

NHS FORTH VALLEY

Uniform Policy and Dress Code



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1.0 INTRODUCTION AND AIM

This policy has been compiled in partnership to ensure that all staff both directly and indirectly employed by NHS Forth Valley (NHSFV) including students, temporary, Bank and Agency staff participating in duties within the organisation project a professional image.

In developing this policy NHSFV recognised the recommendations of the NHS Scotland Dress Code ([CEL 53 \(2008\)](#) and [DL\(2018\)4](#)). This policy sets out the standards for all staff, including those who do not wear a uniform.

Uniforms and clothing must be compatible with safe moving and handling practice and appropriate to the area and sphere of work undertaken. Adherence to the policy will minimise the risk of cross infection, whilst importantly maintaining staff and patient safety at all times.

As with any healthcare organisation it is vital that all staff and students portray a positive and professional image to enhance public trust and confidence. Staff and students within the healthcare environment must also act as professional role models for patients and stakeholders.

2.0 ROLES AND RESPONSIBILITIES

All line managers will ensure that staff adhere to the uniform policy and dress code. Repeated disregard of this policy will be considered misconduct and could lead to disciplinary action being taken in line the [NHSFV Managing of Employee Conduct Policy](#).

Role of Line Managers

- Consider this policy and its implications for the area that you are responsible for
- Ensure that each and every member of staff receives specific instructions relating to the implications of this policy to the local area of work
- Ensure that all staff comply with the policy
- Respect the religious, ethnic and cultural requirements of staff
- Resolve or report any circumstances which make compliance difficult

Role of Employees

- To comply with the guidance within this policy
- Staff will wear and maintain their uniforms in accordance with the uniform policy
- Staff who are required to wear a uniform must allow adequate time to change before commencing their shift
- Staff, when not in uniform or protective clothing, but on NHS Forth Valley business will dress in a professional manner which is likely to inspire public confidence and in accordance with the Dress Code (as described in this policy)
- Staff to recognise that repeated disregard of this policy will be considered misconduct and could lead to disciplinary action being taken in line with the NHS NHSFV Managing of Employee Conduct Policy

3.0 GENERAL GUIDANCE

- A uniform has many purposes such as protection, comfort and professional image and is an external reflection of the organisation. All staff are expected to present a professional image in both dress and behaviour, in line with professional codes of conduct, thereby indicating to other staff members, patients and visitors that they can expect a high standard of professional care and service within NHSFV.
- Uniform is provided by the Employer and offers employees a degree of protection against blood spillage, bodily fluids etc. Importantly, the clothing/uniform worn by staff plays a pivotal role with regard to public perception as to the identification of staff designation and role within the clinical area.
- Uniforms are the property of NHSFV and must not be worn out with the premises unless on official NHSFV business.
- I.D. Badges must be worn in a prominent position at all times as detailed in Appendix 1.
- Staff should not post pictures of themselves on personal social media accounts unless it is compliant in line with the boundaries of their professional registration.

4.0 UNIFORMS AND THE TOBACCO POLICY

Staff in uniform should adhere to the [NHSFV Tobacco Policy](#). It is not permitted for staff to smoke when wearing uniform and it is not acceptable for staff to be smelling of smoke.

5.0 DRESS CODE – GUIDELINES FOR CLINICAL AND NON-CLINICAL STAFF

Individual appearance must reflect a high standard of cleanliness and hygiene at all times. All staff and students must ensure good personal daily hygiene. If there is concern regarding poor personal hygiene, this issue should be managed by the line manager.

- Clinical staff must have their arms bare below the elbow when carrying out clinical duties. There may be areas, for example the Emergency or Theatre Departments, where specific protective clothing is provided which will cover the arms.
- Hair must be neat and tidy at all times and in the clinical environment all hair, even when tied back, must sit off the collar. E.g. a long ponytail must be clipped up and off the shoulder. Any hair accessories must be discreet and clean. Headscarves worn for religious purposes are permitted in most areas, however they are excluded in areas such as theatre, where they could present a health and safety and cross-infection hazard. Beards should be short and neatly trimmed, unless this reflects the individual's religion where it should be tidy.
- Beards must be covered with a hood when undertaking aseptic procedures.

- Facial Covers - Staff who wear facial coverings for religious reasons are expected to remove them whilst on duty. This will ensure that the member of staff is identifiable and will facilitate communication with patients, relatives or friends as well as work colleagues.
- Nails must be kept short and must be well manicured and to avoid an impression of poor hand hygiene should be free from ingrained substances i.e. nicotine. False nails, nail varnish, nail jewellery or nail art is not permissible in the clinical environment.
- Staff must not wear hand or wrist jewellery when providing patient care.
 - Visible body piercing must be kept to a minimum, discreet, inoffensive and not present a safety hazard.
 - Wrist and Hand piercing must not be present when providing patient care as hand hygiene cannot be carried out effectively
 - Non stud earrings may represent a safety hazard to staff and account of the working environment should be taken into consideration.
 - Only a plain metal wedding band or one other plain metal band should be worn when providing patient care.
- Inappropriate tattoos must be covered at all times. The charge nurse/lead consultant or head of service/department will be responsible for determining whether a tattoo is inappropriate or not i.e. any tattoo with offensive language. It is acknowledged that some religions/cultures use henna to decorate their bodies at certain times and this is acceptable.
- Clothing must be neat, clean and appropriate to the area in which the staff are working.
- Staff must wear soft-soled, closed toe shoes. Shoes must be clean, in good condition and should not be a safety hazard to the wearer especially if she/ he has to run in response to an emergency within the hospital environment. Departmental risk assessments will indicate which staff require to wear specific (protective) footwear.
- It is acknowledged that some areas arrange 'Dress Down Days' for charity, these will continue to be at manager's discretion.

6.0 EQUALITY AND DIVERSITY

NHSFV recognises and values the diversity of its workforce in relation to age, disability, gender, gender reassignment, race/ethnicity, religion and belief and sexual orientation and we respect and uphold the right of individuals to the lawful expression of these differences and will take a sensitive approach when this affects dress and uniform requirements. However, there may be circumstances in which there are genuine occupational reasons as to why the wearing of certain articles and/or clothing is not permissible, and priority will be given to health and safety, security and infection control.

There will be occasions and exceptions within this policy for those with disability, either permanent or following injury or where staff have additional needs. Should there be an

additional need or requirement, such exceptions will be agreed in discussion with the local manager.

It is recognised that individuals undergoing gender reassignment may require a review of their uniform issue to accommodate for the transition to their new gender. NHSFV will show flexibility and ensure that provisions are made available for this to take place.

If a member of staff needs to vary from the standards set out in this they should discuss this with their manager who will seek appropriate guidance on an individual basis, with advice and support from Occupational Health, Equality and Diversity Project Manager, Health and Safety Team and Human Resources as required

NHSFV will endeavour to treat such requests sympathetically, balanced against the needs of the service

6.1 Allowances for Cultural or Religious Reasons

Any member of staff who wishes to wear a particular type of clothing or jewellery for cultural or religious reasons should discuss their requirements with their Line Manager who should endeavour to comply with the request. Line Managers will not have the discretion to agree any adjustments that may have the potential to compromise patient or employee safety, especially regarding Healthcare Associated Infection.

All staff must dress in a manner that is sensitive to the social, cultural, diversity and equality needs of other staff, patients and carers/visitors.

7.0 UNIFORM - STANDARDS

The following standards should be adhered to by staff in uniform. It is recommended that, where appropriate, clinical staff should have their arms bare below the elbow when carrying out clinical duties.

STANDARD	REASON
Staff must wear their own clothes when travelling to and from work with the exception of those community staff that have a community uniform, or where changing facilities are not in place.	To minimise risk of cross-infection.
Personal Protective Equipment (PPE) must be worn when exposure to blood and other body fluids might occur.	To protect staff from contamination and minimise the risk of cross-infection.
PPE must be changed between patients and between different activities/interventions on the	To minimise the risk of cross

STANDARD	REASON
<p>same patient.</p> <p>Staff must be discouraged from sitting on patients' beds except where this is a requirement of holistic patient care or to enable safer moving and handling.</p>	<p>infection.</p>
<p>UNIFORMS: Must be clean and changed daily. This includes sweatshirts, headscarf if worn for religious purposes.</p>	<p>To minimise the risk of cross infection.</p>
<p>Uniforms must be a good fit.</p>	<p>To maintain a professional appearance</p> <p>To ensure safe practice uniforms must allow free movement. European guidelines have highlighted that safe moving and handling practice may be restricted by the clothing the individual wears.</p>
<p>Uniforms must be taken to the appropriate sewing room for alterations and repairs as soon as necessary.</p>	<p>To maintain a professional appearance.</p> <p>To ensure staff comfort</p>
<p>DESIGNATED CHANGING FACILITIES: Staff are required to make use of designated changing facilities where available, Changing in public/staff toilets is unacceptable.</p>	<p>To minimise the risk of cross infection.</p>
<p>Laundered uniforms must be returned to the appropriate sewing room or department head as per local procedure on termination of employment.</p>	<p>To contain cost and minimise the risk of uniforms being used for non-NHSFV business.</p>
<p>JEWELLERY: Staff involved in direct clinical care must keep jewellery to a minimum. A ring (plain band) allowed. In addition, 1 pair of metal smooth studded earrings, 1 per lobe, is permitted.</p> <p>Staff involved in food preparation or using machinery, as above i.e. a ring (plain band).</p> <p>Where there is a religious / cultural requirement this should be discussed with the department head.</p>	<p>Jewellery may pose a Health & Safety risk, for example:</p> <ul style="list-style-type: none"> ▪ Rings with stones are hazardous as they can become a reservoir for infectious materials and can scratch patients; the stones may become dislodged. ▪ Jewellery that is hanging e.g. a necklace, could potentially be dangerous with a confused or violent patient or when working with machinery. ▪ Hand jewellery can contribute to outbreaks of

STANDARD	REASON
	infection and interference with proper hand hygiene practices, thereby explaining why these recommendations are made in infection control policies and guidelines.(NICPM 2016)
<p>WATCHES Wristwatches must not be worn in the clinical environment, or by staff providing direct clinical care. Fob watches are acceptable</p>	The area beneath wristwatches has been identified as a source of infection. May cause injury to patients during patient moving and handling.
<p>PIERCING: Visible body piercing must be kept to a minimum, discreet, inoffensive and not present a safety hazard.</p> <p>Wrist and hand piercings must be removed as per Hand Hygiene Policy.</p>	To prevent injury and to minimise the risk of cross infection. Hand hygiene cannot be carried out effectively
<p>ID BADGES:</p> <p>The badge is part of the overall uniform and therefore requires to be compatible with infection control and safe moving and handling practices appropriate to the area and sphere of work. The area should therefore undertake a risk assessment to deem which is most appropriate for use within the clinical area.</p> <p>Staff involved in the direct care of babies and small children must not wear badges in such a way that they may cause injury. Badges may require to be removed in order to enable safe handling of patients or where it is thought that patients are confused and it is likely that they may grab the badge.</p> <p>Where contractors are involved in carrying out work within NHSFV premises then security name badges should be worn.</p> <p>Staff wearing ID security badges on cloth lanyard are responsible to ensure these lanyards must be clean. Staff must have sufficient quantity of lanyards to allow regular washing and changing. Staff involved in clinical care must not wear cloth lanyards</p>	<p>Security issue</p> <p>Minimise risk of patient/staff injury.</p> <p>Minimise cross infection.</p>

STANDARD	REASON
<p>Please see APPENDIX 1 – WEARING OUR VALUES AT WORK for more information</p> <p>on lanyards and kite strings for staff.</p>	
<p>FOOTWEAR: Must be clean and in a good state of repair. For uniformed staff shoes must be soft-soled and have enclosed toes and heels. Shoes should not be of the slip on variety i.e. mules. It is acknowledged however that clogs continue to be the shoe of choice in theatres. (See Operating Departmental Attire)</p> <p>Shoes worn in the clinical area require to be rubber soled and non-pervious. “Croc” styled shoes are not permissible.</p> <p>Dark coloured shoes are preferable however it is acknowledged that many staff, in particular those involved with moving and handling of patients prefer to wear training shoes. Where training shoes are worn they must at all times be clean and be of a non-pervious material. Uniform shoes / trainers should be worn in the work place only.</p>	<p>Footwear in a poor state of repair or poorly fitting are a safety risk.</p> <p>Does not uphold the professional image of the uniform</p> <p>To minimise noise and prevent cross-contamination from blood and body fluids following spillage.</p> <p>To minimise the risk of cross infection.</p>
<p>TIES: ties must not be worn when delivering direct patient care. Where the wearing of a tie is appropriate to the work setting ie non clinical work this should be clean and must be tucked in/taken off when carrying out clinical procedures.</p>	<p>To minimise the risk of cross-infection</p>
<p>HEADWEAR: Headwear must be worn correctly i.e. covering all hair. Where cloth headwear is worn then this must be clean and presentable. All headwear must be changed daily.</p>	<p>The hat has the dual purpose of retaining stray hair and reducing the risk of cross contamination.</p>
<p>BELTS: If worn must be cleaned regularly.</p>	<p>To minimise cross infection.</p>
<p>PERFUME/AFTERSHAVE: Must be discreet.</p>	<p>Patients may find it nauseating or have an allergy.</p>
<p>FINGER NAILS: Nails must be kept short and clean.</p>	<p>It has been shown that nails, including chipped nail polish can</p>

STANDARD	REASON
Nail polish must not be worn. Artificial finger nails/extension must not be worn within the clinical environment and food handling preparation	harbour potentially harmful bacteria, which could then be transmitted to those who are receiving care. Caring for nails helps prevent the harbouring of micro-organisms.

7.1 Attire for Operating Theatres–

Within the operating theatres there is a need to:

- 1) Protect staff against contamination from blood and body fluids
- 2) Promote a clean environment
- 3) Minimise risk of cross-infection, cross-contamination

STANDARD	REASON
Any item of operating department clothing must be changed as soon as possible when contaminated with blood or body fluids.	To reduce the risk of contamination to other operating department personnel.
With the exception of a ring (plain band) all jewellery inclusive of wristwatches and charity bracelets must be removed prior to entering theatre. Prior to performing surgical scrub, rings must be removed.	To reduce the risk of contamination and injury to staff and patient.
Operating department footwear – clogs, wellington boots or other appropriate footwear, which are capable of being decontaminated. Footwear must be clean and free from post-operative residue i.e. blood, iodine etc. Footwear used in theatre must not be worn outside the theatre environment.	The protection of staff. Operating department footwear is normally antistatic (this is not mandatory) in order to reduce the risk from static electricity.
Mask: A fresh mask must be worn correctly for each operation Where aerosolised blood & body fluids are present or where the individual is working less than 18inches from the site of surgery a correctly placed facemask must be worn. When disposing of the facemask the user must handle the ties disposing directly in	To protect the wearer To prevent bacterial shedding into the operative field. To prevent cross infection.

<p>to an appropriate bin.</p> <p>Masks must be worn outside Theatre or procedure area</p> <p>Hat: Hats should be worn correctly i.e. covering all hair. Where cloth headwear is worn then this must be clean and presentable. All headwear must be changed daily.</p> <p>Eye Protection: Eye protection, spectacles/goggles, visors must be worn if there is a risk of splashing or spraying of blood or body fluids and when reconstituting a chemical solution.</p> <p>Eye protection must not be work outside theatre or procedure area.</p>	<p>The hat has the dual purpose of retaining stray hair and reducing the risk of cross contamination.</p> <p>In order to reduce the possibility of contamination of the eyes.</p>
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8.0 TRAVELLING IN UNIFORM

Where changing facilities are in place the wearing of uniform outwith NHSFV premises is NOT PERMITTED unless on specific duty i.e. community staff, for example community midwives, district nurses and AHPs. This recommendation is made for the safety and security of all staff and to minimise the risk of cross infection. It has also been shown that the public believe that there is a risk of cross infection, which is heightened when staff travel to and from work in uniform, therefore staff must not wear their uniform in public places when off duty.

Changing facilities are available at Bo'ness Hospital, Clackmannanshire Community Healthcare Centre, Falkirk Community Hospital, Stirling Community Hospital and Forth Valley Royal Hospital.

Requests to wear uniform out with the organisation for formal occasions or where promoting the organisation must be authorised by the appropriate Head of Department.

Where staff are escorting patients for on-going care and are required to return by public transport, suitable arrangements (including where the staff member will change, leave any clothing etc) prior to departure should be made to enable staff to travel and return in appropriate clothing.

It is acknowledged that some staff when working in the community may require to, visit shops or petrol stations and this is acceptable however staff should not routinely be seen shopping whilst in uniform.

9.0 PERSONAL PROTECTIVE CLOTHING (PPE)

Personal protective equipment consists of items of clothing (e.g. impermeable gloves, shoes with protective toe-caps or non-slip soles, aprons) or other items worn on the person (e.g. respirators) and are required to protect the wearer from a hazard. The need for personal protective equipment is determined by departmental risk assessment, with the assistance of a health and safety adviser if required. Where the need for personal protective equipment has been recognised in risk assessment, its compulsory use must be made known by the department manager and compliance monitored. Details should be recorded in the Health and Safety Manual/local risk register.

10.0 LAUNDERING OF UNIFORM

All scrubs should be sent to the central laundry

All supplied protective clothing i.e. Accident & Emergency suits to be sent to the central laundry.

Where it is known or it is suspected that there is an infection outbreak within a clinical area all uniforms should be sent to the laundry. Please see [APPENDIX 2 NATIONAL UNIFORM LAUNDERING POLICY](#).

Home Laundering

See guidelines for Home Laundering – [APPENDIX 3 HOME LAUNDERING ADVICE](#)

11.0 PERMITTED WEARING OF SCRUBS

The wearing of scrubs in non-operating theatres has been agreed for designated areas ([APPENDIX 2 – NATIONAL UNIFORM LAUNDERING POLICY](#))

Guidelines to inform local policies for NHS Boards

1. A clean, well laundered uniform inspires public confidence, sending positive messages about our professionalism and standards of care.
2. These guidelines reflect the scientific evidence-base and good practice points (HPS Conclusions, Section 3.1) and set out core principles that should inform the development of local policy.
3. These guidelines set out good laundering practice for all staff, including those who do not wear a uniform and should be considered and implemented alongside the NHSScotland Dress Code (Section 2). These guidelines apply to all staff including those who work in the community.

Uniform and Infection Risk

4. Provided appropriate Personal Protection Equipment (PPE) is used in accordance with Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs), there is no evidence that used uniforms pose any risk to healthcare workers or others. PPE, such as aprons, gowns, face protection and gloves have specialist properties which are specifically designed to limit the spread of infection. The

appropriate use of PPE will therefore protect uniform from contamination within the healthcare setting.

5. This guidance assumes that standard infection control and/or transmission based policies and procedures are applied in each department/ward where there is a risk of infection or contamination, and that the appropriate infection prevention and control strategies have been put in place.
6. For laundering classification purposes, we have therefore identified 2 categories:
 - a. **Used uniform**, which has been worn in conjunction with appropriate PPE
 - b. **Contaminated uniform**, which following a PPE failure or other incident is visibly contaminated with blood or other body fluids, or uniform which Infection Control advise should be treated as contaminated following an outbreak.

(A) Used Uniform – laundering guidance

1. Where a uniform has been worn in conjunction with appropriate PPE and is not visibly contaminated with blood or other body fluids, there is no evidence that it poses any risk to healthcare workers or the public.
 - Hospital/facility laundries should be used to launder uniforms if they are available. Uniform should be laundered in accordance with local laundering policy.
 - Where hospital laundry facilities are not available, used uniforms should be laundered at home in accordance with the Home Laundering Guidelines (Section 3.2). There is no evidence to suggest that home laundering is a less effective method of laundering used uniform.

(B) Contaminated Uniform

2. Staff should ensure their uniforms are clearly labelled with their name. Labelling can be done at the Linen Room, Falkirk Community Hospital or by Serco at Forth Valley Royal Hospital.
9. Healthcare workers should be vigilant regarding spillages of blood and/or body fluids adhering to local decontamination policies.
10. Contaminated uniform includes uniform which has become contaminated with blood or other body fluids, or uniform which Infection Control advise should be treated as contaminated following an outbreak. Staff should change out of uniform contaminated with blood or other body fluids immediately. Staff should wash themselves and change into new uniform. Staff should change out of uniform used during an outbreak at the end of their shift.
11. Contaminated uniform may pose a higher risk of infection to healthcare workers and the public. Hospital/facility laundries must be used to launder contaminated uniforms. Home laundering is not appropriate for contaminated uniform. The following process should be followed for a contaminated uniform:

- Staff should place their contaminated uniform directly into a water-soluble/alginate bag. This prevents further handling and potential contamination, particularly for the performing laundering procedures. The bag should be secured using a neck tie.
- A secondary bag (clear plastic or laundry bag) should be used to store and transport the water-soluble bag.
- This bag must be appropriately tagged for identification and should be disposed of, or laundered immediately after use.
- The bag should then be placed into a red hamper, the hamper should be clearly marked 'contaminated uniform'.
- NHS Fife will launder the uniform and return it to NHS Forth Valley with the normal linen delivery. The clean uniform will then be sent up to the relevant department as identified on the garment label with the next exchange trolley.
- Where a uniform is heavily contaminated, following laundering, the Laundry may condemn it as unfit for re-use. In these circumstances, it should be placed in a healthcare waste sack and disposed of as healthcare (including clinical) waste.
- Should a uniform be disposed of, then staff will be notified and provided with a replacement.

The minimum standards for infected linen set out in NHS MEL (1993)⁷ should be adhered to for contaminated uniform.

12.0 STAFF WORKING IN COMMUNITY

Where uniform is to be worn by staff working in the community, staff are permitted to travel in uniform to and from work and throughout their working day. It is acknowledged that at times of hot weather it may not be appropriate to continue to wear an outer coat. At all times it will be essential that staff adhere to universal infection control precautions i.e. the wearing of an apron whilst carrying out clinical tasks.

Staff based in the community should ensure they have access to a spare uniform at all times.

13.0 TERMINATION OF EMPLOYMENT

If an employee leaves NHS Forth Valley to go to another NHS Board in the same role they should take their uniform with them to their new role.

If the employee is leaving the NHS completely or moving to another role/grade their uniform should be returned to the linen room to supplement the linen room stock for staff.



**APPENDIX 1 – WEARING OUR VALUES AT WORK
NEW LANYARDS AND KITE STRINGS FOR STAFF**

In support of embedding the NHS Forth Valley Values and Behaviours for Success, we have invested in the purchase of new lanyards that display our NHS Forth Valley Values and kite strings that display our NHS Forth Valley Values logo. For some areas the original badge holder and clip will be most appropriate and is unchanged.



These new lanyards and kite strings will be distributed to all staff during the next few weeks. To promote consistency and a corporate professional appearance across the organisation, it is important that staff wear these in place of other items currently being worn. Most importantly, the new lanyards and kite strings are fully washable to reduce the risk of cross infection.

The NHS Forth Valley Uniform Policy and the Infection Prevention and Control Team provide the following guidance, which all staff should follow.

ID BADGES:

The badge is part of the overall uniform and therefore requires to be compatible with infection prevention and control as well as safe moving and handling practices appropriate to the area and sphere of work. The area should therefore undertake a risk assessment to deem which way of displaying the staff badge is most appropriate for use within the clinical area.

Three options are available for staff:

1. Badge holder and Lanyard	2. Badge holder and Kite-string	3. Badge holder with clip (unchanged)
		

Staff working in direct patient care areas where there is exposure to contamination from open wounds, blood and body fluids etc. should consider the risks of HAI. Kite strings or badges with clips may be more suitable for these areas.

Staff involved in the direct care of babies and small children must not wear badges in such a way that they may cause injury. Badges may require to be removed in order to enable safe handling of patients or where it is thought that patients are confused and it is likely that they may grab the badge. Risk assessment should also be made where there is a danger of lanyards or kite strings being inadvertently used as weapons in areas where staff or patient personal safety may be compromised. Where contractors are involved in carrying out work within NHSFV premises then security name badges should be worn.

Staff wearing ID security badges on cloth lanyards are responsible for ensuring these cloth lanyards are kept clean. Lanyards must be effectively laundered (as below) on a regular basis or when visibly soiled to reduce the risk of cross infection.

NHS Forth Valley laundering advice

- The kite strings and clips should be cleaned with a detergent wipe (available in clinical areas)
- The cloth lanyards can be washed by hand in hot soapy water or in a washing machine. Due to the small parts on the lanyard, it would be best placed inside a pillowcase or similar if machine washing

Should your NHS Forth Valley lanyard, kite string or clip become damaged or is no longer fit for use please obtain a replacement from the Security Office at Forth Valley Royal Hospital or for staff out with FVRH, replacement lanyards, kite strings and clips can be requested from Carseview reception desk on Tel: 01786 463031.

APPENDIX 2 – NATIONAL UNIFORM LAUNDERING POLICY

Guidelines to inform local policies for NHS Boards

1. A clean, well laundered uniform inspires public confidence, sending positive messages about our professionalism and standards of care.
2. These guidelines reflect the scientific evidence-base and good practice points (HPS Conclusions, Section 3.1) and set out core principles that should inform the development of local policy.
3. These guidelines set out good laundering practice for all staff, including those who do not wear a uniform and should be considered and implemented alongside the NHSScotland Dress Code (Section 2). These guidelines apply to all staff including those who work in the community.

Uniform and Infection Risk

4. Provided appropriate Personal Protection Equipment (PPE) is used in accordance with Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs), there is no evidence that used uniforms pose any risk to healthcare workers or others. PPE, such as aprons, gowns, face protection and gloves have specialist properties which are specifically designed to limit the spread of infection. The appropriate use of PPE will therefore protect uniform from contamination within the healthcare setting.
5. This guidance assumes that standard infection control and/or transmission based policies and procedures are applied in each department/ward where there is a risk of infection or contamination, and that the appropriate infection prevention and control strategies have been put in place.
6. For laundering classification purposes, we have therefore identified 2 categories:
 - a. **Used uniform**, which has been worn in conjunction with appropriate PPE
 - b. **Contaminated uniform**, which following a PPE failure or other incident is visibly contaminated with blood or other body fluids, or uniform which Infection Control advise should be treated as contaminated following an outbreak.

(A) Used Uniform – laundering guidance

3. Where a uniform has been worn in conjunction with appropriate PPE and is not visibly contaminated with blood or other body fluids, there is no evidence that it poses any risk to healthcare workers or the public.
 - Hospital/facility laundries should be used to launder uniforms if they are available. Uniform should be laundered in accordance with local laundering policy.
 - Where hospital laundry facilities are not available, used uniforms should be laundered at home in accordance with the Home Laundering Guidelines (Section

3.2). There is no evidence to suggest that home laundering is a less effective method of laundering used uniform.

(B) Contaminated Uniform

4. Staff should ensure their uniforms are clearly labelled with their name. Labelling can be done at the Linen Room, Falkirk Community Hospital or by Serco at Forth Valley Royal Hospital.
9. Healthcare workers should be vigilant regarding spillages of blood and/or body fluids adhering to local decontamination policies.
10. Contaminated uniform includes uniform which has become contaminated with blood or other body fluids, or uniform which Infection Control advise should be treated as contaminated following an outbreak. Staff should change out of uniform contaminated with blood or other body fluids immediately. Staff should wash themselves and change into new uniform. Staff should change out of uniform used during an outbreak at the end of their shift.
11. Contaminated uniform may pose a higher risk of infection to healthcare workers and the public. Hospital/facility laundries must be used to launder contaminated uniforms. Home laundering is not appropriate for contaminated uniform. The following process should be followed for a contaminated uniform:
 - Staff should place their contaminated uniform directly into a water-soluble/alginate bag. This prevents further handling and potential contamination, particularly for the performing laundering procedures. The bag should be secured using a neck tie.
 - A secondary bag (clear plastic or laundry bag) should be used to store and transport the water-soluble bag.
 - This bag must be appropriately tagged for identification and should be disposed of, or laundered immediately after use.
 - The bag should then be placed into a red hamper, the hamper should be clearly marked 'contaminated uniform'.
 - NHS Fife will launder the uniform and return it to NHS Forth Valley with the normal linen delivery. The clean uniform will then be sent up to the relevant department as identified on the garment label with the next exchange trolley.
 - Where a uniform is heavily contaminated, following laundering, the Laundry may condemn it as unfit for re-use. In these circumstances, it should be placed in a healthcare waste sack and disposed of as healthcare (including clinical) waste.
 - Should a uniform be disposed of, then staff will be notified and provided with a replacement.

The minimum standards for infected linen set out in [NHS MEL \(1993\)7](#) should be adhered to for contaminated uniform.

APPENDIX 3 HOME LAUNDERING ADVICE

Home Laundering Advice

Introduction

The risk of cross infection is reduced with the correct use of protective clothing. All personnel who wear issued uniforms and are involved in direct patient contact and carry out activities that are exposure prone to blood/body fluids should wear personal protective equipment. They should also understand the rationale for optimum laundering processes to render uniforms safe and fit for purpose. If uniforms are laundered correctly it will render the garments safe to wear.

Aim

To ensure that uniforms are not a reservoir for bacteria, and a source of cross infection.
To minimise risks to staff laundering their uniforms at home.

Procedure for Home Laundering of Non-Contaminated Uniforms

Action	Rationale
Staff should take used uniforms home in a plastic bag	To minimise the risk of cross infection
Uniforms should be washed in washing machines separately from other items.	To minimise the risk of cross contamination.
Uniforms should be washed at a temperature of at least 65°C or at the temperature on the care label. Staff should use the washing powder/liquid they currently use.	To reduce bacteria load.
Washing machine should be loaded as per manufacturer guidance and never overfilled.	Minimise the risk of inadequate decontamination.
Hands must be washed after the uniforms are placed into the washing machine.	To minimise the risk of cross contamination via the hands.
Uniforms may be tumble or line dried. When thoroughly dried the uniform must be ironed with a hot steam iron.	To ensure the uniforms are adequately decontaminated.
Place clean uniforms into a clean dry plastic bag.	Minimise the risk of recontamination.

NOTE:

Uniforms supplied by NHSFV can withstand washing at temperatures – tops at 60°C

Personal cardigans are not part of the National Uniform, if staff require outer garments a range of outer garments, including cardigans, fleeces and shower proof jackets are available.

Tax Relief on Home Laundry expenses for staff who have to wash uniforms at home can be claimed. Staff should write to Centre 1, Queensway House, East Kilbride, G79 1AA quoting their National Insurance number.

APPENDIX 4 - APPROVED AREAS FOR THE WEARING OF BLUE/OTHER COLOURED SCRUBS – NOT ‘RASPBERRY’

- Labour Ward staff (Only when working in Theatre)
- Endoscopy procedure areas
- Mortuary
- Terminal Clean team
- Interventional Radiology
- Emergency Department non permanent medical staff
- Pharmacy Clean Room staff
- Wards/departments affected by an outbreak where the Infection Control Team has sanctioned the use of blue scrubs.

NB. ‘RASPBERRY’ scrubs are for Operating Theatre Staff use only.

APPENDIX 5 – FURTHER READING:

Please click the following links for further information:

[Moving and Handling Guidelines \(NHSFV Policies & Procedures\)](#)

[NHSFV Infection Control Policy](#)

[Nursing and Midwifery Council Code of Professional Conduct](#)

[The Watt Report 2002](#)

[The Royal College of Nursing Report 2005](#)

[Behaviours & Rituals in the Operating Theatre, a report from the Hospital Infection Society Working Group on Infection Control in Operating Theatres 2001](#)

[Healthcare Associated Infection Taskforce – Draft Consultation Document](#)

[NHS Education Scotland \(2005\) Promoting the prevention and control of infection through cleanliness champions 3rd edition Jan 2005](#)

[Uniforms and Workwear: An Evidence Base for Developing Local Policy \(Department of Health, 2007\)](#)

[Hand Adornment and Infection Control, 2007, British Journal of Nursing](#)

[National Institute for Health and Care Excellence](#)

[Estates and Facilities Alert – Clogs](#)

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