.

4.7.7 Temporary False Eyelashes

Temporary false eyelashes may be worn in a short and natural-looking style. Long, high volume 'party' styles of lashes are not permitted.

Temporary false eyelashes of any kind may not be worn by staff working in Theatres / Interventional Areas.

4.7.8 Tattoos

Visible tattoos should not be offensive to others (examples of this are symbols or imagery that are hateful or disrespectful). Offensive tattoos must be covered. When it is not possible to comply with Bare Below the Elbows (BBTE) and ensure the offensive tattoo is covered, this must be discussed with the senior manager and HR Business Partner or representative from the Medical HR team.

4.7.9 Requests for Variations to the Dress Code Policy

If a member of staff feels that on the grounds of religious, cultural or special needs that a variation to this policy is required in any clinical setting, where a procedure will be performed which should be taken into account; this must be raised with their line manager and a Human Resources Business Partner or representative from the Medical HR team.

4.8 Personal Protective Clothing and Equipment (PPE)

A number of clinical and non-clinical staff groups are required to wear protective clothing as part of their individual role. The principles are based upon the need for:

- Patient safety
- Personal safety
- Statutory regulatory requirements
- Work environment
- Health and safety requirements
- Infection prevention and control requirements

Each manager must ensure that personal protective clothing and equipment is available to the employee if identified as necessary in the risk assessment, in accordance with the regulations (i.e. COSHH and any other statutory or local regulations in place) or in accordance with infection prevention and control guidance (e.g. plastic gloves and aprons). The provision of personal protective equipment is the responsibility of the Trust's policy on Personal Protective Equipment Policy (PPE), which may be accessed at:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/HealthAndSafety/PersonalProtectiveEquipmentProcedure.doc

and Infection Prevention and Control Policy, which may be found at:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/HumanResources/BloodExposurePolicy.doc

Staff in roles in which they are required to wear protective clothing must wear this whilst carrying out their duties and only wear it in the area where the work is undertaken e.g. lab coats are not permitted to be worn outside the laboratory areas for infection control reasons. If individuals are unsure about such requirements they should discuss this with their line manager. Eye and face protection (including full face visors) must not be impeded by accessories such as piercings and false eyelashes. Due to the requirement for staff to practice optimum hand hygiene, BBTE will apply when considering appropriate clothing.

4.8.1 Staff wearing Scrubs (Theatre Blues / Greens)

In certain approved areas Scrubs (Theatre Blues / Greens) may be the appropriate uniform for the clinical work undertaken ie cath lab, vascular angiography, endoscopy, physiology. Staff must change into appropriate uniform to undertake invasive clinical interventions and Aerosol Generating Procedures (AGPs). However, it is essential that the dress code policy is maintained. Scrubs must be clean at the beginning of every shift and changed each time they become stained with blood or body fluids.

4.9 Dress Code for Staff/Students in Theatre / Interventional Areas

In addition to the guiding principles the following will apply:

Staff should wear well fitted dedicated operating theatre footwear. This footwear should be 'fully enclosed' (containing no holes) and have a back strap in use. These must be cleaned and decontaminated on a regular basis, particularly when visibly dirty or when contaminated with blood or body fluids. Each departmental manager should ensure that local procedures for cleaning and decontamination of footwear are in place.

Scrubs can only be worn outside of the theatre / interventional environment in the following circumstances:

- When attending a clinical emergency
- When accompanying a patient to another clinical area
- When undertaking duties to support clinical care

It is not acceptable to wear theatre scrubs in non-clinical areas or public areas including the dining room or outside of the hospital, for example, on public transport (including the hospital shuttle bus), walking to and from work or in personal cars.

When attending a clinical emergency, theatre headgear and masks should be removed.

Within the operating theatre, hair must be entirely covered with a clean, disposable hat which should be changed at least daily or on leaving the theatre suite. Hats should be changed if they become contaminated with blood or body fluids. It is recommended that beards that cannot be fully covered with a mask should be covered with a beard net with a mask on top. In the theatre suite when hats are not worn, hair should be off the collar, tied back and off the face and should be able to fall forward into patient spaces and contaminate a patient's personal space or become caught in moving parts of machinery or equipment.

It is recommended by the Infection Control Department that all immediate scrub teams should wear masks, but the wearing of masks by other operating theatre personnel should be at the discretion of the individual consultant surgeon involved. Every individual in the operating theatre should wear a mask when prosthetic or implantation surgery is being performed, or if the patient is immuno-compromised. Masks should be removed and disposed of at the end of each case, as they are single use items. Masks should not be worn hanging around the neck.

All Personal Protective Equipment (PPE) must be removed when leaving the theatre environment for natural breaks or extended periods away from the environment.

The routine use of agreed theatre gowns is recommended to protect both the patient and the individual employee. The provisions on theatre gowns are contained in the Trust's Infection Control Policy which may be accessed at:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/HumanResources/BloodExposurePolicy.doc

Clean, cloth headscarves, secured neatly can be worn for each theatre attendance with or without an additional cap. Headscarves should be neutral, black or navy-blue in colour and should not have adornments attached (e.g. brooches, beads and tassels). A headscarf if worn should comply with the Trust's Infection Prevention and Control Policy for the Management of Linen and Laundry.

The Turban, Kippah/Tichel is permitted in Theatre with or without a theatre cap.

The Trust currently provides 4 types of theatre hat: tie back, elasticated, bouffant/mob caps and hoods. Staff are permitted to purchase their own reusable theatre caps if preferred to accommodate their personal/religious needs e.g. to accommodate longer or larger hairstyles.

4.9.1 Visitors to the Operating Theatre Complex

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

4.10 Other Healthcare Professional Groups

All staff are expected to comply with the Trust Dress Code Policy and also comply with local regulatory and good practice requirements.

Certain jobs and roles require employees to wear and adopt Personal Protective Equipment (PPE) for health and safety reasons and to comply with health and safety / food hygiene legislation and good practice. Examples would include roles in the Estates and Facilities Directorates.

All staff involved in food preparation and service must wear the appropriate uniform, headwear and, where required, protective shoes, and comply with the Trust's Hand Hygiene Policy, link below:

http://nww.sth.nhs.uk/STHcontDocs/STH_Pol/ClinicalGovernance/HandHygienePolicy.doc.doc

5. Roles and responsibilities

Role	Responsibility
Managers	<p>Managers are responsible for:</p> <ul style="list-style-type: none"> familiarising themselves with the Trust Dress Code Policy ensuring they understand what can/can't be worn in their working environment for proactively communicating the Dress Code Policy to staff as part of local induction to ensure they feel safe and welcome at work. ensuring the dress code policy is adhered to at all times in respect of the employees they manage

Employees	Employees are responsible for following the standards of the dress code, as outlined in this policy, and to be aware of how this policy relates to their working environment; health and safety, infection prevention and control, particular role / duties and contact with others during the course of their employment. Failure to adhere to the Trust's standards of dress and appearance may constitute misconduct and may result in formal disciplinary proceedings.
Human Resources/Medical Human Resources	To advise on the application of the Policy and seek specialist input from EDI colleagues as required in response to individual requests or concerns.
EDI Team	To keep HR/Medical HR and Trust managers up to date on changes to legislation and best practice with regard to EDI in relation to dress code.

6. Monitoring

Standard, process or issue to be monitored	Monitoring method	Monitored by	Reported to	Frequency
Compliance with the Dress Code Policy should be undertaken locally by line managers	Monitoring of compliance with the Dress Code Policy and employees' wellbeing	Line manager	Clinical Director, Nurse Director, Operations Director, or Corporate Services Director	Ongoing

7. Definitions

Term	Description
BBTE	Bare Below the Elbow
HSAWA	The Health and Safety at Work Act 1974
PPE	Personal Protective Equipment

8. References / standards and statutory legal requirements

The Health and Safety at Work etc. Act 1974

Primary piece of legislation covering occupational health and safety in Great Britain; Section 2 HSWA concerns risks to employees and Section 3 concerns risks to persons other than employees affected by work-related activities.

<https://www.hse.gov.uk/legislation/hswa.htm>

The Management of Health and Safety Regulations 1999

These regulations state what employers are required to do to manage health and safety under the Health and Safety at Work Act 1974 and provide general principles of prevention. They require employers to undertake a risk assessment of the health and safety implications, on employees and others who may be affected, of work-related activities.

<https://www.legislation.gov.uk/ukxi/1999/3242/contents/made>

The Personal Protective Equipment at Work Regulations 2022

These regulations set out an employer's duties concerning the provision and use of personal protective equipment (PPE) at work.

[Personal protective equipment \(PPE\) at work regulations from 6 April 2022 \(hse.gov.uk\)](https://www.hse.gov.uk/ppe/)

Provision and Use of Work Equipment Regulations 1998

These regulations place duties on entities that own, operate or have control of work equipment (including PPE) to manage risks from that equipment.

<https://www.hse.gov.uk/pubns/books/puwer.htm> **Workplace (Health, Safety and**

Welfare) Regulations 1992

These regulations stipulate that where an employee has to wear special clothing (for example, a uniform) for the purposes of work, then suitable and sufficient changing facilities are to be made available to them along with secure facilities to store personal clothing. Where work is strenuous, dirty or could result in contamination, showers must be provided.

<https://www.legislation.gov.uk/ukxi/1992/3004/contents/made>

Manual Handling Operations Regulations 1992

The Manual Handling Operations Regulations stipulate that work clothing should be well-fitting and hinder movement and posture as little as possible.

<https://www.hse.gov.uk/pubns/books/l23.htm>

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

These regulations set out the requirements that all providers must reach in order to be registered with the Care Quality Commission. Regulation 12(2) (h) details that providers must assess the risk of, prevent, detect and control the spread of infections including those that are health care associated.

<https://www.legislation.gov.uk/ukdsi/2014/9780111117613/contents>

The Health and Social Care Act 2008: Code of Practice for health and adult social care on the prevention and control of infections and related guidance

This requires that uniform and Workwear policies ensure the clothing worn by staff when carrying out their duties is clean and fit for purpose. This guidance provides that particular consideration should be given to items of attire that may inadvertently come into contact with the person being cared for and that uniform policies should specifically support good hand hygiene.

<https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance>

The Equality Act

The Equality Act 2010 legally protects people from discrimination in the workplace in relation to disability, religion or belief, sexual orientation, age, race, marriage or civil partnership, pregnancy and maternity, gender reassignment, sex.

<https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwj5g9T-v6uHAXVXW0EAHRBNDicQFnoECBUQAQ&url=https%3A%2F%2Fwww.gov.uk%2Fguidance%2Fequality-act-2010-guidance&usg=AOvVaw3fqeukLyH54bNLsT3iYT5&opi=89978449>

NHS Constitution

The Constitution sets out rights for patients, public and staff. It outlines NHS commitments to patients and staff, and the responsibilities that the public, patients and staff owe to one another to ensure the NHS operates fairly and effectively. Amongst other matters it emphasises patient safety and rights of patients to be cared for in a clean, safe, secure and suitable environment.

<https://www.gov.uk/government/publications/the-nhs-constitution-for-england>

The Health and Social Care Act 2008, Code of Practice on the Prevention and Control of Infections and related Guidance

<https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance>

Uniforms and Workwear: Guidance for NHS employers

[NHS England » Uniforms and workwear: guidance for NHS employers](#)

Health care professionals' neckties as a source of transmission of bacteria to patients: a systematic review January 2018

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5878945/>

9. Associated Trust Documents and external documents

Hand Hygiene Policy [HandHygienePolicy.doc](#)

Guidance on the selection and use of Personal Protective Equipment (PPE)
[PersonalProtectiveEquipmentProcedure](#)

Infection Prevention and Control Policy for the Management of Linen and Laundry
Quality Governance Policy [LinenAndLaundry](#)

Workplace Reasonable Adjustment Policy and Passport
[ReasonableAdjustmentsPolicy](#)

Supporting Trans Non-Binary and Gender Diverse Patients and Staff Guidance
[Supporting Trans Non-Binary and Gender Diverse Patients and Staff Guidance RS comments](#)

10. Appendices

- | | |
|------------|--|
| Appendix 1 | Summary of the application of this Policy in relation to groups of staff |
| Appendix 2 | Description of uniforms worn by Nursing and Midwifery staff |
| Appendix 3 | Description of uniforms worn by Facilities Directorate staff |
| Appendix 4 | Policy Rationale |
| Appendix 5 | Procedure for the supply and return of uniforms |

11. Document control

Ref	224
Version	6.3
Status	Current
TEG sponsor	Mark Gwilliam, Chief People Officer
Authors	Sheeba Jefferson, Nurse Director Lisa Barraclough, Head of Operational HR Sall Edwards, Associate Director of EDI
Approval body	Staff Side Chair on behalf of Staff Partnership Forum
Date approved	15/05/2025
Ratification body	Trust Executive Group (TEG)
Date ratified	18/06/2025 (minor amend 23/06/2025) (6.3 minor amend 11/07/2025)
Issue date	14/07/2025
Review date	15/05/2028

12. Version history

Version	Date issued	Brief summary of changes	Author
2	March 2010	To bring in line with Hand Hygiene Policy Updates to Nursing uniform and theatre sections	Joe Watt Chris Morley
3	12/11/2014	Updates to all sections to include community staff and RCN guidance on work wear	Gill Meek Chris Morley
3.1	26/11/2014	Change to section 4.2.3 regarding footwear for scrub suit wearers	Gill Meek Chris Morley
3.2	17/07/2015	Inclusion of Appendix 1 – outline of uniforms worn by nursing staff	Gill Meek Chris Morley
4	23/02/2017	Changes to sections 5.3 and 6.2.5 in relation to headscarves Update to section 6.5.4	Gill Meek Chris Morley

		regarding the use of beard snoods	
4.1	10/08/2017	Change to section 4.1.3 re charity logo and SHU students' uniform (page 14)	Gill Meek Chris Morley
5.0	21/10/2021	Revision of content for Nursing & Midwifery, Allied Health Professional and other staff groups	Mark Gwilliam Rebecca Robson
5.1	08/03/2022	<p>Section 8 – Wearing of Accessories – which includes the provisions for temporary false eyelashes, has been amended to specify application to all staff and not just to those who wear uniform</p> <p>Paragraph 8.5 amended to focus on identification, as all members of staff were now wearing face masks</p> <p>Appendix 1 has been updated to include anyone who wore a uniform in the organisation</p>	Mark Gwilliam Rebecca Robson
6.0	31/05/2024-15/5/2025	<p>Full Review undertaken. Purpose updated to reflect intention for fair and equitable treatment for all staff and students irrespective of any protected characteristic or work location including working from home. Scope updated to make it clear the Policy applies to all staff and students. Minor changes to wording and flow with repetition removed where appropriate. Updates to reflect equality considerations to promote an inclusive culture where all staff feel comfortable and safe at work in relation to dress particularly in relation to sections 4.1, 4.6.6 (BBTE) and 4.9 (Dress within the Theatre environment). Provision for wearing smart shorts in</p>	Lisa Barraclough Sally Edwards, Sheeba Jefferson

		particular circumstances added. Roles and responsibilities extended. References and Associated Documents updated and reference to the Equality Act added. Appendix 1 updated to include Dieticians and Physicians Associates and other roles not listed. Appendices 2-4 updated with correct uniform items. New EIA undertaken on current version of the template.	
6.1	10/06/2025	Changes made following TEG ratification process. 4.3.2, 4.6.4 and Appendix 4 updated with regards to trainers ideally being neutral or dark in colour and as plain as possible. Clarified that sandals, sliders or any shoes with an open toe or back are not permitted for health and safety reasons.	Lisa Barraclough
6.2	20/06/2025	Changes made following TEG ratification process to 4.3.2, 4.6.4 and Appendix 4 that sandals that are secured at the front and heel are permitted. 4.3.1 and Appendix 4 updated to state that smart shorts for staff in non clinical roles are permitted.	Lisa Barraclough
6.3	14/07/2025	Change made to clarify smart shorts can be worn by clinical staff who wear uniform as well as clinical and non clinical staff who don't wear uniform. The colour should be in keeping with the uniform e.g. black, navy blue.	Lisa Barraclough

13. Consultation and review

Groups / persons consulted	Date
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Operational Partnership Forum	11/09/2024-09/10/2024 and 07/01/2024-14/02/2024 and 06/03/2025 – 15/05/2025
EDI Executive Committee	18/09/2024-09/10/2024
Staff Network Groups	31/01/2025-14/02/2025

14. Intended recipients

All staff who should:

Be aware of the document and where to access it	All managers, staff partners, and employees
Understand the document	All managers, staff partners, and employees
Have a good working knowledge of the document	All managers, staff partners, and employees

15. Rapid equality impact assessment

What relevant quantitative and qualitative information (data) do you have?
 This may include national or local research, surveys, reports or research; workforce / patient data; complaints and patient experience data, etc.

We hosted a workshop on 12 July 2024 facilitated by the Surgical Scarf project to learn how we could improve our Dress Code Policy from a religious dress code point of view. This was attended by HR/Medical HR and EDI colleagues although was opened up to all staff and promoted via our staff partners. The EDI Team had also received some feedback from students on dress in Theatres. The updated policy has taken account of the information and literature shared in the surgical scarf project workshop. A number of Dress Code Policies from other Trusts have also been considered in the review of the Policy.

Delete ✓ ✗ as appropriate

	Positive Impact [#]	Negative Impact [#]	Neutral Impact [#]	Advances equality of opportunity	Eliminates unlawful discrimination	Fosters good relations between people
Race (including nationality)	✓	✗	✗	✓	✓	✓
Religion/belief and non-belief	✓	✗	✗	✓	✓	✓
Disability	✗	✗	✓	✓	✓	✓
Sex	✓	✗	✗	✓	✓	✓
Gender Reassignment	✗	✗	✓	✓	✓	✓
Sexual Orientation	✗	✗	✓	✓	✓	✓
Age	✗	✗	✓	✓	✓	✓
Pregnancy and Maternity	✗	✗	✓	✓	✓	✓
Marriage / Civil Partnership	✗	✗	✓	✓	✓	✓
Human Rights (FREDA principles)	✗	✗	✓	✓	✓	✓
Carers	✗	✗	✓	✓	✓	✓
Other groups E.g. Travellers, vulnerable adults/children, homeless, care leavers, asylum seekers or refugees	✗	✗	✓	✓	✓	✓

#Extent of impact

Positive Impact - This will actively promote or improve equality of opportunity or address unfairness or tackle discrimination

Negative Impact - This will have a negative or adverse impact which will cause disadvantage or exclusion

Neutral Impact - There is no likely impact on any of the protected groups

List any specific equality issues and information gaps that may need to be addressed through engagement and/or further research

N/A

15.1 Analysing the equality information

In this section record your assessment and analysis of the evidence. This is a key element of the EIA process as it explains how you reached your conclusions, decided on priorities, identified actions and any necessary mitigation.

Analysis of the effects and outcomes

Adjustments on the basis of any of the protected characteristics would be assessed on a case by case basis supported by the HR/Medical HR and EDI Team.

15.2 Outcome of equality impact assessment

No major change needed	Adjust Policy / proposal	Adverse impact but continue	Stop and remove policy / proposal
✓	x	x	x

15.3 Action plan

Give details of any actions required to remedy any negative impact(s) identified above:

Action to address negative impact	By whom	By when	Resource implication
Action required	First name and last name	Date	Resource implications

15.4 Monitoring, review and publication

How will the policy be monitored?	See section 6. Monitoring
Manager signing off EIA	Date of next review
Lisa Barraclough, Head of Operational HR	05/03/2025
Approved by	Date sent to EDI Team sth.equalityanddiversity@nhs.net :

Please provide name of committee and date approved	Date
	Date published (if applicable)
	Date

16. Other impacts

Financial implications	None
Training implications	None
Sustainability implications	None
Other	None

17. Document imprint

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Policy template version 2.4

APPENDIX 1

SUMMARY OF THE APPLICATION OF THIS POLICY IN RELATION TO GROUPS OF STAFF *(this list is not exhaustive and any queries should be raised with line managers)*

Clinical staff who provide direct care and wear uniform	Clinical staff who provide direct care and do not wear uniform
Registered Nurses Midwives Clinical Support Workers Clinical Imaging Assistants Doctors Support Workers Clinical Educators Band 4 Educators Phlebotomist and Assistant to Doctor Community Support Worker Nursery Nurses Trainee / Assistant Practitioner Healthcare Apprentice Student Nursing Associates Nursing Associates Podiatrists Physiotherapists Occupational Therapists Dieticians (based in hospital) Speech and Language Therapists Rehabilitation Assistants Therapy Assistants Theatre staff including surgical staff Operating Department Practitioners Radiographers Physiologists Healthcare Scientists Dental Nurses and Technicians Plaster Technicians Podiatrists Speech and Language Therapists Health Professionals and other healthcare workers visiting wards, community and vaccination hubs or clinics, and / or otherwise delivering patient care or who are	Consultants Doctors and Dentists Community Dieticians Medical Students Physicians Associates Clinical Psychologists and Psychology staff Chaplains Advanced Practice Physiotherapists Advanced Practice Podiatrists Occupational Therapists (Pain Clinic) Physiotherapists (Pain Clinic and Hydrotherapy)

in physical contact with patients in a clinical environment Students in roles above	
Staff who wear uniform and may or may not work in clinical areas	Non-clinical staff who do not wear uniform
Housekeeper Food and Beverage Assistants Ward Clerks Patient Services Assistant Domestic Assistant Facilities Deep Clean team Catering – Patient Food Service Team Catering – Food Service Team, Dining Rooms Catering Assistant, CPU Chef Catering Porter / Driver Chargehand Porter Pharmacy staff based on wards Porters Transport Driver / Porter Laboratory based staff Laundry Supervisor Laundry - Linen Services Assistant (clean) Laundry – Linen Services Assistant (dirty) Laundry – Dry cleaning / sewing room Laundry – Sewing room Laundry - Transport Logistics and Materials Management staff Receptionists Admissions staff Estates staff Security Officers Security Control Room Operatives T Level Work Experience Students	Staff who are not in face-to-face contact with patients and / or members of the public: Corporate services staff e.g. Finance, Inventory Management System and office based staff in Procurement, HR, IT Medical Secretaries South Yorkshire and Bassetlaw Pathology including Healthcare scientists, Biomedical assistants and support services

APPENDIX 2

DESCRIPTION OF UNIFORMS WORN BY CLINICAL STAFF

ALL UNIFORMS ARE ORDERED IN ACCORDANCE WITH APPENDIX 5 UNLESS STATED OTHERWISE

Role	Uniform
Chief Nurse	Red dress or tunic with navy-blue collar and sleeve trim. Navy-blue trousers
Deputy Chief Nurse	Navy-blue dress (or tunic) with red collar and sleeve trim, red piping on pockets and navy- blue trousers
Nurse Director	Dark blue dress with solid red collar and red wide band on sleeves or dark blue tunic with red lapels. Navy-blue trousers
Associate Nurse Director/Deputy Nurse Director / Lead Nurse, or equivalent role, which involves duty Matron responsibilities	Dark blue dress or tunic with red piping or dark blue tunic with navy and red striped epaulettes. Navy- blue trousers
Lead Nurse / or equivalent role, which does not involve Duty Matron responsibilities	Royal blue dress or tunic with white piping. Navy- blue trousers
Nurse Consultants/Nurse Practitioners/ Consultant AHP's	Smart black scrubs with a red trim
Matron or equivalent role which involves duty Matron responsibilities	Polka-dot dress or polka-dot tunic with white piping. Plain navy-blue tunic with white stripe epaulette. Navy- blue trousers
Integrated Care Team Nurse Lead	Polka-dot dress or polka-dot dress with white piping. Plain navy-blue tunic with white stripe epaulette. Navy- blue trousers
Community Advanced Clinical Practitioners	Navy-blue dress with royal blue piping or tunic. Navy- blue trousers ordered by the Directorate
Patient flow Sister / Charge Nurse	Royal blue dress or tunic with white piping. Navy- blue trousers
Nurse Specialist	Royal blue dress or tunic with white piping. Navy- blue trousers
Senior Sister / Sister / Charge Nurse	Navy-blue dress with white piping or tunic. Navy- blue trousers

District Nurse Team Leader / Deputy Team Leader (with DNSPQ)	Navy-blue dress or tunic with white piping. Navy-blue trousers
Clinical Educator	Box or royal blue dress with white piping or tunic. Navy-blue trousers
Staff Nurse	Lilac dress or tunic with white piping. White tunic with lilac epaulettes. Navy-blue trousers
Community Staff Nurse / Deputy Team Leader (non DNSPQ)	Box or royal blue dress or tunic. Navy-blue trousers
Occupational Therapist	White tunic or polo shirt, green trousers or white dress
Physiotherapist	White tunic or polo shirt, blue trousers or white dress Physiotherapists based at Leisure Centres can wear shorts
Dietician (based in hospital)	Blue tunic
Speech & Language Therapist	White tunic with black piping or white polo shirt and black trousers.
Midwife	Royal blue dress or tunic with white piping. Navy-blue trousers.
Senior Midwife	Navy blue tunic or dress with white piping. Navy-blue trousers
Student Midwife	<ul style="list-style-type: none"> • SHU - Grey tunics or dresses with maroon trims and maroon writing • University of Sheffield - White tunics with navy blue writing • University of Huddersfield - White tunics with navy blue writing Provided by the relevant University
Clinical Support Worker	White or grey striped dress, white or grey striped tunic with white piping. Navy-blue trousers. White tunic with pale blue epaulettes. Navy-blue trousers
Phlebotomist and Doctor Support Worker	White dress or tunic with grey piping or epaulettes. Navy-blue trousers
Community Support Worker/Advanced Clinical Support Workers	White and pale blue stripe dress or tunic. Navy-blue trousers
Nursery Nurses	White with light blue stripe. Navy-blue trousers. Ordered by the Directorate.

Trainee / Assistant Practitioner	White dress or tunic with grey piping or grey epaulettes (grey epaulettes added once training complete)
Band 4 Educators	White dress or tunic with grey piping. Navy-blue trousers.
Student Nurse	OU – white tunics or dresses with the OU logo and Student Nurse on the front – navy-blue trousers Sheffield University – white tunics with Student Nurse on the front – navy-blue trousers Hallam University – grey tunics or dresses with burgundy neck detail for nurses and blue neck detail for Midwifery students. Uniforms provided by the University.
Healthcare Apprentice	White / grey stripe tunic with red epaulettes. Navy-blue trousers
Trainee Nursing Associate	Biscuit with white piping dress or tunic. Navy-blue trousers
Nursing Associate	Biscuit with white piping dress or tunic with brown epaulettes. Navy-blue trousers
Housekeeper	Maroon or burgundy dress with cream piping or tunic. Navy-blue trousers
Ward Assistant	Green stripe dress with white piping or tunic. Navy-blue trousers
Ward Clerk	Dark blue blouse with white pattern or white shirt. Black or navy-blue trousers. Ordered by the Directorate.
Podiatrists	Green scrubs

APPENDIX 3

DESCRIPTION OF UNIFORMS WORN BY FACILITIES AND OTHER SUPPORT STAFF

ALL UNIFORMS ARE ORDERED IN ACCORDANCE WITH APPENDIX 5 UNLESS
STATED OTHERWISE

Patient Services Assistant	Aqua stripe dress or tunic with white piping or bottle green polo shirts. Navy-blue trousers
Ward Assistant	Aqua stripe dress or tunic with white piping. Navy-blue trousers
Deep Clean Team	Green scrubs
Catering – Patient Food service team	Royal blue polo shirt, black trousers
Catering - Food service team, dining rooms	Black shirt / tunic, black trousers, black / grey apron
Catering assistant, CPU	Blue tunic, blue trousers, navy-blue fleece
Chef	Chefs black or white coat, chefs checked trousers
Catering Porter Driver	Navy-blue polo shirt, black trousers, navy-blue fleece
Childcare Services Team	Coloured logo polo shirt, black trousers, black future and logo sweatshirt, hats in summer when outside as per OFSTED recommendation
Porter	Navy Blue polo, Pale Blue shirt, navy-blue trousers, (or navy blue shorts permitted in hot weather / for personal comfort)
Chargehand Porter	Blue polo and navy trousers or smart navy or black chino shorts permitted in hot weather / for personal comfort, navy-blue fleece (body warmer), navy-blue coat
Radiology Porter	Navy blue shirt, black trousers, smart black chino shorts permitted in hot weather / for personal comfort, navy blue body warmer
Radiology Porter Supervisor	Royal blue shirt, black trousers or smart black chino shorts permitted in hot weather / for personal comfort, navy blue body warmer
Transport – Driver / Porter	Blue polo and navy-blue trousers (or navy blue shorts permitted in hot weather / for personal comfort), navy-blue fleece (body warmer), navy-blue coat
Security – Control room operative	Black polo shirt, Black trousers
	Black polo shirt, Black trousers, Black coat, Black

Security Officer	fleece, Black jumper, Black stab vest, epaulettes and ties
Laundry – Linen services assistant (clean)	Misty scrubs, Green fleece
Laundry – Linen services assistant (dirty)	Burgundy Red scrubs, Red fleece
Laundry – Dry cleaning / sewing room	Blue patterned blouse / shirt and black trousers
Laundry –Sewing room	Blue patterned blouse / shirt and black trousers
Laundry - Transport	Black sweatshirt, Black polo and black trousers
Laundry - Supervisor	Grey polo, black trousers and grey sweatshirt, black body warmer
Receptionist – main receptions	Blue patterned blouse / shirt and navy-blue skirt./trousers Ordered by the Directorate.
T Level Work Experience Students	Black tunic with white trim and black trousers/skirt are provided by the College

APPENDIX 4

STANDARDS OF DRESS EXPECTED OF ALL STAFF WORKING AT SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

STANDARD	RATIONALE
<p>Designated Uniform: Dress tidily and in a professional manner</p> <p>Must be changed daily and laundered including being neatly ironed</p> <p>Navy blue or black cardigans may not be worn when delivering clinical care. They must be laundered regularly and of smart appearance</p>	<p>Maintaining a professional appearance is important for patients. Patients and visitors may equate untidy appearance with low professional standards and poor hygiene standards</p> <p>Confidence and trust from the Public</p>
<p>ID Badges: Must be clearly visible and available and worn at all times and cleaned regularly with detergent and water.</p> <p>Lanyards, where allowed, should be laundered and visibly clean</p> <p>The lanyard should be clean and of a design that allows quick release</p>	<p>Security policy & identification of staff and role</p> <p>Adherence to Infection Prevention & Control Policy</p> <p>Health and Safety Policy Prevention of injury to patients and staff</p>
<p>Footwear: Must be safe, sensible, in good order, smart and clean and have regard to health and safety considerations.</p> <p>Staff working in clinical areas should wear a soft soled full shoe, closed over the foot and toes, plain, low heeled (around 3cm), enclosed and in a good state of repair Trainers are an acceptable</p>	<p>Noise in hospital can be a problem, especially at night; therefore, soft soled full shoes are preferred.</p> <p>Shoes in a poor state of repair are a safety</p>

<p>alternative to a shoe providing they are wipeable or washable materials. Ideally, they should be neutral or dark in colour and as plain as possible.</p> <p>Staff are responsible to ensure that footwear worn is appropriate to the area in which they are working and complies with health and safety regulations.</p> <p>Flip-flops, sliders or any shoes with a fully open back are not a permitted item of footwear</p> <p>Specialist areas such as theatres, hydrotherapy or radiography will supply or recommend area-specific footwear.</p> <p>Exceptions to this are on the recommendation of Occupational Health</p>	<p>risk. Closed shoes offer protection from spills and dropped objects. Open toes risk injury or contamination for staff.</p> <p>Health and safety statutory requirements. These do not protect staff from potential blood and chemical spillage exposure and potential inoculation injuries.</p> <p>Support staff with health issues should be reviewed</p>
<p>Tights / Stockings / Socks:</p> <p>Socks, tights, stockings and hold-ups should be plain black / navy blue, barely black, grey or neutral to individual skin tone and in a colour in keeping with the uniform.</p>	<p>Maintaining a professional appearance is important for patients</p> <p>Confidence and Trust from the Public</p> <p>Assist with staying cool and comfortable</p>
<p>Hair:</p> <p>Hair should neat and tidy, off the face and tied back off the collar for those in uniform. Hair should not be able to fall forward and contaminate a patient's personal space or become caught in moving parts of equipment or machinery</p> <p>Hairbands should be discreet if worn.</p> <p>It is important for STH to maintain a professional and corporate image, there</p>	<p>Potential for wound contamination from loose hair</p> <p>Maintaining a professional corporate image to instil confidence for patients and the public</p> <p>Providing hair is clean and tidy the risk of dispersal is minimal</p> <p>Adherence to Health and Safety</p>

<p>may be times when certain hairstyles and colours deemed to be more extreme are not thought to be in line with this principle. However, this would be discussed with the individual staff member in the first instance</p> <p>In certain areas such as theatres hair must be of a style that is controlled and covered as required, with appropriate headwear</p>	
<p>Fingernails: Nails should be kept short and clean.</p> <p>Artificial gel and acrylic nails and nail varnish are not permitted by staff providing patient care in line with the Bare below the Elbows requirements and the Hand Hygiene Policy under any circumstances. This includes clear nail varnish</p>	<p>Adherence to Infection Prevention & Control Policy</p> <p>To avoid transferring bacteria under the fingernails. Reduces the risk of trauma to the patient when involved in direct patient contact</p>
<p>Jewellery: Staff involved in direct patient care must keep jewellery to a minimum</p> <p>Wristwatches, fitness trackers and bracelets must not be worn in clinical areas by staff involved in direct patient care</p> <p>The wearing of jewellery is restricted to wearing a single plain unstoned band and the ring should be mobile enough to wash underneath</p> <p>One pair of plain metal stud earrings can be worn</p> <p>Plain bands or other rings should not be worn on chains around necks.</p>	<p>To prevent injury to staff and patients during manual handling</p> <p>Compliance with Hand Hygiene Policy and Bare Below the Elbow Restricts effective handwashing techniques</p> <p>Rings with stones are hazardous and can scratch patients; the stones may become dislodged</p> <p>Stones and pearls in earrings may become dislodged</p> <p>Jewellery that is hanging eg a necklace, could</p>

May cause injury or discomfort to patients during care activity

jewellery minimal	
<p>Jewellery - Piercings</p> <p>Earrings - one pair of small plain stud earrings is permissible and one facial piercing</p> <p>A 'tunnel' or 'plug' if worn must be as close to natural skin tone for the individual and will count as the equivalent of one pair of plain earrings.</p> <p>New visible body piercings should be covered with a blue plaster until the wound has healed.</p> <p>Once the wound has healed, above principles apply.</p> <p>Staff are to think about the Trust policy when considering visible piercings to avoid request to remove them.</p>	<p>Maintaining a professional appearance is important for patients.</p> <p>Confidence and trust from the Public</p>

<p>Clothes:</p> <p>If own clothes are worn these should be of smart appearance and in good repair</p> <p>Short sleeved blouses and shirts are recommended</p> <p>Cardigans, fleeces and jackets must be removed when providing direct physical care</p> <p>All neck ties must be removed or secured prior to any activity involving direct patient contact, and when entering clinical areas</p> <p>Skirts must be a reasonable length (knee length or below the knee). Jeans, must not be worn</p> <p>Smart shorts may be worn by staff in non clinical roles. This will be permitted for all staff in the event of a red extreme weather warning being issued by the Met Office. Casual, denim and beach-style shorts may not be worn under any circumstances</p> <p>Low waistbands and cropped tops showing the abdomen and lower back or allowing underwear to be visible are not allowed</p>	<p>Maintaining a professional appearance is important for patients</p> <p>Confidence and Trust from the Public</p> <p>Adherence to Infection Prevention & Control Policy</p> <p>Ties have been shown to be contaminated by pathogens and can accidentally come into contact with patients. They are rarely laundered and play no part in patient care</p>
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APPENDIX 5

PROCEDURE FOR SUPPLY / RETURN OF UNIFORMS ISSUED BY THE SEWING ROOM WITHIN THE FACILITIES DIRECTORATE

1.0 Please note this procedure does not apply where uniforms are ordered directly within the service. All uniforms for staff working in the Combined Community and Acute Care Group are ordered locally by the administrative team. Other examples where there are different arrangement for the ordering of uniform are set out in Appendix 2 and 3.

- 1.1. **Ordering System:** Submit a requisition with the cost code and signed by authorised person (line manager, Matron, Nurse Director) and send to Sewing Room. The Uniform is issued and charged to the Care group
- 1.2. **Authorisation System:** A list of authorised signatures is held in the Sewing Room. The type of uniform, numbers and reasons for request must be specified when ordering.
- 1.3. **Budget:** Each Care Group has an identified budget / cost code for staff uniforms. Request forms must have the correct cost code entered for the order to be processed.

2.0. ISSUING SYSTEM

- 2.1. **New Staff:** The manager or matron will complete the uniform request and send to the Sewing Room as soon as the candidate verbally accepts the post (takes requisition as they need to be measured and fitted). The member of staff will need to attend the Sewing Room for measurement. Uniform will be issued on their 'Induction Day' when they will sign for their uniform. Issuing of uniforms will be free of charge where it is supplied at the request of an authorised manager
- 2.2. **Replacement:** Uniforms will be replaced when no longer fit for purpose. Managers should assess requests on an individual basis and if required complete the form for replacement and advise the member of staff to attend the Sewing Room for measurement. The member of staff **must return old uniforms** when replacements are issued.
- 2.3. **Termination of Contract:** Individuals **must ensure they return uniforms** to the Sewing Room on termination. The manager accepting their resignation

should instruct them to return uniform on their last working day along with other items of trust property.

- 2.4 Receipt and Delivery:** All uniforms will be issued from the Sewing Room, therefore, staff must make necessary arrangements to collect and deliver their uniforms in person. Uniforms will not be sent via the hospital transport or postal system, as a signature is required.