



POLICY

Category:	Dress Code	PAGE NUMBER:	1 of 4
Subject:	Dress Code	DISTRIBUTION:	Hospital Wide Manuals
CURRENT EFFECTIVE DATE:	April 2014	NEXT REVIEW DATE:	April 2017

Stanton Territorial Health Authority (STHA) employees are an important part of the hospital's public image. Employees represent the hospital and influence the opinion of patients, visitors, customers and employees. Proper dress, grooming, personal hygiene, adornment and overall appearance support the positive and professional atmosphere of the hospital.

In order to support occupational health, safety and infection control practices, the following dress statements have been prepared. The expectation is that all employees will meet these requirements.

SPECIAL POINTS

1. STHA reserves the right to ask any employee, student, or volunteer improperly dressed to go home, change clothing and return to work.
2. Headwraps or scarves worn for religious or health-related reasons must be in good repair, laundered regularly and secured to not dangle.
3. Scented products shall not be worn by any employee as these may precipitate allergies or sensitivities in patients, visitors or other employees.
4. **Personal Entertainment Devices:** See Policy Communications: Personal Electronic Devices C-0217.
5. **Personal Protective Equipment:** Personal Protective Equipment must be used to meet the requirements of infection control precautions as well as work unit specific codes of safety.

General Dress Attire for all employees:

1. All employees will present at work in a neat, clean and appropriately dressed manner.
2. Personal hygiene must be maintained.

**STANTON TERRITORIAL HEALTH AUTHORITY
POLICY DOCUMENT**

Dress Code: Dress Code

D-0380

-
3. All employees will wear an STHA identification card (staff, locum or contractor) with the photo clearly visible and not covered in any way (e.g. stickers). The identification card will be clipped to clothing or on a safety lanyard.
 4. Excessively tight, revealing or non-professional clothing will not be permitted. This includes, but is not limited to:
 - Jeans
 - Backless dresses or tops
 - Pants, skirts and shorts that are above knee length
 - Sweat/jogging/yoga pants
 - Shirts with revealing necklines
 - Spaghetti strap tops unless worn with a jacket
 - Visible undergarments
 - See-through clothing
 - Muscle shirts
 - No bare midriff – tops must meet bottoms
 5. Clothing shall not feature:
 - Logos, insignias or adornments which promote the use of drugs, alcohol, or tobacco
 - Offensive or vulgar words or pictures
 - Sexual connotations/pictures or derogatory implication towards ethnicity, national origin, religion, sexual orientation, disability, violence or disruptive group philosophy.
 6. Jeans shall not be worn during regular working hours. The only exception will be based on **unusual** work requirements as deemed by the Manager. Fridays are considered casual days for dress therefore jeans may be worn.
 7. Tattoos/body art should be covered (when possible).
 8. Visible body piercings shall be removed (when possible) or limited to a stud or inconspicuous adornment.

All Direct Patient Care Providers in Clinical and Diagnostic Areas:

The Dress Code for clinical and diagnostic areas is required in order to support occupational health and safety and infection control standards.

Uniforms that are provided by STHA will be laundered by STHA. These uniforms will not leave the hospital. Uniforms should be changed prior to leaving the hospital, and should not be worn

**STANTON TERRITORIAL HEALTH AUTHORITY
POLICY DOCUMENT**

Dress Code: Dress Code

D-0380

outside the hospital in public places prior to coming to work and upon leaving the hospital.

Clothing worn while providing direct patient care should be washable and able to be dried in a dryer in order to kill infectious organisms.

Direct patient care providers shall:

- Wear only (two maximum) plain ring bands without stones
- Wear only a watch or medic alert bracelet or bracelet for religious reasons on wrists
- Use isolation gowns (long sleeve yellow gowns) for isolation care only
- Wear hair away from the face
- Ensure facial hair is well groomed and trimmed
- Launder warm up type jackets at the end of every shift when worn
- Wear inconspicuous earrings such as studs or sleepers
- Limit nasal jewellery to a stud
- Remove visible body jewellery, if possible, or wear a stud or inconspicuous adornment
- Maintain short, unpolished nails. Artificial/gel nails are a risk factor for persistent pathogen carriage therefore they are not permitted
- Wear closed-toed with heel strap shoes. "Croc-like" footwear, sandals, flip-flops and clogs **are not** permitted due to infection control and occupational health & safety reasons
- Wear appropriate hosiery (stockings, tights, socks, etc)
- Not wear neck ties and stethoscope cozies as they may carry infectious organisms and are not laundered on a frequent basis

REFERENCES:

1. Infection Control Guidelines: Hand Washing, Cleaning, Disinfection and Sterilization in Health Care, Health Canada Communicable Disease Report, Volume 24S8, December 1998.
2. Department of Health and Social Services. (2012). *Northwest Territories Infection Prevention and Control Manual*. Yellowknife, NT: Government of the Northwest Territories.
3. NWT Safety Act, 1988, including amendments 2003.
4. UNW Collective Agreement.
5. Ward, Deborah Jane, *Hand Adornment and Infection Control*, British Journal of Nursing 2007, Volume 16, No. 11.
6. Interior Health Authority, British Columbia: Dress Code/Personal Appearance. March 2004.
7. Canadian Human Rights Commission, *Accommodating Environmental Sensitivities Best Practices*.

STANTON TERRITORIAL HEALTH AUTHORITY
POLICY DOCUMENT

Dress Code: Dress Code

D-0380

-
8. University of British Columbia: Department of Occupational Science and Occupational Therapy. August 2005
 9. University of Kentucky, Chandler Medical Centre: Dept of Pharmacy Dress Code Policy. April 2004.
 10. University of Washington, Dress Code for Patient Care Providers. May 2005.

Reviewed and approved by:



APR 3 2014

Chairperson, CPAC (Sign & Date)

Reviewed and approved by:



APR 3 2014

Chief Executive Officer (Sign & Date)