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## Dress Code Policy

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Title of responsible committee/department:	Business & Finance. HR Department		
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Next Review date:	21.03.2022 (or when there is a change in policy).		
Target audience:	All staff		
Impact Assessment Date:	March 2019		
Summary	This document sets out the policy all staff should adhere to in terms of uniform and presentation in business hours		
Version	Date	Control Reason	Title of Accountable Person for this Version
V2	December 2018	Archived	Sue Bantock – HR Department
V3.0	Mar 19	Whole policy review.	HR Manager
Reference Documents		Electronic Locations (Controlled Copy)	Location for Hard Copies
Health & Safety Policy PC24POL9. IPC Policy PC24POL115		S:\Operations\Quality Governance\Corporate Policies & SOPs\PC24 POLICIES	
Consultation: Committees / Groups / Individual			Date
Staff Council			August 2018
Executive Team			December 2018
Quality & Workforce Committee			20 March 2018
Board			28 March 2018

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## 1 PURPOSE

- i. This policy is designed to ensure that the dress code and wearing of uniforms is consistent across the organisation and that all staff portray an image designed to promote confidence in the patients we serve and the public in general. It outlines standards staff are expected to follow while at work. All staff are expected to comply with the standards off uniform, dress and appearance in this policy. They should also understand that this policy relates to their working environment, health and safety, infection control, their particular duties within their role and the reputation of the organisation as a whole.
- ii. The policy lays down a set of general principles that apply to everyone working in the organisation and additional standards for those in a clinical environment.

## 2 SCOPE

- i. This is a policy that applies to all employees, contractors, PC24 members of staff including directors, non-executive directors, bank and agency staff, and associate staff including clinical and medical staff within Primary Care 24 (Merseyside) Ltd.

## 3 AIMS AND OBJECTIVES

- i. This policy sets out the expectations of the PC24 in relation to corporate dress code and the wearing of PC24 uniforms. PC24 recognises the diversity of cultures, religions and disabilities of its employees and will take a sensitive approach when this affects uniform and dress requirements. However, priority will be given to health and safety, security, infection control requirements and the need for verbal and non-verbal communication.
- ii. The dress code, whether for uniformed or non-uniformed staff must support and promote the following principles:
  - Health, Safety and wellbeing of patients
  - Public confidence and professional image
  - To reduce risk of cross infection
  - Professional accountability as defined by professional bodies
  - To ensure a consistent approach is taken across the PC24 to create a corporate image
  - To avoid offence to people of different cultures or beliefs

## 4 RESPONSIBILITIES

#### **4.1 ALL STAFF**

- i. All employees have a responsibility to adhere to the terms and conditions of this policy
- ii. Individual staff members have a responsibility to report any queries or issues relating to uniform and standards of appearance to their line manager
- iii. Any queries on the application or interpretation of the policy should be discussed with the Human Resources team prior to any action taking place

#### **4.2 MANAGERS**

- i. Managers, Heads of Departments and Clinicians who are specified as responsible people must ensure the correct procedure is carried out
- ii. Consult with the Human Resources department prior to taking any action as a result of non-compliance regarding this policy

#### **4.3 DIRECTOR OF NURSING**

- i. The Director of Nursing who acts as the Lead for Infection Control has a responsibility to provide advice and support to managers and employees with regard to the infection control requirements in relation to this policy

#### **4.4 HUMAN RESOURCES**

- i. Ensure that this policy is, monitored, reviewed and updated as appropriate
- ii. Provide advice and guidance to all staff members in line with the policy

### **5 DEFINITIONS**

- i. For clarity, the definition of a clinical role will include those providing care for patients, including GPs, nurse and advanced nurse practitioners and Health Care Assistants.
- ii. Operational staff refers to all non-clinical employees within the call centre, Primary Care 24 centres, the Asylum practice and drivers

## 6 POLICY PROCEDURES

### 6.1 GENERAL PRINCIPLES FOR ALL STAFF

- i. Identification. All employees are provided with an identity badge that must be worn and visible at all times when on duty or acting in an official capacity. Badges should be up to date with regards to job title and photograph. It is recommended that badges should not be worn on chains around the neck as this could pose an injury to the wearer and patients during moving and handling procedures. Lanyards (the neck string with safety catch accompanying an ID badge) worn with identification badges must be Organisation lanyards only. ID Badges must be returned to the issuer when a member of staff leaves PC24. Lost or stolen badges must be reported to the Line Manager immediately and an incident form completed within Datix.
- ii. Clothing. Staff are required to dress according to standards of professionalism and decency. Clothing should be suitable for business, not leisure or sport. Staff should not wear clothes that are revealing or sexualised, or that have offensive, inappropriate or political messages, slogans or images. Clothing must be kept clean and tidy.
- iii. Footwear. When working in clinical areas, open-toed footwear is not acceptable on the basis of hygiene, health and safety. Smart sandals may be acceptable in some areas, such as headquarters. In non-clinical areas smart business footwear should be worn.
- iv. Leisure footwear such as flip-flops, sports shoes or leisure trainers are unacceptable in all areas on the grounds of health and safety as well as professional presentation
- v. Any individual attending work inappropriately dressed or without uniform may be sent home and not permitted to work until this is rectified. This could result in a loss of payment and may invoke disciplinary proceedings

### 6.2 GENERAL PRINCIPLES FOR CLINICAL AREAS

- i. All healthcare workers have a duty to minimise the spread of infection by wearing appropriate clothing in a clinical setting and by complying with the guidelines in this policy. When dealing with patients posing a risk of infection, staff should follow precautions in line with the organisation's Infection Control policy.

- ii. Staff will observe the principles of Bare Below the Elbows and Hand Hygiene rules in clinical areas as described in the organisation's Infection Prevention and Control policy.

### 6.3 INFECTION CONTROL

- i. In settings that involve close or direct contact with clients, contamination of clothing can occur. This may be gross contamination with body fluids, or invisible contamination with micro-organisms. Because of this the following advice must be adhered to:
  - Jewellery must be confined to a plain wedding band.
  - Hair below collar length must be tied up.
  - Nails must be short and kept clean
  - False and gel nails must be avoided as they harbour large numbers of micro-organisms
  - Long sleeved items must not be worn when giving direct patient care
  - Clean uniforms must be worn for every single shift
  - Uniforms must be washed at a minimum temperature of 60 degrees
  - Uniforms must be stored carefully to prevent contamination
  - Dry cleaning is not accepted as an effective method of decontamination.
  - Where there is a risk of contamination to your uniform, wear a plastic apron, worn correctly and tied at the back.

### 6.4 PROFESSIONAL PRESENTATION

- i. Tattoos. The organisation adopts a relaxed attitude towards tattoos. Any visible tattoos must not be offensive or inappropriate in nature, i.e. they should not contain images or wording that is offensive, political, sexualised, discriminatory or inflammatory. In areas where it is possible members of the public may be offended the manager retains the discretion to direct staff members to cover up tattoos. This is conditional on the organisation's "bare below the elbow" guidelines as described in the organisation's Infection Prevention and Control policy.
- ii. Jewellery and Piercings. The wearing of any jewellery and piercings must comply with standards of professionalism, hygiene and health and safety. They should be discrete and inoffensive. Piercings should be discrete and hygienic and removed or covered up otherwise.
- iii. In a clinical environment any items of jewellery that pose a risk in terms of violence (e.g. grab risk) or entanglement must not be worn. Piercings should be removed prior to coming on duty on the grounds of hygiene. In clinical settings all jewellery should be kept to a minimum, limited to a plain band ring, a single pair of

stud earrings and a single stud nasal piercing. All other items are not permitted and should be removed prior to coming on duty.

- iv. Make up, aftershave and aftershave. Discrete makeup and perfume / aftershave may be worn, appropriate for business presentation. In clinical environments regard must be given to patient safety and comfort.
- v. Hair. Hair must be kept clean and presentable for business, paying due regard for health and safety, hygiene and professional image. Any hair accessories should be discrete.
- vi. Nails should be kept clean and reasonably short. For clinical staff, nail varnish, polish, acrylic nails or jewellery should not be worn

## **6.5 EXCEPTIONS AND CONSIDERATIONS**

- i. The organisation values and embraces diversity, recognising that culture, religion and disability have valid influences on how people dress. The organisation takes a sensitive approach to these considerations. Where there is conflict however, priority will be given to health and safety, security and infection control. Face coverings should be removed for the purposes of communication and identification, especially when with patients, the public or in a customer-facing role. Head coverings should be no longer than shoulder-length and secured.
- ii. Headwear for religious purposes, e.g. headscarves, turbans and kibbotts are permitted.
- iii. Manager should take into consideration any practical concerns staff may have in fulfilling their role and should consider making reasonable adjustments given the nature of the role (e.g. moving and handling tasks) and for disabled staff (e.g. footwear arrangements).
- iv. These considerations are not intended to be exhaustive and serve as a guide only. Staff members are encouraged to discuss any requirements with their managers on an individual basis. In all decisions made, managers must give due regard to hygiene, professional image and health and safety.

## **6.6 UNIFORMED STAFF**

### **6.6.1 Uniformed Staff Clinical**

- i. Uniforms are intended as a means of identification to both patients and staff, to offer health and safety to the staff wearing them and to minimise risk to patients and staff through infection and/or injury. Please refer to appendix 1 for guidelines.

### **6.6.2 Non-Uniformed Staff Clinical**

- i. Staff who are not required to wear a uniform but who regularly work with patients in a clinical area are expected to maintain a professional appearance and adhere to the principles of the dress code where applicable at all times. Please refer to appendix 2 for guidelines.
- ii. Staff who do not wear a uniform in the course of their work must present themselves as tidy and professional in appearance. It should be remembered that what is worn outside of work is not necessarily appropriate for the workplace.
- iii. Agency and associate clinicians who are not in a patient-facing role (for example telephone triage) are expected to wear smart business attire as per expectations of management / administrative staff (see 6.7).

### **6.6.3 Uniformed Staff Non - Clinical**

- i. All uniformed staff should wear the organisation uniform while on shift. This should be clean, smart and in good wear. Any individuals who have issues with their uniform should notify their line manager straight away.
- ii. Cardigans, fleeces or jackets may be worn when on breaks or during times of cold weather

## **6.7 MANAGEMENT / ADMINISTRATIVE STAFF**

- i. Employees in management and administrative roles are expected to wear business attire as detailed above

## **7 HELP AND ADVICE**

- i. In the 1<sup>st</sup> instance any queries or questions regarding uniform or dress code should be directed to your line manager
- ii. If any staff members have concerns regarding potential unfair treatment regarding any aspect of the policy, they can contact a member of the Human Resources team



- iii. Line managers who have concerns regarding compliance issues regarding this policy can contact the Human Resources team

## 8 IMPLEMENTATION

- i. This Policy will be implemented via the policy owner with the support of the Service Managers and the Staff Council.
- ii. The plan for implementation of this policy can be found at Appendix 4, where training needs have been assessed and identified.
- iii. **Dissemination.** Once this policy has been approved, it will be uploaded to the staff intranet, this will be supported by a message through PC24's newsletter, NEWS24 by the Governance Team.
- iv. **Monitoring Compliance.** Monitoring compliance will be undertaken by the relevant line managers within Primary Care 24 (Merseyside) Ltd.
- v. **Review of arrangements.** All policies must be reviewed by their authors at least every three years, or as and when a change is required or new evidence becomes available. All new policies, must be reviewed within 12 months of issue to ensure the effectiveness of implementation.

## 9 LOCATION OF POLICIES

All policies can be found on Primary Care 24 (Merseyside) Ltd's Intranet. It is the responsibility of the Policy Owner to ensure that the revised policy has been forwarded to the Governance Team with the instruction to upload the policy to the intranet.

## 10 EQUALITY & DIVERSITY

PC24 is committed to an environment that promotes equality and embraces diversity in its performance as an employer and service provider. It will adhere to legal and performance requirements and will mainstream equality and diversity principles through its policies, procedures and processes. This policy has been implemented with due regard to this commitment. To ensure that the implementation of this policy does not have an adverse impact in response to the requirements of the Equality Act 2010 this policy has been screened for relevance during the policy development process and a full equality impact analysis conducted where necessary. PC24 will take remedial action when necessary to address any unexpected or unwarranted disparities and monitor practice to ensure that this policy is fairly implemented.

## 11 TRAINING NEEDS ANALYSIS

Training Programme	Course Length	Frequency	Delivery Method	Staff Group	Recording Attendance	Strategic & Operational Responsibility
Level 1 Equality & diversity Mandatory Training		On appointment then 3 yearly	E-Learning	All staff	Attendance is recorded on the Training database	
PC24 Staff Handbook		On appointment	Face to face / self-study	100% of staff	n/a	

## Appendix 1 - Clinical Uniformed Guidance

Subject	Clinical Uniformed	Reason
Footwear	Dark in colour flat or low heeled to prevent slips and falls (non cloth/suede) and covered both at heel and toe. Shoes should be able to be thoroughly cleaned.	Closed toe shoes offer protection against spills.
Tights, Stockings and socks	Black or natural tights or stockings if worn with skirts or dresses. Navy blue or black socks worn with trousers.	Professional image
Dress Length /Trousers	Not mini or micro No cropped trousers as part of uniform.	Professional image
Jewellery	Wedding band may be worn. Rings with stones should not be worn, as these can scratch patients. Bracelets should not be worn. Necklaces must be removed. One pair of plain small stud earrings can be worn.	Health & Safety & Infection Control
Watches	Wristwatches should be removed when undertaking clinical duties. FobWatches may be worn	Hand/wrist jewellery can harbour micro-organisms and can reduce compliance hand hygiene
Undergarments	Staff should ensure that their undergarments are not visible.	Professional image
Facial Hair	Beards and moustaches must be kept clean and tidy.	Non interference with clinical procedures.
Hair	Below collar length should be tied or pinned up whilst on duty	Health & Safety, infection control, non interference in clinical procedures, to maintain a professional image.
Personal Hygiene	All staff must maintain a high standard of personal hygiene.	Patient Care, Professional image
Hands and Nail Varnish	Long and/or varnished fingernails or false nails or nail extensions are not permitted. Hands and nails should be clean at all times.	Long and or varnished fingernails/false nails harbour micro-organisms and can reduce compliance with hand
Tattoos and body art	Tattoos of an obscene or offensive nature must be fully covered.	To maintain a professional image and to protect the rights of others.
Facial/Body Piercing	Facial & body piercings are not acceptable and must not be worn.	Health & Safety and to maintain a professional image.
This list is by no means exhaustive. Clothing must be appropriate for job role carried out. If staff are unsure of their responsibilities in this area, they must consult with their manager.		

## Appendix 2 - Clinical Non Uniformed Guidance

Subject	Clinical Non Uniformed	Reason
Footwear	Flat or low heeled to prevent slips and falls (non cloth/suede) and covered both at heel and toe. Shoes should be able to be thoroughly cleaned.	Closed toe shoes offer protection against spills.
Dresses/Skirts	Not see through. No Mini or micro skirts	Professional image
Tops/blouses	Not see through, not low cut at the front or back, no vest style or strap tops. No bare midriffs. Sleeves should be able to be secured above	
Shirts	Male staff working in patient or public areas who do not wear a uniform must wear a shirt.	Professional image
Trousers	Tailored or smart trousers.	Professional image
Jewellery	Wedding band may be worn. Health & Safety recommends rings with stones should not be worn, as these can scratch patients. Bracelets should not be worn. Necklaces must be removed, secured or controlled during patient contact.	Health & Safety & Infection Control
Watches	Wristwatches should be removed when undertaking clinical duties. FobWatches may be worn	Hand/wrist jewellery can harbour micro-organisms and can reduce compliance with hand hygiene.
Undergarments	Staff should ensure that their undergarments are not visible.	Professional image
Hair	Below collar length should be tied or pinned up whilst on duty.	Health & Safety, infection control, non interference in clinical procedures, to maintain a professional image.
Facial Hair	Beards and moustaches must be kept clean & tidy.	Non interference with clinical procedures.
Hygiene	All staff must maintain a high standard of personal hygiene.	Professional image
Make up	To be discreet	To maintain a professional image.
Hands and Nail Varnish	Long and/or varnished fingernails or false nails or nail extensions are not permitted. Hands and nails should be clean at all times.	Long and or varnished fingernails/false nails harbour micro-organisms and can reduce compliance with ha
Body Art	Tattoos of an obscene or offensive nature must be fully covered.	To maintain a professional image and to protect the rights of others.
Facial/Body Piercing	Facial & body piercings are not acceptable and must not be worn.	Health & Safety and to maintain a professional image.
This list is by no means exhaustive. Clothing must be appropriate for job role carried out. If staff are unsure of their responsibilities in this area, they must consult with their manager		

## Appendix 3 - Non Clinical Uniformed Guidance

Subject	Non Clinical Uniformed	Reason
Footwear	Flat or low heeled to prevent slips and falls (non cloth/suede) and covered both at heel and toe. Shoes should be able to be thoroughly cleaned.	Health and Safety.
Tights, Stockings and socks	Neutral, black or subtle-coloured tights or stockings.	Professional image
Dresses/Skirts	Not see through. No Mini or micro skirts	Professional image
Tops/blouses	not see through, not low cut, no vest style or strap tops. No bare midriffs	Professional image
Trousers	Tailored or smart trousers or PC24 issued only if applicable.	Professional image
Hair	For patient facing staff off the collar in length, unless tied (pinned up) whilst on duty	Health & Safety
Facial Hair	Beards and moustaches must be kept clean and tidy.	Professional image.
Personal Hygiene	All staff must maintain a high standard of personal hygiene.	Professional image
Hands and Nail Varnish	Hands and Nails should be clean at all times. When varnish or false nails or extensions are used, they should be kept in good condition, free from chips.	Professional image
Body Art	Tattoos of an obscene or offensive nature must be fully covered.	Professional image
Facial/Body Piercing	Facial & body piercings are not acceptable and must not be worn.	Health & Safety for patient facing staff, professional image

## Appendix 4 - Policy Implementation Plan

Question	Response	Additional resources If so identify	Timescale
Who does the policy affect	All staff	Nil	4 weeks
What additional Standard Operating Procedures or forms need to be included in the policy	None	Nil	As above
What is the proposed date of implementation	December 2018	Nil	As above
Is training required	No	Nil	
If so what training is required (attach separate training outline)	N/A	Nil	
Who will facilitate the training	N/A	Nil	
What audit processes have been identified	N/A	Nil	

# Appendix 5 - Equality and Health Inequalities Screening Tool

Version number: V1



Equalities and Health Inequalities –  
Screening Tool

First published: November 2016

To be read in conjunction with Equalities and Health Inequalities Analysis Guidance,  
Quality & Patient Safety Team, Primary Care 24 (Merseyside) Ltd, 2016.

Prepared by: Quality & Patient Safety Team.

## 1 Introduction

The purpose of this Screening Tool is to help you decide whether or not you need to undertake an Equality and Health Inequalities Analysis (EHIA) for your project, policy or piece of work. It is your responsibility to take this decision once you have worked through the Screening Tool. Once completed, the Head of your SDU or the Quality & Patient Safety Team will need to sign off the Screening Tool and approve your decision i.e. to either undertake an EHIA or not to undertake an EHIA.

The Quality and Patient Safety Team can offer support where needed. It is advisable to contact us as early as possible so that we are aware of your project.

When completing the Screening Tool, consider the nine protected characteristics and how your work would benefit one or more of these groups. The nine protected characteristics are as follows:

Age  
Disability  
Gender reassignment  
Marriage and civil partnership  
Pregnancy and maternity  
Race  
Religion and belief  
Sex  
Sexual orientation

A number of groups of people who are not usually provided for by healthcare services and includes people who are homeless, rough sleepers, vulnerable migrants, sex workers, Gypsies and Travellers, Female Genital Mutilation (FGM), human trafficking and people in recovery. Primary Care 24 (Merseyside) Ltd will also consider these groups when completing the Screening Tool:

The **guidance** which accompanies this tool will support you to ensure you are completing this document properly. It can be found at:  
<http://extranet.urgentcare24.co.uk/>

### Equality and Health Inequalities: Screening Tool

A	General information
A1	Title: What is the title of the activity, project or programme?  Dress Code Policy
A2.	What are the intended outcomes of this work? Please outline why this work is being undertaken and the objectives.  To ensure safety, hygiene and professional image for the organisation
A3.	Who will be affected by this project, programme or work? Please identify whether the project will affect staff, patients, service users, partner organisations or others.



	All staff and patients		
B	The Public Sector Equality Duty		
B1	Could the initiative help to reduce unlawful discrimination or prevent any other conduct prohibited by the Equality Act 2010? If yes, for which of the nine protected characteristics (see above)?		
	Yes		Do not know
	Summary response and your reasons: Managers are more aware with this new policy of the regulations affecting dress code within an organisation and the reasonable adjustments that can be made. It is made clear that health, safety and hygiene are the only issues that cannot be compromised when considering reasonable adjustments for people with protected characteristics		
B2	Could the initiative undermine steps to reduce unlawful discrimination or prevent any other conduct prohibited by the Equality Act 2010? If yes, for which of the nine protected characteristics? If yes, for which of the nine protected characteristics?		
		No	Do not know
	Summary response and your reasons: Managers are more aware with this new policy of the regulations affecting dress code within an organisation and the reasonable adjustments that can be made. It is made clear that health, safety and hygiene are the only issues that cannot be compromised when considering reasonable adjustments for people with protected characteristics		
B3	Could the initiative help to advance equality of opportunity? If yes, for which of the nine protected characteristics?		
	Yes		Do not know
	Summary response and your reasons: Staff are treated in a fair way, with disability and religion / belief triggering reasonable amendments as long as staff and patient safety is not compromised.		
B4	Could the initiative undermine the advancement of equality of opportunity? If yes, for which of the nine protected characteristics?		
		No	Do not know
	Summary response and your reasons: Staff are treated in a fair way, with disability and religion / belief triggering reasonable amendments as long as staff and patient safety is not compromised.		
B5	Could the initiative help to foster good relations between groups who share protected characteristics? If yes, for which of the nine protected characteristics?		
	Yes		Do not know
	Summary reasons: The policy aims to ensure that those who have dress code requirements due to religious, cultural or disabilities can be heard and treated in a fair, equitable and safe manner. The policy offers an explanation as to the reasons for areas that can be accommodated (disability, religion / belief)		

B6	Could the initiative undermine the fostering of good relations between groups who share protected characteristics? If yes, for which of the nine protected characteristics?		
	Yes		Do not know
	Summary response and your reasons: It is conceivable that some staff members might feel resentful that staff members with protected characteristics are being seen to be treated differently than them (disability, religion / belief)		
C	The duty to have regard to reduce health inequalities		
C1	Will the initiative contribute to the duties to reduce health inequalities?		
	Could the initiative reduce inequalities in access to health care for any groups which face health inequalities? If yes for which groups?		
		No	Do not know
	Summary response and your reasons: Not applicable		
C2	Could the initiative reduce inequalities in health outcomes for any groups which face health inequalities? If yes, for which groups?		
		No	Do not know
	Summary response and your reasons: Not applicable. Health outcomes will not be compromised by any changes made in this policy		
D	Will a full Equality and Health Inequalities Analysis (EHIA) be completed?		
D1	Will a full EHIA be completed? Bearing in mind your previous responses, have you decided that an EHIA should be completed? Please see notes. <sup>1</sup> Please place an X below in the correct box below. Please then complete part E of this form.		
	Yes	Cannot decide	No
			X
E	Action required and next steps		
E1	If a full EHIA is planned: Please state when the EHIA will be completed and by whom. Name: Date:		
E2	If no decision is possible at this stage: If it is not possible to state whether an EHIA will be completed, please summarise your reasons below and clearly state what additional information or work is required, when that work will be undertaken and when a decision about whether an EHIA will be completed will be made.  Summary reasons:  Additional information required:  When will it be possible to make a decision about an EHIA?		

<sup>1</sup> Yes: If the answers to the previous questions show the PSED or the duties to reduce health inequalities are engaged/in play a full EHIA will normally be produced. No: If the PSED and/or the duties to reduce health inequalities are not engaged/in play then you normally will not need to produce a full EHIA.

E3	<p>If no EHIA is recommended:</p> <p>If your recommendation or decision is that an EHIA is not required then please summarise the rationale for this decision below.</p> <p>Summary reasons:</p> <p>This policy is a new edition of the existing Staff Dress Code policy, with updated guidance on standards of dress. There have been no known incidences where the dress code or any authorised reasonable alterations have caused any ill-feeling amongst staff members and all managers are trained in E&amp;D regulations</p>

F	Record Keeping		
Lead originator:	HR Manager	Date:	
Director signing off screening:	HR Manager	Date:	
Directorate:	Business & Finance	Date:	
Screening published:		Date:	