Uniforms: the first and final frontier in dementia care

Are uniforms really important in care homes? Sally Knocker says that getting rid of uniforms is an essential part of culture change.

Whether or not to wear uniforms is a debate that seems very particular to older people’s care. In many other care contexts such as learning disability or adult mental health it is accepted best practice to create relaxed and equal relationships through the wearing of one’s own clothes.

In the learning disability movement the removal of uniforms in the 1960s and 1970s was part of a shift away from a medical model of disability. This shift related to a strong move towards “normalisation” and integration of people with a disability into everyday life as “people first”. The label of illness or dependence conveyed by being supported by a person in a uniform was considered unhelpful.

Yet in dementia care, in a Nursing Times survey as recently as 2014, 57% of staff consulted indicated that they thought uniforms were important. Clearly, it is a subject that still generates strong opinions.

Over the last 20 years of Dementia Care Matters’ work on culture change, it has sometimes felt as though we have opened a can of worms on this. When we launch the Butterfly Household Model of Care in a care home, we explain that a non-negotiable part of culture change is to ask the team to get rid of uniforms. But many members of staff are horrified at the prospect of coming to work in their own “home” clothes. Comments like these are typical:

How will people with dementia know who is there to care for them?

Families like us to look smart and professional.

Who’s going to pay for the increased wear and tear on my wardrobe?

What about cross infection? Visiting professionals need to know who are the nurses.

What impression will be given when colleagues wear inappropriate or messy looking clothes at work?

A recent response on Twitter from a daughter of a person living with a dementia stressed that her relative liked uniforms because they are easily recognisable and “reassuring” when she is not there, particularly when the person has just woken up and is “disoriented and a little scared”. Wendy Mitchell, who lives with a dementia, also responded on Twitter that she didn’t feel strongly about uniforms, but found it “unsettling if there is no identification”, and therefore liked clear badges “with a smiley motif”.

Some of those in favour of uniforms become very defensive as if those who oppose them are implying that people cannot be kind and caring when wearing a uniform, which of course they can be. The point is rather that it is not possible to create a sense of being truly person-centred and the feeling for people living there of being “at home” when staff are dressed in ways that quite patently indicate that they are at work. It is the ultimate symbol of separation, which asserts “we are here to do a job; you are different from us because you are being cared for.”

Trust or power?

Those who defend uniforms reflect the argument that many older people see them as representing a person who has been trained and can be trusted to do “the job” well. Yet a uniform is seen by many as a symbol of power and control, reinforcing a sense of “us and them”.

Dementia Care Matters would argue that for people living with a dementia, what is most important is to seek out someone whose whole persona generates confidence and warmth that the uniform acts as a block to achieving this. I asked our CEO Dr David Sheard for his view and he replied:

Those who fiercely cling to vestiges of the old cultures of care cite evidence that people recognise them in their uniforms whilst totally unaware that they are missing the point - in real person-centred care, people truly enabled to LIVE with a dementia and who are experiencing heightened senses, will recognise you from your eyes, the aura of you, the sense of security you convey and the feeling that you are somehow familiar and like a best friend.

Perhaps the strongest support for keeping uniforms comes from relatives as visitors in care homes. Sheard suggests that it is a very normal and understandable desire as a family member to want confidence in the care selected, but this might often be fuelled by a sense of guilt:

Families seek the comfort of uniforms as proof that the care they have selected is the very best it can be, but this can be a misplaced confidence in the visual trappings of the “hospital” model of care where guarantees of quality of care and lack of abuse are far from certain.

Sheard adds that, like the call for CCTV cameras in care homes, the need for uniforms “is an admission of failure in creating positive open relationships - the uniform offers no guarantees at all, it’s what’s on the inside of people that counts. This is a matter of public education.”

Another complication arising from the removal of uniforms is that it can create closer, family-like relationships between staff members and people living with a dementia. These relationships have the potential to feel quite threatening or even excluding for visiting relatives. It has been our experience, however, that with the right support the majority of families come to understand why this brings out the best in everyone living, working and being together “like family”.

Celebrating Individuality

The nature of a uniform can be to ensure that everyone on the staff looks “the same” or to denote particular hierarchical positions. Arguably this can result in a person with a dementia finding it harder to distinguish between different paid carers as individuals. Where none of the usual points of reference exist to help identify individuals through their particular clothing styles, how are people to “know” on the inside as well as the outside who staff really are?

Manor Park nursing home in Weston-super-Mare has recently completed a successful
one-year culture change project with Dementia Care Matters. Lauren Allen is a nurse and one of the directors there and admitted that initially she had some uncertainty:

It was one of our biggest challenges as about 75% of staff didn’t want to lose their uniforms, partly because they were resentful that they would then have to buy their own clothes for work.

She also said that at a personal level she had just completed “three hard years training at university and so felt very proud of being able to wear my blue nurse’s uniform.” Even so, she made the decision to trust in the culture change requirement and set a date very quickly with the whole team to start wearing their own clothes.

Allen comments:

Straight away it was instantly different. It’s hard to explain but staff became more relaxed and it stripped back the professional masks so that you just became who you are. We were freer to just be with that person.

She reported how the individual dress of staff members, particularly the wearing of bright colours, different textured fabrics or interesting accessories prompted lovely moments of interaction with people living with a dementia: “I like that top!” and “That’s a pretty colour” were characteristic comments. Examples from other homes include team members choosing to wear clothes specifically to generate such moments, for example a football shirt of a team that someone living in the home supports or a picture of the Eiffel Tower to prompt discussions about who has been to France.

Canada

We have recently been doing culture change work in Alberta, Canada, where there were similarly mixed feelings about the removal of uniforms. But as with the UK projects, the benefits have been significant. Nancy Cunningham, education coordinator at Alberta-based Choices In Community Living, reports:

There is now more of a feeling of being comfortable and at home rather than being formal in a workplace. The shift in thinking now has become not “What can I do for you?” but “What can we do together?”

Culture change is intrinsic to our Butterfly projects in care homes, but in none of them have there been any ongoing issues with team members resenting having to buy their own clothes. People start to see coming to work as less like “work” and more like a liberation, like being in a second family.

For more information about Dementia Care Matters’ culture change work and the Butterfly Household Model of Care, please go to www.dementiacarematters.com or phone 01273 242335.

References