DRESS CODE, PERSONAL HYGIENE and UNIFORM/WORKWEAR
MANDATORY POLICY FOR STAFF

### Amendments

<table>
<thead>
<tr>
<th>Date</th>
<th>Page(s)</th>
<th>Comments</th>
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</thead>
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<td>June 1999</td>
<td>All</td>
<td>New Policy</td>
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<tr>
<td>April 2010</td>
<td>All</td>
<td>Update and revision of Policy</td>
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<tr>
<td>October 2012</td>
<td>All</td>
<td>No reference to personal hygiene Section 4 added</td>
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</table>

Compiled by: Karen Cooke, HR Advisor

In Consultation with: Heads Of Nursing, Nurse Consultant Infection Control

Ratified by: Trust Board

Date Ratified: December 2012

Date Issued: December 2012

Review Date: October 2014

Target Audience: e.g. All staff / All nursing staff / All Non-clinical staff / All Clinical Staff / All administrative staff

Impact Assessment Carried Out By: HR Directorate

Policy Owner: Deputy Director of Workforce and OD
ASHFORD & ST. PETER’S HOSPITAL NHS FOUNDATION TRUST

See also: To be read in conjunction with the Department of Health: Guidance on Uniform and Workwear policies for NHS Staff 2010

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16. ARCHIVING ARRANGEMENTS
   This is a Trust-wide document and archiving arrangements are managed by the Quality Department, who can be contacted to request master/archived copies.

17. REFERENCES AND BIBLIOGRAPHY
   Department of Health: Guidance on Uniform and Workwear policies for NHS Staff 2010

18. APPENDICES
1. Introduction

The professional image presented by staff is an important component in, the way we are perceived by colleagues, patients and the public. Uniforms make a professional recognisable which in turn promotes trust and confidence. A professional image is one that is smart and simplified.

The trust recognises the right for staff to adhere to religious and cultural observances; however, consideration should be given to infection control, the operation of machinery, the identification of staff and clear communication with patients.

1.1 The Dress Code and Uniform Policy is necessary in order to:-

- Convey a professional and efficient image of the Trust and individual
- Give patients confidence
- Support Infection Control
- Have regard to Health and Safety considerations for staff
- Comply with Professional codes of practice for all staff
- To reduce likelihood of injury to staff and patients

1.2 The Trust considers the way employees dress and their appearance is of significant importance in portraying a professional image to all users of its service, whether patients, visitors, clients or colleagues.

1.3 The Trust recognises the diversity of cultures, religions, disabilities and beliefs of its employees and 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. Full guidance from the DOH is contained in Appendix 3

2. Aims and scope of the Policy

The Policy sets out the expectations of the Trust in relation to corporate dress code and the wearing of Trust uniforms.

2.1 This Policy is designed to guide managers and employees on the Trust standards of dress and appearance. The Policy is not exhaustive in defining acceptable and unacceptable standards of dress and appearance and staff should use common sense in adhering to the principles underpinning the Policy. A sensible approach should be taken to ensure the spirit of the code is applied.

3. Key points and responsibilities

3.1 The Policy applies to all staff, including those with honorary contracts, agency workers and students when working on Trust premises.

3.2 The Policy follows in full the Department of Health Guidance: Uniforms and Work wear policies for NHS Staff 2010.
3.3 The Trust Executive Committee is responsible for developing and reviewing the Policy.

3.3 This policy fully adopts the Department of Health’s ‘Bare below the elbow’ policy. All staff working in any clinical area should be: ‘bare below the elbow’ this means no wrist watches and only wedding bands without stones – these should be removed as good practice to facilitate hand washing and hygiene.

3.4 Where the term ‘Clinical Area’ is used in the policy this refers to: ‘all places where there are patients receiving clinical attention, i.e. wards, clinics, OPD, therapies, medical imaging, phlebotomy, etc.

3.5 All employees are supplied with a Trust name badge and an identity security badge that must be worn and be visible at all times when on duty or acting in an official capacity representing the Trust unless they are likely to cause a danger to the member of staff or patient. ID badges on lanyards should not be worn in any clinical area or when patient contact is involved.

3.6 Staff are expected to dress in clean clothes every time they start work

3.7 Managers are also responsible for ensuring this Policy is adhered to at all times in respect of the employees they manage. All staff are required to comply with the principles and requirements of the Policy.

3.8 Failure to adhere to the Trust’s standards of dress, appearance and personal hygiene guidance may constitute misconduct and result in formal disciplinary proceedings.

4. Personal Hygiene

4.1 Maintaining a comfortable environment in which all employees can work in is an important part of being an employer. However, sometimes poor hygiene from employees can affect the overall performance of a team or impact on their colleagues and other people, particularly patients, with whom an individual comes in to contact.

4.2 Keeping clean is essential for good health; poor hygiene can cause skin complaints, unpleasant smells and bacterial or parasitic infections; poor dental care can also give rise to bad breath. Unwashed clothes are often a source of undesirable smells.

4.2 Staff should come work having attended to their personal hygiene each day with clean clothes and hair and free from unpleasant odours.

4.3 Clean uniform should be worn each day and replaced if it becomes soiled during a shift.

5. Dress code (General)

5.1 For staff not required to wear a uniform, examples of acceptable staff clothing include:-
• Skirts, blouses, smart shirts (with collars – long or short sleeve) or tops, jumpers jackets, dresses, culottes, suits, trousers, sports jackets and blazers (see 4.9)

5.2 For staff who are non-uniform wearers, the following items of clothing are examples of unacceptable clothing, either on the grounds of Health and Safety or for the Trust’s public image:
• Track suits, casual sports t-shirts, combat trousers, sweat shirts, baseball caps/hats, jeans or denim clothing
• Overly tight or revealing clothes, including mini-skirts/shorts, tops revealing the midriff and leggings, see-through and/or, low-cut blouses/tops and strappy tops
• Skirts/trousers that are sufficiently long that they touch the ground when walking are not acceptable on safety and hygiene grounds
• Clothing bearing large and/or inappropriate slogans
• Flip-flops
• Crocs or similar
• Sandals or open toe shoes in any clinical area. Consideration should also be given to the noise made by shoes on the ward. At night smart trainers or soft soled/rubber soled shoes should be worn in-line with the Trust’s ‘good night’ charter.

5.3 Footwear must be safe, sensible, and stable, in good order, be smart and clean and have regard to Health and Safety considerations. Certain jobs require staff to wear protective footwear. These staff must wear the correct footwear for undertaking their work and if staff are uncertain they must check with their line manager. All considerations are at the managers’ discretion in line with the appropriate guidance.

5.4 Each manager must ensure that personal protective clothing and equipment is available to the employee in accordance with COSHH regulations and local/statutory recommendations. Staff in roles that require protective clothing are required to wear this whilst carrying out their duties in accordance with health and safety requirements. If individuals are unsure about such requirements they should discuss this with their manager.

5.5 Visible tattoos are to be discouraged and should be covered if at all possible. Where they are present they should not be offensive to others and where they are deemed to be offensive they should be appropriately covered if possible, see 4.9. Tattoos on the forearms or hands must be left uncovered for hygiene during patient activity.

5.6 Jewellery and piercing should be discreet and appropriate and not cause offence or be a health and safety or an infection control hazard. Any items of jewellery and piercing that create the potential for injury or present the possibility for entanglement (e.g. large hoops) must be covered or removed during working hours or when working within a clinical setting.

5.7 Hair should be clean, neat and tidy at all times. In clinical areas hair should be worn above the collar or tied back if it falls below the shoulder. Also when visiting clinical areas, paragraph 6.11 applies to all staff in regard to fingernails.
5.8 Our ‘bare below the elbows’ policy applies when visiting clinical areas or where patient contact is involved (e.g. wards and outpatients), all staff should dress and wear clothing that makes hand hygiene both easy and satisfactory. This means no long sleeves (e.g. jackets) and that shirts are either short sleeved or that shirt sleeves are rolled up to the elbow.

5.9 Watches should be removed to facilitate hand washing that involves any patient contact.

5.10 Personal Protective Equipment (PPE) is to be worn in accordance with the Standard Precaution Policy.

5.11 In any clinical area or in activity involving patient contact, ties (other than bow-ties) should not be worn as they perform no beneficial function in patient care, are laundered rarely but often worn daily and have been shown to be colonised by pathogens.

5.12 When moving patients, pens and scissors, etc. should be carried in hip pockets or inside breast pockets to avoid causing injury.

5.13 Staff who are pregnant should continue to observe the dress code and not wear overly tight or revealing clothing.

5.14 Staff who wear facial coverings for religious reasons are expected to remove them while on duty. This will ensure that the member of staff is identifiable.

6. Other Health and Professional Groups

(This group includes: Pharmacists, Clinical Scientists, Medical Physics, Laboratory staff.)

6.1 Staff are expected to comply with the Policy and also comply with regulatory and good practice requirements. This reflects the individual environment and materials handled (please refer to 3.1).

7. Trust clinical uniform requirement

Requirements for all uniform wearers (where appropriate these requirements override those laid out in Section 4)

7.1 The uniform should be worn in a clean and presentable fashion and all staff must have access to a spare uniform in case one becomes soiled during the shift.

7.2 Shoes must be black, closed toe, low heel with a non-slip sole and should have low noise soles in clinical areas. Sandals, flip-flops and crocs or similar are not allowed. These are health and safety guidelines. No clogs are to be worn except when wearing scrubs. Suede shoes are not acceptable. Tights do not need to be worn during hot weather.

7.3 Jewellery must be kept to a minimum; a wedding/plain band ring (without stone(s)) is permitted. Wristwatches or other wristbands or bracelets must not be worn when
providing clinical care. Facial/body piercing is not to be worn when providing clinical care. Facial/body piercing for those staff working in a clinical area but not providing direct clinical care is to be worn at the managers’ discretion in line with health and safety guidance and should be assessed before coming on duty.

7.4 The uniforms issued may be altered by the individual within acceptable limits as the Uniform Stores no longer provides this service.

7.5 Maternity clothing will be provided in line with the normal uniform for the role.

7.6 The wearing of the Trust uniform when off duty/out of hospital premises is not acceptable unless travelling to and from work (see 7.7)

7.7 If a uniform is worn on the journey to and from work it must be covered by a coat or suitable garment. If at all possible it is preferable for staff to change in and out of their uniform before and after their shift.

7.8 Hair should be neat and tidy at all times and arranged off the face and collar with suitable hair ornamentation if past shoulder level. Beards should be short and neatly trimmed or secured to avoid patient contact.

7.9 Where facial coverings are worn, health and safety guidance must be adhered to.

7.10 Make up can be worn discreetly.

7.11 Nail varnish and false nails are not permitted. Nails should be sufficiently short to ensure safe patient contact and infection control.

7.12 Staff are expected to comply fully with the Trust’s Smoke Free Policy and understand that smoking in uniform may affect patient care due to the smell and possible infection control issues. If staff do smoke off site they have to ensure their uniform is fully covered and failure to comply with this instruction will be treated as misconduct and may result in disciplinary action being taken.

7.13 Uniforms need to be washed at the hottest temperature suitable for the fabric. A ten-minute wash at 60 degrees Celsius removes almost all micro-organisms (DoH 2007) Washing with detergent at lower temperatures down to 30 degrees Celsius eliminates MRSA and most microorganisms.

8. Nurses and Midwives

8.1 The NMC Code of Conduct requires professional staff to, ‘justify public confidence’. One area of this is first impressions for people who are vulnerable, ill and frightened. The appearance of staff will help the patient to feel at ease and in safe hands. The Trust portrays a corporate image in its staff. Smart, polite staff immediately give the impression of a sympathetic environment.

8.2 Uniforms are supplied by the Trust. This includes dresses, tunics, trousers, polo shirts. Staff supply their own tights/stockings/socks and shoes.
8.3 Cardigans must not be worn when attending to patients. Black or dark blue cardigans can only be worn at night when working at the desk or off the ward.

*Please see Appendix 1 and 2*

9. **Radiology, Occupational Therapists, Physiotherapists & Pharmacy Technicians**

9.1 Radiographers, Occupational Therapists, Physiotherapists and Pharmacy Technicians will be issued with appropriate sets of uniforms, with a choice of tunic/trousers, polo shirts or dresses, or a combination.

9.2 Due to the nature of therapy, OT and Physiotherapists may wear training shoes that are smart, clean and plain white or black only.

10. **Estates and Facilities Staff**

10.1 Some staff within this directorate have specific clothing requirements based upon the need for:

- Personal safety
- Statutory regulatory requirement
- Work environment (including outside working)
- Infection control

10.2 All Domestic, Laundry, Portering and Driving Staff must wear their issued uniform at all times whilst on duty.

11. **Clinical Staff Wearing Scrubs**

11.1 Scrubs and clogs can only be worn in designated areas:

- Theatres, including Endoscopy suites
- ITU/ HDU
- Labour Ward
- Neonatal Unit
- Scrubs and clogs that are worn must be clean at the beginning of every shift and changed each time they become stained with blood or body fluids. They should also be changed or cleaned (for clogs) if worn elsewhere within the Trust on return to the designated area.
- If it is necessary to leave a designated ‘scrubs area’ the staff member should ideally change out of the scrubs or change on return to the designated area.

12. **Theatre Staff**

   (this should be read in conjunction with the Operating Theatre Uniform Policy)

12.1 In addition to the guiding principles the following will apply.
12.2 Staff should wear well-fitted dedicated operating approved theatre footwear in line with the Policy. These must be cleaned/decontaminated on a regular basis, particularly when visibly dirty or when contaminated with blood or body fluids. Theatre management should ensure that local mechanisms are in place for these procedures to take place.

12.3 All theatre staff and visitors to theatres should comply with theatre policy on the use of PPE.

12.4 As per theatre policy, clinical staff in scrubs who visit areas outside the theatre complex then return to theatre must change into a clean pair of scrubs on returning to theatre.

13. Visitors to the operating theatre complex

13.1 Theatre staff will guide all visitors to the operating theatres on what wear. Any visitor entering an operating theatre must change into scrubs and suitable footwear.

14. Dissemination and implementation

This policy will be stored in the “employment policies” section of the Trust Intranet and thus available to all staff. New staff are given a copy of the policy during their induction period.

15. Review

Policies will be reviewed when statutory requirements/best practice guidelines dictate, or no longer than 3 years after the previous review/initial ratification.

16. Archiving arrangements

This is a trust-wide document and archiving arrangements are managed by the Quality department who can be contacted to request master/archived copies.
Please see tables below for information on uniforms worn in the various areas.

**Table 1** Areas covered by Appendices to this document

<table>
<thead>
<tr>
<th>Appendix 1</th>
<th>Appendix 2</th>
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<tbody>
<tr>
<td>♦ Wards</td>
<td>Other nursing</td>
</tr>
<tr>
<td>♦ Coronary Care</td>
<td>♦ Discharge Facilitator</td>
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<tr>
<td>♦ Imaging</td>
<td>♦ CSNP / Deputy CSNP</td>
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<tr>
<td>♦ Outpatients</td>
<td>♦ Matron</td>
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<tr>
<td>♦ Accident &amp; Emergency, Emergency Dept</td>
<td>♦ Advanced and Specialist Practitioners</td>
</tr>
<tr>
<td>♦ Pre assessment Nurses</td>
<td>♦ Clinical Practitioner Educators</td>
</tr>
<tr>
<td>♦ Ophthalmology OPD/DSU</td>
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**Table 2** For information on uniforms worn in these areas, please see local nurse uniform sheet

<table>
<thead>
<tr>
<th>Theatres</th>
<th>Critical Care</th>
<th>Children’s Services</th>
<th>Medical Unit</th>
<th>Maternity Services</th>
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<tbody>
<tr>
<td>♦ Theatres</td>
<td>♦ Intensive Care Unit</td>
<td>♦ Paediatrics</td>
<td>♦ Haematology Unit</td>
<td>♦ Midwives in hospital</td>
</tr>
<tr>
<td>♦ Day surgery</td>
<td>♦ High Dependency Unit</td>
<td>♦ Neonatal Unit</td>
<td></td>
<td>♦ Midwives in Community</td>
</tr>
<tr>
<td>♦ Endoscopy</td>
<td>♦ CCU</td>
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</table>

**In all cases regardless of area of clinical work, the following apply:**

**Jewellery and Badges:**

| Only wedding rings without stone(s) may be worn |
| Plain stud earrings only may be worn            |
| Discreet neck chain may be worn only if covered by the uniform |
| Wrist watches are not to be worn in the clinical area when providing direct patient care |
| Other jewellery should not be worn on duty*    |
Nurses must wear their name badges

One professional badge may be worn - any possibility of harm or injury to patients must be avoided.

*See 7.3

**Hair/ Make-up beards:**

<table>
<thead>
<tr>
<th>Hair</th>
<th>This should be tidy, off the face and above shoulder level, tied up if necessary.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make-up</td>
<td>Must be kept discreet.</td>
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<tr>
<td></td>
<td>Nail varnish and / or false nails are not permitted in uniform or mufti in the clinical area.</td>
</tr>
<tr>
<td></td>
<td>Nails must be short and clean</td>
</tr>
<tr>
<td>Beards</td>
<td>Must be neat.</td>
</tr>
</tbody>
</table>

**Accessories:**

- **Tights / stockings**  black / natural
- **Socks**  black
- **Shoes**  Black leather / leather look, or black trainers. Closed toe and heel, low heel, soft soles for low noise in clinical areas
- **Belts**  Not to be worn when providing direct patient care in the clinical area
- **Cardigan / Jacket**  Navy - Not to be worn when providing direct patient care in clinical area
Appendix 1

UNIFORM POLICY

- Wards
- Coronary Care
- Accident and Emergency / Emergency Department
- Pre-assessment Nurses
- Imaging
- Outpatients
- Ophthalmology

Female staff:

<table>
<thead>
<tr>
<th>Grade</th>
<th>(Belt) / Epaulettes</th>
<th>Dress / Tunic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Assistant</td>
<td>Brown</td>
<td>White</td>
</tr>
<tr>
<td>Senior care Assistant NVQ Level 3</td>
<td>Turquoise</td>
<td>White</td>
</tr>
<tr>
<td>Staff Nurse Preceptee</td>
<td>Pale blue</td>
<td>Navy stripe</td>
</tr>
<tr>
<td>Staff Nurse PFG</td>
<td>Blue</td>
<td>Navy stripe</td>
</tr>
<tr>
<td>Deputy Sister</td>
<td>Maroon</td>
<td>Royal blue</td>
</tr>
</tbody>
</table>

Trousers - Navy

Male Staff:

Dark Grey or Black Trousers
White tunic with short sleeves.
Epaulettes (colour coded as per designation above)
Appendix 2

UNIFORM POLICY

- Matron
- Clinical Site Nurse Practitioner and Deputies (CSNP)
- Advance Specialist Practitioner
- Clinical Practice Educator
- Discharge Co-ordinator

**Female Staff:** dresses, tunics

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Epaulettes</th>
<th>Dress / Tunic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matron</td>
<td>Red with Navy Trim</td>
<td>Red with Navy Trim</td>
</tr>
<tr>
<td>Deputy CSNPs</td>
<td>Navy (Male Nurse)</td>
<td>Navy</td>
</tr>
<tr>
<td>CSNP’s</td>
<td>Navy (Male Nurse)</td>
<td>Navy</td>
</tr>
<tr>
<td>Advanced and Specialist Practitioners</td>
<td>Navy (Male Nurse)</td>
<td>Navy</td>
</tr>
<tr>
<td>Clinical Practitioner Educator</td>
<td>Navy with pale blue stripe</td>
<td>Navy with pale blue trim</td>
</tr>
<tr>
<td></td>
<td>(Male Nurse)</td>
<td></td>
</tr>
</tbody>
</table>

Trousers – Navy Blue (except as indicated above)

**Male Staff:**

Dark Grey or black Trousers
Short sleeved white tunic or coat.
Epaulettes (colour coded as per job title above)
Appendix B

Advice from Muslim Spiritual Care Provision in the NHS (MSCP)*

Exposure of the forearms is not acceptable to some staff because of their Islamic faith. In response to these and other concerns, the MSCP convened a group including Islamic scholars and chaplains and multi-faith representatives as well as Department of Health policy-makers and external experts in infection prevention. Based on these group discussions, the MSCP prepared a list of recommendations to ensure that local dress code policies are sensitive to the obligations of Muslims and other faith groups whilst maintaining equivalent standards of hygiene.

Incorporating any of these recommendations into trust policy will have to be agreed in conjunction with clinical managers and the local infection prevention and control team:

- Uniforms may include provision for sleeves that can be full length when staff are not engaged in direct patient care activity.

- Uniforms can have three-quarter length sleeves.

- Any full or three-quarter length sleeves must not be loose or dangling. They must be able to be rolled or pulled back and kept securely in place during hand-washing and direct patient care activity.

- 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.

Use of hand disinfection gels containing synthetic alcohol does not fall within the Muslim prohibition against natural alcohol (from fermented fruit or grain).
## Equality Impact Assessment Summary

**Name:**

**Policy/Service:**

### Background

The Policy sets out the expectations of the Trust in relation to corporate dress code, personal hygiene and the wearing of Trust uniforms.

- Context in which the policy operates
- Who was involved in the Equality Impact Assessment

The Policy sets out the expectations of the Trust in relation to corporate dress code and the wearing of Trust uniforms.

The policy refers to all staff.

### Methodology

- A brief account of how the likely effects of the policy was assessed (to include race and ethnic origin, disability, gender, culture, religion or belief, sexual orientation, age)
- The data sources and any other information used
- The consultation that was carried out (who, why and how?)

Consultation has involved the Staff Employee Partnership Forum, Infection Control, Health and Safety, Heads of Nursing and members of the HR Department.

The Policy should be read in conjunction with the Department of Health: Guidance on Uniform and Workwear policies for NHS Staff 2010

### Key Findings

- Describe the results of the assessment
- Identify if there is adverse or a potentially adverse impacts for any equalities groups

At present there is no evidence that the policy adversely impacts on particular equalities groups unwittingly but this will be kept under review.

### Conclusion

- Provide a summary of the overall conclusions
In conclusion there are no equalities groups that are adversely affected as a result of this policy.

**Recommendations**
- State recommended changes to the proposed policy as a result of the impact assessment
- Where it has not been possible to amend the policy, provide the detail of any actions that have been identified
- Describe the plans for reviewing the assessment

The Policy and any impact is due for review in one year

**Guidance on Equalities Groups**

<table>
<thead>
<tr>
<th>Race and Ethnic origin (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)</th>
<th>Religion or belief (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)</td>
<td>Sexual orientation including lesbian, gay and bisexual people (consider whether the policy/service promotes a culture of openness and takes account of individual needs)</td>
</tr>
<tr>
<td>Gender (consider care needs and employment issues, identify and remove or justify terms which are gender specific)</td>
<td>Age (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)</td>
</tr>
<tr>
<td>Culture (consider dietary requirements, family relationships and individual care needs)</td>
<td>Social class (consider ability to access services and information, for example, is information provided in plain English?)</td>
</tr>
</tbody>
</table>