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Research Article

THE IMPORTANCE OF ADHERING TO THE OFFICIAL UNIFORM IN HEALTH FACILITIES

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The aim of the study is to identify the uniform, its requirements, and controls by the Ministry of Health, especially for male and female practitioners, to know the opinions of male and female health practitioners about wearing uniforms in health facilities, what are the contraindications for using uniforms inside and outside health facilities, what are the benefits of health clothing for male and female health practitioners. A questionnaire was created via Google Drive and distributed to WhatsApp social media groups, where 700 were distributed and 700 responses were obtained from the target group (health practitioners and male health professionals).

Keywords: security and safety, standards, health facilities

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INTRODUCTION:

A uniform is clothing dress by a collection of people to show their relationship to one group or entity, such as students, nursing staff, police officers, and members of a sports party (1)(2)(3). The first nurse's wear was derived from a nun's dress. Before the nineteenth century, nuns cared for the ill and wounded, so it was obvious that trainee nurses acquired the nun's custom as they adopted functions as "charge nurse (nun)." Mies Van Rensselaer, one of Florence Nightingale's students, prepared the original wearing for students at Miss Nightingale's School of Nursing. small changes occurred in this uniform before the 1940s. The clothing consists primarily of a blue uniform. Hospitals had the freedom to define the manner of the nurse's clothes, and contain the nurse's hat, which existed in many various forms (4). In Britain, the national (or simply 'national') uniform was designed at the same time as the presentation of the National Health Service (NHS) in 1948 and the coming of the Newcastle uniform. The manifestation of open-collar uniforms started in the 1960s. In the 1970s, disposable white paper hats changed to cotton hats; In the 1980s, plastic brats replaced traditional aprons and the old clothing began to disappear away. Since the 1990s, scrubs have become combined in Britain. It appeared for the first time in the United States of America; However, some nurses in Britain uninterrupted to wear other scrubs, although some NHS relies did not agree in support of scrubs as in many other countries. A normal nurse's wearing historically consisted of a petticoat, a uniform apron, and a nurse's hat. However, in some hospitals student nurses also wore a nursing logo, or the uniform duster may have been replaced with a cobbler-style apron. This type of nurse's clothing continued to be worn in many countries. There has been a bearing toward alternate designs of nursing uniforms in some countries since the late 1980s. The latest nurse uniform style in the United Kingdom consists of either (5)(6)(7): Short tops and dark blue trousers are optimally designed to block

transportation, and their color relies on the grade (or more recently, strip) of the nurse – the color varies between different NHS trusts. Mostly, the short top features adorning the hems of the uniform. A dress in the same color as the short top. Male nurses generally wear a white tunic with epaulets in a color or quantity that represents their year of training or job degree. A scrub uniform is a simpler type of uniform and is sometimes worn in operating rooms. As for clothing outside the hospital, the nurse wears a red jacket over the uniform she wears inside the hospital. If a nurse is seen outside the hospital in the uniform she wears inside the hospital, this is a crime for which she can be blamed and the nurse may be held answerable. Traditional uniforms remain combined in the third world, but in Western Europe and North America so-called "scrubs" or tunic clothing are becoming more common. From the early 1990s to the present, traditional nurse uniforms have been replaced by the "new" scrub uniform in some countries. Most hospitals in the United States and Europe state that scrub uniforms are easier to clean than old nurse uniforms. Nurses who wear uniforms are divided into two groups: Those who choose new scrubs uniforms because they hate the old white nurses' uniforms. Nurses who want to wear the old white nurses' uniforms; They note that nurses who wear scrubs are seen by patients as cleaners or surgeons (8) and their identity as nurses cannot be identified. Nurses continue to wear a white uniform consisting of a gown and a hat in many parts of the world. The classical white uniform for male nurses is now out of fashion, with the exemption of student nurses. A tunic is often used, similar to the style of a dental surgeon's uniform or a V-neck uniform. Colors vary depending on job grade, field of work, and hospital; However, the uniform color of the male equivalent of a nurse (who is in charge) face be shades of blue or dark green: this is often the only color recognized by the public, as it denotes a person in charge. It is customary for nurses to be strongly urged not to wear jewelry while they are working, as this may beguile, them from their aim and work, and the jewelry may become stuck to the patient's skin while providing care. In the past, a pocket watch or pendant watch was considered a must-have for nursing professionals. The pocket watches freed nurses' hands so that they could care for patients well, and prevented the wristwatch from becoming a transmitter of illness. The watches were sometimes given as a distinctive symbolic gift from parents to young nurses, who were moving to the nurses' quarters and living away from home for the first time.

2-MATERIAL AND METHODS:

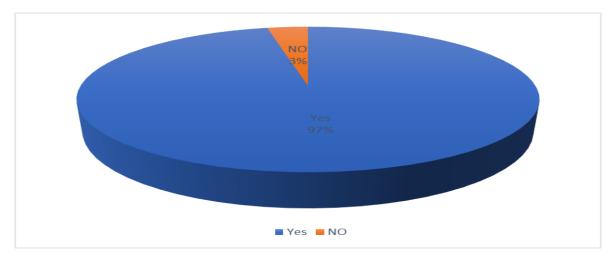
the study started in (the holy city of Mecca in Saudi Arabia), began writing the research and then recording the questionnaire in January 2022, and the study ended with data collection in June 2022. The researchers used the descriptive analytical approach that uses a quantitative or qualitative description of the social phenomenon (The importance of adhering to the official uniform in health facilities) ,this kind of study is characterized by analysis, reason, objectivity, and reality, as it is concerned with individuals and societies, as it studies the variables and their effects on the health of the individual, society, and consumer, the spread of diseases and their relationship to demographic variables such as age, gender, nationality, and marital status. Status, occupation (9), And use the Excel 2010 Office suite histogram to arrange the results using: Frequency tables Percentages (10). A questionnaire is a remarkable and helpful tool for collecting a huge amount of data, however, researchers were not able to personally interview participants on the online survey, due to social distancing regulations at the time to prevent infection between participants and researchers and vice versa (not coronavirus participation completely disappearing from society). He only answered the questionnaire electronically, because the questionnaire consisted of thirteen questions, all of which were closed He only answered the questionnaire electronically, because the questionnaire consisted of thirteen questions closed, all of which were closed. The online approach has also been used to generate valid samples in similar studies in Saudi Arabia and elsewhere (11)

3- RESULTS:

Regarding the ages of the male and female participants in answering the research questionnaire, they were as follows: from the age of 25-34 years, their percentage was 10.3%, from the age of 35-44 years, it was 55.2%, from the age of 45-54 years, it was 20.7%, and finally from Age 55-60 years was 13.8%. As for the gender of the participants, they were 51.7% female and 48.3%

male. The majority of the male and female participants were 100% Saudis. As for the educational aspect, none of them held an elementary, middle, or secondary degree. There were 58.6% who held a university degree, a doctorate degree, and a certificate. Diploma 20.7%. As for professions, they were nursing 27.6%, laboratory 48.3%, radiology none, care technician 3.3%, doctor in all categories 7%, and pharmacist in all categories 13.8%. When moving to the research questions: The first question was about: What is the importance of adhering to the uniform for health practitioners in health facilities? The answers were mostly that it is very important and one of the tasks and duties, and that it is very obligatory and important. As for the second question, it was about: In your opinion, adherence to the uniform is beneficial for health practitioners in health facilities. The answer was yes 96.6%, and no 3.4%. The third question was: In your opinion, does adherence to the uniform protect health practitioners in health facilities from contamination? Yes, 79.3% and 20.7%. The fourth question: In your opinion, are Western hairstyles and hats prohibited from uniform regulations in health facilities? Yes, 65.5%, and no, 34.5%. As for the fifth question, it was about: Are tight-fitting uniforms for male and female health practitioners prohibited? The answers were yes 86.2%, 13.8%. The sixth question: Is it prohibited to wear chains with uniforms in health facilities? The percentage of yes was 69% and 31%. The seventh question: Is it necessary to wear the official uniform under the coat in health facilities? It was the same answer. The eighth question: Is it necessary to cover the entire head with a non-transparent or decorative scarf for female health care professionals in health facilities? The answers were yes, 62.1%, and 37.9%. As for the ninth question: Are nail polish and cosmetics prohibited for female healthcare professionals in health facilities? The answer was yes, 69% and 31%. The tenth question: Should the coat be wide for hygienic practices in health facilities? The answer was yes 89.7%, no 10.3%. The eleventh question: Should the coat be non-tight and non-transparent for female hygienists in health facilities? Yes, the percentage was high, 93.1% and 6.9%. The twelfth question: Is it forbidden to wear jeans and tight, non-covering clothing for health care professionals in health facilities? Yes, by 82.8% and 17.2%. The thirteenth question was about: Is it prohibited to wear clothing bearing slogans, pictures and writings regarding health practices in health facilities? Yes, at rates of 75.9% and 24.1%. As for the last question, is it forbidden to walk around in or outside the health facility wearing surgical clothing and delivery rooms for health practices in health facilities? The response rate was yes, 79.3% and 20.7%. (Figure N0.1)

Figure N0.1: Opinion of male and female participants in research on the official uniform for male and female health practitioners in health facilities



4-DISCUSSION:

Through the results of this study, we find that the percentage of male and female health practitioners' commitment to wearing the uniform is high, thank God, and this indicates the strength of the religious conscience of all health practitioners and that they follow the instructions of the ministry of health very carefully, the ethics of the system for practicing the profession, and the instructions of the legal administration for the system for practicing the profession.

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