



BUCKINGHAMSHIRE
NEW UNIVERSITY

EST. 1891



Health and Safety: Pregnancy and Maternity - Employees

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General Statement

- 1 All reasonable steps will be taken by the University to secure the health, safety and welfare of all persons at work or visiting the premises. However the University is aware that pregnant women and their unborn children are more susceptible to certain risks that may arise as a consequence of their employment.
- 2 Pregnant women will be given all the information, instruction and training necessary to enable them to work safely and without risks to their health.

New and expectant mothers

- 3 The University undertakes to assess all risks to new or expectant mothers arising from their work activities and to take appropriate preventive or control measures.
- 4 The University undertakes to regularly monitor the work undertaken by new or expectant mothers, especially during the development of pregnancy, in order to continually assess the individual's ability to work safely and without risk. All problems identified will be addressed, so far as is reasonably practicable, and all risks will be adequately controlled and safe systems of work established.
- 5 The University will also make arrangements for reasonable and appropriate health programmes for pregnant women and determine whether it will be necessary to impose limitations or special arrangements on medical grounds.

Safe system of work

- 6 The risk assessment should identify any inadequacies, which will need to be addressed in accordance with the particular circumstances. In determining what risks there are to pregnant women the following factors need to be considered:
 - a Exposure to physical agents such as vibration, noise, temperature extremes, poor or prolonged working postures and repetitive movements should be avoided or at least minimised.
 - b Manual handling activities should be assessed and the individual's ability to carry out these activities regularly monitored, this is particularly important as these abilities will alter as the pregnancy develops.
 - c Exposure to ionising radiation should be avoided where possible. If exposure is necessary it should be reduced to the lowest level and strict controls, including personal dosimeters provided.
 - d Exposure to biological agents, especially agents capable of causing abortion should be avoided. If exposure is necessary then the strictest controls should be implemented, paying particular attention to the containment requirements detailed in schedule 9 to the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

- e Exposure to chemical agents such as mercury, lead, substances absorbed through the skin, cytotoxic drugs, carbon dioxide and chemicals labelled as follows should be avoided or at least reduced to the lowest level possible:
 - o possible risk of irreversible effects
 - o may cause cancer
 - o may cause heritable genetic damage
 - o may cause harm to the unborn child
 - o possible risk of harm to the unborn child
 - o may cause harm to breast fed babies
- f Personal protective equipment (PPE) should be provided as a last resort, and must be suitable for controlling the identified risks. Training in the correct use of PPE and in understanding the limitations must be given.
- g Pregnancy is not a static condition and the nature and degree of risk will change as the pregnancy develops. These physiological changes must be taken into account when assessing the risks. The physiological aspects of pregnancy which need to be considered are:
 - o morning sickness, which is relevant where early morning shift work is undertaken or where there is exposure to nauseating smells
 - o backache associated with poor or prolonged posture or manual handling activities — this will become increasingly significant as the pregnancy advances
 - o haemorrhoids and varicose veins are associated with posture, the former also with hot work environments
 - o the increasing physical size of pregnant women may affect their ability to wear PPE properly and consequently reduce the level of protection offered. It will also affect: the amount of work space needed for a pregnant woman to work comfortably, her ability to perform manual handling correctly and safely, and her co-ordination, mobility and dexterity. Consideration may need to be given to evacuation routes, especially where they involve awkward and difficult stairs, ladders etc.
 - o many pregnant women will need to make increasingly regular visits to the toilet; so it is important that they are able to leave their job easily and have readily accessible facilities
 - o as the pregnancy develops, increasing tiredness will become an important factor and will affect shift work or overtime. This will also be significant where long periods of concentration are necessary and/or where machinery is operated etc.
 - o the increasing size of a pregnant woman may also adversely affect her balance; so hazards associated with slippery or uneven floors etc. will need to be addressed.

Example of risks and precautions taken

- 7 The table below contains a list of a typical risk to pregnant women or new mothers and the sort of action that should be taken (note that this is not an exhaustive list as different projects may engender different arrangements and risks).
- 8 Each employee should be considered as an individual when identifying and controlling risks.

Risk Element	Impact on Women	Precautions (if not possible, re-assign or provide paid leave)
Night Work	Adverse health impact	If employee has a medical certificate stating that night work could affect her health and safety, you must offer alternative, suitable daytime employment on terms and conditions no less favourable than before.
Early-morning shift work	Impacted with morning sickness	Consider changing hours of work, particularly during first trimester.
Manual handling	Less physical capability and possibility of harm when pregnant or following birth (especially after caesarean section)	Re-organise work so that manual handling is no longer part of that employee's tasks. Provide manual handling aids such as trolleys etc.
Standing / sitting for extended periods	Backache and general physical fatigue and discomfort	Provide good quality seating for any task requiring a lot of standing – consider changing heights of work surfaces etc. to facilitate sitting while working. Ensure workstation is suitable – not too cramped or restricted to find a comfortable sitting position. Ensure work is managed with breaks – or breaks within work pattern (variation) such as 10 minutes sitting work in every ½ hour or 5 minutes filing during every 20 minutes word-processing. Provide rest area, which is suitable and provides good seating and lying down facilities.
Location of work	Requirement to visit toilets more frequently	Re-locate work and/or provide flexible work/rest arrangements to accommodate needs.
Overtime or evening work	Fatigue	Display tolerance to inability to work similar extended hours to that of non-pregnant workers.
Temperature	Heat stress	Pregnant women are generally more sensitive to high temperature/poor ventilation and may more readily suffer heat stress – need to review ventilation arrangements, provide local control to heating, and consider auxiliary devices such as fans. Work / rest patterns may need to be modified to accommodate short-term heat discomfort.
Slippery and wet floors	Pregnant women may be less able to adjust posture and avoid falling over, and the consequence of a fall is	Review working arrangements for cleaners, slippery floor notices etc. and review work undertaken by pregnant women in wet areas such as kitchens.

potentially more serious

Risk assessment form for new and expectant mothers

See Appendix 1

- 9 The assessment form acts as an aide memoir to what should be considered in a typical office / workshop environment, and a record of the precautions, which are adopted, if any. The completion of this form represents the clearest evidence that the University is complying with its legal obligations to pregnant and nursing employee.

Summary policy statement

- 10 Women may be exposed to additional risks at work due to physiological differences, which make them more susceptible to harm in certain situations. These risks may be amplified for new or expectant mothers, where risks to unborn children must also be addressed. The consequences of hazardous work activities on the ability of women to have children should also be taken into account.
 - a Each employee should be considered as an individual when identifying and controlling risks.
 - b The risks to women and especially new or expectant mothers must be identified and controlled.
 - c The risk assessment should be dynamic and take account of the physiological changes that occur during pregnancy.
 - d Careful consideration should be given to any restrictions or other actions placed on the type of work which may be undertaken by women.

Appendix 1: Risk Assessment Form for New and Expectant Mothers

Name: Department:	Date baby due/was born:	
Things to check	Action taken – risk elimination or reduction	
Does the work programme involve any of the following:	Risk identified:	Action taken:
a) shift patterns, especially if they involve night work b) manual handling c) working in hot atmospheres d) any work liable to cause fatigue, physical or mental e) work on slippery or wet surface f) any work in which the taking of rest breaks and/or distance to rest room or toilets may be a problem g) working with chemicals h) Your workstation, do you require a workstation assessment? i) any other work which could pose a hazard to a pregnant or new mother		
Signed:..... Dated:..... Line Manager/Safety Manager Signed:..... Dated:..... New and Expectant Mother		

Appendix 2: Notification of Pregnancy or Recent Birth or Breast Feeding

Notification in writing of pregnancy or recent birth or breast feeding

Please delete inapplicable line(s)

Name:.....

Department:.....

*This is to confirm that I am pregnant and expecting a baby on:
(approximately)

*This is to confirm that I am a new mother, having given birth on:
(this applies to new Employee who have given birth within the last 6 months)

*This is to confirm that I am a new mother, and am breast-feeding my baby

*Please note that I formerly advised that I was breast-feeding my baby, this is no longer applicable

Signed:..... Date:.....

This form is to be completed for health and safety reasons. This information will be treated as confidential and used solely to trigger a review/assessment of your work to ensure that any potential hazards to you or your baby are evaluated and managed. For women who complete the form to confirm that they are breast-feeding, please note that you should advise your manager when this ceases to be the case.