



Dear Colleague

NATIONAL UNIFORM POLICY, DRESS CODE AND LAUNDERING POLICY

Summary and Background

1. This DL confirms a change to the National Uniform Policy, following the introduction of a uniform for Clinical Nurse Managers of band 8A and above, to be worn at all times when working in a clinical environment. This has been agreed by the Cabinet Secretary for Health and Sport following consideration by the National Uniform Partnership Group and at the recommendation of the Scottish Workforce and Staff Governance Committee (SWAG).

2. This DL comprises 3 sections, National Uniform policy, the Dress Code and the Laundering policy.

- **National Uniform Policy (Section 1)** – this sets out the uniform set for all staff groups, and provides further clarification to Boards on the appropriate uniform for staff. This DL updates and replaces the previously issued [CEL 36 \(2009\)](#), [CEL 46 \(2009\)](#) and [CEL 42 \(2010\)](#).
- **Dress Code (Section 2)** – the Dress Code was implemented via [CEL 53 \(2008\)](#). In summer 2010, the Scottish Government Uniform Working Group (SGUWG) conducted a review of the policy. The updated policy is set out here. This CEL updates and replaces the previously issued CEL 53 (2008).
- **Laundry Policy (Section 3)** – this sets out a national classification for used uniform, allowing in-house laundering resources to be focused on garments that pose risk, and provides home laundering guidance.

DL (2018) 4

Addresses

For action

Chief Executives, NHS Boards
NHS Board Communications Directors
NHS Board Finance Directors
NHS Board Procurement Directors

For information

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Action

3. NHS Boards are asked to ensure:

National Uniform Policy

- That all staff who currently wear a uniform are provided with the appropriate national uniform.
- Each Health Board should manage their own process for phasing in the new Clinical Nurse Manager uniform.
- The uniform policy applies to all staff who currently wear a uniform and applies in all settings.
- A range of outer garments, including fleeces and jackets, are available depending on job role and local policy.
- **It is not permissible to develop alternative national uniform identities for staff groups that are included within this policy.** Staff should only wear the items of national uniform which have been assigned to their staff group, as detailed at table 1, Section 1.
- National uniforms may only be embroidered, as per table 2 at Section 1. Staff may not add any additional embroidery or sew any badge onto their national uniform.

Dress Code

- Where appropriate, local dress code policies must comply with the principles outlined in the National Dress Code.
- The Dress Code applies to all staff whether or not they are required to wear a uniform.

Laundering Policy

- Local policies must reflect these guidelines and apply to all staff including those who do not wear a uniform.
- Boards will have in place a local policy to deal with the collection of contaminated uniform. Boards should reissue local guidance on procedures in place to clinical nurse managers to be read in conjunction with the National Laundering Policy.

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SECTION 1 – NATIONAL UNIFORM POLICY

National Uniform Specification

1. The national uniform applies to all staff who are required to wear a uniform and establishes a national standard across Scotland. The specification for all staff groups has been agreed and is detailed below in **Table 1**.

Uniform colours and shades

2. The purpose of the uniform colour coding is to make it easier for patients, members of the public and other staff to distinguish between the different clinical and non-clinical roles. Clinical staff will wear blue or burgundy and non-clinical staff will wear green. **It must be noted however, that the colour coding is not the only means of communication and it is expected that verbal communication and staff identifiers will still play their part.** A new poster has been launched to allow patients and the general public to identify different members of staff.

The Clinical team

3. Clinical staff will wear a uniform in one of five shades of blue and a shade of burgundy as detailed in **Table 1** below.

Cornflower Blue uniform

The cornflower blue uniform is only for Nurses who are registered with the Nursing & Midwifery Council (NMC) and Dental Nurses who are registered with the General Dental Council (GDC).

Navy Blue Uniform

The navy blue uniform was developed to ensure the nurse in charge is clearly visible to patients and the public. For this purpose the navy blue uniform will be worn by Senior Charge Nurses, and Hospital At Night Nurse Practitioners in charge of the ward. In addition, Senior Midwives and Community Nurse Team Leaders should wear navy blue uniform where their duties are similar to a Senior Charge Nurse. It is important for nurses undertaking these roles to be visible to patients and the public as being the nurse in charge in hospital wards, clinics and health centres.

4. The purpose of the navy blue uniform is to denote the individual undertaking the responsibilities of a senior charge nurse in a ward or clinical setting. The uniform does not correspond directly with Agenda for Change bands. Boards must ensure that use of the navy blue tunic must not be extended to denote other specialist or senior nurses even if these are practising at the same or more senior level than the Senior Charge Nurse. Nor should it be used for any general management, supervisory or team leader roles in any other staff groups.

Smoked Berry Burgundy Uniform

The smoked berry burgundy uniform has been developed in response to the Vale of Leven Report, it is to be worn by Clinical Nursing Managers of Grade 8A or above only (e.g. Associate/Deputy Nurse Directors and Nurse Directors). The uniform was developed to ensure visibility of senior nurse leadership to patients and the public. The smoked berry uniform should be worn by Clinical Nursing Managers when they are in a clinical setting.

The Non-Clinical team

5. Non-clinical staff who currently wear a uniform wear the mid-green national uniform as detailed in **Table 1** below. Non-clinical staff groups include Catering, Domestic, Porters, Admin & Clerical and Facilities.
6. The dark green uniform is only for Catering and Domestic supervisors and must not be used to denote supervisors or managerial roles in any other staff groups.

Trousers

7. Navy blue trousers are available in a single cargo style and tailored styles. It is anticipated that the cargo style will be worn with tunics and polo shirts and the tailored trousers worn with shirts and blouses. However this is a matter for local policy.

Polo shirts

8. Polo shirts are available to order as an alternative to tunics. Whether staff are permitted to wear a polo shirt will be determined by local policy. However, the general rule is that staff who currently wear a tunic will continue to do so.

Specialist Items

9. Specialist items required to meet religious or medical needs are available to order on National Uniform contract. These could include any adaptation to the standard items, and you should contact the supplier directly to discuss your requirements. Where a specialist item is required on religious grounds, it must be authorised by the staff member's line managers, who are responsible for ensuring that any garment purchased adheres to the NHSScotland Dress Code. Where a specialist item is required for medical reasons, Occupational Health are required to confirm that it is required, and is compliant with the Dress Code. These items will be manufactured on a bespoke basis, and will have a lead time of 6 to 8 weeks.
10. A tunic with three-quarter length sleeves will be available for clinical staff with direct patient care responsibilities who have a religious or medical requirement to cover their upper forearms. As set out in the NHSScotland Dress Code policy, three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity.

11. A tunic with full length sleeves will be available for staff who do not undertake patient care activity and who have a religious or medical requirement to cover their arms.

Staff group - policy exceptions

12. Prosthetists/Orthotists – white workwear is required when working with plaster. These staff groups should therefore wear the national white tunic and trousers which is available as a special item on the national contract, when working with plaster. Both staff groups will wear the appropriate national uniform when not working with plaster.
13. The white uniform may be applicable for other staff other than Prosthetists and Orthotists who are working with plaster however normal Personal Protective Equipment (PPE) e.g aprons worn over the national uniform should be considered first to determine if a white uniform is actually required and is being used appropriately.
14. As with Prosthetists and Orthotists, the white uniform should only be worn when working with plaster and staff must wear their appropriate national uniform for other duties. It must not be used as protective clothing for other staff groups not working with plaster, nor should it be used as an alternative uniform to the appropriate national uniform colours.
15. Aroma Café staff and Beardmore Hotel Services – staff in these areas perform different functions to core facilities staff, and they are excluded from the uniform policy.

Staff who do not wear national uniform

16. Staff in a variety of roles and settings will not wear the national uniform for a range of safety, clinical and other reasons. If staff are required to wear Personal Protective Equipment (PPE) instead of a uniform, for example, chef's whites, then this will continue.

National uniform for students

17. Nursing, midwifery and Allied Health Professional (AHP) students will wear the national student uniform. This is a silver-grey tunic in the same style and fabric as the national uniform for staff. This will be worn with the national uniform navy blue trousers. This uniform will be embroidered with the appropriate University / College logo.
18. The national student uniform does not apply to medical students (Doctors and Dentists). Medical students are not included in the National Uniform policy. The national uniform for students is not intended for NHSScotland employees who are undertaking study or training.

Allied Health Professionals (AHPs)

19. AHP staff will have their professional role embroidered on their tunics

Private Finance Initiative (PFI) Hospitals

20. The national uniform is available for Boards to purchase on behalf of their PFI contractors. This will achieve consistency and ensure that patients and the public can identify non-clinical staff. These uniforms will be branded with the NHSScotland logo. PFI contractors are not permitted to add any additional embroidery to the uniform. Where Boards and their PFI contractors choose not to adopt the national uniform, efforts should be made to persuade PFI contractors not to adopt blue uniforms as this will lead to confusion in the identification of clinical staff.

TABLE 1: NHS Scotland National Uniform Specification

Clinical staff	
Clinical Nursing Managers (Band 8A or above) Associate/Deputy Nurse Directors Nurse Directors	<ul style="list-style-type: none"> • Smoked Berry burgundy tunic/polo shirt • Navy blue trousers
Senior Charge Nurses / midwives Community Team Leaders Hospital At Night Nurse Practitioners in charge of the ward	<ul style="list-style-type: none"> • Navy blue tunic / polo shirt • Navy blue trousers
Registered Nurses including Dental Nurses	<ul style="list-style-type: none"> • Cornflower blue tunic or cornflower blue polo shirt • Navy blue trousers
Allied Health Professionals (AHP)	<ul style="list-style-type: none"> • Mediterranean blue tunic or Mediterranean blue polo shirt • Navy blue trousers • Allied Health Professionals will have their professional role embroidered on their tunic/polo shirt
Healthcare Scientists, Pharmacy Technicians, Dental Care Professionals including Dental Hygienists, Orthopaedic Practitioners (holders of BCC - British Casting Certificate)	<ul style="list-style-type: none"> • Ocean Blue tunic or ocean blue polo shirt • Navy blue trousers • These staff groups will have their professional role embroidered on their tunic/polo shirt
All unregistered staff, healthcare support workers and trainees	<ul style="list-style-type: none"> • Pale sky blue tunic or pale sky blue polo shirt • Navy blue trousers • Healthcare support staff for Allied Health Professionals, Healthcare Scientists, and Pharmacy Technicians can have their department embroidered on their tunic/polo shirt or have the option to wear a non-embroidered tunic/polo shirt. This depends on local policy.

Non-clinical staff	
Catering and domestic staff, including non-clinical staff trainees.	<ul style="list-style-type: none"> • Mid-green tunic or mid-green polo shirt • Navy blue trousers
Catering and domestic supervisors	<ul style="list-style-type: none"> • Dark green tunic or dark green polo shirt • Navy blue trousers
Porters	<ul style="list-style-type: none"> • Mid-green Polo shirt or mid-green dress shirt/blouse • Navy blue trousers
Administration and Clerical Staff	<ul style="list-style-type: none"> • Plain coloured mid-green blouse/dress shirt • Navy blue dress trousers
Security Guards	<ul style="list-style-type: none"> • White shirt / blouse (available with or without epaulettes) and clip on tie with military style jumper or black t-shirt and stab vest depending on local policy • Black trousers

- Polo shirts are available as an alternative to tunics depending on local policy.

A range of outer garments, including cardigans, fleeces, and shower proof jackets are available.

Where staff require a heavy duty 3 in 1 water resistant jacket for prolonged use in harsh weather conditions, this is considered a specialist item of PPE, and is available, according to local policy, from the national (PPE) contract.

TABLE 2: National Uniform Embroidery

Tunics and polo shirts with the following embroidery will be available to order. It is not permissible to embroider any other job title or department. It is permissible for unregistered staff to wear the pale blue tunic with no embroidery, and this should be determined by local policy. Embroidery will only be available on the tunic colours as detailed below. Boards are not permitted to add to this list and create embroidery for any other staff groups.

Mediterranean Blue (Registered AHP staff)	Physiotherapist Occupational Therapist Radiographer Podiatrist Orthoptist Speech and Language Therapist Orthotist Arts Therapist Dietitian Prosthetist
Ocean Blue (Qualified Healthcare Scientists, Dental Care Professionals, Pharmacy Technicians, Orthopaedic Practitioners)	Clinical Physiologist Clinical Dental Technician Dental Technician Dental Hygienist Orthodontic Therapist Dental Therapist Pharmacy Technician Orthopaedic Practitioner
Pale-Sky Blue (Healthcare support staff to AHPs, Healthcare Scientists, Pharmacy Technicians, Orthopaedic Practitioners). Embroidery is not required for Dental Care Professional support staff.	Physiotherapy Radiotherapy*. Imaging* Podiatry Orthoptics Speech and Language Therapy Orthotics Arts Therapy Dietetics Prosthetics Pharmacy

*Radiotherapy applies to those working in the 5 Cancer Centres, and Imaging is for staff supporting Radiographers elsewhere in NHS Scotland.

SECTION 2 – NHSSCOTLAND DRESS CODE

NHSScotland Dress Code

Evidence-based Principles to inform local policies for Staff

The way staff dress sends messages to the patients they care for, and to the public about their professionalism and standards of care.

These guidelines reflect evidence-based good practice and aim to set out core principles that should inform the development of local policy. The following principles are by no means exhaustive, but are intended to give some examples of the issues which Boards should consider. These guidelines set out standards of dress for all staff, including those who do not wear a uniform.

In developing local uniform and workwear policies, Boards should conduct a full risk assessment to ensure that local policy is appropriate for different categories of staff. Boards should look to support staff in complying with both the needs of the service and any disability, religious or cultural requirements.

Boards must ensure that where appropriate, their dress code policies comply with these principles:

- *Staff must dress in a professional manner which is likely to inspire public confidence;*
 - for example: in clean uniform (where uniform is a requirement), which has been laundered in accordance with the Uniform Laundering Policy (Section 3).
 - When providing patient care, hair should be tied back off the collar, with nails kept short and clean.
 - Wear clear identifiers (e.g. badges etc).
 - Where changing facilities are available, staff should change into and out of uniform at work and should change out of their uniform at the earliest opportunity at the end of their shift. It is preferable that staff should avoid undertaking activities in public, such as shopping, whilst wearing their uniform, except where such activities form an integral part of their duties.
- *Appropriate steps must be taken to adhere to good practice, and to minimise the risks of infections and cross contamination for patients and the public;*
 - for example: staff should wear short-sleeved shirts/blouses and avoid wearing white coats or neck ties when providing patient care; staff may wear full length sleeves when not engaged in patient care activity;
 - Staff should not wear false nails or hand or wrist jewellery (other than a plain wedding ring or one other plain band) when providing patient care.
 - Where for religious reasons, staff wish to cover their forearms during patient care activity, it is acceptable to wear disposable over-sleeves where gloves are used, with strict adherence to hand and wrist washing before and after use. Over-sleeves must be disposed of as disposable gloves.
 - Where for religious reasons, staff wish to cover their upper forearms during patient care activity, it is acceptable to wear three-quarter length sleeves. Three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity.

- *All appropriate health and safety requirements for staff should be met*
 - for example: Staff should not wear excessive jewellery;
 - Staff should wear soft-soled, closed toe shoes;
 - Staff should not carry pens or scissors in outside breast pockets.
- *Staff must dress in a manner which is sensitive to the social, cultural and diversity and equality needs of other staff, patients and carers/visitors.*

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SECTION 3 – UNIFORM LAUNDERING POLICY

NHSScotland Laundering of Uniform 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

7. 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

8. Healthcare workers should be vigilant regarding spillages of blood and/or body fluids adhering to local decontamination policies.
9. 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.
10. 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 uniform should be placed directly into a water-soluble/alginate bag. This prevents further handling and potential contamination, particularly for those 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. The bag must be appropriately tagged for identification and should either be disposed of, or laundered immediately after use.
 - Boards will have local policy in place to label uniforms for collection and return to staff. Should the uniform be disposed of, then staff will be notified and provided with a replacement.
 - The minimum standards for infected linen set out in the [National Guidance for Safe Management of Linen in NHSScotland](#) should be adhered to for contaminated uniform. A copy should be available from your local Laundry Manager or from the enquiry point for this CEL.
11. Where 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.

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Section 3.1: HPS Conclusions

12. We asked Health Protection Scotland to review the current evidence on uniforms worn in healthcare settings as work wear, and to ascertain whether uniforms pose any risk of infection. Their report considered national and international policy and guidance and available scientific literature. These conclusions are based on the current available evidence and consensus from the policy/guidance reviewed, including:

- NHS Board Policies from NHSScotland – reviewed and summarised by HPS (unpublished) October 2009

- HPS - Standard Infection Control Precautions

- <http://www.nipcm.hps.scot.nhs.uk/chapter-1-standard-infection-control-precautions-sicps/>

13. The report concluded:

- Healthcare workers' uniform must never be considered as PPE as uniform does not have the properties or function of PPE.
- Uniform and home laundering can be an emotive issue for staff, however, providing that PPE is worn appropriately, there is no evidence suggesting that this poses any risk to healthcare workers or others.
- There is no evidence available to suggest that home laundering is an ineffective method of laundering uniform.
- There is a public perception that there is a risk of infection from staff wearing uniform out with the healthcare setting, this is a perceived risk with no evidence to substantiate it, however this must be considered when offering guidance to staff travelling to and from work in uniform.

Section 3.2: HOME LAUNDERING OF UNIFORMS

This guidance does not apply to theatre scrub suits, any item of PPE, or contaminated uniforms, for which Hospital/facility laundries must be used.

The following guidance on the home laundering of uniform is for all staff who are unable to access an NHSScotland laundry facility and consequently take uniform home to launder.

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 it poses any risk to healthcare workers or the public.

The guidance applies to all uniform and workwear supplied by NHSScotland.

Segregation

- Used uniform should be kept separate at all times from clean uniform.
- Ensure all items such as pens, coins, tissues are removed from pockets.
- Apply good hand hygiene practice utilising soap and warm water before handling clean uniform and after handling soiled uniform.

Temperature

- All uniform should be laundered at the highest temperature suitable for the fabric as per the care label.

Detergents and Additives

- Use a detergent that is suitable for your skin type.
- Do not add bleaches to the wash process or use for a 'whitening' effect.

Tumble Drying/Ironing

- Uniform may be ironed or tumble dried as per the care label.

Storage and Transportation

- Ensure laundered uniform is stored separately from used uniform.
- Ensure all storage and transportation facilities are clean and washed regularly.

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