Patron
Her Royal Highness The Princess Royal
President
Professor Sheila the Baroness Hollins
Chief Executive

Steve Ford



106–114 Borough High Street, London SE1 1LB T: 020 3141 4600 www.rcot.co.uk

27th May 2021

To whom it may concern,

Re: National Healthcare Uniform Proposal – Workforce Consultation

The Royal College of Occupational Therapists (RCOT) is pleased to respond to the current consultation.

We would like to thank colleagues at NHS Supply Chain for the recent communication they have undertaken with ourselves and fellow AHP professional bodies. We look forward to continued discussion as this project progresses.

Sustainability and ethical procurement must be a key consideration. RCOT welcome an approach to procuring uniforms that increases sustainability by reducing environmental impact and financial costs to the NHS. From our recent discussion with Kevin Chidlow we are reassured that appropriate consideration is also being given to ethical procurement processes.

Uniforms help the public to identify the professionals supporting them. It is important that members of the public accessing NHS services are able to identify the different professionals involved in their care and support. We agree that adopting a consistent approach to uniform styles and colours across the NHS would be beneficial in enabling the public to do this more easily. Being in hospital can be a disorientating experience and personnel can change on a daily basis, so uniforms are vital for patients to help recognise who they are working with. This must be the priority consideration.

Uniforms help to portray a discrete professional identity. Recognition of our unique professional identity is very important to RCOT members and the people we support. We are proud to be part of the AHP family, but the roles that the different allied health professions undertake are very distinct, and we feel strongly that it should be possible for the public and our colleagues to distinguish between the different professional groups.

Green is synonymous with occupational therapy. Use of different colourways is a logical and established means of distinguishing between professionals, and occupational therapists have long been associated with the 'bottle green' worn by many of our members in the NHS workforce in England. When RCOT surveyed members about key words that they associated with their profession 'green' was one of the top three answers. We would hope to retain this as part of our professional identity going forward.





Uniforms alone cannot convey professional identity. It is unlikely that members of the public would be able to identify professions through use of colour alone – especially if certain colourways are shared across professional groups. We would recommend additional, clear badging including the staff member's name and profession to assist easy identification.

Uniforms must be fit for purpose. The practicality of the uniform design is also of high importance to our members, as occupational therapy can involve a range of physically active tasks, including manual handling. Making sure that wearers can move freely, moderate their temperature, and carry essential items (notebooks, pens, tape measures etc.) will be vital to the final uniform design.

Uniforms must be suitable for a diverse workforce. The style of the uniform and the range of options within it must be inclusive and practical for all members of the workforce, considering religious and cultural needs, gender identity, disability, maternity and body shape. It is essential to engage widely with the workforce to understand the full breadth of needs and preferences, so that the final design is appropriate for everyone.

Occupational therapists should be included in the Advanced Clinical Practitioner uniform considerations. Within the current consultation documentation there is a proposed separate grouping for 'advanced clinical practitioner'. Occupational therapists and other AHPs are not noted amongst this, even though they (increasingly) occupy advanced practitioner roles. If other professions are to be defined by seniority through their uniform, it is necessary that AHPs should be as well.

Continued consultation is required to understand the impact of changes. When considering the consultation results, and when moving forward into the testing phase of any new uniform design, it is important to remember that occupational therapy is not a homogenous role. The tasks undertaken by occupational therapists vary considerably across settings and patient groups, and so the needs and preferences of the workforce may be broad. It will be important to continue to consult and test widely across the breadth of the workforce as this project progresses.

Yours faithfully,

Lauren Walker Professional Adviser Royal College of Occupational Therapists