



Family Nursing & Home Care

Uniform and Workwear Policy

June 2023

Document Profile

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Version control / changes made

Date	Version	Summary of changes made	Author
November 2015	1.0		
September 2019	2.0	Complete update of policy reflecting Responsibilities of all staff New Uniform provision Infection control measures	Judy Foglia
March 2023	3.0	Complete update of policy reflecting latest guidance from NHS	Claire White

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1. INTRODUCTION

1.1 Rationale

Family Nursing & Home Care (FNHC) aims to provide the best community health and home care services across Jersey. The objectives of this uniform and workwear policy are to support and promote:

- Patient/client safety
- Public confidence
- Staff comfort

In 2020 NHS England and NHS Improvement published best practice guidance for NHS employers regarding uniforms and workwear which takes in to account the equality, faith and cultural issues associated with workwear. This has been used to inform the policy.

1.2 Scope

This document applies to all staff and volunteers working for or on behalf of FNHC and will be referred to as 'staff' throughout this policy. Patient/client is used to refer to any member of the community in receipt of care from FNHC (including babies, children and adults).

1.3 Role and Responsibilities

Main Committee

The Committee have overall responsibility for ensuring that the charity has adequate systems and processes in place to ensure that best practice evidenced based policies and procedures are implemented and adequately resourced.

Chief Executive Officer (CEO)

The CEO is responsible for the final approval of policies and procedures and ensuring that resources are made available to implement policies and procedures effectively.

Director of Governance & Care

The Director of Governance and Care is responsible for ensuring the charity has appropriate effective policies and procedures in place.

Head of Quality & Safety

The Head of Quality & Safety is responsible for managing the approval and ratification processes and ensuring that this policy is available on the organisation's procedural document library.

Finance Team

The Finance Team are responsible for the sourcing and supply of uniforms.

Operational Leads/Heads of Departments

Each Lead or Head is responsible for overseeing the implementation and ongoing adherence to this policy within their service or department.

Team Lead/Line Managers

Team leaders and line managers are responsible for ensuring that all staff are aware of and adhere to the policy.

All staff and volunteers

Staff and volunteers are responsible for wearing the appropriate uniform/workwear and ensuring that they adhere to the requirements of this policy. All staff and volunteers must at all times display photographic identification.

2. POLICY

The policy will set out uniform and workwear requirements for all staff (both patient/client facing and non-patient/client facing).

2.1 Patient/Client Safety

Effective hygiene and preventing infection transmissions are absolutes in all healthcare settings. Although there is no conclusive evidence that uniforms and workwear play a direct role in spreading infection, the clothes that staff wear should facilitate good care practices and minimise any risk to patients. Uniforms and workwear should not impede effective hand hygiene and should not unintentionally come into contact with patients during direct patient care activities. Similarly, nothing should be worn that could compromise patient or staff safety during care, for example any nail products, rings, earrings (other than studs), and necklaces.

2.2 Public Confidence

The way staff dress is an important influence on people's overall perceptions of the standards of care they experience. Uniforms/workwear must be clean at all times and professional in appearance. There is no evidence that wearing uniforms outside work adds to infection risks, however, public attitudes indicate it is good practice for staff to change at work or cover their uniforms if they are on a break in the community or are visiting a shop/establishment for refreshments.

2.2 Staff Comfort

As far as possible, subject to the overriding requirements of patient/client safety and public confidence, staff should feel comfortable in their uniforms and workwear. This includes being able to dress in accordance with their cultural practices and taking account of menopausal and other health-related symptoms.

3. PROCEDURE

3.1 General Principles

3.1.1 Infection Prevention & Control (Patient/client facing staff)

Uniforms/workwear must be clean and staff must apply the 'bare below the elbow' principles whilst delivering care:

- All wrist and hand jewelry must be removed except one plain ring with no stones or deep engraving
- No false nails, nail varnish or nail adornments (nails should be short and neatly filed)

- No long sleeves below the elbow (see 3.2 cultural and religious considerations)

All staff will be provided with Personal Protective Equipment and are responsible for ensuring that they have and use the appropriate equipment available to adhere to the relevant IPAC policies/procedures and guidance.

If uniform/workwear becomes contaminated during a shift it must be changed as soon as practicably possible.

3.1.2 Personal Hygiene

All staff should maintain a high level of personal hygiene and appearance. Staff should be free from smells associated with smoking/vaping or those that others may find unpleasant.

3.1.3 Hair

Hair must be clean and well groomed. For patient/client facing staff hair must be off the collar and a style that does not require frequent re-adjustment. Keeping hair off the collar reduces the incidence of bacterial growth around the collar areas. Patient/client facing staff must have their hair tied back if longer than shoulder length. Facial hair must be neatly trimmed.

3.1.4 Make up and fragrances

Light make up may be worn and staff are reminded to be cautious when using fragrances. Patient/client facing staff should avoid using strongly scented products.

False eyelashes should not be worn by patient/client facing staff nor should false nails/nail extensions.

3.1.5 Tattoos

Where present, tattoos should not be offensive to others and where they are deemed to be offensive, should be covered with an appropriate waterproof dressing.

3.1.6 Jewellery (Patient/client facing staff only)

To adhere to the 'bare below the elbow' principles, staff are only permitted to wear one plain ring with no stones/deep engraving, wrist watches must be removed during patient/client care and for hand hygiene. Ear/facial/other piercings must not present a risk to staff/others (i.e. no hoop earrings/nasal rings). Necklaces/bracelets/chains may only be worn following discussion with line manager for religious / cultural / medical reasons.

3.2 Cultural/Religious Considerations

Where, for religious reasons, staff wish to cover their forearms or wear a bracelet when not engaged in patient care, ensure that sleeves or bracelets can be pushed up the arm and secured in place for hand hygiene and direct patient/client care activity.

Headwear, for example, turbans and kippot, veils (Christian or niqab) and headscarves are permitted on religious grounds, provided that patient/client care, health and safety, infection control and security and safety of patients or staff is not compromised.

3.3 Non Patient/Client Facing Staff

Staff who do not deliver patient/client care must ensure that their clothes are suitable for work purposes, are clean and in a good state of repair maintaining a standard of professionalism at all times.

3.4 Non-Uniform Wearing Patient/Client Facing Staff

Patient/client facing staff who do not wear a uniform, must ensure that their clothes are suitable for their work purpose.

Clothing should allow a full range of movement and must not hinder safe moving and handling procedures.

Clothing must allow 'bare below the elbow' when performing hand hygiene and/or delivering care.

Clothing should project a professional image and should be modest (e.g. no crop tops) and appropriate to the service delivery taking account of cultural/religious sensitivities.

PPE must be worn in accordance with local policy/procedure and guidance.

Footwear must be clean and in good repair and appropriate for the type of work individuals carry out and must not expose others to risk. Shoes must be low-heeled, closed around the toes and heel and in a material that can be wiped cleaned or machine washable. Flip flops are not permitted.

Should staff be requested to remove their shoes on entering a person's home, they should advise that this not permitted under FNHC policy, however overshoes can be worn. The policy of shoe wearing exists for the health and safety of staff.

3.5 Uniformed staff

3.5.1. Community Nursery Nurses

Staff will be provided with:

- FNHC Logo polo shirts (lilac) (1 polo shirt/working day/week)
- Black trousers and/or
- Navy/black knee length shorts
- FNHC Logo fleece

Footwear must be clean and in good repair and appropriate for the type of work individuals carry out and must not expose others to risk. Shoes must be low-heeled, closed around the toes and heel and in a material that can be wiped cleaned or machine washable. Trainers are permitted. Flip flops are not permitted.

Should staff be requested to remove their shoes on entering a person's home, they should advise that this not permitted under FNHC policy*, however overshoes can be worn. The policy of shoe wearing exists for the health and safety of staff.

3.5.2 All other uniformed staff

Staff will be provided with a choice of uniforms (so that they have a clean top/dress for each working day/week). The colour scheme will depend upon the service or staff grade (see appendix 2):

- FNHC Logo dresses
- FNHC Logo tunics
- FNHC Logo scrub tops (formerly summer uniform)
- Black trousers
- FNHC Logo Fleece

Footwear must be clean and in good repair and appropriate for the type of work individuals carry out and must not expose others to risk. Shoes must be low-heeled, closed around the toes and heel and in a material that can be wiped cleaned or

machine washable. Plain black or white trainers are permitted. Flip flops are not permitted.

Staff who wear dresses may choose to wear tights which should be plain natural or black.

Should staff be requested to remove their shoes on entering a person's home, they should advise that this not permitted under FNHC Policy, however overshoes can be worn. The policy of shoe wearing exists for the health and safety of staff.

**However, whilst it is FNHC policy that shoes should not normally be removed, it is acknowledged that there may be times when some staff need to remove their shoes when at work for example when running baby/toddler groups. An assessment of risk should be undertaken before this happens with consideration given to whether the use of overshoes would be the better option.*

3.6 Supply and replacement of uniforms

Uniforms should be ordered through the Finance Team using the forms on central filing.

Uniform wearing staff will be supplied with sufficient pieces of uniform to cover the average number of days they work per week. For example a member of staff working 5 days per week will be provided with:

5 dresses; **or**

5 tops and two pairs of trousers; **or**

3 dresses, two tops and 1 pair of trousers.

When uniforms become worn, damaged or need replacing the individual should bring this to the attention of their line manager. All items of uniform remain the property of FNHC and should be returned upon termination of employment.

3.7 Laundry Guidance

FNHC does not have facilities for laundering the uniforms/workwear that it supplies. Staff are required to wash their own uniforms/workwear.

All uniform/workwear should be laundered at the highest temperature suitable for the fabric as per the care label. Use a detergent that is suitable for your skin type.

Do not add bleaches to the wash process or use for a 'whitening' effect. Uniform/workwear may be ironed or tumble dried as per the care label

3.8 Extreme Weather

There may be circumstances where the wearing of all, or part of the uniform / workwear may cause difficulties to staff. One example of this is in extremely hot or cold weather. Changes to uniform/workwear may be permitted by the Senior Leadership Team. However this adaptation must endeavour to maintain a professional appearance and respect the general principles specified throughout this policy.

4. CONSULTATION PROCESS

Name	Title	Date
Wellbeing Group Members		10/03/23
Jeanette Hotton	Finance Administrator	10/03/23
Elspeth Snowie	Head of Quality & Safety	30/03/23
Michelle Cumming	Operational Lead	30/03/23
Tia Hall	Operational Lead	30/03/23
Clare McConomy	Operational Lead	30/03/23
Mo de Gruchy	Quality and Performance Development Nurse	30/03/23
Teri O'Connor	Registered Manager	30/03/23
Elaine Walsh	Director of Finance	30/03/23
Michael Gardner	Head of Finance	30/03/23
Amanda de Freitas	Head of Human Resources	30/03/23
Claire Whelan	Head of Information Gov & Systems	30/03/23

5. IMPLEMENTATION PLAN

Action	Responsible Person	Planned timeline
Email to all staff with explanation about expectations of supply	Education Administrator	Within 2 weeks following ratification
Policy to be placed on procedural document library	Education Administrator	Within 2 weeks following ratification
Staff to sign up to documents if relevant on Virtual College	Education Administrator / all staff	Within 3 months following ratification

6. MONITORING COMPLIANCE

Compliance with this policy will be through on-going monitoring by line managers and operational leads.

7. EQUALITY IMPACT STATEMENT

Family Nursing & Home Care is committed to ensuring that, as far as is reasonably practicable, the way services are provided to the public and the way staff are treated

reflects their individual needs and does not discriminate against individuals or groups on any grounds.

This policy document forms part of a commitment to create a positive culture of respect for all individuals including staff, patients, their families and carers as well as community partners. The intention is to identify, remove or minimise discriminatory practice in the areas of race, disability, gender, sexual orientation, age and 'religion, belief, faith and spirituality' as well as to promote positive practice and value the diversity of all individuals and communities.

The Family Nursing & Home Care values underpin everything done in the name of the organisation. They are manifest in the behaviours employees display. The organisation is committed to promoting a culture founded on these values.

Always:

- ✓ Putting patients first
- ✓ Keeping people safe
- ✓ Have courage and commitment to do the right thing
- ✓ Be accountable, take responsibility and own your actions
- ✓ Listen actively
- ✓ Check for understanding when you communicate
- ✓ Be respectful and treat people with dignity
- ✓ Work as a team

This policy should be read and implemented with the Organisational Values in mind at all times. See appendix 1 for the Equality Impact Assessment for this policy.

8. REFERENCES

NHS, (2020), *Uniforms and Workwear: guidance for NGS employers*, Accessed 10/03/23, available from: <https://www.england.nhs.uk/wp-content/uploads/2020/04/Uniforms-and-Workwear-Guidance-2-April-2020.pdf>

9. APPENDIX

9.1 Appendix 1 Equality Impact Screening Tool

Stage 1 - Screening			
Title of Procedural Document: Uniform and Workwear Policy			
Date of Assessment	25/05/23	Responsible Department	Governance
Name of person completing assessment	Claire White	Job Title	Director of Governance & Care
Does the policy/function affect one group less or more favourably than another on the basis of :			
	Yes/No	Comments	
• Age	No		
• Disability Learning disability; physical disability; sensory impairment and/or mental health problems e.g. dementia	No		
• Ethnic Origin (including hard to reach groups)	No		
• Gender reassignment	No		
• Pregnancy or Maternity	No		
• Race	No		
• Sex	No		
• Religion and Belief	No		
• Sexual Orientation	No		
If the answer to all of the above questions is NO, the EIA is complete. If YES, a full impact assessment is required: go on to stage 2, page 2			
Stage 2 – Full Impact Assessment			
What is the impact	Level of Impact	Mitigating Actions (what needs to be done to minimise / remove the impact)	Responsible Officer
Monitoring of Actions			
The monitoring of actions to mitigate any impact will be undertaken at the appropriate level			

9.2 Appendix 2 Uniform Colour Schemes

Grade/Role	Colour
Community Nursery Nurses	Lilac
Therapists	White
Home Care	Green
Nurse Grade 4/5	Hospital Blue
Nurse Grade 6	Navy Blue
Specialist Nurse	Navy Blue/ Red Piping
Advanced Clinical Practitioner	Navy Blue / Gold Piping