PURPOSE:
This policy describes OHSU Healthcare’s expectations regarding professional appearance. “Professional appearance” will henceforth be used to describe dress, grooming, hygiene, body adornments or any combination thereof (this is not intended to constitute an all inclusive list).

PERSONS AFFECTED:
This policy applies to all OHSU Healthcare workforce members.

POLICY:
Professional appearance plays an important role in achieving the professional and respectful image expected by OHSU’s internal and external customers, to include patients, their families, visitors and coworkers. To manage diverse expectations in our environment, OHSU expects employees to dress in a manner appropriate to the jobs they perform.

RESPONSIBILITIES:
It is the responsibility of all persons working in any OHSU Healthcare setting to comply with all aspects of this policy.

PROCEDURES:

1. Each individual staff member is responsible for professional appearance that contributes to patient, family, visitor, co-worker or other stakeholders’ experience of an orderly, clean, safe and professional atmosphere for care as set forth in this policy.

2. Determining compliance with this policy and enforcing consistent application of its provisions are the responsibility of each supervisor.

3. The Chief Operating Officer, or designee, is responsible for reviewing and approving requests for exception to this policy (e.g., new employee requiring time to transition, etc.).

4. Meeting professional appearance requirements is a condition of employment for all OHSU Healthcare employees. Individuals who have a practice or belief that conflicts with this professional appearance policy may contact OHSU’s Affirmative Action Equal Opportunity Department (AAEO) to request a religious or cultural accommodation. The link to AAEO’s website, including a religious accommodation request form, is http://www.ohsu.edu/aaeo/

5. Department specific appearance expectations may be established as needed by Department Directors/Clinic Managers based on the particular work requirements of their areas.

6. Uniform or other dress requirements for staff covered by collective bargaining agreements must be reviewed and approved in advance of implementation by Human Resources.

7. **Professional Appearance Requirement**
   a. **Identification Badges**
      i. Identification badges must be worn at all times while at work in a visible, upright position on a necklace ID chain (lanyard) or suitable apparel fastener. Holders must be kept clean. Identifying
information must be visible to others with whom the employee interacts (e.g., name tags should be free of any material that covers the identification and photo of the employee). TriMet stickers are allowed on the name tag and one additional adornment (e.g., rose award, certification pin). Rose emblems or other employment related recognition may be affixed to badge holders in areas that do not preclude identity visibility (e.g., the back of plastic sleeves, lanyards, etc.). As always, germ carrying material should be laundered, wiped down or otherwise kept clean to avoid adverse consequence to patient or co-worker health and safety.

b. Clothing
   i. Clothing must be suitable to the work performed and must be clean, neat and free of wrinkles. For purposes of this policy, dress common in corporate or other business settings is generally acceptable for administrative and management positions not involved in the delivery of direct patient care. See Section VI below for requirements for those who provide care directly to patients.
   ii. Clothing which distracts from the orderly conduct of business with patients, family, and other staff is not permitted. Examples include:

   iii. Shorts
   iv. Skirts and culottes that are shorter than 3 inches above the knee
   v. See-through fabrics, and exposed undergarments
   vi. Sweatshirts and sweat pants
   vii. Clothing with logos or silk screen designs that are not acceptable for business settings (e.g., T-shirts with brand names)
   viii. Tank tops, halter tops, spaghetti straps
   ix. Denim
   x. Leggings or stretch pants
   xi. Patient gowns or bath robes, towels or blankets
   xii. Low-cut necklines or bare midriff-designed clothing
   xiii. Other distracting or unprofessional items as determined by management
   xiv. Shoes
       Footwear must be clean, safe, and appropriate for the individual's work assignment.

c. Accessories/Adornments
   i. Accessories such as jewelry and hair adornments must be clean and safe and appropriate for the environment.
   ii. Tattoos must be covered by clothing if possible. Individuals contemplating visible tattoos post-hire should consult with management in advance to determine possible job impact.
   iii. No proprietary insignias, pins or buttons can be worn unless they relate to activities sponsored by OHSU or are authorized under labor agreements. For purposes of this section, the wearing of union pins, insignia or buttons in the workplace is protected activity unless they impede OHSU’s right to maintain discipline, present a safety concern, have a message that has an inherent disruptive influence, contains controversial language which is susceptible to derisive and profane construction or is disruptive to harmonious employer-employee relationships and contact with the public. This is in no way meant to limit union members protected activity or their rights of association. Generally, determinations regarding the wearing of such items will be made in collaboration with Human Resources. For purposes of this paragraph, the right to maintain discipline relates to the employer’s reasonable attempts to ensure policy compliance. For example, directing removal of a button or insignia that is inherently disruptive (e.g., so controversial as to cause patient, coworkers, visitors or the general populous to react adversely to its viewing) is contrary to evidence-based care or safety guidelines if allowed to continue.

   iv. Sunglasses may not be worn indoors unless ordered by a physician.

d. Grooming and Personal Hygiene
   i. Staff must be physically clean, including hair and fingernails, and free of pervasive body odor.
   ii. Hair should be neat and clean. Individuals with styles that result in limited washing may be required to wear approved medical hair cover-ups.
iii. Hair color should be conservative and sensitive to the reactions of patients, families and coworkers.
iv. Hair sculpture (e.g., designs cut into the hair) is not appropriate for the work environment and is not allowed.
v. Beards, mustaches and sideburns must be neat and trimmed.
vi. Fingernail decorations should be safe, functional and customary for the work area.

8. **Direct Patient Care Additional Requirements**
   a. **Clothing**
      i. All staff involved in the delivery of direct care to patients must wear scrubs or a uniform. Shirts with collars are acceptable to wear with scrub pants; shirts without collars (i.e., tee shirts or other under coverings) must be covered with a lab coat or scrub jacket. Scrub shirts without collars are acceptable. Other health care organization logos on scrubs are not permitted.
      ii. Staff working in departments that have not been approved for hospital provided scrubs may not wear hospital provided scrubs (see Section VI-D-5 below). Disposable scrubs will be provided to members whose personal clothing is contaminated by blood or body fluids. The scrubs are available in all sizes from the Administrator on Duty.
      iii. A clean lab coat over business attire is appropriate for clinicians performing professional work related activities other than direct patient care (e.g., quality management, infection control reviewers).
      iv. Direct patient care providers’ clothing must be woven (i.e., cotton and nylon) and/or low-lint collecting (e.g., polyester blends). Materials that are woven and/or lint collecting (e.g., fleece vests that are 100% polyester, wool or acrylic sweaters or other approved cover-ups) must not be worn in direct patient care areas. Also prohibited for direct patient care providers:
         1. Sleeveless garments in direct patient care areas
         2. Scrub jackets and sweaters tied around the waist or hips
         3. Hooded sweaters or other cover-ups
         4. Hats of any kind unless required by department (e.g., Surgical or Procedural areas). See section II-A above regarding religious or cultural accommodations.
      v. Gender appropriate leg coverings must be worn (e.g., hosiery with dresses or skirts, socks with pants).
   b. **Shoes**
      i. Solid color soft soled, athletic with discreet trim or other quiet shoes may be worn in patient care areas.
      ii. Only shoes that do not present a safety hazard may be worn in patient care areas. Examples of unacceptable foot attire include, but may not be limited to, open-toed shoes and other designs that do not offer foot protection from physical, chemical and fluid hazards; footwear that can cause tripping, be caught in equipment or present a fall risk.
   c. **Accessories/Adornments**
      i. Dangling jewelry and loop earrings larger than a dime must not be worn in direct patient care areas.
      ii. Body piercing and related jewelry (except for suitable earrings) must be covered by clothing. Body piercings that cannot be covered must be without jewelry.
   d. **Grooming Requirements**
      i. Due to an increased incidence of reactive airway disease, employees are encouraged not to wear fragrances to work. Applied fragrances such as perfumes, aftershaves or other personal care products must not carry a pervasive odor if they are worn. Some work areas are defined as "fragrance free" because of the types of patients served there or because unit staff has allergic reactions to fragrances. In these work areas, no applied fragrances are allowed.
      ii. Hair longer than collar length must be pulled back and secured.
      iii. Beards, mustaches and sideburns may be required to be covered.
      iv. Fingernails are to be neatly manicured and not to exceed 1/4 inch beyond the fingertip. Employees having direct physical patient contact must not wear any type of nail enhancement (as recommended by the Center for Disease Control). This includes, but is not limited to, the
following: artificial nails, acrylcs, tips, wraps, appliqués, gels, or any additional items applied to
the nail surface with the exception of nail polish. Nail polish must be smooth and not chipped or
cracked.

v. Hospital provided and laundered scrub suits will be worn by staff as required in specific
departments. The following areas have approved employee use of hospital provided scrubs:
a. All Operating Rooms: Multnomah Pavilion, OHS, DCH, CHH and CEI
b. PACUs
c. Sterile Processing
d. Labor and Delivery
e. Interventional Radiology
f. Interventional Cardiac Services
g. Pharmacy
h. Pathology

vi. Surgical attire must be donned in a designated dressing area of the facility.
vii. Surgical attire must be changed daily or whenever it becomes visibly soiled, contaminated, or
wet. Worn scrubs must be deposited in the linen hampers and not be hung or placed in a locker
for wearing at another time.
viii. Scrub jackets are recommended to be worn to cover arms of non scrubbed personnel in the OR
suites to prevent bacterial shedding from bare arms.
ix. Hospital provided scrubs must not be worn off campus, unless it is in conjunction with providing
direct medical care.
x. Cover gowns or lab coats should be worn over scrub suits when staff area outside patient care
areas of the facility. If worn outside the assigned area, the scrubs must be changed before
entering semi-restricted or restricted areas.

xii. Other garments should be contained completely within or covered by the surgical attire.

9. UNIFORMS FOR AFSCME EMPLOYEES
   a. The same uniform may be required of each employee performing primarily the same duties, regardless
   of his/her department location.
   b. During the staff member’s trial service, the uniforms provided to him/her are the property of the
   organization and must be returned if the staff member resigns or is terminated during trial service. After
   trial service is successfully completed, the uniform(s) provided become the property of the staff
   member.

10. CONSEQUENCES:
   a. An individual staff member whose appearance is not in compliance with this policy may be sent home by
   any management representative or faculty, without pay, and only authorized to return to the work
   setting when his/her appearance has been adjusted to meet these requirements. All unpaid leave must
   be coordinated in advance with the appropriate HR Business Partner.

RELEVANT REFERENCES:

- Boyce, JM, Pitted, D. "Guideline for Hand Hygiene in Health-Care Settings". Centers for Disease Control, MMWR,
  October 25, 2002/51(RR16);1-44.
  & 3361.
- http://www.eeoc.gov/facts/backlash-employer.html (Questions and Answers about Employer responsibilities
  concerning the employment of Muslims, Arabs, South Asians, and SIKHS)

RELATED DOCUMENTS/EXTERNAL LINKS:
• Religious accommodation request form: http://www.ohsu.edu/aaeo/
• Identification Cards, No. 07-90-001 (Chapter 7: Facilities Management and Support Services)

TITLE, POLICY OWNER:

Human Resources Manager

APPROVING COMMITTEE(S):

• Nursing Practice Council
• ACMG (Ambulatory Care Management Group)
• Patient Care Operations
• Infection Control Department
• Legal Services

FINAL APPROVAL:

OHSU Healthcare Administrative Team

Superseded: 05/21/1998; 06/05/2000; 10/15/2003; 08/08/2008