SESLHD PROCEDURE COVER SHEET



NAME OF DOCUMENT	Uniform and Dress Code
TYPE OF DOCUMENT	Procedure
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FORMER REFERENCE(S)	PD 202, PR 275, SESLHDPR/233 – Name Badges
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FUNCTIONAL GROUP(S)	Conduct and Ethics
	Nursing and Midwifery
KEY TERMS	Uniform, Name badges, Nurses, Midwives, Medical, Allied Health, Radiography, Corporate Services, Trainee
SUMMARY	This procedure defines standards for dress code uniforms and appearance, and outlines arrangements for the provision of name badges and uniforms for SESLHD staff (excluding Calvary Health Care and War Memorial Hospital). This applies to all staff including Nursing and Midwifery, Allied Health, SESLHD Medical Imaging, Corporate Services, and all Trainees/Contingent Workers.



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1. POLICY STATEMENT

SESLHD provides staff with practical and functional uniforms in a variety of styles. Each work stream, such as medical and nursing and midwifery, have their own individual colours, helping patients to easily identify members of their care team. Where available, staff must wear the complete uniform.

Staff are to wear the provided name badge including their first name and family name. There may be areas with unique security considerations where only the first name and initial will be displayed for identification purposes. This exemption can only be granted by Service Director/ SESLHD Executive Member following a risk assessment.

All staff are required to project a professional image by maintaining a sensible and conservative standard of dress which is compliant with relevant work, health and safety, Code of Conduct and infection prevention and control requirements.

Failure to comply with any part of this procedure is a performance management issue, which may lead to disciplinary action.

Definitions

- Name badge refers to the provided badge (magnetic or clip fastening). As required by <u>Caring Together</u>, all NSW Health employees are required to wear a badge identifying clearly for patients and staff their name and designation (a small number of areas may need to have security considerations).
- <u>Photo ID card</u> refers to the key card staff are issued by the facility/site. These are flat, programmable plastic cards used to swipe against a door reader for access. These often include the staff member's identification (e.g. photo, name, position). These do not replace the need to wear a name badge.

2. BACKGROUND

SESLHD provides uniforms for nurses and midwives, allied health, radiography, and corporate services staff 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.

Once the supply of uniforms commences, clinical and corporate services staff who currently receive a uniform allowance are to be advised that payment of this allowance under the relevant Awards will cease but payment of Laundry Allowance will continue.

3. RESPONSIBILITIES

All line managers or cost centre managers are responsible for ensuring compliance with this procedure.

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HealthShare will allocate allowances based on <u>position number</u> following request from SESLHD. This will allow relevant allowances to be allocated to employees automatically.

4. PROCEDURE

- **4.1** Uniforms are ordered online via the <u>NSW Health Total Apparel Management System</u> (TAMS). Access to TAMS is with StaffLink ID and password. New starters must be active on the payroll system to order.
- **4.2** The <u>NSW Health Uniform Colour Palette</u> displays the colours and patterns assigned to each employee classification.
- 4.3 The <u>allocation of uniform items</u> is defined by HealthShare. The number of items provided is based upon the hours of work (FTE) contracted of the staff member. Staff can purchase over their allocation at their own cost at any time via the 'personal purchase' ordering section.
- **4.4** Staff can draw down renewal items once these limits are exhausted. 'Fair Wear and Tear' and 'Renewal' allocations must be approved by the cost centre manager.

4.5 Appearance and wearing of the uniform

Name badge

- Name badges are ordered by the Line Manager by completing the <u>Staff Identification</u> <u>Badge Order Form (F027)</u> and submitted as per local site business process.
- The list of staff categories approved for use on name badges are listed in Appendix 1.
 Acronyms and abbreviations are not permitted. Requests to use alternate staff categories must be escalated by the Line Manager prior to use.
- Name badges require staff member's full name i.e. first name and family name.
- Where a staff member is known by a name other than their legal name, this must be discussed with the Line Manager in relation to the name badge and Photo ID card. This is of particular importance for clinicians where the name registered with AHPRA differs to their preferred/ chosen name.
- Provided name badge is to be worn on the upper right-hand side of the chest.
- The use of stickers on name badges should maintain a sensible and conservative standard. External logos and advertisements should not be applied without express permission of a Tier 2 Director.

Exemption to displaying full name on Name badge

• In accordance with the <u>Protecting People and Property: Security Manual</u>, staff in certain settings (such as emergency departments, mental health units, drug and alcohol units) may request to have only their first name and surname initial displayed on their name badge.

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- In all other areas, a decision to not display both first name and surname must be based on a documented risk assessment in consultation with staff, be relevant to the department and approved by the facility manager/general manager. The risk assessment will consider the likelihood of particularised threats against staff using the information on the name badge.
- Where full names are not used on name badges care must be taken to ensure that
 patients and others are always able to see enough information to differentiate between
 individual staff.
- In addition to the name badge, staff must also be wearing photo ID cards to be available for checking when requested.

Photo ID card

- Photo ID card will be issued by the site/ facility. Refer to local procedures for same.
- For staff in clinical or patient care areas, Photo ID card should not be worn on a lanyard where possible. The wearing of lanyards has been shown to facilitate transmission of infection (NMHRC).

Uniform

- Only uniforms issued from TAMS are to be worn whilst on duty with SESLHD. The
 only exception is when approval has been given by the relevant site/ service
 Executive.
- Staff who require an undershirt for warmth must ensure the colour is the same as the uniform top and not be below the elbow when undertaking direct/ clinical patient care. This is to ensure compliance with the NSW Health Uniform Colour Palette.
- Cardigans and long-sleeved jackets must be removed prior to performing direct patient care, treatment, or procedures.

Socks/ stockings

- Socks and stockings must be in good condition.
- Any patterned or coloured socks/ stockings must be professional and sensible.
- External logos, advertisements or offensive content must not be present.

Shoes

- Shoes must be closed (i.e. not open-toed or backless) with non-slip soles and of a solid base colour (black, brown, navy, white). A small amount of coloured trim is acceptable.
- Footwear should be leather/vinyl and impervious to hazards in the workplace.
- A risk management approach is to be adopted when assessing suitability of footwear requirements within individual working environments.

Perioperative Attire

 As per the CEC <u>Infection Prevention and Control Practice Handbook</u> perioperative attire should not be worn outside of the Operating Room, with the exception of emergency attendance of patients. An outer gown should cover the front of the attire when leaving the Operating Room.

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- If scrubs are worn outside of the Operating Room, surgical attire is to be changed before re-entry into the Operating Room.
- Clean protective equipment including masks, overshoes and balaclavas must be applied on each entry to the Operating Room.
- White cotton gowns are not to be worn by SESLHD staff at any time other than by perioperative personnel and are not to be worn off campus.

4.6 Staff not required to wear a uniform

- All staff are required to project a professional image by maintaining a sensible and conservative standard of dress which is compliant with relevant WHS and infection prevention and control requirements.
- Clothing must be neat and in good repair.
- Clothing must not display logos (other than NSW Health), lettering or artwork which
 may be interpreted as offensive or inappropriate. This can also include political
 statements.

4.7 All staff

Hair

- Long hair should be tied back in clinical areas.
- Head/ hair protection is mandatory in certain areas including kitchens and perioperative setting.
- Facial hair should be neat and trimmed.

<u>Jewelle</u>ry

- Jewellery should be removed wherever possible prior to undertaking direct/ clinical patient care.
- Some jewellery such as long necklaces and earrings, may be considered a WHS risk and unacceptable in the workplace.
- Lanyards, ties, and scarves may present a WHS or infection risk and should not be worn in clinical areas.
- As per <u>SESLHDPR/343 Bare Below the Elbows Hand Hygiene</u> hand and wrist jewellery, including watches are to be removed as they present an infection risk. Simple/ plain wedding bands are the only acceptable piece of jewellery to be worn by clinical staff below the elbow.
- All jewellery, including wedding bands are to be removed prior to performing aseptic
 procedures to reduce the risk of infection and promote patient safety.

Hand Accessories

- As per <u>SESLHDPR/343 Bare Below the Elbows Hand Hygiene</u> fingernail enhancements including nail polish, acrylic/gel nails, nail extensions or nail art/ adornments must not be worn in clinical or patient care areas.
- Natural fingernails are to be neatly manicured and extend no longer than the tip of the finger and be free of nail polish to reduce the risk of infection to patients.

Other Attire

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- Ties are only acceptable in non-clinical areas. Exceptions may be made where it is deemed appropriate, such as general consultation between a medical staff member and a patient. In these cases, ties should be secured so as not to contact the patient or surrounds.
- It is expected that shirt sleeves be rolled to above the elbow by all staff in clinical areas to aid hand hygiene and decrease the risk of infection to patients.

Religious/ Cultural Items

Articles of clothing/ jewellery considered to have cultural/religious significance are
acceptable if they comply with the acceptable standards set out above. To comply with
the <u>SESLHDPR/343 - Bare Below the Elbows - Hand Hygiene</u> sleeves must be rolled
up when providing clinical/direct patient care. Once clinical/ direct care is completed
the sleeves can be rolled down again.

4.8 Local Procedures/ Business Rules

Facilities/ services within SESLHD are encouraged to have a local uniform procedure covering the following:

- Identification of employees in clinical and non-clinical roles.
- Alterations, maintenance, and repairs (may be claimed as a tax deduction).
- Replacement of uniforms fair wear and tear.
- Replacement of uniforms lost or stolen. The following statement is to be made: "Lost or stolen items will be replaced at the discretion of the facility or service taking the circumstances into consideration."
- Provisions during pregnancy (as per Award).
- Provision of uniforms during periods of secondment.
- Return of uniforms/apparel on termination of employment from NSW Health.
- Occasions when alternate uniforms can be worn.

5. DOCUMENTATION

Staff Identification Badge Order Form (F027)

6. AUDIT

Regular and ongoing monitoring of compliance will be completed at site level.

7. REFERENCES

NSW Health Policy Directive PD2019 012 - Uniforms Policy SESLHDPR/343 - Bare Below the Elbows - Hand Hygiene SESLHD Diversity, Inclusion and Belonging Strategy, 2024-2026 Protecting People and Property, NSW Health, 2022

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8. VERSION AND APPROVAL HISTORY

Date	Version	Version and approval notes
July 2013	1	Developed by Wei-Li Hume, Management Trainee.
September 2013	2	Revised and Re-formatted by Scarlette Acevedo, District Policy Officer.
October 2013	2	Approved by DET.
July 2015	3	Minor update to accommodate availability of polo shirts for Corporate Services Staff. Approved by Executive Sponsor.
September 2020	4	Sharon White, NM Workforce. Approved by Kim Olesen, SESLHD Director Nursing and Midwifery
25 July 2024	5.0	Major review coordinated by Norbert Pereira, NM Workforce. Approved by Kate Hackett, District Director of Nursing and Midwifery; Kim Olesen, Executive Director Operations; Sharon Carey, General Manager, Corporate Services; Marianne Gale, Director, Population and Community Health. Amalgamated with SESLHDPR/233 – Name Badges.

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Appendix 1: STAFF CATEGORIES FOR NAME BADGES

The following list of job classifications has been approved by the District Executive Team for use on staff name badges. These are the only classifications to be used when ordering name badges. For more information or requests regarding the job classifications for staff name badges, please contact your Line Manager.

MEDICAL

- Doctor (used for JMO/ RMO staff)
- Consultant e.g. Surgeon, Radiologist, Cardiologist, Oncologist, etc
- Trainee

NURSING

- Assistant in Nursing/ Midwifery
- Cadet
- Child & Family Nurse
- Clinical Nursing and Midwifery Educator
- Clinical Nurse/Midwifery Specialist
- · Deputy Director of Nursing
- · Director of Nursing
- Director of Nursing and Midwifery
- Site Manager/ Director of Nursing
- Enrolled Nurse
- Manager
- Midwife
- Midwifery/ Nurse Consultant
- Midwifery/ Nurse Manager
- Midwifery/ Nurse Practitioner
- Nursing/ Midwifery Educator
- Nurse/ Midwife in Charge
- Nurse Manager (at principal and specialised referral facilities)
- Nursing/ Midwifery Unit Manager
- Registered Nurse
- Student Midwife
- Team Leader
- Trainee

ALLIED HEALTH

- Aboriginal Liaison Officer
- Aboriginal Health Worker
- Allied Health Assistant

- Art Therapist
- Audiologist
- Cadet
- Case Worker
- Counsellor
- Dental Therapist
- Dental Assistant
- Dentist
- Diet Aide
- Dietitian
- Divisional Therapist
- Diversity Health Officer
- Exercise Physiologist
- Genetic Counsellor
- Music Therapist
- Non-Nursing Learning and Development Staff
- Occupational Therapist
- Orthoptist
- Orthotist
- Pastoral care
- Pharmacist
- Pharmacy Technician
- Physiotherapist
- Physiotherapy Assistant
- Play Therapist
- Podiatrist
- Psychologist
- Clinical Psychologist
- Speech Pathologist
- Social Worker
- Trainee
- Welfare Officer

NON-CLINICAL

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- Administration Officer
- Business Analyst
- Cadet
- Chaplain
- Chief Executive
- Chief Information Officer
- Cleaning Services Officer
- Clinical Coordinator
- Clinical Support Officer
- Coordinator
- Consumer Advisory Committee Member
- Consumer Advisory Councillor
- Consumer Advocate
- Consumer Representative
- Corporate Manager Cleaning
- Corporate Manager Engineering
- Corporate Manager Security
- Corporate Services
- District Director
- District Manager
- Driver
- Executive Assistant
- Executive Officer
- Executive Services
- Finance Officer
- Food Services Officer
- General Manager
- IT Officer
- Interpreter
- I ibrarian

- Maintenance Officer
- Mail Officer
- Media and Communications
- Non-Nursing Learning and Development Staff
- Patient Services Assistant
- Personal Assistant
- Planning Officer
- · Policy Officer
- Porter
- Project Officer
- Research Officer
- Security Officer
- Service Director
- Storeman
- Switchboard Operator
- Team Leader
- Technical Aide
- Technician
- Trainee
- Volunteer
- Ward Clerk
- Ward Person
- Workforce Services Officer

STAFF ACTING IN POSITIONS ABOVE

- Acting
- Deputy, if Deputy

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