

UNIFORMS, DRESS CODE AND APPEARANCE POLICY®

DOCUMENT SUMMARY/KEY POINTS

- Every employee, whether wearing a uniform or not, will maintain a professional appearance which is consistent with the image and standards of the SCHN.
- This document provides details for the provision of uniforms for staff that are required by SCHN to wear a uniform.
- (Note: NETS staff are exempt from the uniform section of this policy).
- A photo-ID badge (or a magnetic name badge purchased from Public Relations [CHW staff] or from the Offices of Finance & Corporate Services Manager or Nursing Workforce, Nurse Manager [SCH staff]) should be worn at chest height so it is easily read by parents and visitors.
- It is the responsibility of each Department Head to ensure that staff members comply with this policy and any departmental specific related policies.

CHANGE SUMMARY

- Changes throughout document

READ ACKNOWLEDGEMENT

- All SCHN staff, whether they are required to wear a uniform or not, must read and acknowledge this policy.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st April 2019	Review Period: 3 years
Team Leader:	Operational Workforce Manager	Area/Dept: Workforce

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1 Introduction

The Sydney Children's Hospitals Network (SCHN) promotes a code of dress and appearance that is consistent with our professional health-care facility and that meets current legislative requirements including those governing Work Health and Safety (WHS) and Infection Prevention and Control.

All employees, whether wearing a uniform or not, whether in a clinical area or not, are visible to our patients, parents and visitors. SCHN expects all staff to maintain a professional appearance which is consistent with the image and standards of the SCHN and its values of Collaboration, Openness, Respect and Empowerment (CORE).

Definitions

Clinical - As designated by the employing facility, usually involved in patient care.

Non clinical - As designated by the employing facility, usually no patient care involved.

Uniform - Items of specific clothing or apparel supplied by the employer to be worn by employees in the course of their duties.

2 Policy Statement

- All staff must wear a clearly visible badge with their name and position/role¹. This badge should be worn at chest height so it is easily read by parents and visitors.
- Lanyards should not be worn in any clinical area². (as per [Infection Prevention and Control Policy](#)).
- SCHN provides uniforms for categories of staff to enable the transferability of personnel within the NSW Health system without the issue of new uniforms³. ([NSW Health PD2012_057](#))
- If an employee is required to wear a uniform prescribed by the SCHN, it must be worn at all times. The uniform may only be varied for cultural or religious reasons following consultation with line manager/Department Head.
- Employees who are not required to wear a uniform must ensure that their clothing complies with the requirements of WHS and employee wellbeing and Infection Prevention and Control standards (i.e. bare below the elbow) and this policy.
- It is the responsibility of each Department Head to ensure that staff members comply with this policy and any departmental specific related policies.

3 Identification Badges

- The displayed ID badge at chest height may be either the Hospital issued photo identification badge or a magnetic name badge.

Whichever badge is worn, it must be worn and clearly visible at all times when an employee is on duty to display the full name and title.

It should be noted, even when wearing the magnetic ID badge, staff must still keep their photo-ID badge on them, as this is their official identification badge and provide access to areas within SCHN.

- Defacing or altering an ID Badge with labels, clip-ons, markers etc. is not permitted.
- All staff are issued a photo-ID Badge at the beginning of their employment.
- Any loss of a Photo-ID Badge must be reported to Security immediately, allowing the ID Badge to be cancelled and a replacement ID Badge issued. There is a cost for this service. (Refer to your local Security Policy for more information)
- Staff wishing to use the magnetic name badges should order the badge through CHW Public Relations (9845 3364) for all CHW staff, SCH Nursing Workforce (9382 1893) for all SCH Nurses or SCH Finance & Corporate Services Office (9382 1308) for all other SCH staff for a small cost. The badges may be ordered as a bulk order by Managers.

4 Uniforms

Staff required by SCHN to wear uniform

- As per (NSW Health PD2019_012) Uniforms Policy SCHN determines staff roles that are required to wear a uniform. At SCHN, staff that are required to wear a uniform generally work in front line clinical and non-clinical positions. Uniforms are provided to staff in these roles within award requirements. Staff who are not certain that they are required to wear a uniform should first refer to their line manager/Department Head.

Staff who purchase their own uniform

- Staff who are not required by SCHN to wear a uniform may purchase their own uniform using the TAMS system self-purchase module.
- SCHN provide uniforms for categories of staff who are employed within the SCHN in lieu of payment of relevant allowances. Permanent, temporary and casual staff will receive a uniform allocation where the wearing of a uniform is required for their position.
- The Department Head should advise new employees of suitable dress requirements until they receive a uniform.
- Most employees in non-clinical areas are not required to wear a uniform. This is at the discretion of their Department Head.
- Staff should confirm with their line manager to determine if they are eligible for uniform provision.
- Once the supply of uniforms commences, staff are to be advised that payment of any previous Uniform Allowance(s) under the relevant employee award will cease. Payment of Laundry and other relevant Allowance/s (if applicable) is to continue.

4.1 Procedure

- SCHN staff that are required to wear a uniform should follow the procedures outlined in the State-Wide Uniform Operations Manual found at:
<http://intranet.hss.health.nsw.gov.au/about/healthshare/finance/uniforms/operations-manual>
- Uniforms will be provided as per the Uniform range in the State-Wide Uniform Operations Manual. In addition to the uniform colour, differentiation between staff classifications is by the official hospital, service or Network name badge.
- Employees should only wear a NSW Health approved uniform available via the Total Apparel Management System (TAMS) online system.

Quantity of Uniforms to be supplied

Table 1: Quantity of Items to be Supplied: Nursing

Quantity			
	Upper	Lower	Outerwear
Full Time	5	5	1
0.8	4	4	1
0.7	4	4	1
0.6	3	3	1
0.5	3	3	1
0.4	2	2	1
0.3	2	2	1
0.2	2	2	1
Casual	2	2	1

Table 2: Quantity of Items to be Supplied: Corporate and all other

Quantity			
	Upper	Lower	Outerwear
Full Time	5	3	1
0.8	4	2	1
0.7	4	2	1
0.6	3	2	1
0.5	3	2	1
0.4	2	2	1
0.3	2	2	1
0.2	2	2	1
Casual	2	2	1
Shoes (trades only)		1 pair only	

Ordering Uniforms

- Orders will be placed via the online Total Apparel Management System (TAMS) .
- Employees will create, maintain and update their own (mandatory) personal profile information. TAMS Employee User Guide is available at the following link:
http://intranet.hss.health.nsw.gov.au/_data/assets/pdf_file/0007/353599/TAMS-Employee-User-Guide.pdf
- Employees are encouraged to have their uniform allocation sent to their home address
- Employees will be responsible for ordering their own uniforms during the allocated order timeframes annually.
- All 'fair wear & tear' items require online authorisation by the cost centre manager
- Employees are able to self-purchase over and above their allocation at any time
- The Uniform catalogue and other information is available on the NSW Health intranet on the following link: http://intranet.hss.health.nsw.gov.au/hss_uniforms

SCHN Procedures

- Most employees in non-clinical areas will not be required to wear a uniform, this is at the discretion of their Department Head.
- Alterations, maintenance and repairs at employees expense (may be subject to personal tax deduction).
- Replacement of uniforms – 'fair wear and tear' to be determined by department manager/head (e.g. NUM).
- Replacement of uniforms – lost or stolen to be determined by department manager/head (e.g. NUM).
- Uniforms may only be varied for cultural or religious reasons following approval from line manager. The line manager will need to consult with WHS and Infection Control.
- Uniform variations for regular and special events may be considered and approved by the relevant Tier 3 manager in consultation with WHS and Infection Control.
- Provisions during pregnancy to be agreed with department manager/head (e.g. NUM) (as per Award).
- If leaving the employment of NSW Health entirely, employees are to dispose of uniforms appropriately.

Additional reading, refer to NSW Health Uniform Policy [PD2019_012]:

https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2019_012

5 Dress Code and Appearance

5.1 General aspects of clothing and footwear

- Consideration should be given to patients, visitors and other staff when selecting appropriate work wear. Clothing (sheer/revealing, very casual, scruffy, untidy or not in good repair or dirty) that may attract negative attention, comments or be offensive to visitors or colleagues is not considered to meet the required standard of the SCHN. Any dispute as to the appropriateness of clothing should be discussed with the Department Head.
- In Clinical areas, for the safety of the staff member as well as the patient, anything that can come into contact with the patient should be secured. This includes scarves, long hair, stethoscopes, ID badges or other items that may scratch, catch or irritate a patient should be removed when moving, lifting or transferring a patient. Neckties are not recommended to assist in reduction of healthcare-acquired infections.
- Clothing items (hats, badges) should not advertise other commercial / pharmaceutical products or services (e.g. antibiotics).
- Suitable footwear must be worn at all times. Staff in clinical areas and laboratories, Stores, Engineering, Linen and Domestic Services are required to wear closed-in toe and low heel shoes. Shoes should be clean, in good repair and have a non-slip sole. Some areas require very specific types of foot wear as directed to by management. e.g.: industrial, waterproof, safety toes, etc. Theatre clogs should be closed, without any holes. Other clogs and high-heeled shoes are not appropriate in clinical areas. Laboratories staff need to follow the local policies with regard to clothing.
- All staff should wear footwear complementary to professional dress. Footwear should be sturdy, low heeled, preferably non-slip and protect the foot. Footwear worn should be in relation to risk associated with Slips, Trips and Falls, this may be in relation to journeys to and around the workplace.
- Nursing staff are required to wear black, dark blue or dark grey closed in shoes. For other staff such as porters, "joggers"/sport shoes may be worn if they meet the appropriate safety and professional dress standards.
- Personal Grooming, hair should be clean and tidy and should not compromise clinical requirements and other common sense standards. This means that long hair must be tied back in clinical areas and in other areas for Infection Prevention and Control and WHS reasons. Some areas will require head/hair protection to be worn e.g. Operating Suite, Kitchen, all areas of food handling.
- Attention is to be given to personal cleanliness and grooming.
- Staff members should maintain facial hair in a clean and tidy fashion and covered in specific clinical areas (i.e. Theatres).
- Perfume and cologne may become an irritant to some and should be used with discretion. (see SCHN Procedure – [Highly Perfumed Products](#))

- Infection Control requirements (Refer to [Hand Hygiene Practice Guideline](#)):
 - All staff involved in (patient or other) activities that can spread infection and for all staff working in patient care areas, fingernails need to be short and clean and nail polish or artificial nails are not permitted. Rings need to be limited to plain metal bands. Wrists need to be clear of watches, bracelets, bangles, and personal fitness monitors (bare below the elbow)
 - In clinical areas, sleeves should not go past the elbow (bare below the elbow). If long sleeves are worn for religious or cultural reasons, they must be rolled up when providing direct patient care and when performing hand hygiene.
 - Skin integrity needs to be maintained on the hands/wrist with the regular use of moisturiser.
 - Freshly laundered clothing must be worn daily.

5.2 Jewellery

- In clinical areas wearing of jewellery (including body-piercings) should be kept to a minimum (e.g. simple studs). Wearing of hand and arm jewellery must be in accordance with the SCHN Hand Hygiene policy. Rings need to be limited to plain metal bands. Wrists need to be clear of watches, bracelets, bangles, and personal fitness monitors (bare below the elbow)
- In all other areas, wearing of jewellery may vary be dependent upon individual Department policy.
- Special arrangements for cultural or religious reasons may be considered and approved by line manager. The line manager will need to consult with WHS and Infection Prevention and Control.

6 Reference

1. NSW Health Policy Directive [PD2017_013] Infection Prevention and Control Policy: https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2017_013
2. 1. NSW Health Policy Directive [PD2012_061] Environmental Cleaning Policy: https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2012_061
3. NSW Health Policy Directive [PD2019_012] Uniforms Policy: https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2019_012
4. SCHN Hand Hygiene Practice Guideline: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/4305>
5. NSW Health Policy Directive [PD2018_013] WHS: Better Practice Procedure https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2018_013
6. Community Hosp Intern Med Perspect 5(5); 2015 PMC4612704 - Bow tie or no tie: a rule to reduce healthcare-acquired infections. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4612704/> (viewed 29.11.18)

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