# MENTAL HEALTH UNIFORM POLICY

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<td>Head of Corporate Business</td>
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| Review date:   | April 2016  
|                | Extended to September 2019 |
| Relevant Staff Groups: | All mental health staff employed by the Trust including seconded staff, AMHPs, students, cadets and volunteers. |

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**Document Control**

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**Amendments**: Revised using new Trust policy template

**Document objectives**: To provide a framework for appropriateness of clothing whilst on Trust business.

**Intended recipients**: This policy applies to all staff employed by the Trust, including seconded staff, Social workers, Allied Mental Healthcare Professionals (AMHPs), students, cadets and volunteers.

**Committee/Group Consulted**: Clinical Governance Group

**Monitoring arrangements and indicators**: Health and Safety audits, supervision and appraisal process.

**Training/resource implications**: Cost of uniforms, infection control and hand hygiene training.

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<th>Clinical Governance Group</th>
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**Date of issue**: August 2015

**Review date**: April 2016 - Extended to September 2019

**Contact for review**: Head of Corporate Business

**Lead Director**: Director of Nursing and Patient Safety

**CONTRIBUTION LIST**

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1. **INTRODUCTION**

1.1 All staff are required to present themselves in a manner which reflects the professional image of the Trust and the diverse nature of the workforce.

1.2 The Trust is required to ensure the health, safety and well-being of all staff, users of the service and visitors.

1.3 The Trust is committed to promoting diversity and equality of opportunity within its workforce and will therefore respect an individual’s preference or requirement for customary dress, subject to the minimisation of the health and safety and control of infection risks; assessments will take place as appropriate.

1.4 The Trust will ensure the application of any part of this policy does not have the effect of discriminating directly or indirectly against anyone on the grounds of race, colour, age, nationality, ethnic (or national) origin, sex, sexual orientation, marital status, religious belief or disability. The application of this policy will apply equally to full and part time staff.

1.5 This policy has been subject to an equality impact assessment. However it is recognised whilst priority must be given to Health and Safety, security and infection control issues, Trust managers are required to implement the policy sensitively and take in to account relevant cultural differences.

1.6 Working on behalf of all of the service users requires staff to promote dignity and professionalism, which should be reflected in the clothes worn.

1.7 Any individual may request assistance with this policy if they have particular needs. If the person has language difficulties and difficulty understanding this policy the use of an interpreter will be considered.

1.8 The policy is based on the principles and guidelines within the Sex Discrimination Act 1975, Religious or Belief Regulations 2003, and Disability Discrimination Act 2005, and also the rights of individuals to express themselves freely under the Human Rights Act. The Trust reserves the right to review and amend this policy at any time through the Trust’s consultation and communication process’, following changes to legislation or guidelines.

1.9 The responsibility for complying with this policy lies with the individual employee. If the employee has cultural or religious beliefs which make it difficult for them to comply with this policy they must discuss this issue with their line manager to resolve the issue.

1.10 The Trust supports the renewed focus by the Department of Health on infection prevention and control.

2. **PURPOSE & SCOPE**

2.1 This policy applies to all mental health staff employed by the Trust, including seconded staff, Allied Mental Healthcare Professionals (AMHPs), students, cadets and volunteers.

2.2 This policy is developed to provide guidance to all staff as to the appropriateness of clothing whilst on duty.

2.3 This policy sets out the expectations of the Trust in relation to uniform and work wear. The policy is necessary for patients, visitors and employees in order to:
• minimise the risk of cross infection;
• minimise the risk of injury to patients;
• comply with Health and Safety regulations;
• provide a professional image;
• enhance Trust Security arrangements.

3. DUTIES AND RESPONSIBILITIES

3.1 It is the responsibility of all persons to present themselves in a professional manner with regard to the appropriateness of clothing, footwear and jewellery as described in this policy.

3.2 Where uniforms are provided, staff must keep them in good order and properly laundered to comply with infection control procedures.

3.3 It is not acceptable to wear clothing with slogans, images or political beliefs that may be seen as offensive.

3.4 All staff, when on duty, must wear identification badges. Where used, lanyards will be provided for the ID badges with a minimum of two ‘break points’ for safety purposes.

3.5 Uniforms and identification badges must only be worn in public when undertaking Trust duties.

3.6 Ward/Team managers will be responsible for compliance with this policy and to determine the appropriateness of clothing. They will ensure that this standard is adhered to. The Heads of Division would arbitrate in any disputes arising from local decisions.

3.7 Failure to comply with this policy will result in the instigation of the Employee Relations Policy.

4. EXPLANATIONS OF TERMS USED
PMVA – prevention and management of violence and aggression
PPE – Personal Protective Equipment
Direct Patient Care – Undertaking physical examinations, during practical procedures or at any time when close physical contact is required e.g., restraint situations

5. EQUALITY AND DIVERSITY CONSIDERATIONS

5.1 The wearing of items arising from cultural or religious norms is in most circumstances respected by the Trust, providing the health and safety and security of patients or staff is not compromised.

5.2 Staff who wear facial coverings for religious reasons are required to remove them whilst on duty. This is to ensure the member of staff is identifiable, and to enhance engagement and communication with patients, visitors and colleagues.

5.3 Within provider services, hijabs and jibabs are not compliant with Trust guidance on dress and are therefore not permitted. However, female staff of Muslim faith may wear Trust uniform, with elbow length sleeves in order to
comply with both religious norms, and Trust infection prevention requirements. This clothing must allow for adequate hand hygiene (please see the Health Act 2006: Code of Practice for the Prevention and Control of Healthcare Associated Infections (2008) Department of Health).

5.4 Turbans and kippots, and headscarves are supported on religious grounds. The latter should be shoulder length and must be worn unadorned. Scarves should be tucked into necklines when providing direct clinical care. Turbans should be of the non-starched type and all headwear should be changed daily and laundered in line with the procedures set out later in this policy.

5.5 Employees wearing any additional items of clothing must follow the Trust infection control guidance.

5.6 Jewellery based on a belief system is permissible provided the dress code guidelines in this policy are adhered to.

5.7 Political beliefs are not covered within the UK regulations. When wearing non-uniform clothing at work employees and managers should give due consideration to ensuring the clothing is not offensive, ie, the wearing of T-shirts or other garments with political statements should be avoided.

5.8 Symbols and badges are not permitted in order to comply with the principles of this policy, unless they are in recognition of a Trust campaign approved by the Trust’s Executive Team, or a recognised professional body.

5.9 The above are intended as a guide for managers and employees. Staff are encouraged to discuss any additional clothing requirements with their managers on an individual basis.

6. **UNIFORM (for inpatient Wards and reception staff Trustwide)**

6.1 Uniform is provided for nursing staff, Occupational Therapy (OT) staff, Service Assistants working in an in-patient setting.

6.2 Uniform will also be provided to all Ward and team receptionists who will come into contact with the public. These items of clothing will be provided with the Trust logo.

6.3 Initially and for all new members of staff entitled to uniforms they will be provided in the quantities set out in Appendix A.

6.4 The allocation of uniform will be provided on a pro rata basis depending on hours contracted.

6.5 All Service assistants will wear light blue tunics with the Trust logo and either uniform navy blue trousers or skirt. Personal Protective Equipment (PPE) such as aprons, catering coats etc. will be provided depending on tasks being undertaken.

6.6 Occupational therapy staff will wear the approved uniform with the Trust logo when they are based on Wards.

6.7 Nursing staff working in older adult services will wear either traditional nurse’s uniforms or navy blue trousers with tunic. Male staff will wear the approved uniform shirt. These will be provided with the Trust logo.

6.8 Nursing staff working in all adult and child services will wear the approved shirt/blouse and either uniform navy blue trousers or skirt. Female staff
working in these areas will wear the navy blue tunic as an alternative to the blouse.

6.9 Agency staff will be expected to wear the uniform provided by their employer whilst working on Trust premises.

6.10 All staff expected to wear uniform will also be issued with a blue fleece or padded waistcoat for outdoor activities/nights etc. This will not carry a logo.

6.11 For female staff, an option of a white vest is available to wear under the blouse, if they wish. This will not form part of their allocation of 10 pieces of clothing. They will be able to order one vest with each blouse ordered.

6.12 Ward managers will be entitled to uniform allocation but they will have the opportunity to not wear uniform when not undertaking clinical duties. At this time they would be required to comply with this policy with regards appropriate clothing.

6.13 Each year, staff will be entitled to replacement of up to three individual items of uniform. This will be ordered through the local uniform co-ordinator and records kept of issue by the Ward Manager.

6.14 The uniform co-ordinators will keep a supply of order forms for uniforms. They will assist staff in choosing and ordering the appropriate garments (dependant on work base).

6.15 Once staff have chosen their appropriate sizing and the order form is completed by the co-ordinator, the individuals uniform order will be delivered in a pack directly from the supplier.

6.16 The ordering codes of uniform available to be ordered can be found in Appendix A.

6.17 Where uniform is damaged due to work activities, a replacement can be ordered through the uniform co-ordinators with permission of the Ward Manager in addition to the allowance as described above.

6.18 For staff who become pregnant, maternity wear is available on special order and can be arranged through the Ward/Team Manager and the uniform co-ordinators.

6.19 For any other outsize orders that cannot be met by the provider, arrangements can be made by local agreement with Ward Manager and Service Manager for staff to purchase their own navy blue trousers/skirt providing it is in keeping with the uniform described in this policy.

6.20 Staff will be required to launder their own uniform between shifts. Advice on tax relief for the laundering of uniforms is available from local tax offices or Trade Union Representatives. The uniforms provided are compliant with Infection Control and can be washed at temperatures of up to 60 degrees (except the vest and fleece).

6.21 Uniforms must be changed during a shift if visibly soiled and staff should wear a clean uniform every day.

6.22 When uniformed staff take a break from duty outside of the workplace, they should ensure that their uniform is adequately covered.

6.23 Long sleeves are not permitted when providing direct clinical care on the basis that cuffs interfere with effective hand hygiene, become heavily contaminated and come into direct contact with service users. If long
sleeves are worn they should be rolled up when providing direct patient care.

6.24 For personal safety and Infection Control reasons it is not advisable for staff to travel to and from work wearing uniform. Where there are issues with changing facilities, the Trust accepts that staff may need to travel to and from work in their uniform. If this is the case then, it is a requirement that the uniform is covered by a Trust issue fleece/waistcoat, coat or Mac. No commercial premises should be visited if in uniform unless on official Trust business and then, adequate coverage of uniforms is required.

7. **EXCEPTIONS**

7.1 Due to the nature of the job, it has been agreed with staff and service user groups that there are occasions that it may not appropriate for staff to wear uniform.

7.2 It is recognised that there is a variation in activities throughout the Trust so these occasions will be approved by the Ward Manager and Service Manager for that area.

7.3 A fleece is provided for staff to cover up uniform when ‘off site’ escorting patients on therapeutic activities. However, where the Service user requests, staff may change out of uniform for this activity. On these occasions the clothing should be appropriate to the task and comply with all other elements of this Policy.

7.4 It has been agreed that staff working in the Adult and Young Persons Services would have the choice to display the logo on their shirts/blouses.

7.5 Any further exceptions to the policy must be approved by the Ward/Team Manager in consultation with the staff and the Service Manager.

7.6 Staff may wear cardigan or similar. They should be black or navy blue (These will not be provided as part of the uniform allocation). This will be removed when providing direct patient care, should be laundered in line with items 6.20 and 6.21 and a clean item used every shift.

8. **HEALTH, SAFETY AND WELFARE**

8.1 The following requirements must also be complied with in order for staff to protect the health, safety, welfare and infection risk of themselves, clients and the public whilst undertaking certain activities in the course of their work.

8.2 **Clothing (for those not wearing uniform)**

- the wearing of revealing clothing (short skirts, poorly fitting trousers, cropped tops showing midriff or cleavage) is not permitted.
- the wearing of jeans/denim clothing or shorts will not be permitted.
- ripped/torn fashion wear clothing will not be permitted.
- clothing must be clean.
- specialist personal protective equipment is provided where required and must be worn appropriate to the task.
- Beach wear, sports wear, trainers, shorts etc. will not be permitted.
• Clothing should be washed between shifts at the highest temperature that the material allows and consideration should be given when purchasing clothing to choose those made of fabrics that it will withstand repeated washing at high enough temperatures to ensure effective decontamination (preferably a hot, 60 degree wash)

• Long sleeves are not permitted when providing direct clinical care on the basis that cuffs interfere with effective hand hygiene, become heavily contaminated and come into direct contact with service users. If long sleeves are worn they should be rolled up when providing direct patient care.

9. TIES AND SCARVES

9.1 Where ties are worn, which are not provided as part of the Trust approved uniform, staff are advised that the wearing of clip-on ties is recommended. Staff are also advised of the dangers of wearing scarves and ties and it is their responsibility to have regard for this. Ties should be removed or tucked into clothing when giving direct patient care, should be laundered in line with procedures set out earlier in this policy and a clean tie worn every day

10. FOOTWEAR

10.1 Foot wear should be relevant to the task undertaken. Staff in uniform should wear dark (Black/Brown/Blue) shoes with flat heels. Consideration should be made to the choice of footwear and ideally shoes should have low or no heels and be appropriate to the tasks being undertaken by the wearer. All footwear should have enclosed toes. Specifically designed catering shoes must be worn when preparing food. Likewise it is only acceptable to wear trainers when undertaking PMVA training or Occupational therapy activities. Shoes such as sandals, ‘flip flops’ or ‘Crocs’ should not be worn.

11. JEWELLERY

11.1 The wearing of jewellery must be appropriate to the tasks and area of work. In clinical settings jewellery should be limited to acknowledge issues of health, safety and infection control and should not be excessive.

• Single stud earrings are permissible as is a single nose stud. All other visible piercings should be removed whilst on duty. Staff with non-visible piercings must be aware of the potential risk of harm to themselves and others during physical interventions.

• To minimise the risk of harm to other during physical interventions and to reduce possible infections the wearing of rings is limited to a single band whilst on duty.

• Necklaces/chains worn around the neck are discouraged as they pose a significant risk to the wearer by possibly being used to inflict injury. The Partnership Trust will not be liable for any damage to jewellery.

• If a wrist watch is worn, it must be removed when undertaking any invasive or practical procedure. Patient observation and consultation would not normally be included in this. Staff should be mindful that hand/wrist jewellery and watches can harbour micro organisms and can reduce compliance to hand hygiene. The Trust takes no responsibility for items of jewellery being lost or damaged
12. **TATTOOS**
12.1 Tattoos should, where possible, be fully covered whilst on duty.

13. **NAILS**
13.1 Fingernails should be kept reasonably short and not pose a threat to clients especially in areas where physical interventions may be performed and to minimise the infection control risks.
13.2 Staff working in clinical areas should not use nail polish/varnish on duty due to the increased infection control risk.
13.3 False nails and nail extensions are not to be worn by staff in clinical areas due to the increased infection control risk.

14. **HAIR**
14.1 Hair that is longer than collar length should be tied back during food preparation and clinical procedures/physical interventions (including PMVA procedures) regardless of gender.

15. **ATTENDANCE AT ACTIVITIES AWAY FROM WORKPLACE**
15.1 All staff will be required to adhere to this policy when on Trust activities such as training, conferences and meeting with external stakeholders.
15.2 Staff who usually wear uniform will not be required to do so but a standard of dress as described in the rest of this policy should be adhered to.
15.3 Appropriate clothing should be worn when training in PMVA training. Advice on what to wear at these sessions is available from the Learning and Development team.

16. **EQUALITY IMPACT ASSESSMENT**
16.1 All relevant persons are required to comply with this document and must demonstrate sensitivity and competence in relation to the nine protected characteristics as defined by the Equality Act 2010. In addition, the Trust has identified Learning Disabilities as an additional tenth protected characteristic. If you, or any other groups, believe you are disadvantaged by anything contained in this document please contact the Equality and Diversity Lead who will then actively respond to the enquiry.

17. **TRAINING REQUIREMENTS**
17.1 The Trust will work towards all staff being appropriately trained in line with the organisation’s training needs analysis. All training documents referred to in this policy are accessible to staff within the Learning and Development Section of the Trust Intranet.
   - Basic infection control at Corporate Induction sessions.
   - Hand Hygiene training
   - PMVA training
18. **MONITORING COMPLIANCE AND EFFECTIVENESS**

18.1 **Monitoring arrangements for compliance and effectiveness**
Ward Managers will ensure compliance with this policy and individuals will be monitored through the supervision and appraisal process.

18.2 **Responsibilities for conducting the monitoring**
- Managers will monitor compliance during routine inspections.
- Heads of Division will have overall responsibility for ensuring the policy is monitored.

18.3 **Methodology to be used for monitoring**
- Routine inspections by H&S audit team
- Supervision and appraisal process

18.4 **Frequency of monitoring**
- Constant monitoring by Ward/Team Managers to ensure compliance

18.5 **Process for reviewing results and ensuring improvements in performance occur.**
Lessons learnt will be forwarded to the Risk Manager who will add to the Lessons Learnt Quarter Report to the Risk Group, following each meeting the report will be accessible to all staff on the Trust Intranet and hyperlinked into SPICE newsletter to raise awareness.
A briefing of the audit will be provided to staff to raise awareness through the Spice newsletter.

19. **RELEVANT CARE QUALITY COMMISSION (CQC) –**

19.1 Under the **Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)**, the fundamental standards which inform this procedural document, are set out in the following regulations:

- Regulation 10: Dignity and respect
- Regulation 12: Safe care and treatment
- Regulation 15: Premises and equipment
- Regulation 17: Good governance
- Regulation 18: Staffing

19.2 Under the **CQC (Registration) Regulations 2009 (Part 4)** the requirements which inform this procedural document are set out in the following regulations:

- Regulation 18: Notification of other incidents

19.3 Detailed guidance on meeting the requirements can be found at [http://www.cqc.org.uk/sites/default/files/20150311%20Guidance%20for%20providers%20on%20meeting%20the%20regulations%20FINAL%20FOR%20PUBLISHING.pdf](http://www.cqc.org.uk/sites/default/files/20150311%20Guidance%20for%20providers%20on%20meeting%20the%20regulations%20FINAL%20FOR%20PUBLISHING.pdf)


**Relevant National Requirements**

Department of Health Infection Control Guidance

Department of Health Uniforms and Workwear - Evidence base for developing local policy - June 2007

20. REFERENCES

Cross reference to other procedural documents

Health and Safety Policy
Hand Decontamination Policy
Security Policy
Infection Control Policy
Equality and Diversity Policy
Untoward Events Reporting Policy

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on ‘Policies and Procedures’). Trust Guidance is accessible to staff on the Trust Intranet.

21. APPENDICES

21.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

Appendix A – List of Uniform available to order
LIST OF UNIFORM AVAILABLE TO ORDER

- Staff will initially be allocated 10 pieces of uniform, one of which will be the fleece. They will then be entitled to three pieces per year.
- Female staff wearing the blouse will be entitled to order the white vest and this won't form part of the allocation.
- Part time staff will be allocated the amount of uniform pro rata to the hours worked.