

DRESS CODE POLICY

July 2014

Authorship:	CSU Transition HR Policy Lead – adapted for local use by North Yorkshire and Humber Commissioning Support Unit on behalf of NHS Scarborough and Ryedale CCG			
Committee Approved:	Governing Body			
Approved date:	September 2014			
Review Date:	September 2018			
	Relevant	Screening	Full / Completed	Outcome
Equality Impact Assessment	Yes	Yes	Yes	<i>Issues Identified / No Issues Identified</i>
Sustainability Impact Assessment	Yes		Yes	<i>Issues Identified / No Issues Identified</i>
Privacy Impact Assessment	Yes/No	Yes/No	Yes/No	<i>Issues Identified / No Issues Identified</i>
Bribery Checklist	Yes/No		Yes/No	<i>Issues Identified / No Issues Identified</i>
Target Audience:	All CCG Staff			
Policy Reference No:	SCRCCG P630			
Version Number:	V.1.0			
Publication/Distribution	Website	Email Staff		Others (i.e. SBC)
	Yes	Yes		Yes

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as ‘uncontrolled’ and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on website
DRAFT	SRCCG	Draft policy for CCG	Senior Management Team (SMT)	22/04/2014
DRAFT	SRCCG	Draft policy for CCG	JTUPF	23/07/2014
1	SRCCG	Policy for CCG	SMT for approval	12/08/2014
1	SRCCG	Policy for CCG	Governing Body for formal adoption	24/09/2014

Approval Record

Applicable <input checked="" type="checkbox"/>	Committee / Group	Consultation / Information/ Ratification	Date taken to group	Date last Approved
<input type="checkbox"/>	Audit and Governance Committee	Choose an item.		
<input type="checkbox"/>	Business Committee	Choose an item.		
<input type="checkbox"/>	Communications and Engagement Committee	Choose an item.		
<input type="checkbox"/>	Council of Clinical Representatives	Choose an item.		
<input type="checkbox"/>	Finance and Contracting Committee	Choose an item.		
<input checked="" type="checkbox"/>	Governing Body	Ratification	Sept 14	Sept 14
<input type="checkbox"/>	Primary Care Co-Commissioning	Choose an item.		
<input type="checkbox"/>	Quality and Performance Committee	Choose an item.		
<input type="checkbox"/>	Remuneration Committee	Choose an item.		
<input checked="" type="checkbox"/>	Senior Management Team	Ratification	Aug 14	Aug 14
<input type="checkbox"/>	All Employees	Choose an item.		
<input checked="" type="checkbox"/>	Yorkshire and Humber Social Partnership Forum	Consultation	July 14	July 14
<input type="checkbox"/>	Other	Choose an item.		

Note: A new policy only needs to be ratified by the appropriate Committee (and the Governing Body if new) and for information only to the other committees after consultation.

Policies should follow the following ratification process. The delegated committee for ratification is specified in Section 10.

Version control should also be managed as outlined below where x = current version number and y = the new version number.

Consultation and Ratification Process	Version Number
Reviewed policies should be circulated to staff for comment prior to ratification	V x.1
HR policies and policy changes directly impacting on staff should be sent to the Social Partnership Forum for Union consultation prior to ratification	V x.2
Reviews and minor amends should be ratified by the delegated Committee	V x.3
All new policies and policies where significant changes have been made should be ratified by the delegated Committee and Governing Body	V x.4
Ratified policy is circulated and published (if appropriate) on the website	V y.0

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1 INTRODUCTION

- 1.1** This policy sets out the expectations of NHS Scarborough and Ryedale Clinical Commissioning Group (the CCG) in relation to the Dress Code Policy.
- 1.2** The Dress Code Policy is necessary in order to:
- Present a smart and professional image, thereby increasing patient and public confidence.
 - Support infection prevention and control
 - Have regard to health and safety considerations for staff
- 1.3** It is recognised that a considerable range of dress and appearance is appropriate and that this will vary, dependant on the working environment, the range of services provided to different client groups and the religion and beliefs of staff.

2 ENGAGEMENT

- Social Partnership Forum/Policy Subgroup.
- CCG Staff via Team meetings, Staff newsletter.
- CCG Senior Management Team

3 IMPACT ANALYSES

- 3.1** The following impact assessments have been completed in respect of this policy:
- Data Protection Impact Assessment – No issues identified
 - Equality Impact Assessment – No issues identified
 - Sustainability Impact Assessment – No issues identified
- 3.2** These assessments are recorded in the relevant registers and available to view on the CCG website.
- 3.3** The Bribery Act does not apply to this policy.

4 SCOPE

- 4.1** This policy applies to:-
- All employees of the CCG
 - CCG Governing Body
 - Contracted third parties (including eMBED and agency staff)
 - Students and trainees
 - Staff on secondment and other staff on placement with the CCG.

5 POLICY PURPOSE AND AIMS

5.1 The purpose and objectives of this policy are to protect the CCG along with its customers, service users, staff and other stakeholders, as well as the assets of the CCG, whilst ensuring delivery of its strategic and corporate objectives which are:

- To commission high quality services
- To engage patients, carers and other organisations in our planning and decision process
- To ensure value for money
- To be open and honest in our transactions, and accountable to our communities
- To respect our staff and promote a learning environment
- To improve health outcomes.

5.2 The Policy is underpinned by a number of principles:-

- The purpose of this Policy and Procedure is to set out a sensible and safe approach to dress and appearance including cleanliness and personal hygiene. The CCG considers the way employees dress and their appearance to be of significant importance in portraying a corporate and professional image to all users of its service, whether visitors, clients or colleagues.
- The CCG welcomes and embraces the diversity of cultures, religions and disabilities and will take a sensitive approach when this affects dress and uniform requirements. However, priority will be given to clinical, health and safety, security and infection control considerations.
- The Dress Code Policy is designed to guide managers and employees on the application of CCG standards of dress and appearance. 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 underpinning the policy.

6 ROLES, RESPONSIBILITIES AND DUTIES

6.1 Every member of staff will be responsible for promoting a professional and positive image of the CCG.

6.2 Staff should adhere to any dress code requirements in accordance with CCG guidance in relation to Health and Safety and Control of Infection Policies, Procedures and Guidance.

6.3 All staff are required to comply with the principles of the Dress Code Policy. Failure to adhere to the CCG's standards of dress and appearance may constitute misconduct and may result in formal disciplinary proceedings.

6.4 Managers are responsible for ensuring the Dress Code Policy is adhered to at all times in respect of the employees they manage.

7 IMPLEMENTATION

7.1 This policy will be communicated to all staff via team meetings, Staff Newsletter and available on the CCG website.

7.2 Failure to comply with this policy would be considered to be a breach of the terms and conditions of employment and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

8 TRAINING AND AWARENESS

8.1 A copy of the policy is available on the CCG website. Training needs will be identified via the annual appraisal process and training needs analysis.

9 MONITORING AND AUDIT

9.1 Line managers are responsible for monitoring individual's compliance with this policy.

9.2 The implementation of this policy will be reviewed on an annual basis by the Senior Management Team and reported to the Governing Body.

10 POLICY REVIEW

10.1 The policy and procedure will be reviewed at least every three years by the CCG in conjunction with managers, staff and Trade Union representatives if appropriate, with changes made as required and the outcome published. Where review is necessary due to legislative change, this will happen immediately.

10.2 The Senior Management Team has delegated responsibility for monitoring and reviewing the policy and will report any concerns to the Governing Body.

11 ASSOCIATED DOCUMENTATION

- Grievance Policy and Procedure
- Disciplinary Policy and Procedure
- ACAS Advisory Booklet – The People Factor (June 2011)
- ACAS Guide on Religion or Belief and the Workplace
- Equality and Diversity Policy
- Health and Safety Policy and Procedure
- Control of Infection Policy, Procedures and Guidance
- Equality Impact Assessment
- Sustainability Impact Assessment

12 PART 2 – PROCEDURE

12.1 Clothing and appearance will not deliberately cause offence to people who come in to contact with, or use, the CCG services. It should be non-offensive and contain no provocative, sexist, or racist remarks. Clothing should not display slogans or logos relating to drugs, alcohol or tobacco, or demonstrate sponsorship of such products.

12.2 Clothing should be worn appropriately for the work being undertaken.

12.3 Clothing for particular purposes should be worn in accordance with Health and Safety and Control of Infection Policies and Procedures and guidance.

12.4 In the event of carrying out hazardous duties under Health & Safety Regulations appropriate protection clothing must be worn.

Footwear

12.5 It is the responsibility of all employees to wear footwear suitable for the duties undertaken. Footwear should be of a “sensible” nature and worn appropriately, particularly in areas involving direct delivery of care. “Sensible” includes no flip-flops which will impede safer lifting and handling issues. Footwear that might cause injury to others during normal working duties should be avoided.

12.6 Injury associated with wearing inappropriate footwear will invalidate any claim against the CCG.

Sports Clothing

12.7 In the event that some activities may require the wearing of sports clothing it is expected that staff revert to normal clothing once the activity is completed.

Jewellery

12.8 It is good practice to avoid the wearing of jewellery, such as necklaces and earrings that can be hazardous, especially where these can get caught/pulled. The wearing of small studs/sleepers are more appropriate when working in areas where clients are, or can be, challenging in their behaviour. Injury arising from wearing inappropriate jewellery will invalidate any related claim against the CCG.

12.9 Visible body piercing should be; kept to a minimum, discreet, non-offensive and not present a safety hazard or infection risk control.

Badges

12.10 All employees are supplied with a CCG identity security badge which must be worn and visible and available at all times when on duty or acting in an official capacity representing the CCG.

Hair

12.11 Certain hairstyles and colouring can affect the way people see us. While tolerance of the differences we all display is always necessary, consideration should be given to the impact we might have on others. Long hair should be worn tied back during hazardous procedures.

Style of Clothing

12.12 During periods of warm weather staff clothing must remain appropriate and suitable. Staff should be aware that certain items of clothing could be viewed as provocative e.g. short revealing/ tight garments, and therefore not acceptable for work.

12.13 It is not acceptable to wear clothing that over exposes a part, or parts, of the body, e.g. stomach, chest etc. or that is transparent/see through.

Tattoos

- 12.14** Visible tattoos can affect the way people see us and should be discouraged. While tolerance of the differences we all display is always necessary, consideration should be given to the impact we might have on others. Where present they should be appropriately covered.

13 RAISING CONCERNS

- 13.1** The CCG undertake to ensure that this policy and procedure is applied consistently and fairly. However, in the event of a member of staff feeling that have been treated unfairly or unreasonably they can raise the issue with their line manager or raise a concern through the CCG Grievance Procedure.