



UNIFORM AND DRESS CODE POLICY

DATE APPROVED:	17 January 2020
APPROVED BY:	Operational Management Team
IMPLEMENTATION DATE:	3 April 2020
REVIEW DATE:	May 2022
LEAD DIRECTOR:	Director of Strategic Operations & Digital Integration
IMPACT ASSESSMENT STATEMENT: No adverse impact on Equality or Diversity	

Document Reference Number:	OPS – Policy – 017 (Version 3)
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Change Control:

Document Number	OPS – Policy - 017
Document	Uniform and Dress Code Policy
Version	Version 3
Owner	Director of Strategic Operations & Digital Integration
Distribution list	All
Issue Date	3 April 2020
Next Review Date	May 2022
Author	Logistics Manager

Change History:

Date	Change	Comment/Approved by
Previous Change History available on v1 of document		
17 May 2016	To be presented to OMT	
9 June 2016	Suggested changes made and agreed	Policy Group
6 July 2016	Shared with group	Regional Partnership Forum
Renumbered from OPS – Policy 017 due to change in document referencing procedure.		
12 December 2019	Amendments to Rank Structure changes and epaulettes 8.8 Pin badges and brooches 8.10 Legacy uniform 18.2 Bare below the elbow 19.2 Hair colouring 18.12, 8.13, 8.14 and 8.15 Green Polo Shirts Rank/Designation epaulettes 111 department additions	Director of Strategic Operations & Digital Integration
December 2019	Discussed	Operational Management Team
17 January 2020	Shared with group and agreed	Policy Group

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1 Introduction

- 1.1** West Midlands Ambulance Service University NHS Foundation Trust (the Trust) considers the way employees dress and their appearance is significant in portraying a professional image to all users of its services, whether patients, visitors, clients or colleagues.

2 Scope

- 2.1** This policy applies to all employed staff in the Trust on substantive, fixed term, secondment contracts; interim appointments and individuals on the bank register.

3 Statement of Intent

- 3.1** The Trust is committed to providing an adequate and appropriate uniform to all staff required to wear it. The uniform should be of a suitable type that conforms to current legislation and regulations, pertaining to Ambulance Services.
- 3.2** This Policy will embrace other corporate image issues such as non-wearing of jewellery and the use of personal equipment and will supersede existing policies and procedures regarding dress/uniform, in line with current Health and Safety Legislation and Infection Prevention and Control Guidance.

4 Equality & Human Rights Impact Statement

- 4.1** We recognise, acknowledge and value difference across all people and their backgrounds. We will treat everyone with courtesy and consideration and ensure that no-one is belittled, excluded or disadvantaged.
- 4.2** The Trust will take a sensitive approach when this affects dress and uniform requirements. However, priority will be given to health and safety, security and infection control considerations. Risk assessments will take place as appropriate.

5 Aims

- 5.1** The aim of the uniform policy is to protect staff and where appropriate display the Trust's corporate image so that the public and other organisations may readily identify Trust staff by their skills or rank.

6 Legal Requirements and Relevant Guidance

- 6.1 The main legislation that affects an organisation's response to the transmission of infections via uniforms or work wear is outlined below:
- 6.1.1 **The Health and Safety at Work etc Act 1974 sections 2 and 3.** Section 2 covers risks to employees and Section 3 to others affected by their work e.g. patients.
 - 6.1.2 **The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH).** Further information about COSHH and its applicability to infection control can be found at <http://www.hse.gov.uk/biosafety/healthcare.htm>
 - 6.1.3 **Management of Health and Safety at Work Regulations 1999** requires the trust to apply an effective risk management process to the selection, procurement and provision of uniform to ensure any associated risks are controlled and reduced effectively. This extends the cover to patients and others affected by microbiological infections and include control of infection measures.
 - 6.1.4 **'Securing Health Together'**, the Health and Safety Executive (HSE) long term strategy for occupational health, which 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.
 - 6.1.5 The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance.
 - 6.1.6 ***Winning Ways: Working together to reduce Healthcare Associated Infection in England*** Report from the Chief Medical Officer, Department of Health Publications, December 2003.
 - 6.1.7 Department of Health Uniforms and workwear: Guidance on uniform and workwear policies for NHS employers
 - 6.1.8 **Personal Protective Equipment (PPE)**, (EC Directive) Regulations 1992 as amended by *SI 2002*, requires the trust to make formal assessment of the personal protective equipment needs of their employees and supply suitable and sufficient PPE.

7 Trust Accountabilities and Responsibilities

- 7.1 The **Trust Board** is responsible for the effectiveness of this policy and procedures and for ensuring sufficient resources are available to support the implementation
- 7.2 **The Quality Governance Committee** is responsible for:

- Monitoring the effectiveness of this policy and procedures and for ensuring the Trust Board is kept informed.
- Monitoring sub committee's effectiveness in management of risks including at local level (LP&G and IP&C)
- Monitoring of high risks on the Trust risk register
- Monitoring of Action Plans to mitigate risks

7.3 Health, Safety and Risk Management Committee will

- Ensure a Biennial review of the policy and guidance is undertaken and scrutinised prior to implementation of new policy.
- Monitor all risks on the Trust risk register

7.4 The Uniform Working Group will

- Perform a Biennial review of this policy and guidance in accordance with latest research and guidance
- Monitor compliance with the policy
- Review all associated risks with Uniform and PPE

7.5 The Strategic Operations Director:

The Strategic Operations Director is the delegate Lead with responsibility for provision of safe, high quality uniform, suitable PPE and setting policy for the Trusts dress code.

7.6 All Managers/Supervisors:

All Managers and Supervisors are responsible for ensuring that:

- All staff under their responsibility are aware of the requirements to apply and maintain PPE and understand the Trust Policy on Uniform and Dress code
- This policy and procedure is fully applied within their area of responsibility.
- All new employees are aware of the required standards of this policy during the induction process.
- Staff are aware that failure to adhere to the Trusts procedures for the application of PPE and the Trusts standards of dress and appearance may constitute misconduct and result in initiation of the Trusts Disciplinary policy.
- Uniformed staff leaving the Trust return all issued uniform and PPE in accordance with: - Policy for Employees Leaving the Trust.
- All uniform is to be stored securely prior to the issue to new members of staff and prior to the return of old uniform to the Uniform Manager.

7.7 Staff Responsibility:

All staff are responsible for:

- Ensuring uniform is to be kept clean, ironed (if appropriate) and fit for use at all times. Loss of uniform must be reported to the line manager immediately and completion of an WMAS ER54, the Uniform Manager is to be included.
- Making themselves familiar with the requirements of this policy and ensuring compliance with it.

8 Uniform Management

- 8.1 On entry into the Trust, staff will be issued with an initial issue of uniform, based on the requirements of the area in which they work and pro rata'd against whole time equivalent
- 8.2 A list of uniform and appropriate personal protective equipment (PPE) issued to staff is attached as Appendix 2.
- 8.3 Uniform is to be worn during working hours only, therefore all markings i.e. crests, and logos should be covered up outside working hours.
- 8.4 Uniform must not be worn for any purpose other than that which is related to the Trust's business, unless the line manager has granted prior permission.
- 8.5 A database of all uniform issued to individual staff in each calendar year will be maintained by the Uniform department.
- 8.6 Where individuals require uniform to be specially made to fit their specific needs, they need to contact the Uniform Manager to arrange for one of the Trust uniform sizing sets to be made available to the individual. Individuals are to be made aware that any 'Special' measurement uniform requested will take long than the normal 14 days to be issued.
- 8.7 Uniform must be covered when travelling to and from work and should not be worn outside of the guidance issued within this policy.
- 8.8 Staff should not wear numerous badges or other adornments. Maximum of two badges (e.g. denoting professional qualifications or affiliations) may be acceptable; too many looks unprofessional and may cause injury when moving patients. Pin badges or brooches are not to be attached to lanyards or any position on Trust uniform that may cause harm to patients.
- 8.9 Where a member of staff's religion calls for cloth head coverings, etc the principle is the Trust's corporate colours will be issued.
- 8.10 West Midlands Ambulance Service University NHS Foundation Trust (WMAS) uniformed staff are **ONLY** to wear uniform that has been procured and issued by the Trust uniform department. All uniform items are to be procured via the National Ambulance Service (NAS) uniform contract or authorised suppliers to the Trust. The only exception to the procurement/issue of WMAS uniform via the Trust uniform department, will be uniform worn by the Hazardous Area Response Team (HART), who will be issued specialist uniform procured by the National Ambulance Resilience Unit (NARU). Legacy issued uniform may be worn until an official notice has been issued for any items to be removed from service. All issued uniform must conform to health and safety regulations and infection, prevention and control guidance.

- 8.11** The uniform manager is to publish bi-annually a uniform wearer bulletin which will identify any changes to processes, uniform style and other salient points.
- 8.12** Issued green shirts are only to be issued and worn by those uniformed staff that have been designated to do so – Refer to Appendix 2 to this policy. Green shirts issued are in addition to the NAS green shirt and staff are maintain the correct number of both styles of shirts, in line with the Policy allocation scale.
- 8.13** Shirts must always be tucked into the trousers and under no circumstances are the shirts to be worn outside of the trousers.
- 8.14** Restrictions to when the shirt can't be worn as follows:
 - 8.14.1** When representing the Trust at Court.
 - 8.14.2** Meetings with external bodies.
 - 8.14.3** When instruction has been issued by your manager that a shirt is not to be worn.
- 8.15** Issued Trust uniform must not be worn with a mixture of personal clothing other than a jacket or coat that is being worn when travelling to and from your place of duty. Mixed dress does not portray the Trust corporate image and personal clothing may not comply with both infection, prevention and control or health and safety policies.

9 Non-Uniformed Staff

- 9.1** It is important to maintain a professional appearance whilst adopting a dress code that is practical, functional and comfortable.
- 9.2** These staff will not be issued uniform other than PPE where their job requires it. Whilst carrying out duty for the trust, it will not be acceptable for staff to wear:
 - 9.2.1** Denim of any description.
 - 9.2.2** Sportswear (including trainers).
 - 9.2.3** Clothing which exposes the midriff, or any other inappropriate parts of the body.
 - 9.2.4** Clothing which does not adhere to principles of decency and appropriateness for the role, or which may cause offence.

10 Personal Protective Equipment

- 10.1** The Personal Protective Equipment at Work Regulations 1992 as amended by *SI 2002*, requires that equipment must be supplied and used at work wherever risks to health and safety cannot be adequately controlled by other means. Such equipment, including safety helmets, high visibility jackets and boots. Should be worn at appropriate times, as per guidance provided with PPE and Trust policy.
- 10.2** All protective clothing should only be used for the purpose intended. It must be maintained in good condition and checked regularly, by individuals.
- 10.3** Where it is a condition of employment that staff use safety equipment or clothing this must be complied with. Any issues arising, or problems encountered in connection with minority groups, where particular safety or infection prevention and control requirements may conflict with religious beliefs should be referred to the Senior Operation Manager.
The Director of Strategic Operations & Digital Integration will ensure suitable risk assessment and subsequent actions are completed.
- 10.4** Where safety helmets and high visibility jackets are issued as part of PPE, they must be worn at all times where there is a risk of injury to staff. This is especially important for safety reasons e.g. at scene of the incident or in confined spaces, to help avoid staff sustaining injury in the course of their duty.
- 10.5** Where a member of staff has a disability or a specific condition which prevents the wearing of standard issue footwear, the Trust will fund the purchase and supply of alternative uniform. Footwear is to be sourced by the Uniform Manager which is to be supported by medical certification. All alternative uniform is to be risked assessed the Regional Risk Manager to ensure that this footwear is suitable for the role of the wearer and Trust. Only safety wear that meets the Trust specification will be procured and issued.
- 10.6** Where necessary a referral to occupational health will be offered to individuals to assist the Trust in supporting individuals effectively. This will include an appointment with a podiatrist to ensure that the alternative footwear meets the requirement of both the individual and safety footwear specifications.
- All alternative footwear selected for staff must meet the current standard footwear applied by the Trust and must be assessed suitable, prior to use, by the Regional Risk Manager. All alternative footwear must be supported by manufacturer's technical specification to assist in the undertaking of the assessment.
- 10.7** It is the responsibility of the Trust to provide suitable PPE in accordance with the outcomes identified in any relevant risk assessments completed by the Trust.

- 10.8** Out of hours emergency stores will be sited regionally which will be stocked with PPE to an agreed stock list. These stores will be monitored by the Uniform Manager on a monthly basis to ensure that stock levels are maintained. Operational Managers (OM) will be responsible for the day to day management of these stores and submit a monthly report to the Uniform Manager. These stores will only hold and issue safety footwear, high visibility jackets and safety helmets (To be issued on a temporary loan basis only).
- 10.9** Staff that require an emergency issue of PPE during either pre-shift, during shift or after shift are to contact the OM. They will direct the member of staff to the nearest emergency PPE store, where on completion of the correct paperwork they will be issued with the requested uniform or footwear.
- 10.10** Upon receipt of the monthly stock check, the Uniform Manager will ensure that all stock levels are kept to the agreed levels for each designated hub and conducted on a quarterly basis.

11 Cleaning and Infection Control

- 11.1** There is no conclusive evidence that uniforms and workwear play a direct role in spreading infection, however, the clothing worn by staff should facilitate good practice and minimize the risk to patients, therefore all uniform worn by Operational staff should be washable at 60 degrees, which is the recommended temperature to remove the majority of pathogens.
- 11.2** The way staff dress influences patient perception of standards, so uniforms need to be clean at all times, with a clean uniform worn each shift. All staff should ensure they have a spare set of uniform available to change into should their uniform get soiled during a shift.
- 11.3** The DH Working Group on Uniforms and Laundry has put together an evidence base on the wearing and laundering of uniforms. *Uniforms and work wear, an evidence base for developing local policy* (DH, 2007).
- 11.4** Staff must change as soon as practicably possible if uniform or clothes become visibly soiled or contaminated.
- 11.5** Uniform shirt and trousers can be washed at a maximum temperature of 60°C as per Infection Control Policy and ironed as stated in the care label. A wash for ten minutes at 60°C, removes most micro-organisms.

12 Minor Repairs

- 12.1** Minor repairs i.e. loose stitching, small holes, buttons etc will be the responsibility of the member of staff to rectify. For any other repairs to the uniform and damaged PPE the Uniform Manager must be contacted to discuss repairs/replacement options.
- 12.2** Managers will be required to sign off any uniform that is unserviceable and support requests for replacement.

13 Lost Uniform

- 13.1** When uniform is lost, or mislaid staff members are required to inform their Managers immediately.
- 13.2** An Incident Report Form (ER 54) must be completed and reported to the Uniform Manager.

14 Destroying Trust Uniforms

- 14.1** All non-reusable uniform with ambulance insignia should be returned to the uniform store and destroyed by the Uniform Manager, as per procedure.
- 14.2** All other clothing can be recycled via the Uniform Manager.

15 Termination of Employment

- 15.1** All uniform and personal protective equipment (PPE) issued must be returned, clean and in an appropriate condition to the line manager on leaving the Trust. All staff must complete a checklist for the return of uniform. Appendix 4 Return of Uniform Checklist Refer to the 'Leavers Procedure' available on the Trust Intranet.

16 Jewellery restrictions for staff involved in direct patient care

- 16.1** Should staff decide to wear jewellery etc. they must be aware that they do so at their own risk and the Trust will not accept liability for personal injury caused as a result of wearing such items.

16.2 Bare Below the Elbow

The Trust supports the Department of Health led initiative which has resulted in the introduction of “bare below the elbows” (BBE) into healthcare organisations, this initiative aspires to remove the barriers to hand decontamination and reduce the risk of infection from contaminated sleeves and jewellery.

The prevention and management of the risk of healthcare associated infections (HCAIs) is an essential part of maintaining patient safety and fundamental in any healthcare setting. Therefore, items that could compromise patient or staff safety during care must not be worn.

Prior to commencing shift, all operational staff are required to be compliant with the principles of bare below the elbows.

Bare Below the Elbow should be adopted by staff who at any given time may be called upon to enter clinical areas and or provide treatment to patients.

This includes the removal of:

- Wrist watches
- Wrist and finger jewellery – apart from one plain ring
- Long nails – nails should be natural and short in length
- Nail varnish (clear and coloured)
- Nail extensions including gel nails
- Nail adornments
- Long sleeves (by shortening sleeves or wearing sleeve protectors)

16.3 Trust exemptions to BBE in the Pre-Hospital Setting

It is acknowledged that long sleeves are required as part of personal protective equipment (PPE), such as wearing high visibility jackets, air ambulance suit or other Trust issue uniform. The Trust offers PPE such as sleeve protectors and should be worn during patient contact.

Shell/fleece/jacket sleeves will easily become contaminated and must not be worn when carrying out patient care activities unless adverse weather conditions dictate otherwise, in this instance sleeves should be rolled up above the elbow or sleeve protectors must be worn.

Exceptions apply for cultural/religious artefacts including one plain wedding band. If religious/cultural artefacts are worn, these must be covered by the donning of gloves and sleeve protectors for all patient contact.

When entering healthcare premises staff are expected to comply with bare below the elbows and ensure sleeves are rolled up or long sleeve coats/jackets are removed, unless transferring a patient whose condition presents an immediate threat to life.

Before a shift of clinical work begins, cuts and abrasions must be covered with waterproof dressings. Fingernails should be kept short, clean and free from nail polish. False nails and nail extensions must not be worn by clinical staff. EPIC2G guidelines 2007 (National evidence-based practice in Infection Prevention and Control).

16.4 Long sleeved clothing also restricts effective hand hygiene, so long sleeves must be either removed or rolled up to perform adequate hand washing.

16.5 Only plain wedding bands should be worn at work, as stoned and etched rings can harbour micro-organisms

If earrings are worn, these should be discreet studs. All other body piercings must be out of public view. There is an increased risk of infection and injury in any pierced area.

Necklaces, ties and lanyards should not be on view for direct patient care, if they are worn, they should be out of patients view underneath clothing.

17 Personal Hygiene

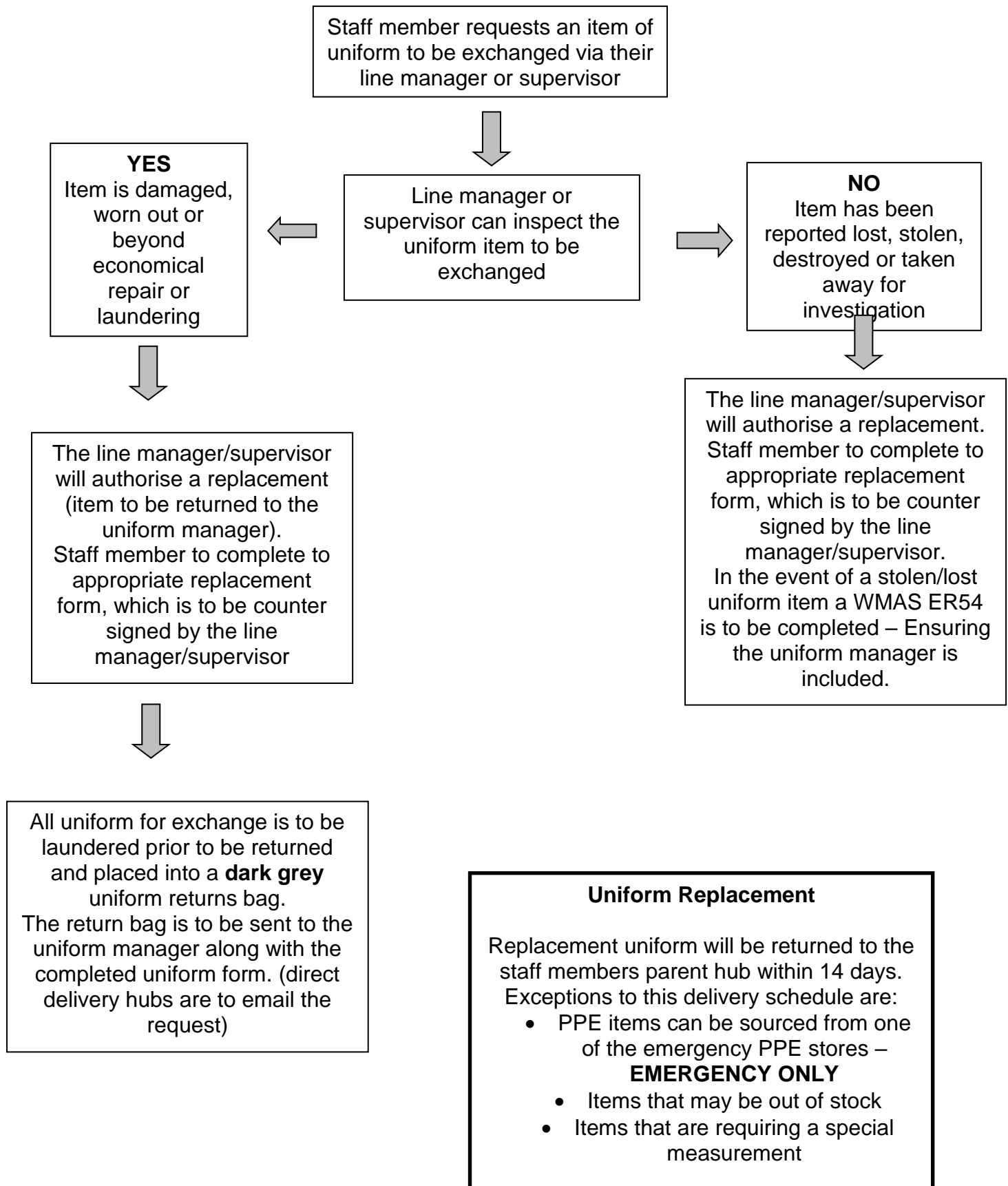
17.1 The Department of Health Uniform and Work wear guidance recommends that neither false nails nor nail varnish is worn by clinical staff. They suggest it is good practice for staff to have clean, short nails as these are more hygienic.

- 17.2** The Department of Health Uniform and Work wear guidance recommends that long hair is tied back. This is to prevent hair from falling forward into the face and to prevent it from becoming entangled whilst dealing with a patient., Hair should only be coloured with a maximum of two natural hair colours.

18 Monitoring and Review of this Policy

- 18.1** The Policy will be routinely reviewed for its effectiveness at least every two years and/or when there are changes in the relevant legislation by the Uniform Manager and reviewed by the Operational Management Team (OMT).
- 18.2** The Policy will be monitored for its effectiveness through the following:
- Operation Management Team (OMT)
 - Tender Process
 - Uniform Working Group

Uniform Fair, Wear and Tear Replacement Procedure











WEST MIDLANDS AMBULANCE SERVICE UNIVERSITY NHS FOUNDATION TRUST
UNIFORM AND DRESS CODE POLICY

Appendix 2

Designation	Operations Officer		EOC Officer		Operations		PTS		EOC		Support Staff		
	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time	
Uniform Item													Remarks
Safety Helmet	1	1			1	1							
High Visibility Jacket	1	1			1	1	1	1			1	1	
Safety Boots or Shoes (per pair)	1	1			1	1	1	1			1	1	
Keela Munro Jacket	1	1			1	1	1	1					PTS – Road Staff Only
Soft Shell Jacket	1	1			1	1	1	1					
Green Jumper			1	1					1	1			
Shirt Formal (White)	5	3											Crown & Pip Officer and above Only
Shirt Operations (Green)	5	3			5	3	5	3	5	3			
White T Shirts	5	3			5	3	5	3					
Trousers (Green)	3	2	3	2	3	2	3	2	3	2			
Woollen Hat	1	1			1	1	1	1			1	1	Support Staff – Navy Blue
Skirt (Green)									*	*			* Pro-rata against trouser allocation
Green Shirts	3	3			3	3	3	3					Crown and below Officers Only
Gloves (per pair)	1	1			1	1	1	1			1	1	
Belt	1	1	1	1	1	1	1	1	1	1	1	1	
Epaulettes (per pair)	4	4	4	4	4	4	4	4					As per designation/rank
Jacket Designation Slides	2	2			2	2	2	2			1	1	Rear Hi Vis / Keela Jacket
Tie or Cravat	2	1	2	1									
Navy Blue Fleece											1	1	Support Staff – Navy Blue
Navy Blue Shirt											5	3	
Navy Blue Trousers											3	2	
Navy Blue Waterproof Coat											1	1	
Waterproof Trousers											1	1	VPOs Only
Navy Blue Round Neck T-Shirts											5	3	Mixture of polo shirts & t-shirts up to the full entitlement – Mechanics Only
Navy Blue Sweatshirts											2	1	Mechanics Only
Navy Thermal (Shirt & Leggings)											1	1	VPOs Only - One set

Appendix 3 Rank/Designation Epaulettes

RANK/TITLE	EPAULETTES	Headdress and Gorgets
CHIEF EXECUTIVE		Two row of oak leaves Oak leaf gorgets
DEPUTY CHIEF AMBULANCE OFFICER		One row oak leaves Line gorgets
ASSISTANT CHIEF AMBULANCE OFFICER		One row oak leaves Line gorgets
Head of Training		Gold band No gorgets
Senior Operations Manager		Senior Operations Manager (SOM) Clinical Leads HART Manager PTS Senior Operations Manager EOC Commanders SOC Commander Air Ops/Merit Manager Tactical Incident Commander
Assistant Senior Operations Manager Emergency Planning Officer		Assistant Senior Operations Manager PTS Operations Manager Education Training Officer Emergency Planning Officer HART Training Manager EOC Duty Managers Community Response Managers Air Ops/Merit Support Manager

Operations Manager		PTS Locality Supervisor EOC Call Controllers Driving Instructors HALO
HART Team Leaders		HART Team Leaders EOC Caller taker Supervisor (without Paramedic) Air Desk Supervisor (without Paramedic) Incident Command Desk Supervisor Hospital Desk Supervisor

Other Titled Epaulettes:	
Critical Care Paramedic	
Emergency Care Practitioner	
Paramedic	
Technician	
Student Paramedic	
Emergency Care Assistant	
PTS	
High Dependency	
Clinical Team Mentor	
Doctor – Red Epaulette	
Nurse	
Trainee Technician	
PTS Mentor	EOC Only
Assistant Call-Taking Supervisor	EOC Only
Call Assessor	EOC Only
Emergency Medical Dispatcher	111 Control only
Health Advisor	111 Control only
Nurse	111 Control only
Advanced Paramedic	111 Control only
Advanced Nurse	111 Control only
Pharmacist	111 Control only
Mental Health Nurse	111 Control only
Dental Nurse	111 Control only
General Practitioner	111 Control only
Clinical Supervisor	111 Control only
HA Supervisor	111 Control only

Appendix 4 Return of Uniform Check List

Return of Uniform Check List			
<p>TO BE COMPLETED BY SENIOR MANAGER, MANAGER OR DEPARTMENTAL HEAD</p> <p>Please complete with members of staff who are leaving WMAS or are transferring to another part of the Service, eg PTS to EOC and requires the issue of a new uniform.</p>			
Managers Name:		Signature:	
Individuals Name:			
Job Title:			
Current Station/Location/Department:			
New Hub /Location/Department			
Rank/Grade:			
Date commenced with WMAS:			
Length of Service:			
Leaving Date/Transfer Date:			
Uniform to be returned which carries the WMAS/NHS Crest			
Description	Returned QTY	Returned No	Destroyed Y/N
High Visibility Jacket			
Soft Shell Jacket - Green			
Munroe Jacket - Green			
Woolley Hat - Green			
Gloves			
Trust Shirts			
Safety Helmet & Bag			
Fleece - Blue			
3 Season Jacket - Blue			
Shirts - Blue			
Woolley Hat - Blue			
Jumper - Green (Control Staff)			

Appendix 6 Procedure for the issuing / Replenishing of Personal Protection Equipment (PPE) on designated Operational sites

PPE should be available to all operational, on occasions PPE previously issued to staff gets damaged, lost, stolen or other agencies such as the Police confiscate items of PPE from staff to facilitate an ongoing criminal investigation.

1. If PPE has been damaged beyond use, lost, stolen or items confiscated as outlined above new PPE should be issued in the following manner:
 - If between Mondays to Friday between 0730-1530hrs replacement items can be drawn by contacting the Uniform manager currently based at Anchor Brook Distribution Centre Tel : 01384 246613, or uniform@wmas.nhs.uk who will make the necessary arrangements to provide replacement.
 - If it is outside of normal office hours replacement can be sourced from satellite stores based at Dudley, Erdington, Coventry, Worcester and Stoke via the appropriate managers.
 - Uniform held at these stores is only to be issued where it is deemed as an emergency, and not purely on a fair, wear and tear basis.
2. A record of the issue is to be done by completing the following form:

WMAS UNIFORM – EMERGENCY PPE FORM

- This information should be forwarded to the Uniform Manager via email immediately following the issuing of the replacement PPE to facilitate the replacement process to the satellite stores. If the Uniform Manager is not advised no replacement stock will be issued.
3. The Uniform manager will maintain an electronic database of emergency stock located at satellite sites and replenish on notification of issue. Also, the Uniform Manager will keep an electronic database of replacement PPE issued to individual staff members.
 4. It should be remembered that PPE issued from satellite sites is an Emergency facility only and whenever possible replacement items should be drawn from the main stores at Anchor Brook via the Uniform Manager.
 5. A monthly stock check of all Emergency PPE stores is to be conducted, with stock figures being returned to the Uniform Manager. Every 3 months the Uniform Manager will conduct a stock check at the 5 Emergency PPE stores; this is in line with the Trusts Standing Financial Instructions (SFI).