

Policy:	Infection Safety and Personal Attire	
Owner of Policy:	Manager, Infection Prevention and Control Manager Occupational Health and Safety Services	
SLT Sponsor:	IVP Medical Education & Medical Affairs Senior Director, Chief Human Resources Officer	
Approval By:	Medical Advisory Committee	Date: April 14, 2010

Original Effective Date: 2010-04-14	Reviewed Date(s):	Revised Date(s):
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This policy applies to: LHSC

There is a similar/same policy at SJHC yes no
If yes: Policy Name: Infection Safety and Personal Attire
 Policy owner: Manager, Infection Prevention & Control
 Director, Occupational Health and Safety Services

POLICY

Based on a review of current infection control literature and best practice guidelines the following standards will be adopted for London Health Sciences Centre (LHSC).

LHSC recognizes that certain customs of its staff/affiliates may be protected under the Ontario Human Rights Code and will endeavour to take a sensitive individual approach when these considerations are required in conjunction with infection control considerations. It is also recognized that some departmental policies may be more stringent due to the associated risk in those departments. Staff/affiliates in those departments will adhere to the departmental policies.

For staff/affiliates providing direct physical hands on care, regardless of frequency:

Fingers:

- Fingernails must be clean and neat with the length not extending beyond the end of the finger
- Fingernail polish must be free of cracks or chips
- It is preferred rings not be worn. If worn, they must be limited to a smooth solid band
- Artificial nails and nail enhancements must not be worn

Arms:

- While providing care and performing hand hygiene, arms must be bare below the elbow (long sleeves must be able to be pushed up to the elbow while providing care and hand hygiene). See [Hand Hygiene Policy](#)
- Arm jewelry must be limited to a watch that is cleanable. Medical alert bracelets may be worn but cleaned regularly (minimum daily)
- Staff/affiliates who must wear hand splints or arm compression stockings must be assessed by OHSS for work exclusion if they are unable to remove them for performing hand hygiene.

Accessories:

- During patient care when there is the potential of patient contact, lanyards, neckties, scarves, stethoscopes, or dangling clothing must be tucked in, removed or held back
- Stethoscopes must be cleaned between patients with an alcohol swab

Uniforms/Clothing/Gowns/Foot wear:

- If uniform or clothes become visibly soiled or contaminated they must be changed as soon as possible

- Yellow isolation gowns are to be used for isolation purposes only and must not be worn outside of patient rooms. (Note: pharmacy staff may use in sterile production rooms)
- Functional and protective footwear for care providers is required (closed toe/heel, slip resistant sole) to protect against potential spills of body fluids and blood borne pathogen exposures from sharps injuries.

PROCEDURE:

If a uniform or clothes become visibly soiled or contaminated the following procedure will apply:

- For staff/affiliates who normally have access to greens they would use this access to change into greens
- For staff/affiliates who have a locker available while at work, an extra uniform should be brought to work to allow changing of the uniform
- For staff/affiliates who do not normally have greens access nor access to a locker, greens will be kept securely in each patient care area and staff will sign for greens if needed in these circumstances. Each patient care area will establish a process for signing out and documenting the return of the greens to the hospital.

REFERENCES

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[Sundee, S., & Allen, K. D. \(2006\). An audit of the dress code for hospital medical staff. *Journal of Hospital Infection*, 64\(1\), 92-93. AN/16831491](#)

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[William E. Trick,¹ Michael O. Vernon,^{2,3} Robert A. Hayes,² Catherine Nathan,² Thomas W. Rice,² Brian J. Peterson,^{2,3} John Segreti,^{3,4} Sharon F. Welbel,^{2,3,4} Steven L. Solomon,¹ and Robert A. Weinstein^{2,3,4} \(2003\) Impact of Ring Wearing on Hand Contamination and Comparison of Hand Hygiene Agents in a Hospital *CID* 2003;36 \(1 June\)](#)

[Magali Buffet, MSc, LeeAnn Turnbull, BSc, MLT, Donald Spady, MC, FRCPC, Robert Rennie, PhD, Sarah E.D. Forgie, MD, FRCPC, \(2008\) ID tags, does the ID stand for identification or infectious diseases risk? *American Journal of Infection Control Letters to the Editor August 2009*](#)

[Occupational Health and Safety Act, Ontario \(R.S.O 1990, c 0.1\)](#)

[Ontario Regulation 67/93 Health Care and Residential Facilities](#)

[Occupational Health and Safety Act RRO 1990, Regulation 833 Control of Exposure to Biological or Chemical Agents](#)

Standard for Professional Practice Related to Nursing Attire
<http://www.lhsc.on.ca/priv/pm/PTRSd46eAhQAABAPJ9w.htm>

http://appserver.lhsc.on.ca/policy/search_res.php?polid=OHS021&live=1

<http://www.lhsc.on.ca/priv/periop/or/policies/attire.htm>

<http://www.lhsc.on.ca/priv/pm/PTRbXl6eAhQAADDYgiE.htm>

<http://www.lhsc.on.ca/priv/lab/policy/safety/tech aids/esaf001.pdf>

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