

# Expectant and New Mothers at Work - Guide for Managers

Version 1 – August 2005	Revision - November 2010
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#### Introduction

West Lothian Council's Health and Safety Policy places the responsibility on Directors to ensure nominated people within their area carry out risk assessments of the workplace and work operations As a result of the European 'The Pregnant Workers Directive', the Management of Health & Safety at Work Regulations requires employers to assess risk to expectant or new mothers. The term 'expectant or new mothers' includes

- Those who are pregnant;
- Those who are breast feeding; and
- Those who have recently given birth (up to 6-12 weeks post delivery or longer if breast-feeding).

Health and safety implications for expectant and new mothers can be addressed by implementing normal health and safety management procedures and risk assessment.

#### Legislation, Policies & Guidance

The Management of Health and Safety at Work Regulations 1999 (MHSW) and the Workplace (Health, Safety and Welfare) Regulations 1992 (WHSWR) include regulations that set the standards and protect the health and safety of new and expectant mothers who work. The Sex Discrimination Act 1975 also protects the rights of pregnant workers.

Information regarding maternity leave and pay can be found on My Toolkit <u>http://www.mytoolkit.net/knowledge/default.asp</u>. The Family care section contains the Family Care Policy and Procedures and Maternity Packs for teaching and Non Teaching staff.

Further health and safety information can be obtained from the Health and Safety Executive (HSE) website <a href="http://www.hse.gov.uk/mothers/index.htm">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.hse.gov.uk/mothers/index.htm">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.hse.gov.uk/mothers/index.htm">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.hse.gov.uk/mothers/index.htm">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.hse.gov.uk/mothers/index.htm">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.seltothian.gov.uk">www.hse.gov.uk/mothers/index.htm</a>. Alternatively, you can contact Health and Safety - <a href="http://www.seltothian.gov.uk">www.seltothian.gov.uk</a>

#### **Risk Assessment**

Risk assessment of the workplace and work operations should identify hazards and risks to females of childbearing age, including new and expectant mothers. Known as Stage 1, these risks will be identified when completing general task risk assessments. This is because there may be a period where a pregnant worker may not be aware that they are pregnant. Risk assessment Toolkit. forms can be found on Μv Health and Safetv. http://www.mytoolkit.net/hsafety/risk assessments.asp

When a manager is notified in writing that a member of staff is pregnant or is intending to return to work and wishes to breast feed or express milk an individual risk assessment must be carried out (Stage 2). This should be reviewed at each trimester throughout pregnancy and also on return to work where you are notified of the intention to breast feed or express milk (Appendix 1). During pregnancy risk assessment (Appendix 1) should be completed at each trimesters. The identified hazards and risks may remain constant in some cases but, the likelihood of harm occurring may differ at each stage of the pregnancy due to e.g. dexterity, agility and impaired mobility created by increased size.

#### Additional Areas of Risk

Expectant and nursing mothers are at additional risk when carrying out specified work activities involving exposure to chemical, physical (e.g. noise, manual handling), biological (e.g. Viral Infections, Chickenpox) and working condition hazards. Other factors may include morning sickness, tiredness, and the need for frequent visits to the toilet.

The HSE have published a guide for employers that includes an extensive section on hazards and risks and ways of avoiding them. This may help where the individual assessment highlights action needs to be taken. The publication 'New and expectant mothers at work: A guide for employers' <u>http://www.hse.gov.uk/pubns/books/hsg122.htm</u> can be downloaded free from the HSE website.

#### Irregular Work Patterns

Where an expectant mother participates in shift work and the risk assessment identifies it to be detrimental to the mother and/or baby's health, she should be transferred to day work on her existing salary/wage level and conditions of service (including any shift working premium payments).

Similarly, where a new or expectant mother works at night, and her GP/midwife has issued her with a certificate indicating that for her health and safety she should not work at night, she should be transferred to day work on her existing salary/wage level and conditions of service (including any night working premium payment). Where a transfer is not possible such employees should be given paid leave from work for the period designated in the medical certificate.

Every effort should be made to adjust the working environment, so far as is reasonable practicable, to suit the needs and requirements of the pre and post birth mother, with regards to their health and safety. Amended work arrangements may become increasingly necessary in the last 8-12 weeks of pregnancy due to increasing size (e.g. need to review suitability of workstation, personal protective equipment etc).

#### Suitable Alternative Employment

Where an assessment identifies a risk to the health and safety of the worker then action must be taken to remove her form the risk. For example

- Can the working conditions and/ or hours be altered to remove the risk?
- Can suitable alternative work (at the same rate of pay) be offered for as long as necessary?

If the the risk cannot be eliminated expectant mothers should be given paid leave on normal pay, including all contractual payments, for as long as is necessary in order to protect their health and safety.

#### Antenatal Care

Managers must make arrangements for expectant mothers to have reasonable paid time off work for antenatal care on production of evidence of antenatal appointments. This includes any antenatal appointments recommended by the Midwife, GP or Consultant. This arrangement is irrespective of weekly working hours or how long an employee has been in service.

## **Resting/ Breastfeeding**

WHSWR require 'suitable and sufficient' facilities for pregnant or nursing mothers to rest. In practice this means that you must identify a room which has a 'bed' or similar and a means of privacy e.g a turnbuckle lock.

There is no time limit on how long a nursing mother can continue breastfeeding.

It is good practice to provide a healthy and safe environment for nursing mothers to express and store milk. These facilities could be included in the 'rest area' that you must provide for pregnant and nursing mothers.

A rest area could be achieved by having a 'multi purpose' first aid room, which typically has access to washing facilities and a bed to rest on. A small refrigerator could be provided to store expressed milk. The room must afford privacy and the ability to enable high standards of hygiene. Toilets are not considered to be an acceptable area for this purpose.

#### Smoking

The council has a Tobacco Policy to protect employees from exposure to tobacco smoke. However, some employees may be exposed to passive smoking while meeting clients in their home. Under these circumstances the employee can ask the person(s) to refrain from smoking for the duration of the visit. If they decline to do so, the employee has the right to suspend the visit and report the matter to their line manager who will make alternative arrangements with the client.



#### EXPECTANT OR NEW MOTHERS

#### **RISK ASSESSMENT OF WORK ARRANGEMENTS (Stage 2)**

In order to help them fulfil their work commitments to the best of their ability full and proper consideration must be given to the condition of expectant and new mothers throughout the term of their pregnancy and post-natal period. This assessment will assist in highlighting any hazards, and through subsequent appropriate action, eliminate or minimise any risk posed to new and expectant mothers.

Employee's Name:	
Post Held:	Location:
Service	

#### EXPECTANT MOTHER

Tick box which best describes the employee's stage of pregnancy 1<sup>st</sup> trimester 1-14 wks

# NURSING MOTHER

Tick box which best describes the<br/>employee's state as nursing motherUp to 3 months post birthBetween 3 & 6 months post birthBreast Feeding

3 <sup>rd</sup> trimester	29-40	wks
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2<sup>nd</sup> trimester 15-28 wks

AIN ELEMENTS OF POST	

DOES THE JOB PRESENT RISKS FROM THE FOLLOWING	YES	NO
(those marked ✓ need action)	$\checkmark$	$\checkmark$
SHIFT WORK		
Does the employee work nights/split shifts?		
(alternative arrangements may be required)		
DISPLAY SCREEN EQUIPMENT		
Does the employee use this type of equipment on a daily basis and		
normally for continuous spells of one hour at a time?		
(If Yes you will need to complete Cardinus assessment at each		
trimester)		

DOES THE JOB PRESENT RISKS FROM THE FOLLOWING	YES	NO ✓
(those marked ✓ need action)	v	v
BIOLOGICAL AGENTS		1
Exposure to harmful biological agents? e.g. Hepatitis, HIV, Weils		
Disease, etc (check the HSE guide at		
http://www.hse.gov.uk/pubns/books/hsg122.htm		
Rubella or other childhood diseases e.g. Chicken Pox		
Risk of exposure to animal diseases		
Risk of contact with sewage		
PHYSICAL AGENTS		
Exposure to stress/ mental fatigue		
Exposure to shocks, repeated movements or actions		
Require you to sit/stand awkwardly/stand for lengthy periods		
Lifting carrying, pushing, pulling of loads which may present risks		
Exposure to 'high' noise levels (where you need to shout to be heard)		
Exposure to extremes of heat/cold		
Risks from travelling/ driving due to posture or fatigue		
Exposed to risk from 'violence' at work		
Work at height or confined spaces		
Lone worker	+	
	-	
Has to work at a pre-determined pace		
CHEMICAL AGENTS	T	
Contact with hazardous substances? (If yes, review COSHH		
assessments paying particular attention to Toxic' and 'R' markings		
that can have an effect on the unborn child and breast-fed babies.		
Exposure to passive smoking at work		
Exposure to: carbon monoxide		
lead		
asbestos		
mineral oils		
If yes, employee must be removed from tasks where exposure is likely.	<u>I</u>	1
PERSONAL PROTECTIVE EQUIPMENT		
Does the employee wear 'PPE' at work?(If yes, review to ensure		
'suitable' for her current condition)		
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WORKPLACE FACILITIES – Are/is there		

WORKPLACE FACILITIES – Are/is there	
Facilities to rest/lie in private?	
Fresh supply of wholesome drinking water?	
Adequate ventilation?	
Comfortable range of temperatures?	
Clean toilet facilities?	
Access to first aid- people and equipment?	
BREASTFEEDING	
Is there a private, healthy & safe environment to express milk (not	
toilets)?	

Give details of any issues regarding the workplace and/or aspects of pregnancy that

may be causing concern e.g. morning sickness, comfort, health.

## DISCUSSION BETWEEN MANAGER AND EMPLOYEE

DISCUSSION POINT	ACTION AGREED	OUTCOME

Line Manager is required to review this assessment at all stages of pregnancy and breastfeeding to ensure suitable and sufficient controls are in place

#### I confirm that the employee has received a copy of this completed statement

#### **Risk Assessment carried out by:**

Name:	
Job Title:	
Signature:	Date: