



Uniform and Work Attire Procedure

Version:	V4.00
Name of originator/ author:	Operating Unit Manager
Responsible management group:	Operations
Directorate/team accountable:	Operations

Procedure:	
Approved by:	Joint Partnership Policy Forum (JPPF)
Date approved:	03/09/2019
Fit for purpose according to:	Operations
Date approved:	03/09/2019

Date issued:	03/09/2019
Date next review due:	03/09/2022
Target audience:	All staff
Replaces (version number):	2.00

Equality Analysis Record		
Approved EA included	Dated:	26/04/2016
Quality Impact Assessment		
Approved QIA included	Dated:	20/05/2019

Document Control

Formal approval:

Final approval by:	Joint Partnership Policy Forum	
Version No. V3.00	Final	Date: 03/09/2019
Responsible Management Group approval by:	Operations	
Version No. V3.00	Final	Date: 03/09/2019

Review/comments:

Person/ Committee	Comments	Version	Date
Lorna Stuart/Kirsty Booth	Incorporated comments from EOC, H&S, Procurement, Trade Unions, Inclusion team, Logistics, ROMs, and Clinical Education. Reformatted to new Trust style	V1.04	17/05/2019
Timothy Poole	Rewrite and amendments following decisions made by UPWG	V1.03	16/07/2018
OGWG	Approval	V1.02	26/04/2016
OUM	Review and update	V1.01	04/03/2016
COWG	Approval	V1.00	07/02/2012
Infection Control Lead	For Comment	V0.03	10/01/2012
IG Lead	Reformatted and suggestions made with regard to training, monitoring and review	V0.03	29/12/2011
Operational Business Development Lead	Comments on formatting and approval process	V0.02	21/10/2011
Senior Operations Manager	First draft	V0.01	Oct 2011

Circulation:

Records Management Database upload	Date: 11/10/2019
Internal Stakeholders	
External Stakeholders	

Review Due by responsible Management Group:

Period	Every three years or sooner if new legislation, codes of practice or national standards are introduced	Date: 03/09/2022
--------	--	------------------

Record Information:

Security Access/ Sensitivity	[select either Official (Public Domain) or Official – Sensitive for document(s) which should not be made available to the public routinely]
Where Held	Corporate Records Register
Disposal Method and Date	In line with national guidelines

Contents

Document Control	2
1 Scope	5
2 Procedure	5
3 Responsibilities	11
4 Audit and Review (evaluating effectiveness)	11
5 Associated Trust Documentation	12
6 References	12
7 Glossary	13
8 Equality Analysis	14
Appendix A: Rank Slide Definitions	16
Appendix B: List of Standard Uniform	17
Appendix C: Uniform Allowances	19
Appendix 3: List of PPE by working Environment	21

1 Scope

- 1.1. This procedure applies to all members of South East Coast Ambulance Service NHS Foundation Trust (the Trust) who are required to wear uniform or work wear. Every effort will be made to cater for employees whose cultural and religious beliefs do not allow them to conform fully to this policy. Reasonable adjustments will be made for employees who have a genuine medical reason, or for reasons of disability.
- 1.2. First impressions are important and as a form of non-verbal communication, they often determine the attitude which will be conveyed within the staff/patient relationship. A neat, well-groomed appearance will impart an impression of an efficient, professional person representing an efficient, professional ambulance service.
- 1.3. This procedure will cover all areas of the Trust in which staff wear a uniform as part of their working day e.g. Operational front line, Emergency Operations Centre staff, Hazardous Area Response Team and other support workers such as Administrators, Fleet department and Scheduling. Dual role Clinicians that work across non clinical and clinical roles may remain in their clinical uniform.
- 1.4. This procedure also covers staff that do not wear uniform as part of their job role.

2 Procedure

- 2.1. All uniform issued to staff by the Trust will remain the property of the Trust at all times and must be returned at the termination of employment issued at the beginning and during their employment. Failure to do so could result in delay in payment of monies due or, in extreme cases, police involvement.
- 2.2. The uniform or any issued Personal Protective Equipment (PPE) must not be worn for any unauthorised activities outside the employment of the Trust, nor may it be worn if working for private ambulance providers at events etc
 - 2.2.1 Employees should ensure their uniform is complete and of standard issue only.
 - 2.2.2 Smoking, the use of e-cigarettes, vaping, drinking of alcohol or purchasing these products in uniform will not be permitted in public view. Staff who smoke or purchase alcohol whilst wearing the Trust uniform will be required to cover up with appropriate outer clothing that does not identify the Trust.

- 2.2.3 For safety and security staff who are off duty and travelling to and from their place of work should cover up with appropriate outer clothing that does not identify the Trust or should change into civilian clothes.
- 2.2.4 Staff are not permitted to alter their uniform in any way except for sizing adjustments.
- 2.2.5 No visible additional or substituted items of clothing may be worn unless authorised by the individual's line manager.
- 2.2.6 Exchanges and replacement of uniform due to soiling, loss or general wear and tear should be completed on an item for item basis. e.g. 3 worn shirts exchanged for 3 new shirts etc.

2.3 Care of Uniform

- 2.3.1 It is the responsibility of each member of staff to take appropriate care of all issued items, and to follow the manufacturer's instructions with regard to cleaning and storage in order to minimise the risk of damage or loss.
- 2.3.2 It should be noted that blood or body fluid stains cannot be removed by hot washing alone; it must first be soaked in cold salt water, then washed at standard temperature. However, a 10-minute wash at 60°C is sufficient to dilute safely or remove most micro-organisms. Should a garment become so heavily contaminated that it cannot be effectively cleaned and requires disposal, this should be done as hazardous waste and with the authorisation of the individual's line manager. See 'Disposal of Uniform' below.
- 2.3.3 Operational staff should keep a spare set of green clinical uniform at their place of work in case of uniform soiling whilst on duty or requests from the police to take items of uniform. It is not acceptable for staff to have to return home to change. Spare uniform must be stored securely at all times in the member of staff's locker or out of sight in their personal vehicle. A selection of boots will be kept in the OU for emergencies.

2.4 Shirts

- 2.4.1 Trust issued T-Shirts (or similar matching garments) may be worn under shirts.
- 2.4.2 Shirts will be worn tucked inside the trousers/skirt. Staff who are pregnant are permitted to wear their shirts outside their trousers if they can no longer be tucked in smartly.

2.5 Footwear

- 2.5.1 Only approved Trust footwear is to be worn and should a member of staff be unable to wear this footwear for medical reasons, (supported by a doctor's letter and signed off by the line manager), the Trust will reimburse up to £40.00 towards the cost of appropriate alternative footwear, this must comply with the required Trust safety standards available from the Health and Safety department.
- 2.5.2 If a staff member requires high ankle boots, these may only be ordered following sign off by the line manager giving the reasons.
- 2.5.3 Alternative footwear, for example Vegan boots, are available on request and with the line manager's authorisation.
- 2.5.4 Footwear must be maintained in a clean and serviceable condition. Any defects must be notified to the staff member's line manager.
- 2.5.5 Each Operating Unit will hold one pair of each size (4-13) of the standard boot to be issued in an emergency.

2.6 Hair and Head Covering

- 2.6.1 Hair is to be maintained in a clean, presentable, and tidy condition at all times. Staff members with hair that reaches below the shirt collar must keep it tied up at all times. Whilst undertaking clinical duties staff must ensure that it does not fall forward or interfere with patient care. Hair colour must be in keeping with a professional image.
- 2.6.2 Any accessories that are used to tie or clip hair in place should be small and discreet, and of a dark colour. Any clips/hair ties worn must not contain any stones/beads etc. and must allow for the correct fitment of the individual's safety helmet.
- 2.6.3 Beards and moustaches may be worn providing they are kept neatly groomed and clean. The Trust advises staff that some beards may present a problem with wearing of FFP3 single use, disposable masks by not fitting snugly. In these cases, they may not give adequate protection whilst performing procedures which may create airborne particles, such as intubation, airway aspiration or nebulising.
- 2.6.4 Head coverings required to be worn due to religious beliefs such as, but not limited to, a Turban (Sikh men), Kippah (Jewish men) and Hijab headscarf (Muslim women) should be in a plain green colour, as near to SECamb corporate green as possible. These items will not be provided but the Trust will reimburse the cost up to £20. Headscarves should be securely fastened with no trailing ends and should not cover the face. All items must be regularly laundered.

2.7 Jewellery

2.7.1 In the interests of Health and Safety, infection prevention and control and a professional appearance, the following must be adhered to:

2.7.1.1 Ear jewellery will be allowed in the form of studs only. Hoops, bars or dangling earrings are not permitted. Other visible body piercing jewellery will be limited to studs (these may be worn in the nose (excluding septum), no eyebrow piercings, no lip piercings and no dermal anchors. Ear tunnels must be filled with suitably size plugs. Where there is a recognised cultural need such requirements will be discussed at interview or with the line manager and a note placed on the individual's record to this effect.

2.7.1.2 Neck jewellery must not be visible at any time while in uniform.

2.7.1.3 Only a band (wedding ring style) with no raised stones will be acceptable as hand jewellery.

2.7.1.4 Watches are not to be worn on the wrist whilst in green clinical uniform; and bracelets are not permitted unless they are the approved "medic-alert" type or are worn for medical reasons (supported by a doctor's letter) or for cultural/religious reasons. These are to be removed whilst performing hand hygiene practices. (Please refer to the Infection Prevention Ready Procedure).

2.8 "Clinically Ready" (Please refer to Infection Prevention Ready Procedure)

2.8.1 "Clinically Ready" will be adopted by all staff in green clinical uniform, unless wearing clothing issued for health and safety reasons or inclement weather. These sleeved items should be removed whilst performing hand hygiene practices within clinical care settings. For those staff who are required to wear full sleeves (for religious/medical reasons), plastic sleeve covers will be available on request.

2.8.2 To ensure compliance with the hand hygiene technique, all staff wearing green ambulance uniform will, at all times, adhere to following dress code;

2.8.3 No jewellery to be worn from the elbow down with the exception of one flat banded ring. This includes watches, bracelets and raised stoned rings.

2.8.4 Watches are not to be worn on the wrist and bracelets are not permitted. Anyone requiring to wear an approved "medic-alert" worn for medical reasons (supported by a doctor's letter) must contact the IPC team for advice.

- 2.8.5 Fingernails should be short and clean. On no account is nail polish (clear or coloured) and/or false nails permitted when in green clinical uniform.
- 2.8.6 The Trust has consulted with various cultural leads and a full Equality Analysis Assessment has been completed. There are no cultural reasons for staff not to comply with “clinically ready”.
- 2.8.7 Approved bracelets are to be removed whilst performing hand hygiene practices and clinical procedures.

2.9 Identification

- 2.9.1 To identify staff, embroidered name badges are woven on to the shirts for front line staff. EOC staff will be able to wear a magnetic name badge. Pin badges authorised by the Trust may be worn on a safety breakaway lanyard that must be tucked away when patient facing. All Trust staff must carry Trust ID cards at all times while at work.
- 2.9.2 Job titles or Clinical grade will be displayed where appropriate.
- 2.9.3 Specialist Paramedics, Consultant Paramedics and Medical staff (Doctors etc) will wear red epaulettes with the appropriate job title.

2.10 Tattoos

- 2.10.1 To maintain a professional appearance, staff are required to cover tattoos where these may be deemed controversial (i.e. sexual, racist, aggressive etc).

2.11 Personal Hygiene Standards

- 2.11.1 All staff should adhere to the following personal standards: good hygiene, cleanliness and a neat appearance. Advice can be obtained from Operational Managers, Clinical Education Leads, Human Resources, Infection Prevention Control Team, Occupational Health or Staff Side representatives.
- 2.11.2 Make up may be worn in keeping with professional standards.

2.12 Sharp Objects

- 2.12.1 Pens and scissors etc. in breast or sleeve pockets may cause harm when moving patients. Such items should be carried away from possible direct patient contact to prevent harm or cross contamination/infection.
- 2.12.2 Ribbon bars should be worn for ceremonial purposes only and not worn when providing direct patient contact. These could be an issue for patient safety when moving and handling.

2.13 Personal Protective Equipment (PPE)

2.13.1 The uniform itself is not considered as PPE, and so PPE must be worn in any situation where there is danger or potential danger to the individual e.g. road traffic collisions; other highway incidents; poor visibility; construction sites; and potential blood/body fluid splashing etc. The following list is an example of PPE available to all patient facing staff and is not exhaustive:

2.13.1.1 Safety helmets

2.13.1.2 Safety footwear,

2.13.1.3 Debris gloves,

2.13.1.4 Fluorescent jackets,

2.13.1.5 Disposable plastic aprons,

2.13.1.6 Disposable medical gloves,

2.13.1.7 Disposable face masks,

2.13.1.8 Eye protection,

2.13.1.9 FFP3 masks.

2.13.1.10 Uniform including PPE must not be left on show in private vehicles due to the risk of theft and security implications that this would involve. Prolonged exposure of magnified sunlight (through vehicle windows) will fade or damage the high visibility materials or compromise the safety standards of the garment.

2.13.1.11 A complete list of PPE available to staff is documented in Appendix C.

2.14 Loss or Theft

2.14.1 If an item of uniform is lost or stolen, the employee is responsible for informing their line manager as soon as possible. An incident report form (DIF1) must also be completed and submitted. Where the loss is substantial, or part of a wider loss of Trust equipment, the Local Security Management Specialist (LSMS) must be informed as soon as possible via the Datix System, phone or email.

2.14.2 In circumstances where theft is suspected, the Police must be informed. This would normally be done by the line manager or out of hours duty manager. This is particularly important when security concerns are heightened, e.g. high-profile events occurring in the Trust.

2.15 Disposal of Uniform

- 2.15.1 Items that are visually identifiable as the whole or part of a Trust uniform (e.g. due to their colour or style), have insignia or are otherwise unique to the Trust and which are not suitable for re-use must be disposed of securely. They must be returned to the line manager for onward passage to Stores for disposal by an approved contractor.
- 2.15.2 All uniform that is returned for shedding must be in a clear plastic bag with a card label (in the bin system) stating '**Old Uniform for shredding**'. All returns must be checked for any items that are not uniform (e.g. iPads, ID cards etc), before sending as stores will not open the bags once received. Do not put new exchanges in the bag, please use a separate bag clearly marked '**Exchanges**'

3 Responsibilities

- 3.13 The responsibility for ensuring that the procedure is enforced lies with the Trust Board and **Chief Executive Officer**.
- 3.14 The **Operating Unit Managers** and **Line Managers** are responsible for overseeing the implementation and monitoring of this procedure.
- 3.15 **Procurement** and **Finance Directorates** will ensure appropriate resources, facilities and associated supplies for staff to adhere effectively to this procedure are available and maintained. All uniform issued to staff by the Trust will remain the property of the Trust at all times and must be returned at the termination of employment and reconciled with a list of items issued at the beginning and during the employment. Failure to do so could result in delay in payment of monies due or in extreme cases police involvement.
- 3.16 All **Operational Managers**, **Clinical Managers** and **Team Leaders** are responsible for ensuring that this procedure is routinely applied by all uniformed staff and that suitable and necessary facilities to support this procedure are readily available in all Trust settings
- 3.17 **All members of staff** are individually responsible for adhering to this procedure.

4 Audit and Review (evaluating effectiveness)

- 4.1 Staff should receive information and education (as necessary) when there is a change in the uniform supplied.
- 4.2 Monitoring compliance on a day-to-day basis will be undertaken by the Line Managers observing staff during duty hours. Remedial action for non-compliance should be part of a personal development plan.

- 4.3 The Infection Control Team, on behalf of the Infection Control Sub Group, will periodically monitor compliance through auditing of infection prevention and control standards. The reporting of non-compliance and deficiencies will be undertaken through the responsible line managers and the Infection Control Sub Group (ICSG) for remedial action.
- 4.4 All procedures have their effectiveness audited by the responsible Management Group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 4.5 Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).
- 4.6 This procedure will be reviewed every three years or earlier if required by the Trust's Senior Management Team and Staff Side Representatives through the Joint Partnership Forum to ensure it is meeting its aims and objectives. The procedure will be reviewed sooner if new legislation, codes of practice or national standards are introduced or if feedback from employees indicates that the policy is not working effectively.
- 4.7 All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.

5 Associated Trust Documentation

- 5.1 Recruitment and Selection Policy
- 5.2 Smoking free environment Policy and procedure
- 5.3 Equality, Diversity and Inclusion Policy
- 5.4 Health & Safety Policy
- 5.5 Infection Prevention and Control Policy
- 5.6 Infection Prevention Ready Procedure
- 5.7 Security Management Policy

6 References

- 6.1 Department of Health (2008) The Health and Social Care Act 2008: (rev 2015): Code of practice for the prevention and control of healthcare associated infections. London: DoH.
- 6.2 Department of Health (2007) Uniforms and Workwear: (rev 2010) An evidence base for developing local Policy. London: DoH.

- 6.3 Department of Health (2007) Saving Lives: reducing infection, delivering clean and safe care. London: DoH.
- 6.4 Health and Safety Executive (INDG174 rev 08/05) A short guide to the Personal Protective Equipment at Work Regulations 1992. Suffolk: HSE books.
- 6.5 Health and Safety Executive (2005) COSHH a brief guide to regulations: What you need to know about the Control of Substances Hazardous to Health Regulations 2002. Suffolk: HSE books.
- 6.6 The Health and Safety at Work Act 1974 sections 2 and 3. Section 2 covers risks to employees and Section 3 to others affected by their work e.g. patients.
- 6.7 Health and Safety Executive (1999) Management of Health and Safety at Work Regulations 1999 (Management Regulations), that extend the cover to patients and others affected by microbiological infections, and include control of infection measures.
- 6.8 'Securing Health Together', the Health and Safety Executive (HSE) long term strategy for occupational health that commits HSE/Health and Safety Commission and their fellow signatories (including the Department of Health) to a 20 per cent reduction in ill health caused by work activity by 2010.
- 6.9 Health Act 2006 Code of Practice, Duty 4 to maintain a clean and appropriate environment includes at section (g) that the supply and provision of linen and laundry reflects Health Service Guidance HSG95 (18), as revised from time to time and at section (h) that clothing (including uniforms) worn by staff when carrying out their duties is clean and fit for purpose. Health Professions Council, Standard of Proficiency section 10.
- 6.10 If applicable, this section should include a list of useful sources of reference material, for example, legislation, national guidance, relevant research etc. The document title should be listed in full, followed by the date and publisher/ author.

7 Glossary

- 7.1 **Personal Protective Equipment (PPE):** Issued above the standard uniform issue to protect against a specific risk to health and safety e.g. Fluorescent jacket, FFP3 disposable mask, EPD (electronic dosimeter); and helmet. PPE must be worn in any situation where there is danger or potential danger to the individual, e.g. road traffic collisions; other highway incidents; poor visibility; construction sites; and potential blood/body fluid splashing etc.

8 Equality Analysis

- 8.1 The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.
- 8.2 Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.

Name of author and role		OUM QI Hub	
Directorate	Operations	Date of analysis:	16/05/19
Name of policy being analysed		Uniform Procedure	
Names of those involved in this EA			
1. Trust policies and procedures should support the requirements of the Equality Duty within the Equality Act:	<ul style="list-style-type: none"> • Eliminate discrimination, harassment and victimisation; • Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; • Foster good relations between persons who share a relevant protected characteristic and persons who do not share it. 	<p>In submitting this form, you are confirming that you have taken all reasonable steps to ensure that the requirements of the Equality Duty are properly considered.</p> <p>Equality Duty Considered</p>	
2. When considering whether the processes outlined in your document may adversely impact on anyone, is there any existing research or information that you have taken into account?	<p>National guidance on healthcare staff uniforms and hand hygiene procedures provides evidence that there is no adverse impact on anyone when adhering to the procedure.</p> <p>Work undertaken on the Infection Prevention and Control EA for the Trust can be evidence to confirm this statement.</p>	<p>Department of Health (2010) Uniforms and Workwear: an evidence base for developing local policy. London: DoH.</p> <p>Department of Health (2015) Health and Social Care Act 2008: the Code of Practice for the Prevention and Control of Healthcare Associated Infections (the 'Code of Practice') (Department of Health, updated July 2015).</p> <p>Health Professions Council, Standard of Proficiency section 10.</p>	

3. Do the processes described have an impact on anyone's human rights?	<p>This EA has used detail from the Infection Prevention and Control EA and ensures that all staff are aware of their individual responsibility to protect themselves, as well as making all reasonable efforts to safeguard the welfare of their patients and all other persons encountered in their daily duties and do not therefore act in a way that disadvantages any person, taking into account protected characteristics, infringes on human rights.</p> <p>Consultation has taken place on the procedure and identified no adverse impact on people with protected characteristics and no infringements on human rights. No unlawful discrimination has been identified.</p>
---	--

4. What are the outcomes of the EA in relation to people with protected characteristics?			
Protected characteristic	Impact Positive/Neutral/Negative	Protected characteristic	Impact Positive/Neutral/Negative
Age	Neutral	Race	Neutral
Disability	Neutral	Religion or belief	Neutral
Gender reassignment	Neutral	Sex	Neutral
Marriage and civil partnership	Neutral	Sexual orientation	Neutral
Pregnancy and maternity	Neutral		

EA Sign off	
EA checkpoint (Inclusion Working Group member, preferably from your Directorate)	
By signing this, I confirm that I am satisfied the EA process detailed on this form and the work it refers to are non-discriminatory and support the aims of the Equality Act 2010 as outlined in section 1 above.	
Signed:	Date: 21/05/2019

Appendix A: Rank Slide Definitions

1. Deputy Director of Operations Cartwheel and 2 x pip
2. Associate Director of Operations Cartwheel and 1 x pip
3. Strategic Commander/Heads of Cartwheel
4. Tactical Commander (OUM) Crown and 1 x pip
5. EOC Tactical Commander (OUM) Crown and 1 x pip
6. Tactical Commander (OM) Crown
7. EOC (Operational commander training) 3 x pip
8. HART TL 3 x pip
9. OTL (Operational commander trained 3 x pip
10. OTL (non-operational commander trained 2 x pip
11. EOC team leaders (EMATL/DTL) 2 x pip

Red epaulettes denote specialist or consultant paramedics and Medical staff such as Doctors.

Appendix B: List of Standard Uniform

1. Band 8b Managers and above

- a. The Band 8b uniform reflects the less clinical and more corporate professional, office-based role of a senior manager within the Trust. There is a requirement to present a smart, appropriate image for meetings, public and media engagements, and other heightened profile events where a senior manager would play a significant part.
- b. The uniform consists of White pilot shirt, magnetic name badge, green clip-on tie, green trousers or skirt, rank epaulettes, black leather belt, black shoes.
- c. As well as the white corporate uniform issue, Band 8b response capable managers shall also be issued one set of green clinical uniform consisting of:
 - i. Green pilot and/or green polo shirt with embroidered name badge, white undershirt, green cargo trousers, green outer jacket, black safety boots, helmet, the issued rank epaulettes, fluorescent jacket and black leather belt.

2. Front Line crews, including RCM

- a. The uniform consists of a green pilot shirt or green polo shirt with embroidered name badge, clinical grade or rank epaulettes, white undershirt, green cargo trousers, green outer jacket, black leather belt, fluorescent jacket and black safety boots.

3. EOC

- a. Green polo shirt with magnetic/pin style name badge, staff grade or rank epaulettes, green trousers, green fleece, black leather belt, black shoes.

4. HART

- a. The uniform consists of a green HART polo shirt, green HART sweatshirt, green HART cotton undershirt, green combat trousers, Haix high ankle safety boots (as per NARU requirements).

5. Fleet

- a. The uniform consists of a navy-blue polo shirt, navy blue cargo trousers, navy blue sweatshirt, navy blue fleece, navy blue coverall with retroreflective stripes, black safety boots, fluorescent jacket, fluorescent over-trousers, knitted hat.

6. Logistics

- a. The uniform consists of navy-blue trousers, navy blue polo shirt, navy blue sweatshirt, navy blue fleece, fluorescent jacket, safety shoes/boots, knitted hat.

7. Scheduling

- a. The uniform consists of navy-blue cargo trousers, navy blue polo shirt, navy blue fleece, navy blue sweatshirt, black shoes.

8. Medicines Support

- a. The uniform consists of navy-blue trousers, navy blue polo shirt, navy blue sweatshirt, navy blue fleece, safety shoes/boots.

9. Admin and Reception

- a. The uniform consists of a navy-blue polo shirt, navy blue cargo trousers, navy blue sweatshirt, navy blue fleece, black shoes.

or

- b. White $\frac{3}{4}$ sleeve blouse, navy skirt or trousers, navy suit jacket, black shoes.

10. Make Ready Centre Managers and Assistants

- a. The uniform consists of navy-blue trousers, navy blue polo shirt, navy blue sweatshirt, navy blue fleece, safety shoes/boots. Unless a Clinician, they may remain in Green.

11. Non-Uniform Dress Code

- a. There is a requirement to present a clean, smart, professional, and appropriate image. All staff are required to dress in a manner that does not cause offence or embarrassment to others with whom they come in to contact.

12. Chaplain

- a. The uniform consists of a green clerical collar shirt, green trousers, black shoes or boots, green outer jacket, and fluorescent jacket.

Appendix C: Uniform Allowances

Operational Staff – Full Time

5 x Shirts (A&E Pilot or Polo, to a total of 5)
 5 x T Shirts
 3 x Trousers
 1 x Green Jacket
 1 x Hi-Viz Jacket
 1 x Belt (Trousers)
 1 x Belt (Utility)
 1 x Over trousers
 3 x Epaulettes
 1 x Hi-Viz Insert
 1 x Helmet
 1 x Helmet Bag
 1 x Personal Green Holdall
 3 x Kneepads
 1 x Boots/Shoes

Non Operational Staff – Full Time

(EOC Staff etc)
 5 x Shirts (EOC Polo)
 5 x T Shirts
 3 x Trousers
 1 x Fleece/Jacket (dependant on change)
 3 x Epaulettes
 Name badge
 1 x Shoes (Boots if dual role)

EOC Bank Staff

1 x Shirt (EOC Polo)
 1 x Trousers
 1 x Epaulettes

Operational Staff – Part Time

3 x Shirts (A&E Pilot or Polo, to a total of 3)
 3 x T Shirts
 2 x Trousers
 1 x Green Jacket
 1 x Hi-Viz Jacket
 1 x Belt (Trousers)
 1 x Over trousers
 3 x Epaulettes
 1 x Hi-Viz Insert
 1 x Helmet
 1 x Helmet Bag
 1 x Personal Green Holdall
 2 x Kneepads
 1 x Boots/Shoes
 1 x Belt (Utility)

Non Operation Staff – Part Time

(EOC Staff etc)
 3 x Shirts (EOC Polo)
 3 x T Shirts
 2 x Trousers
 1 x Fleece/Jacket (dependant on change)
 3 x Epaulettes
 Name Badge
 1 x Shoes

Chaplain

2 x Chaplain Shirt
 1 x Green jacket
 1 x Hi Vis Jacket and insert
 1 x Trousers
 1 x Boots/Shoes

Fleet Staff – Blue Support Uniform

3 x Trousers
1 x Fleece
2 x Sweatshirts
5 x Polo shirts
(Overalls, boots & Hi vis sorted by Fleet)

Support Staff – Blue Support Uniform

5 x Polo Shirts
3 x Trousers
1 x Fleece
2 x Sweatshirts
1 x Hi Vis (Scheduling do not get Hi Vis jacket)
1 x Hi Vis Insert
1 x Boots
1 x Gloves

Operations Managers (8b and above)

5 x Shirts (White Pilot)
3 x Trousers/Skirt (Green)
Clip on tie (Dark Green)
Formal shoes

Reception Staff

5 x ¾ length sleeved white blouse
3 x Skirts/Trousers
1 x Jacket
1 x Fleece
1 x Name Badge

Make Ready Centre Managers & Assistants – Blue Support Uniform

5 x Polo Shirts
3 x Trousers
1 x Fleece
2 x Sweatshirts
1 x Hi Vis
1 x Boots
1 x Gloves

Appendix 3: List of PPE by working Environment

1. Front Line Ambulance Crew

- a. Safety helmet, protective eyeglasses, FFP3 disposable masks, disposable face masks, fluorescent jacket, plastic apron, disposable medical gloves, debris gloves, fluorescent over-trousers and safety footwear.

2. Fleet

- a. Bump cap, ear defenders, safety glasses, impact protection glasses, fitted safety face shield, safety gloves, knee pads, ABEK1P3R half face respirator.

3. HART

- a. Gallet mk4 helmet, green fire-retardant tunic with fluorescent and retroreflective stripes, green leggings with fluorescent and retroreflective stripes, jolly boots (or Haix), fluorescent vest, debris gloves.