<table>
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<th><strong>Dress Code for Medical Staff</strong></th>
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<tr>
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(Updated version with mandatory policy content only added replaced on Staffnet June 11)

**NHSCT Mission Statement**
To provide for all, the quality of service we expect for our families, and ourselves.
Dress Code for Medical Staff Guidance
Northern Health & Social Care Trust

Dress Code for Medical Staff Guidance

Introduction
This guidance defines the acceptable dress code for all medical staff in the Northern Health & Social Care Trust (NCHST). The guidance is to be read in conjunction with local and regional infection control policy and guidance.

This dress code takes cognisance of the need to;
• project a professional image to patients, visitors and health care colleagues,
• facilitate the implementation of high standards of Infection Control Practice and
• emphasize the importance of personal safety.

The guidance is based upon the principle that contact with patients and clients in different areas presents different levels of risk; therefore, different approaches will be required depending upon the clinical area involved.

Who this guidance applies to
This guidance applies to all medical practitioners at all grades employed by the NHSCT including temporary and locum medical staff. All other medical staff working within the Trust are expected to adhere to these guidelines as are medical students on placement with the NHSCT.

General principles
The following principles apply to all medical staff when involved in clinical duties on all sites;
• All staff should wear identification name badges.
• Staff are expected to exhibit and maintain a well groomed personal appearance including cleanliness and proper hygiene.
• T-shirts are not acceptable, however T-shirts may be worn under scrub top but must remained tucked in.
• All staff must comply with the “naked below the elbow” policy. That is:
  o Nails should be short and clean – no nail polish or extensions;
  o Wrist watches must not be worn in clinical areas;
  o No other jewellery should be worn around the wrist;
  o No rings with stones should be worn – one plain band is permitted: if a ring is worn it should be manipulated to ensure good hand washing technique.
• Excessive exposure of the skin e.g. bare midriffs, scant tops, places the wearer at risk of direct skin contamination and the possibility of becoming a carrier of pathogenic or multi-resistant bacteria or the risk of infection through sites of body piercing, therefore such apparel is not permitted.
• Uncontrolled long hair presents a risk of acquisition and transmission of such bacteria and must be securely contained by tying back/up.
• To facilitate proper hand hygiene and avoid contamination of long sleeved garments, a short sleeved shirt/blouse/top or scrub top should be worn.
• Scrub suits should be worn when working in clinical areas when there is a high risk of exposure to infections and where there are appropriate changing facilities: each department will have guidance on which area scrub suits should be worn in.
• Ties should be securely fastened with tiepin or tucked into shirt; bow ties are acceptable.
• Scrubs and white coats must not be worn outside the workplace – any breach will be regarded very seriously by the Trust and will lead to disciplinary action.

**Standard infection control precautions**

Standard infection control precautions must be followed in the care of all patients at all times, to prevent transmission of infection from person to person.

Standard precautions are based on a risk assessment of the likelihood of exposure to blood or body fluids, and not on an assessment of the perceived risk of infection from an individual patient, as it is not always possible to know which patients are infected or colonized with pathogenic or antibiotic resistant bacteria.

Standard precautions encompass hand hygiene, use of personal protective clothing and the safe use and disposal of sharps. The selection of personal protective clothing should be based on an assessment of the risk of transmission of micro-organisms to the patient and the risk of contamination of the doctor’s clothing and skin by the patient’s blood or body fluids or contaminated surfaces.

Standard infection control precautions include:

- **Single use plastic apron** should be worn over the scrub suit or the white coat (white coat may be removed) or normal clothes for all direct contact with blood, body fluids, secretions, excretions (except sweat) or contaminated surfaces.
- **The wearing of gloves**, changed with every procedure contact, together with routine hand washing following the procedure, is mandatory for invasive procedures, contact with sterile sites and non intact skin, and for all activities that have been assessed as carrying a risk of exposure to blood or body fluids, or to sharp or contaminated instruments. Gloves must be worn as single-use items and sterile gloves should be used for appropriate tasks.
- **Facemask and eye protection** are required if there is a risk of blood or body fluids splashing into the face or eyes.
It is important, that overall contact with the patient’s bed/bedding, chair or bed table should be minimised to prevent contamination of the doctor.

**HIGH RISK PATIENTS.**
If a patient is in Contact, Droplet or Airborne Isolation, all staff without exception must comply with the additional precautions appropriate to the type of isolation.

**Lower risk areas**
Lower risk areas include areas where the patients are attending for appointments and are not exposed to in-patients e.g. Out Patient Department. Lower risk areas also include mental health care facilities and community facilities unless there is direct physical contact with the patient or client in which case the standard precautions (as above) must be followed.

In lower risk areas (e.g. Outpatient Departments) medical staff should observe the general principles set out on page 3. However, if there is the need for close physical contact with patients then white coats with short sleeves should be worn or plastic aprons should be used to prevent contamination of personal street clothes. When there is a risk of exposure to blood or body fluids **standard precautions** should be applied.

**STETHOSCOPES.**
Stethoscopes should be cleaned before and after any patient contact.

**Equality, Human Rights and DDA**

This policy has been drawn up and reviewed in the light of Section 75 of the Northern Ireland Act (1998) which requires the Trust to have due regard to the need to promote equality of opportunity. It has been screened to identify any adverse impact on the 9 equality categories and no significant differential impacts were identified, therefore, an Equality Impact Assessment is not required.

**Alternative formats**

This document can be made available on request on disc, larger font, Braille, audio-cassette and in other minority languages to meet the needs of those who are not fluent in English.

**Sources of Advice in relation to this document**

The Policy Author, responsible Assistant Director or Director as detailed on the policy title page should be contacted with regard to any queries on the content of this policy.