



Public – To be published on the Trust external website

Dress Code Procedure

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Status: Approved

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Overarching policy: N/A



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1 Purpose

This procedure applies to all employees of the Trust, those on educational/vocational placements in Trust services and any casual or agency staff / workers employed to work within the Trust.

The professional image presented by health service employees/workers is an important component in the way health services are regarded by patients and the public and can improve the reputation of the Trust within the locality.

- This procedure will outline the acceptable standards of employee dress and general appearance that will ensure employees dress in ways that are safe, fit for purpose, appropriate to the duties undertaken and demonstrate sensitivity to the needs of the service users, other employees and the sphere of work.
- This procedure applies at all times that employees are engaged in Trust business. Nothing in this procedure shall infringe unnecessarily or excessively upon the religious or cultural beliefs of the employees of the Trust. Any deviations from this policy for health or cultural reasons must be agreed by your line manager on a case by case basis

2 Related documents

This procedure also refers to:-

- ✓ TEWV [Health and Safety Policy](#)
- ✓ TEWV Infection Prevention and Control Policies and procedures
- ✓ TEWV [Infection Prevention and Control Policy](#)
- ✓ [Hand Hygiene](#) Procedure
- ✓ [Standard \(Universal\) Infection Prevention and Control Precautions](#) procedure.
- ✓ Statutory Professional Codes of Conduct, as applicable
- ✓ Photographic identification / Door access control (ID cards) procedure

If you have any difficulty accessing the above hyperlinks please go to the Trust intranet site and search under policies, procedures and legislation.

3 Principles

Whilst it is not the intention to infringe unnecessarily or excessively upon the religious/cultural beliefs and cultural dress of its employees, full consideration will be given by the Trust to the environment in which the individual works and the role that they are carrying out to ensure there are no potential risks relating to health and safety, hygiene, risk of physical attack and will be applied to the following principles:-

3.1 Identification

You **must** wear appropriate name badges where supplied by the Trust.

The wearing of a lanyard to display a name badge will only be permitted where there has been a risk assessment undertaken. Only lanyards with the required quick release system are safe for staff to wear.

Name badges must be visible to patients, colleagues and the public at all times whilst in the workplace.

- Modified name badges will be available for use in areas where patients may have visual defects to enable identification of staff.
- Modified name badges will be available in different presentations to ensure the wearing of the badge presents no hazard to employees or patients.
- When it is inappropriate to wear the name badge (e.g. in community, on escorted visits, in public places) the name badge should be carried by the employee at all times and be readily available to be displayed.
- You must report the loss of the name badge to your manager as soon as possible and arrange for a replacement.
- It is your responsibility to have a contemporary and accurate name badge.

Badges other than Trust name badges are only permitted as follows:

- The badge of a professional organisation or Trade Union.
- Approved national campaign badges may be worn at the time of campaign.

3.2 General Appearance

You will be aware of the image that you present to service users, your colleagues and the general public. You will present yourself as professional and non-provocative*, demonstrating self-respect. The professional image will be projected to encourage public trust and confidence and contribute to the positive corporate image that the Trust will present. For direct care employees, your appearance will facilitate and enhance your engagement with service users, their families and carers.

*'provocative' meaning challenging, stimulating, offensive, confrontational or insulting

You will also be aware of the aspects of appearance such as hairstyles, hair colour and use of make-up and fashion style on your general image and how that image impacts on the public and your colleagues. Consideration should be given to the appropriateness of hair colour and should not be in a style that requires frequent readjustment. You will be sensitive to the views of service users, their carers, their families and colleagues. Managers will feedback on inappropriate appearance where necessary to ensure the promotion of professional standards.

Staff will not wear any kind of sports clothing unless they are engaged with service users in activities where specialist sports clothing is required or they are undertaking training activities where sports clothing is required. This includes the wearing of shorts and vest tops unless

authorised by service managers in periods of extreme hot weather. Staff will always be sensitive to the impact of any clothing on service users, carers and colleagues.

Staff must avoid wearing clothing / belts / footwear with logo's or graphics.

Staff are required to maintain the above standards during day, night and weekend shifts. Achievement of these standards will ensure the Trust's workforce appear professional at all times and can always be identified.

Table 3: Arrangements for uniform and corporate dress, provides further detail and guidance on acceptable standards relating to dress code.

Directorate/Service area	Dress Arrangements	Additional Information
ALL STAFF	<p>Both uniform and non-uniform dress should ensure their appearance and clothing to be clean, tidy, safe and practical. All clothing must ensure adequate coverage to ensure modesty is preserved and should not display any slogans or communication that could provoke or cause offence.</p> <p>All clinical staff to observe 'bare below elbow' code when engaged in clinical practice as outlined in the Hand Hygiene Procedure.</p>	<p>Unless an exemption is agreed at local level by the Corporate Director or Director of Operations, denim clothing will <u>not</u> be worn for work.</p> <p>Note: If agreed, should be dark, smart and in good repair. Faded, worn, frayed and torn denim clothing is not acceptable at any time.</p>
Trust Board, Directors, Associate Directors, Senior Managers and all Corporate and administrative/ clerical services in all Directorate service areas – including ward clerks	Smart non-uniform dress	
Clinical staff working within inpatient settings	<p>Uniforms comprised of tunics (or polo shifts) with smart trousers.</p> <p>Appendix 3 provides details of colour scheme by profession / grade.</p>	
Nursing students	<p>University uniform to be worn when on clinical placements in clinical practice areas wearing uniform/corporate dress</p> <p>All students to observe – 'bare below elbow' code when engaged in clinical practice defined as per the Hand Hygiene Procedure.</p>	Uniform supplied by university.
Physical intervention trainers	Uniform: Dark blue or white polo	Smart non-uniform dress to

	shirt with TEWV logo, grey sweatshirt and black / grey jogging bottoms / leggings	be worn for non direct training activity
Facilities Directorate:	Smart non uniform dress.	
Engineering, works and maintenance teams	Agreed department uniform and protective work-wear/footwear and safety glasses.	
Hotel Services staff, including: domestic, catering, housekeeping/portering and driving staff	Agreed department uniform and protective work-wear	
Reception staff (employed via EFM)	Trust dress style as agreed with Director of Estates & Facilities Management	
AHP practitioners in community settings	Uniforms to be worn during practice at clinician discretion Appendix 3 provides details of colour scheme and expectations by profession / grade.	Smart non-uniform dress as appropriate
Volunteers	Smart non-uniform dress	
Chaplains	Smart non-uniform dress which may include that which identifies individuals as a spiritual / religious leader.	

3.3 Visible Body Art/Tattoos/Body Piercings

Visible tattoos where present should not be offensive or provocative to others and that where they are deemed to be offensive they must be appropriately covered. It should be noted that the general public (our service users and carers) still hold a wide range of views about what constitutes a professional image as highlighted in section 3.2. The Trust expects managers to feedback where necessary to ensure the promotion of professional standards.

If you have a visible tattoo that is normally covered by long sleeved clothing and provide direct patient care, when a procedure requires hand-washing or to be 'bare below elbow', sleeves should be rolled up during procedure and/or hand washing then rolled back after each episode.

3.4 Control of Infection



There may be periods of time when a decision is taken that staff uniform or the wearing of protective clothing is required as a means of infection prevention and control, where such measures are put in place, this will constitute a change to the current dress code rule within the work area and must be adhered to by all staff.

Effective hand hygiene is the single most important way of preventing and controlling infection, all employees are expected to follow the Infection Prevention and Control Procedures developed by the Trust.

You will promote and demonstrate positive personal hygiene and the maintenance of clean clothing. You will ensure that your general appearance promotes good hygiene and that you practice the principles detailed in the Trusts [Standard \(Universal\) Infection Prevention and Control Precautions](#) procedure.

Hands of nurses, doctors and other members of staff who handle patients are the most common and important source of cross infection.

All clinical staff must adhere to the Trusts [Hand Hygiene](#) procedure and adopt a bare below the elbow approach when undertaking any clinical procedure.

All direct care employees will only wear minimal jewellery, in order to promote the effectiveness of good hand hygiene. Direct care staff will adopt a 'bare below the elbows' approach and will wear no jewellery on hands or wrists other than one plain wedding band when undertaking clinical procedures or procedures that require hand washing.

Fingernails will be short and free of nail varnish – false nails/gel nails and nail extensions are unacceptable within areas where direct care is delivered.

Hair **must** be clean, neat and tidy, tied back if longer than shoulder length as appropriate depending on the task being performed

Personal protective equipment, such as gloves, aprons and facial protection are provided by the Trust for staff. This equipment will provide protection against contact with blood, bodily fluids and other infectious sources.

Clothing must be laundered at the highest possible temperature for the garment – guidance regarding laundering temperatures will be available on the garment. Uniforms worn in inpatient settings should be laundered separately. Specific precautions to be taken during outbreaks of infection will be advised by the Infection Prevention and Control team.

3.5 Health and Safety

You will only wear jewellery that does not obstruct or prevent you in carrying out your duties. Jewellery will be discreet and appropriate to the role and presentation to the public. The Corporate Director or Director of Operations will give guidance on the wearing of jewellery required for cultural or religious reasons. No necklaces or hanging jewellery will be worn in clinical areas. Additionally consideration should be given to the wearing of ties, scarves or other potential ligatures when working in an environment of increased risk.

You will wear footwear that is safe and practicable for the duties being undertaken at the time, including driving and engaging with service users, carers and families in the community.

All direct care employees will wear footwear that is smart, flat, practical, safe and appropriate to both the clinical areas and the range of duties within their role. You should not wear open toe sandals, flip-flops, clogs, mules or sling backs. If training shoes are worn they must be in good repair, fastened correctly, and have minimal logos. Physiotherapy and Occupational Therapy staff may wear white or black training shoes as part of their professional uniform.

All direct care employees will remove facial piercings wherever possible and if removal is not possible piercings should be taped to the skin. This is as a precaution against injury to the employee, service users and others in physical care or contact situations that may arise.

For staff who do not work in a clinical area, and who are required to visit a clinical area must comply with the above sections on Control of Infection and Health and Safety.

3.6 Personal Protective Equipment / Clothing

Protective clothing is provided by the Trust for all activities where it is required for Health and Safety and Infection Control purposes. Staff will wear the protective clothing as instructed for those activities where it is required.

Staff have a responsibility to alert their manager if the appropriate protective clothing is not available to them.

3.7 Special Clothing

The Trust recognises the diversity of culture, religions, disability and other needs of its staff and its responsibility to support these. A sensitive approach will be taken when this affects the way that staff are expected to dress. However, consideration will be given to health and safety, security and infection control requirements. For example, for some the exposure of the forearms is not acceptable therefore consideration of the following may be appropriate for staff required to wear uniforms with short sleeved tunics / polo shirts:

- Uniforms may include provision for sleeves that can be full length when staff are not engaged in direct patient care activity.
- Uniforms maybe able to have three-quarter length sleeves.
- Disposable over-sleeves, elasticated at the elbow and wrist, may be used but must be put on and discarded in exactly the same way as disposable gloves. Strict procedures for washing hands and wrists must still be observed following the Trust Hand hygiene procedure

To ensure effective communication, clothing which covers the face will not be permitted for any staff in contact with patients, carers or visitors or for staff in other roles where clear face to face communication is essential.

Staff who wish to wear clothing which covers their face when they are not working, such as during their break, their lunch or when walking around buildings, are allowed to do so. However, staff must be prepared to remove the item of clothing that is covering their face if they are required to do so to check their identity against their ID Badge.

Further advice can be sought from the Human Resources Department or the Equality, Diversity and Human Rights Department.

All the uniforms and corporate dress issued by the Trust will be available in styles appropriate for maternity wear.

Service managers will issue guidance about local adaptation to the wearing of uniform/corporate dress in periods of extreme hot or cold weather. Extreme weather uniform and code of dress would reflect the general principles of appearance already outlined in this policy.

Staff working within Forensic Services providing direct patient care are required to provide their own belt which should be plain black with no studs or logo's. Specific requirements are available from the service.

3.8 Uniforms

Initially introduced due to the COVID-19 pandemic, the Trust requires all clinical staff working in inpatient settings to wear uniforms. The primary rationale for this is to support effective infection prevention and control measures, including laundering of uniforms at a higher temperatures and laundering work wear separately. The uniforms additionally create a clear distinction between work and home attire minimising the spread of the virus. The colour schemes also provide clearer identification of grades and professions. Uniforms are comprised of tunics and smart trousers, unless in an Adult Learning Disability service where polo shirts will be worn. **Appendix 3** provides details of uniforms by grade and profession.

Departmental uniforms are also worn within some Estates and Facilities management teams.

Employees providing direct care in services where uniform/corporate dress is provided will be expected to change from/to personal clothing when arriving / leaving work and when employees are required to escort service users (as agreed locally).

4 Definitions

Term	Definition
<i>Direct care employees</i>	<ul style="list-style-type: none"> all employees where employment duties include direct service user engagement/contact with carers and families for the purpose of health and social care provision.

Indirect care and support employees	<ul style="list-style-type: none"> all employees within clinical / professional services that support the delivery of direct care where work does not involve direct engagement / contact with service users, their families and carers. If indirect care and support employees need to visit clinical areas they should adhere to the same requirements as direct care employees
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5 How this procedure will be implemented

<ul style="list-style-type: none"> This procedure will be published on the Trust's intranet and external website.
<ul style="list-style-type: none"> Line managers will disseminate this procedure to all Trust employees through a line management briefing.
<ul style="list-style-type: none"> Appointing Officers should discuss this procedure with all newly appointed employees and ensure this forms part of their local induction
<ul style="list-style-type: none"> Information regarding hand-washing is available in Hand Hygiene which includes information regarding 'bare below the elbows'.
<ul style="list-style-type: none"> Line managers will take appropriate managerial action where non-compliance with the policy is brought to the attention of the employee and not remedied.
<ul style="list-style-type: none"> Training and development in communication and interpersonal skills will include information about the role of appearance and personal presentation in non-verbal communication.
<ul style="list-style-type: none"> Observational spot audits of procedure compliance will be carried out and managers will monitor compliance through management practice and supervision

5.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff / workers / students	Informal – staff awareness of procedure via local induction on commencement into role	-	As appropriate subject to any changes / updates to procedure

6 How the implementation of this procedure will be monitored

Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and
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			monitored; (this will usually be via the relevant Governance Group).
1	Observational audits of procedure compliance	Annually and via observational spot audits / supervision by management	N/A

7 References

- ✓ TEWV [Health and Safety Policy](#)
- ✓ TEWV Infection Prevention and Control Policies and procedures
- ✓ TEWV [Infection Prevent and Control Policy](#)
- ✓ [Hand Hygiene](#) Procedure
- ✓ [Standard \(Universal\) Infection Prevention and Control Precautions](#) procedure.
- ✓ Statutory Professional Codes of Conduct, as applicable
- ✓ Photographic identification / Door access control (ID cards) procedure
- ✓ Equality Act (2010)

8 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval:	13 April 2021	
Next review date:	31 May 2025	
This document replaces:	HR/0024/v4.1 Dress Code Procedure	
This document was approved by:	Name of committee/group	Date
	JCC	13 April 2021
This document was ratified by:	Name of committee/group	Date
	Policy Working Group	9 March 2021
An equality analysis was completed on this document on:	April 2021	
Document type	Public	
FOI Clause (Private documents only)	N/A	

Change record

Version	Date	Amendment details	Status
4	05 Apr 2017	Section 3.6 Special Clothing has been amended following advice from the Equality and Diversity team.	Withdrawn
4.1	30 Oct 2017	3.2.1 reworded re visible tattoos	Withdrawn
4.2	13 April 2021	3.1.7 – reference to requirements regarding belts within forensic services has been included 3.1.2 – additional information regarding no logos on clothing / shoes. Appendix 3 moved into body of procedure as Table 3 and updated 3.1.4 – reference added regarding requirement to wear uniform or PPE due to infection control measures 3.1.7 Section updated to include reference to uniforms and cultural / religious beliefs as well as guidance relating to changing in / out of uniforms	Published

		3.1.8 - new section regarding uniforms including new Appendix 3	
4.2	16 Jul 2024	Extended review date from 13 Apr 2024 till 30 Nov 2024.	Published
4.2	Nov 2024	Extended review date to the 31 May 2025	Published

Appendix 1 - Equality Analysis Screening Form

Please note; The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.	Human Resources				
Policy (document/service) name	Dress Code				
Is the area being assessed a...	Policy/Strategy	<input type="checkbox"/>	Service/Business plan	<input type="checkbox"/>	Project
	Procedure/Guidance			X	Code of practice
	Other – Please state				
Geographical area covered	Trustwide				
Aims and objectives	To provide an outline with regards to acceptable standards of dress and general appearance ensuring compliance with Health & Safety, Control of Infection and the Equality Act				
Start date of Equality Analysis Screening (This is the date you are asked to write or review the document/service etc.)	March 2020				
End date of Equality Analysis Screening (This is when you have completed the equality analysis and it is ready to go to EMT to be approved)	April 2021				

You must contact the EDHR team if you identify a negative impact.

1. Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?					
Staff, managers, service users and members of the public					
2. Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups below?					
Race (including Gypsy and Traveller)	No	Disability (includes physical, learning, mental health, sensory and medical disabilities)	No	Sex (Men, women and gender neutral etc.)	Yes/No
Gender reassignment (Transgender and gender identity)	No	Sexual Orientation (Lesbian, Gay, Bisexual and Heterosexual etc.)	No	Age (includes, young people, older people – people of all ages)	Yes/No
Religion or Belief (includes faith groups, atheism and philosophical belief's)	Yes	Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave)	No	Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners)	Yes/No
<p>Yes – Please describe anticipated negative impact/s</p> <p>No – Please describe any positive impacts/s</p> <p>The implementation of this procedure would ensure that the appropriate professional image of the Trust is portrayed amongst employees, service users and members of the public whilst complying with infection control guidance, hygiene, the health and safety of both employees' and service users, as well as reducing the risk of assault.</p> <p>There is a potential negative impact should the procedure be infringed unnecessarily or excessively upon anyone who falls within a protected characteristic, and this could apply to those whose cultural / religious beliefs require certain dress, for example the wearing of hijab. Consideration of cultural / religious beliefs alongside IPC and health and safety requirements of staff, workers, service users and members of the public will need to be managed appropriately and reviewed on individual case basis. Employees would have the opportunity to submit a</p>					

grievance in line with the Grievance Procedure if they felt that this procedure was being applied inappropriately.

3. Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.? If 'No', why not?	Yes	X	No	
Sources of Information may include: <ul style="list-style-type: none"> Feedback from equality bodies, Care Quality Commission, Equality and Human Rights Commission, etc. Investigation findings Trust Strategic Direction Data collection/analysis National Guidance/Reports 	<ul style="list-style-type: none"> Staff grievances Media Community Consultation/Consultation Groups Internal Consultation Research Other (Please state below) 			
4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Sex, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership				
Yes – Please describe the engagement and involvement that has taken place				
The procedure has been developed through the Policy Working Group which is made up of staff side representatives, managers and HR. The procedure has been reviewed by the nursing directorate and IPC as well as Trust wide consultation in respect of the introduction of uniforms in inpatient settings. Managers from EFM have reviewed the accuracy of information in relation to their staff as have the AHP				

professional leads. In addition, input has been provided by the Equality, Diversity and Human Rights team, particularly in relation to the impact of new sections on uniforms in terms of cultural dress/ religion / belief.

No – Please describe future plans that you may have to engage and involve people from different groups

5. As part of this equality analysis have any training needs/service needs been identified?

No	Please describe the identified training needs/service needs below
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A training need has been identified for;

Trust staff	No	Service users	No	Contractors or other outside agencies	No
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Make sure that you have checked the information and that you are comfortable that additional evidence can be provided if you are required to do so

If you need further advice or information on equality analysis, the EDHR team host surgeries to support you in this process, to book on and find out more please contact the team.

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Y	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Y	
2.	Rationale		
	Are reasons for development of the document stated?	Y	
3.	Development Process		
	Are people involved in the development identified?	Y	
	Has relevant expertise has been sought/used?	Y	
	Is there evidence of consultation with stakeholders and users?	Y	
	Have any related documents or documents that are impacted by this change been identified and updated?	Y	
4.	Content		
	Is the objective of the document clear?	Y	
	Is the target population clear and unambiguous?	Y	
	Are the intended outcomes described?	Y	
	Are the statements clear and unambiguous?	Y	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Y	
	Are key references cited?	Y	
	Are supporting documents referenced?	Y	
6.	Training		
	Have training needs been considered?	Y	
	Are training needs included in the document?	Y	

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Y	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Y	
	Have Equality and Diversity reviewed and approved the equality analysis?	Y	
9.	Approval		
	Does the document identify which committee/group will approve it?	Y	
10.	Publication		
	Has the document been reviewed for harm?	Y	
	Does the document identify whether it is private or public?	Y	
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	

Appendix 3 – Uniforms for clinical staff working in Inpatient settings

Staff Role	Uniform Colour
Modern Matron	Navy tunic with light blue trim/black trousers In ALD services : Navy polo shirt – with TEWV logo and printed text ‘Modern Matron’
Ward Manager	Navy blue tunic with white trim/ black trousers In ALD services : Navy polo shirt – with TEWV logo and printed text ‘Ward Manager’
Clinical Lead	Royal blue tunic with white trim/black trousers – In ALD services: Royal blue polo shirt with TEWV logo
Staff Nurse	Light blue tunic with white trim/black trousers In ALD services: Light blue polo shirt with TEWV logo
Nursing Associate	Bottle green tunic/black trousers In ALD services: Bottle green polo shirt with TEWV logo
Associate Practitioner	Aquamarine tunic/black trousers In ALD services: Aquamarine polo shirt with TEWV logo
Non Registered staff (HCA)	Black tunic with white trim/black trousers In ALD services: Black polo shirt with TEWV logo
Social Work staff (Forensics)	White polo shirt with TEWV logo and printed text “Social Worker”/ black trousers
Housekeeper/Porter	Aqua tunic with white stripe/black trousers
IPC Team	Red tunic/navy trousers
Occupational Therapist	White polo shirt with TEWV logo and printed text “Occupational Therapy” /bottle green trousers
Occupational Therapy Assistant /	White polo shirt with TEWV logo and printed text “Occupational Therapy

Technical Instructor	Assistant or Technical Instructor” /bottle green trousers
Physiotherapist	Navy polo shirt or white tunic with navy trim with TEWV logo and printed text ‘Physiotherapy’ /navy trousers
Physiotherapist Assistant	Grey polo shirt with TEWV logo and printed text ‘Physiotherapy Assistant’ /navy trousers
Dietician	White tunic with purple trim/ black trousers In ALD services: White polo shirt with TEWV logo and printed text ‘Dietetics’
Speech and Language	White tunic with red trim/ black trousers In ALD services: Red polo shirt with TEWV logo and printed text ‘Speech and Language Therapy’
Pharmacist	To be confirmed
Pharmacy Technician	To be confirmed
Pharmacy Assistant	To be confirmed
Bank Staff Nurse	Pale blue polo shirt with TEWV logo and black trousers
Bank HCA	Black polo shirt with TEWV logo and black trousers