

<b>DRESS CODE AND UNIFORM POLICY</b>	
<b>Summary statement: How does the document support patient care?</b>	To provide effective and meaningful guidance in accordance with infection control, health and safety and local procedures. To maintain public confidence reinforcing a message that staff are professional
<b>Staff/stakeholders involved in development</b>	Workforce Managers, HR Advisers Policy Review Group
<b>Division:</b>	Organisational Development and Leadership
<b>Department:</b>	Human Resources
<b>Responsible Person:</b>	██████████ Head of Employee Relations
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<b>For use by:</b>	All Staff
<b>Purpose:</b>	To set out the expectations of the Trust in relation to corporate dress code and the wearing of Trust uniforms
<b>This document supports:</b> <i>Standards and legislation</i>	Department of Health Guidance, "Uniforms and work wear 2007", COSHH Regulations NHSLA
<b>Key related documents:</b>	Staff Discipline Policy, Raising Concerns (Whistleblowing) Policy, Smoke Free Policy, Grievance Policy
<b>Approved by:</b> <i>Divisional Governance/Management Group</i>	Employee Partnership Forum
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## 1. **PURPOSE**

- 1.1 University Hospitals Sussex NHS Foundation Trust is striving to create a culture where everyone is passionate about delivering exceptional quality every time and “where better never stops”.
- 1.2 The Patient First programme is the Trust’s approach to improving services continuously ensuring that we put the patient at the heart of everything we do. “Our People” are essential to creating a culture in which we see *“everyone passionate about delivering excellent quality care every time”*, to create hospitals *“where better never stops”*.
- 1.3 Patient First demonstrates this approach and includes the Trust’s values and behaviors.
- One of the Trust’s values and behaviors identified at the top of the triangle is to be professional. The appearance of staff is often critical in determining a patient’s first impression and therefore it is vital that all staff appear professional at all time.
- 1.4 In our clinical areas it is important that staff appearance does not only convey a professional image but also complies with infection control policies to ensure we are minimising risks to our patients. This policy fully adopts the Department of Health’s “Bare Below the Elbows” policy.
- 1.5 Another key feature of a Dress Code Policy is to ensure that staff have appropriate clothing for their role that protects their health and safety.
- 1.6 This policy and associated guidance give clear guidelines over appropriate dress code. Specific guidance for departments are included in the appendices.
- 1.7 It is recognised that there may be occasions when staff do not meet the required standards of appearance and this policy outlines how concerns over dress code will be managed.

## **2. SCOPE**

### **2.1 Who is covered by the Policy**

**2.1.1** This policy covers all employees, regardless of role, location or contractual status.

**2.1.2** This policy also covers students, contractors, bank and agency workers and those working on Trust premises under a license agreement.

### **2.2 When the policy should be used**

**2.2.1** The policy sets out key principles of professional dress code that apply to all staff, at all times. In addition there are additional sections of the policy for all uniform wearers and those working in areas with specific dress codes. However, this policy does not attempt to cover specific arrangements for all areas of the Trust and there may be additional local guidelines or protocols in place.

**2.2.2** All staff should be made aware of the policy and any local guidelines as part of their local induction process.

## **3. PRINCIPLES**

**3.1** The Dress Code and Uniform Policy is necessary in order to:

- Convey a professional and efficient image of the Trust and the individual
- Give patients confidence
- Support infection control
- Have regard to Health and Safety considerations for staff
- Comply with Professional Codes of practice for all staff

**3.2** The Trust considers the way staff dress and their appearance is of significant importance in portraying a professional image to all users of the service, whether patients, visitors, clients or colleagues.

**3.3** A number of clinical and non-clinical staff groups are required to wear protective clothing as part of their individual role. The principles are based upon the need for:

- Patient safety
- Personal safety
- Statutory regulatory requirements
- Work environment

- Health and safety requirements
- Infection control requirements

- 3.4** The Trust recognises the diversity of cultures, religions, disabilities and beliefs of our staff and will take a sensitive approach when this affects dress and uniform requirements. However, priority will be given to health and safety, security and infection control considerations.
- 3.5** Employees are supplied with a Trust identity (ID) security badge that must be worn and be visible at all times when on duty or acting in an official capacity representing the Trust. ID badges on lanyards should not be worn in any clinical area or when patient contact is involved. Staff should contact the Security department for alternative ways to attach ID badges to their person. Lanyards in non-clinical areas must not carry any advertising other than that of the Trust or professional association.
- 3.6** Staff are expected to dress in clean, smart clothes every time they start work.
- 3.7** Staff are required to comply with the principles and requirements of the policy. The policy is not exhaustive in defining acceptable and unacceptable standards of dress and appearance and staff should use common sense in adhering to the principles underlying the policy.
- 3.8** Where the term 'Clinical Area' is used in the policy this refers to: 'all places where there are patients receiving clinical attention, i.e., wards, clinics, Outpatient Departments (OPD), therapies, radiology, phlebotomy etc.'
- 3.9** Managers are responsible for ensuring that staff are aware of the policies and any specific local guidelines. They are also responsible for addressing any concerns where staff are not compliant with the policy.

#### **4. GENERAL GUIDANCE**

- 4.1** For staff that are not required to wear a uniform, examples of **acceptable** staff clothing include:-
- Skirts
  - Tailored shorts/smart three quarter length trousers
  - Blouses, smart shirts or tops
  - Jumpers
  - Jackets
  - Dresses
  - Culottes
  - Trousers
  - Blazers

All clothing worn should be appropriate for the area where their work is to be undertaken.

**4.2** The following items are examples of unacceptable clothing and footwear, either on the grounds of Health and Safety or for the Trust's public image:

- Track suits, casual/sports T-shirts, jeans, combat trousers, sweatshirts, baseball caps/hats
- Overly tight or revealing clothes, including mini-skirts/shorts, tops revealing the midriff/chest, leggings
- Underwear should not be visible (avoid low slung trousers, sheer blouses/shirts, spaghetti straps and dark underwear under light colored clothing)
- Skirts/trousers that are sufficiently long that they touch the ground when walking are not acceptable on safety and hygiene grounds
- Clothing bearing inappropriate slogans/wording
- Flip flops, plastic shoes and slippers
- Trainers (trainers may be permitted in some clinical areas of work, please see further guidance on footwear in clinical areas and Appendix 1 for more information)

**4.3** Each manager must ensure that personal protective clothing and equipment is available to relevant employees in accordance with the Personal Protective Equipment Regulations 1992 and Control of Substances Hazardous to Health (COSHH) regulations 2002 and local/statutory recommendations. Staff in roles that require protective clothing are required to wear this whilst carrying out their duties in accordance with health and safety requirements. This will be provided by the Trust for its employees and bank workers. If staff are unsure about such requirements they should discuss this with their line manager who will refer to the appropriate risk assessment.

**4.4** Footwear must be safe, sensible, stable, in good order, be smart and clean and have regard to health and safety considerations (i.e. close back, sensible heel height). It should also be appropriate for the area where their work is to be undertaken. Certain jobs require staff to wear protective footwear. If staff work in one of these areas they must wear the correct footwear for undertaking their work and if uncertain, they must check with their line manager. This will be provided by the Trust for its employees and bank workers.

**4.5** Any tattoos deemed to be offensive should be appropriately covered.

**4.6** Jewellery and piercings should be discreet and appropriate and not cause offence or be a health and safety or an infection control hazard. Any items of jewellery and piercing that create the potential for injury or present the possibility of entanglement (e.g. large hoops) must be covered or removed during working hours.

**4.7** Strong smelling perfumes/aftershaves are to be avoided as this could potentially cause irritation and breathing discomfort to patients and colleagues.

- 4.8 Hair should be clean, neat and tidy at all times.
- 4.9 The wearing of items arising from cultural or religious norms is in most circumstances welcomed by the Trust providing that the health and safety, infection prevention and security of patients or staff are not compromised.
- 4.10 If an employee wears facial coverings for religious reasons, they must remove them whilst on duty. This will ensure that as a member of staff they are identifiable. Please contact the Trust's Equality and Diversity Lead for further guidance.
- 4.11 Staff who work night duty should be considerate to patients and footwear should be as noise free as possible.

## **5. FURTHER GUIDANCE FOR STAFF WORKING IN OR VISITING CLINICAL AREAS**

This section should be read in conjunction with section 4 and is to give further guidance to staff working or visiting clinical areas, even if a non-uniform wearer.

- 5.1 Uniform should be worn in a clean and presentable way.
- 5.2 Shoes must be smart, closed back and toe, non-vented (i.e. no decorative holes) have a low heel with a non-slip sole. For night staff, shoes must also be appropriately heeled and soled and be as noise free as possible. These are health and safety guidelines and no clogs are to be worn except when wearing scrubs. Suede shoes are not acceptable.
- 5.3 In any clinical area or in activity involving patient contact, ties (other than bow ties) should not be worn as they perform no beneficial function in patient care, are laundered rarely but often worn daily and have been shown to be colonized by pathogens.
- 5.4 The "bare below the elbows" policy applies when visiting clinical areas or where patient contact is involved (e.g. wards and outpatients). All staff should dress and wear clothing that makes hand hygiene both easy and satisfactory. This means no long sleeves (e.g. jackets) and that shirts are either short sleeved or that shirt sleeves are rolled up past the elbow and this includes the wearing of jewelry with the exception of plain rings (see 5.6 for further details).
- 5.5 In clinical areas hair should be worn above the collar or tied back if it falls below the collar. Long hair needs to be secured to prevent it from falling forward and becoming a potential risk within the clinical area. Beards should be short and neatly trimmed or secured to avoid patient contact and not interfere with the fit of face masks.
- 5.6 Jewellery must be kept to a minimum; a wedding/plain band ring (without stones/ridges) is permitted. Wristwatches/bracelets must not be worn when in uniform or providing clinical care. Facial/body piercing can be worn at the managers' discretion in line with health and safety



guidance and should be assessed before duty. Necklaces are not permitted due to health and safety.

- 5.7** Where uniforms are issued they should not be added to by the individual. Tailored shorts are acceptable as part of some clinical department uniform, staff should check this within their department of work.
- 5.8** Maternity clothing will be provided.
- 5.9** Trust uniform should be worn during the shift and for Trust official business. If the uniform is worn on the journey to and from work it must be covered by a coat or suitable garment. If at all possible it is preferable for staff to change in and out of their uniform before and after their shift. It is not appropriate to wear a Trust uniform outside of their work environment other than in these circumstances.
- 5.10** Nail varnish and false/gel/shellac nails are not permitted. Nails should be sufficiently short and clean to ensure safe patient contact and infection control. Eyelash extensions are not permitted.
- 5.11** Employees should understand that smoking in their uniform may affect patient care due to the smell. If staff choose to smoke off site then they have to ensure their uniform is fully covered.
- 5.12** Uniforms need to be washed at the hottest temperature suitable for the fabric. A ten minute wash at 60 degrees Celsius will remove most micro-organisms. Ironing uniforms will further reduce any micro-organisms that may be present.
- 5.13** The Trust provides a laundry service to the following areas: Portering, Catering, Estates, Path Labs and SSD. The list is not exhaustive so please check with the Linin supervisor if you are unsure.
- 5.14** ID badges on lanyards should not be worn in any clinical area when patient contact is involved. Staff should contact the Security department for alternative ways to attach ID badges to their person.
- 5.15** Substantive staff uniforms are supplied by the Trust and are considered Trust property. Staff will supply their own tights/stockings/socks/shoes. Staff must return all Trust property on leaving Trust employment.
- 5.16** The uniform department has specific opening times, details of these and contact numbers for the department can be found on The staff intranet under the facilities department tab.
- 5.17** Cardigans should not be worn when attending to patients. Black or dark blue cardigans can only be worn at night when working at the desk or off the ward.

**5.18** Further guidance for professional groups and/or specific work areas is included in the appendices.

## **6. WHEN A CONCERN ARISES**

**6.1** Managers have a responsibility to deal with any concern raised regarding an employee's adherence to the Dress Code Policy. They should discuss the concern with the employee and ensure the employee understands the expectations of them and the consequences of a failure to adhere to the policy. If following discussion it is decided the principles in this policy have not been adhered to the employee may be asked to return home to change. Human Resources advice can be sought at any time.

**6.2** An ongoing or repeated failure to adhere to the policy may be dealt with under the Trust's Staff Discipline Policy.

**6.3** If an employee has a concern about any aspect of the implementation of the dress code policy this should be raised with their line manager initially. Examples of concerns could include the fair implementation of the policy or any failure to provide the appropriate uniform or protective clothing. If the concern cannot be resolved through discussion with the manager further guidance can be found within the Trust's Grievance and Fair Treatment Policy.

**6.4** Where a dispute or concern arises further advice and guidance can be sought from:

- Health and Safety
- Infection Control
- Human Resources
- Occupational Health
- Equality and Diversity Lead

## **7. MONITORING, REVIEW AND LEARNING**

**7.1** The Employee Relations team will be responsible for maintaining records of cases under the terms of the following policies and will identify where a case is related to the implementation of the Dress Code policy:

- Health and Wellbeing Policy
- Investigation Policy
- Staff Discipline Policy
- Grievance Policy

**7.2** The Employee Relations team will maintain statistics of all cases managed under the above policies, monitor trends and identify organisational learning where relevant.

- 7.3** Where the learning relates to the implementation of this or another Human Resources policy, the Employee Relations team will be responsible for carrying out a case review. The outcome of the case review may be used to inform management training, advice from Human Resources and any required changes to policies, procedures and guidance documents.
- 7.4** The Employee Partnership Forum will monitor the implementation of the policy.

## REFERENCE SOURCES

The Control of Substance Hazardous to Health Regulation 2002	<a href="http://www.opsi.gov.uk/acts">www.opsi.gov.uk/acts</a>
Health and Safety at Work Act 1974	<a href="http://www.opsi.gov.uk/acts">www.opsi.gov.uk/acts</a>
Department of Health Guidance, Uniforms and Workwear 2007	<a href="http://www.dh.gov.uk">www.dh.gov.uk</a>
Royal College of Nursing Guidance on Uniforms and work wear	<a href="http://www.rcn.org.uk">www.rcn.org.uk</a>

## APPENDIX 1

### UNIFORM WORK STREAM PRINCIPLES

#### 1. INTRODUCTION

The Uniform Work Stream was formed to review how nursing and other staff uniforms may be standardised across the organisation to achieve:

- A corporate look reducing confusion to patients and visitors
- Improve identification of roles and responsibilities
- Improve the availability of uniform for issue
- Enable a stock of uniforms to be maintained to meet the demands of the organisation
- Reduce the spend against ward budgets on uniform through Improved purchasing and pricing agreements with suppliers

#### 2. SUMMARY OF PROPOSAL

The Work Stream has identified that there is an advantage to the organisation in achieving the objectives detailed in section 1.01 above and acknowledges that this has already been achieved across the senior nursing structure.

The Work Stream Group which comprised of representatives from Nursing including Midwifery, HR, Laundry & Uniform Room and Infection Control, look into the advantages to the organisation, patients and visitors in having a standardised Uniform Policy.

Although the Group identified the need for nursing staff to be in uniform it is acknowledged that different types of uniform are better suited to different nursing tasks.

Theatre staff were not included as they have already undertaken a separate review and implemented change.

Consideration was also given to badging and logos although this is already covered in the Uniform Policy.



### **3. NURSING STAFF**

#### **Nursing, Clinic Reception Staff & Ward Clerk Dress Code**

- I. All nursing staff should be in uniform when carrying out clinical procedures/work, with exception of community based staff.
- II. Staff should be issued sufficient uniform pro rota for a week i.e. full time 5 uniforms for 5 days, 3 uniforms for 3 days.
- III. Nursing Staff should wear a uniform that identifies their grade and responsibilities, which can be tunic & trousers or dress.
  - Executive & Heads of Nursing – Navy/white spot with navy or black trousers
  - Matron – Purple with black trousers
  - Specialist Nurses – Navy striped with navy trousers
  - Sister – Navy Blue with navy trousers
  - Staff Nurse – Metro blue with navy trousers
  - Band 4 – Sky blue with navy trousers
  - Band 6 – Royal Blue with navy trousers
  - HCA – Turquoise with navy trousers
  - Student Nurse/Supervised Practice Nurse – White with navy trousers
  - Discharge Co-ordinators – Black with white piping
- IV. In high risk areas such as A&E and Critical Care a Scrub Uniform may be worn
- V. Tights/stockings should be black and they are not required to be worn in warmer weather.
- VI. All reception staff and Ward Clerks will wear a blouse/shirt the style and colour agreed by the division/department with the option of black skirt or trousers.

### **4. CLINICAL STAFF WEARING SCRUBS**

Scrubs and clogs can only be worn in designated areas:

- i. Theatres, including Endoscopy suites
- ii. ITU/HDU
- iii. Labour Ward
- iv. Neonatal Unit
- v. A&E/Emergency Floor
- vi. Dermatology
- vii. Outpatients – staff assisting with surgical lists

- viii. Radiology
- ix. Cardiac Catheter Lab
- x. Other specialist areas requiring scrubs for clinical procedures

Scrubs and clogs that are worn must be clean at the beginning of every shift and changed each time they become stained with blood or body fluids. They should also be changed or cleaned (for clogs) if worn elsewhere within the Trust on return to the designated area.

Where scrub style uniforms are in use, e.g. A&E/Emergency Floor the normal generic rules for uniform wearers apply, however please also see Appendix 2.

## **5. THEATRE STAFF**

In addition to the guiding principles the following will apply:

- 5.1** Staff should wear well-fitted dedicated operating approved theatre footwear in line with the policy. These must be cleaned/decontaminated on a regular basis, particularly when visibly dirty or when contaminated with blood or body fluids. Theatre management should ensure that local mechanisms are in place for these procedures to take place.
- 5.2** All theatre staff and visitors to theatres should comply with theatre policy on the use of PPE (Personal Protective Equipment).
- 5.3** As per existing theatre policy staff in scrubs should not visit areas outside the theatre complex except in an emergency in which case staff must change into a clean pair of scrubs on returning to theatre. For further guidance in relation to this, please see Appendix 2.

## **6. THERAPISTS**

- 6.1** Due to the nature of therapy, OT and Physiotherapists may wear training shoes that are smart, clean and plain white or black only.
- 6.2** Additional types of uniform and clothing may be required to carry out the role and should be appropriate to the department.

## **7. ACCIDENT AND EMERGENCY DEPARTMENT**

All A&E Scrubs are embroidered with the department and job title.

### **Doctors:**

Green scrubs

### **Nurses:**



Band 8 Matron: Purple scrubs with white trim

Band 7 Senior Sisters/Charge Nurses/ENP's: Navy scrubs with white trim

Band 6 Sisters/Charge Nurses/Trainee ENP's: Navy scrubs

Band 5 Registered Nurses/Paramedics: Royal Blue scrubs

Band 2 Emergency Nursing Assistants: Light Blue scrubs

Apprentice: Green t-shirt

**House Keepers:**

White tops with Black Trousers

**Reception Staff:**

Magenta and Navy tunics with blue/black trousers/skirts.

## **8. ESTATES AND FACILITIES STAFF**

**8.1** Some staff within this directorate have specific clothing requirements based upon the need for:

- Personal safety
  - Statutory regulatory requirement
  - Infection control
  - Work environment (including outside working)
- a. All Domestic, Laundry, Portering and Driving Staff must wear issued uniform at all times whilst on duty.
  - b. All Catering staff involved in the preparation and service of food must wear the appropriate uniform, headwear and, where required, protective shoes.
  - c. If staff work in a kitchen environment they must ensure that their hair is kept covered at all times, and beards must be covered with an appropriate facial mask when preparing food.

### **THEATRE DRESS CODE**

**The basic principle of this policy is to ensure that raspberry scrubs are only worn in theatres and should not routinely be seen in any other areas of the hospital.**

In all theatre complexes across the Trust only raspberry scrubs should be worn. Exceptions to this include emergency cases and out of hours work where assistance may be needed from someone wearing blue scrubs.

- When leaving the theatre suite, individuals must routinely change into blue scrubs or outdoor clothes. Raspberry scrubs must not be worn outside this setting except in an emergency or where it would be impracticable to change. Examples include transferring patients to ITU, having to see emergency (CEPOD) or Trauma patients during a theatre session or if called down to the resuscitation department.
- At St Richards Hospital Raspberry scrubs may be worn when staff are moving between main and CTC theatre suites.
- This policy also applies to delivery suite, accepting that whilst in theatre there may be urgent epidurals necessitating the wearing of raspberry scrubs in the delivery rooms. As a general principle only blue scrubs should be worn outside the operating area. Raspberry scrubs should not be worn outside the delivery suite unless in an emergency.
- In other areas such as endoscopy and the cardiac catheter lab only blue scrubs should be worn.
- Staff should change clothes in the changing room facilities provided for the theatre suite that they are working in.
- Raspberry scrubs must not be worn in the PGMC / CMEC or any areas serving or selling food. Staff in these areas have been instructed to take the names of anyone wearing such attire and will forward these for further investigation.
- Staff should only wear footwear provided by the Trust in theatres. This footwear must not be worn outdoors. Soiled footwear must not be worn outside of theatres.
- Under no circumstances should any scrubs be worn off the hospital premises.
- Failure to comply with this policy will initially result in a warning, followed by further sanctions for recurrent offenders in line with trust policy.



**University Hospitals Sussex**  
NHS Foundation Trust

## EQUALITY IMPACT ASSESSMENT (EIA)

### PURPOSE OF EQUALITY IMPACT ASSESSMENT

The EIA should:

- Inform the Trust if any groups are, or could be, disadvantaged by a policy, service change or reconfiguration and if so clarify/propose action to mitigate that impact
- Enable the Trust to identify where policy changes may be needed to actively promote equality and eliminate inequality
- Remind all involved in delivering services of the Trusts determination to promote equality

### Section 1 – About the Policy, Service, Function, Proposal, Strategy or Consultation

<b>1.1 Name of Policy, Service, Function, Proposal, Strategy or Consultation</b>	<b>Dress Code and Uniform Policy</b>
<b>1.2 Name of person completing this assessment (and role/department)</b>	<b>HR Advisor</b>
<b>1.3 Brief description of the aims of the policy, service, function, proposal, strategy or consultation?</b>  (include details of who is affected by, involved in and/or benefits from it)	<b>To set out the expectations of the Trust in relation to corporate dress code and the wearing of Trust uniforms.</b>  <b>The policy applies to all staff, including those with honorary contracts, bank staff, agency workers, contractors and students when on Trust premises</b>
<b>1.4 Which department owns the policy, service, function, proposal, strategy or consultation?</b>	<b>Human Resources Department</b>
<b>1.5 Is responsibility for implementation of this policy, service, function, proposal, strategy or consultation shared with another agency/department?</b>	<b>Yes</b> <b>No</b>  (If yes describe their involvement in this process, if a partner has conducted an EIA, please attach this information)
<b>1.6 Does the policy, service, function, proposal, strategy or consultation have direct consequences or implications for service users and/or staff?</b>	<b>Yes</b> <b>No</b>  (If no then it is not relevant to Equality Duties. Please complete the statement in section 3 and send the completed form for checking to the E&D Lead as shown. If

	yes, please also complete section 2)
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## Section 2 – Equality Impacts

2.1 Have you made sure that the views of stakeholders, including key people likely to face exclusion have been influential in the development of the policy, service, function, proposal, strategy? (please indicate which)			
<b>External</b>	<b>Partners</b>	<b>Internal</b>	
<del>Service user interviews</del>	<del>Care Quality Commission</del>	<del>Staff</del>	
<del>Focus Groups</del>	<del>Multi Agency event</del>	<del>Staff event</del>	
<del>Public events</del>	<del>Joint Working group</del>	<del>Staff interviews</del>	
<del>Patient experience surveys</del>	<del>Regional Minority network</del>	<del>Staff workshop/focus groups</del>	
<del>Voluntary organizations</del>	<del>Regional equality forum</del>	<del>Management Board</del>	
<del>Minority group events/forums</del>	<del>GP Practice groups</del>	<del>Trust Executive Committee</del>	
<del>Carer Forum</del>	<del>Local/County Council</del>	<del>Diversity Matters Group</del>	
<del>LINKs</del>	<del>Equality and Human Rights Commission (EHRC)</del>	<del>Staff side reps</del>	
<del>HOSC</del>	<del>Other NHS Trust (please identify below)</del>	<del>Staff minority forums (e.g disability, BME, sexual orientation, religion/beliefs) (please state)</del>	
<del>On line forums</del>		<del>Trust Board</del>	
<del>Local media</del>		<del>Staff survey results</del>	
<del>Published research into minority needs</del>		<del>Annual General Meeting</del>	
<del>Census data or other external demographic reports</del>		<del>Other (please state)</del>	
<b>Comments:</b>			

### Section 3 – Equality Analysis Template

To be used to analyse the effect of your policy or service on the protected groups in equality law, resulting in either:

1. removing or minimizing disadvantages suffered by people due to their protected group characteristics (i.e. gender, race, age, disability, sexual orientation, gender reassignment, pregnancy or maternity, religion or belief, civil partnership or marriage)
2. taking steps to meet the needs of people from protected groups where these are different from the needs of other people
3. no further action required

Equality law protects people on the following grounds:	Is your policy or service relevant to this area of equality or human rights?		If relevant, is the effect positive or negative		Evidence of the effect (e.g. statistics, research, surveys, results of engagement, etc)	Is further action required?	
	Yes	No	Positive effect	Negative effect		*Yes	No
<b>Disability</b>	X		X	Potential for negative effect	Reasonable adjustments will be considered for disabled people when dress codes are in place.		X
<b>Gender</b>	X		X	Potential for negative effect	The policy can be perceived as effecting men and women differently when addressing typically gender specific items of clothing, however it applies to all equally, although some may have different requirements.		X
<b>Gender Reassignment</b>	X		X	Potential for negative effect	Potential for negative impact on staff while transitioning. Staff should be permitted to wear the uniform appropriate to their chosen sex.	X	
<b>Race &amp; Ethnicity</b>		X					X
<b>Religion &amp; Belief</b>	X		X	Potential for negative effect	Some dress code/uniform requirements may go against certain religious beliefs and these will be looked at on a case to case basis, with patient safety and infection control in mind.		X

<b>Sexual Orientation</b>		X					X
<b>Marriage and civil partnership</b>		X					X
<b>Pregnancy &amp; Maternity</b>		X					X
<b>Age</b>		X					X
<b>Human Rights</b>		X					X

\* Complete the following Equality Analysis Action Plan only for the equality grounds marked: \*Yes further action required.

<b>Equality Analysis Action Plan</b>								
<b>Equality grounds ticked *yes requiring further action:</b>	<b>Does your policy or service:</b>			<b>Any action taken to date</b>	<b>Action to be taken</b>	<b>Target date</b>	<b>Responsible Person(s)</b>	<b>Expected Outcome (including monitoring arrangements)</b>
	<b>Discriminate?</b>	<b>Eliminate discrimination or promote equality?</b>	<b>Promote good relations between groups?</b>					
<b>Disability</b>	No							
<b>Gender</b>	No							
<b>Gender Re-assignment</b>	No			None	Trans-gender guidance to be published for Trust	Aug 2017	LGBT Network	
<b>Race/ Ethnicity</b>	No							
<b>Religion/ Belief</b>	No							

<b>Sexual orientation</b>	No							
<b>Age</b>	No							
<b>Marriage and civil partnership</b>	No							
<b>Pregnancy &amp; Maternity</b>	No							
<b>Human Rights</b>	No							

Equality Analysis: Equality and Diversity Lead sign off			
<b>Signed</b>		<b>Date</b>	