

CORPORATE GUIDANCE

New and Expectant Mothers

Risk Assessment guidance for Manager's

Introduction

The Council has a Risk Assessment Procedure that should be read in conjunction with this guidance:

[Corporate Guidance on Risk Assessment \(word\)](#)

Managers should also consider reading the HSE Guidance for new and expectant Mothers who work: <http://www.hse.gov.uk/pubns/indg373.pdf>

Being pregnant or a new mother does not prevent employees from working and progressing their career. Many women work while they are pregnant and many return to work very soon after the birth of the child.

However, in the workplace there may be risks that could affect the health and safety of new and expectant mothers and that of their child.

Certain work activities may inherently have adverse health effects on New and Expectant Mothers and by identifying these activities; managers can protect these individuals from any adverse health effects from work activities they undertake.

This guidance sets out what you need to do as a manager when assessing the health and safety risks to new and expectant mothers. The general risks to staff are covered in the general guidance to risk assessment in the workplace.

Definitions

A new or expectant mother means an employee:

- a) Who is pregnant;
- b) Who has given birth within the previous six months (further defined in the Regulations as 'delivered a living child or, after twenty-four weeks of pregnancy, a stillborn child'). Or
- c) Who is breastfeeding

Manager's responsibilities:

The Management of Health and Safety at Work (Amendment) Regulations 1999 (**MHSW**), explicitly requires that special attention is given to identifying and controlling risks that may affect employees who fall into one of the above groups. The objective is to avoid adverse effects being suffered either by the woman herself, by the foetus or by the newborn child

Risks to new and expectant mothers must be assessed and reasonably practicable measures to control those risks must be introduced.

In addition to a **General Risk Assessment**, on receiving notification that an employee is pregnant, managers must assess the **specific risks** to that employee and take action to ensure that she is not exposed to anything that will damage either her health or that of the developing child

Managers must inform their female staff of any risks identified by the risk assessment, and of the control measures that are to be implemented to ensure that new and expectant mothers are not exposed to the risks that could cause them harm.

The main points are summarised below:

When assessing the risks to new and expectant mothers, Managers are required to:

- a) Assess risks to new and expectant mothers for staff and any other person who may be affected by our undertakings (e.g. contractors, visitors, clients etc.).
- b) Inform female employees of any risks identified by the risk assessment, and of the control measures which are to be implemented to ensure that they are not exposed to risks that could cause them harm;
- c) Avoid any risks by adjusting working conditions and/or hours of work, offering suitable alternative work, or suspending staff (on full pay) if it is not possible to control the risks by any other reasonable means;
- d) Keep the risks under review throughout the different stages of pregnancy; and,
- e) Ensure that new and expectant mothers do not work night shifts (Upon the recommendation of registered medical practitioner or midwife).

Common risks:

Any risk must be reduced to an acceptable level. It is preferable to remove the risk and if this is not possible, the risk must be controlled.

You will need to consider if hazards arising from the workplace/ work task pose risks specifically for new and expectant mothers:

- Physical
- Chemical

- Ergonomic
- Biological agents
- Working procedures and conditions

(A full list of hazards along with control measures is set out in **Appendix A Table 1**).

Any risks identified which relate to infectious or contagious disease should be considered only if the level of risk is greater than that the mother may be expected to be exposed to outside the workplace

In special cases professional advice from Occupational Health may be required

New and expectant mothers are particularly at risk from:

- Standing or sitting for long lengths of time, and/or continuous walking
- Work related stress
- Workstations and posture
- Exposure to infectious diseases
- Threat of violence in the workplace
- Long working hours
- Excessively noisy workplaces
- Exposure to radioactive materials
- Lifting/carrying of heavy loads

Many of the hazards included above are already covered by specific health and safety regulations e.g. Control of Substances Hazardous to Health – COSHH) and guidance on these regulations can be found under the Health and Safety section Intranet page.

Other Considerations:

In addition to risks presented by the work activity itself, there are aspects of pregnancy that may impact on the way the individual is able to work. Such aspects include sickness, backache, increasing size, frequent visits to toilet, tiredness, agility, balance and comfort. Managers must give consideration to these aspects as circumstances dictate. Changes of work activity or the way in which an activity is carried out may be required

In undertaking an assessment of the risk to new or expectant mothers in their work situation, welfare provisions need to be considered.

Consideration should be given to items such as:

- Ease of access and egress to and from the workplace,
- Temperature
- Noxious smells
- Proximity to toilet facilities
- Physical restrictions
- Availability of suitable rest area

The employee should be made aware of the need to advise her line manager of additional welfare requirements.

Breastfeeding:

The Assessment must include the risks posed to the unborn child or child of a woman who is still breastfeeding, not just risks to the mother herself.

There is no fixed time span for breastfeeding and it may vary considerably. During breastfeeding, the worker must not be exposed to risks that could adversely affect her health or that of the baby. The worker should inform their manager that they are breastfeeding and advice may be sought from Occupational Health.

Night Work:

Where an employee who is a new or expectant mother works at night, and has a medical certificate stating that night work could affect her health or safety, the Manager must consult with their Personnel Section with a view to either;

- a) Offering suitable daytime work if any is available; or if that is not reasonable,
Or
- b) To suspend her from work (on full pay) for as long as necessary to protect her health and/or safety.

Control Measures - Avoidance of Risk

Generally actions to reduce risk should entail:

- Eliminating the hazard
- Limiting exposure
- Changing the type of work
- Changing work routine.

Where, on an individual basis, it is not possible to sufficiently control any risks identified by the risk assessment, Managers must alter the working conditions or hours, if such alterations would avoid those identified risks.

In the event that it is not reasonable to alter the working conditions or hours, or if such alterations would not avoid the risks identified, then the employee shall be suspended (on full pay) for so long as is necessary to avoid such risk.

It should be noted that managers are not required to alter the working conditions or hours until the employee notifies the council in writing that she is pregnant, has given birth within the previous six months, or is breastfeeding.

Maintenance of Control Measures

Managers are not required to maintain any avoidance of risk measures detailed above if:

- a) An employee has notified the Council that she is pregnant, but failed, within a reasonable time, to obtain for the Councils' inspection, a certificate from a registered medical practitioner or registered midwife showing that she is pregnant;
- b) The Council knows that she is no longer a new or expectant mother;
- c) If the Council cannot establish whether she remains a new or expectant mother.

Reviewing assessment

Where an employee has informed her Manager that she is either expectant, has given birth or is breastfeeding, then the manager must keep the risks to the health and safety of new and expectant mothers under review throughout the different stages of pregnancy. (Although the hazards are likely to remain constant, the possibility of damage to the foetus as a result of a hazard may vary at different stages of pregnancy).

Summary of actions required:

- 1. Follow Council risk assessment procedure to include specific risks to new and expectant mothers
- 2. Upon being notified of pregnancy, carry out specific risk assessment to identify any additional risks
- 3. Implement measures for control of risk where necessary
- 4. Provide appropriate information to women of child-bearing age
- 5. Implement any further control measures required or remove worker from risk
- 6. Ensure that worker is not at risk if breastfeeding on return to work

7. Review arrangements periodically to ensure validity.

Model Risk Assessment for new and expectant mothers

HAZARDS & SITUATIONS	ASSOCIATED RISKS	CONTROL & PREVENTATIVE MEASURES
Mental & Physical fatigue and working hours	<p>Both mental & physical fatigue increases during pregnancy and in the postnatal period due to the various physiological and other changes taking place.</p> <p>Tiredness</p> <p>Stress & Stress related ill health</p> <p>Changes in blood pressure</p>	Consider flexible arrangements for working hours, include provisions for rest breaks, consider the frequency & timing of breaks and the location of the rest area and toilets.
Postural problems connected with the activities	<p>Fatigue from standing & other physical work has long been associated with miscarriage, premature birth and low birth weight.</p> <p>Strain & Sprain injuries could occur, in restricted workspaces, due to the increased abdominal size. Dexterity, agility, co-ordination, speed of movement, reach and balance may also be impaired.</p>	<p>Consider the duration of tasks and ensure the volume and pacing of work are not excessive. Staff should be given some control over how their work is organised.</p> <p>Ensure appropriate seating is available and systems are in place for longer break periods</p>

Occupational Stress	New & expectant mothers can be particularly affected by occupational stresses, for various reasons: Hormonal, physiological and psychological changes occur and sometimes change rapidly, affecting susceptibility to stress, or to anxiety or depression. Financial, emotional and job security may also have an affect.	Consider avoiding activities where stress is a known factor and put Measures in place to take into account known stress factors: Look at support for the individual to counter stress, whilst respecting privacy.
Standing Activities	Continuous standing and/or walking for long periods, during the working day, could contribute to an increased risk of premature childbirth	Seating is available and staff are advised to take regular breaks.
Sitting Activities	Pregnancy-specific changes in the coagulation factors and mechanical compression of the pelvic veins by the uterus pose a relatively high risk of thrombosis or embolism for pregnant women Sitting still for long periods may cause aching and oedema in the legs, and muscular pains in the lumber region	Ensure that medical advice is given to pregnant staff that standing and sitting for long periods is not advisable, and work patterns are in place to alternate between both, whilst taking regular breaks.
Welfare Facilities	Rest is important to new & expectant mothers. The need for rest is both mental & physical	Ensure pregnant staff have access to the occupational health suite, where they can sit & lie down comfortably in privacy, and without disturbance, at appropriate intervals. Ensure there are suitable washroom and toilet facilities available.
BIOLOGICAL AGENTS	ASSOCIATED RISKS	CONTROL & PREVENTATIVE MEASURES

Biological Agents	Many biological agents can affect the unborn child if the mother is infected during pregnancy. Other staff members could bring them in: i.e. Rubella (German Measles). HIV, Hepatitis, Herpes, TB, Chicken Pox, Typhoid etc.	Ensure there are no biological agents within the workplace at present. Other staff members will be required to inform their Manager immediately, if they have any health issues.
PHYSICAL AGENTS	ASSOCIATED RISKS	CONTROL & PREVENTATIVE MEASURES
Shocks, Vibration or Movement (Driving etc)	Regular exposure to shocks, i.e. sudden severe blow to the body or lower frequency vibration, (for example driving or riding in off road vehicles, or excessive movement) may increase the risk of miscarriage. Long-term exposure to whole body vibration may increase the risk of premature birth or low birth weight. Travelling in the course of work, and to and from the workplace, can be problematic for pregnant women, including fatigue, vibration, stress, static posture, discomfort and accidents. These risks can have a significant effect on the health of new and expectant mothers.	Ensure all work is organised in such a way that pregnant women and those who have recently given birth are not exposed to tasks entailing risk arising from unpleasant vibration of the body. Only short driving trips are undertaken in an 'on road vehicle' and only if the person feels fit & well enough to do so, this should be monitored constantly. Also consider that another staff member accompanies Pregnant drivers.
Noise	Prolonged exposure to loud noise may lead to increased blood pressure and tiredness. Experimental evidence suggests that prolonged exposure of the unborn child during pregnancy may have an effect on later hearing and that low frequencies have a greater potential for causing harm.	As part of the workplace assessment you must ensure that noise levels do not exceed the current national exposure limits. You must also ensure that there is no low frequency noise equipment in use.

CHEMICAL AGENTS	ASSOCIATED RISKS	CONTROL & PREVENTATIVE MEASURES
Chemicals	Some chemicals can endanger the health of pregnant women and the unborn child	<p>There are no substances listed in Annex 1 of Directive 67/548/EEC used within the print room.</p> <p>There are no dangerous percutaneous chemical agents used. Other hazardous substances are used intermittently, and in small amounts, to keep exposure well below levels that could cause harm.</p> <p>Most of the hazardous substances used within the print room are irritants with a small amount labelled harmful if swallowed. Only small amounts of these substances are used at any one time.</p> <p>PPE (gloves aprons etc) is available and used when required</p> <p>There is a robust housekeeping regime in place.</p>
WORKING CONDITIONS	ASSOCIATED RISKS	CONTROL & PREVENTATIVE MEASURES
Manual handling of loads	Manual handling of heavy loads is considered to pose a risk to pregnancy, such as risk of foetal injury and premature birth	Pregnant staff must not undertake heavy manual handling tasks. Note: All pregnant staff are advised to avoid any manual handling and seek help from colleagues
Movement and Posture	<p>The nature and extent of risk of injury or ill health resulting from movements & posture during and after pregnancy will depend on a number of factors:</p> <ul style="list-style-type: none"> • The nature, duration and frequency of tasks/movement • The pace, intensity and variety of work • Patterns of working time and rest breaks • Ergonomic factors and the working environment 	<p>Flexible arrangements for working hours should be in place, including provisions of rest breaks and their frequency & timing</p> <p>Ensure that advice is given to pregnant staff that standing and sitting for long periods is not advisable, and work patterns are in place to alternate between both to maintain healthy circulation, whilst taking regular breaks</p> <p>Ensure that the job content has been redesigned and adapted to allow regular movement/exercise.</p>

	<ul style="list-style-type: none"> • The suitability and adaptability of work equipment involved <p>Hormonal changes in women who are pregnant or have recently given birth can affect the ligaments, increasing susceptibility to injury. Postural problems can arise at different stages of pregnancy, and on returning to work depending on the individual and her working conditions</p> <p>These problems may increase as the pregnancy progresses, especially if the work involves awkward movements or long periods of standing or sitting in one position where the body is exposed to risks of prolonged static load or impaired circulation.</p> <p>These may contribute to the development of varicose veins and haemorrhoids as well as backache</p>	
Work Equipment & Personal Protective equipment (PPE)	<p>Work equipment and PPE is not generally designed for use by pregnant women. Pregnancy (and breastfeeding) involves physiological changes, which make some work and protective equipment not only uncomfortable but also unsafe for use in some cases.</p> <p>E.g. where equipment does not fit properly or comfortably, or where the operational mobility, dexterity or co-ordination of the woman concerned is temporarily impeded by her pregnancy or recent childbirth.</p>	<p>Ensure the job content has been redesigned and adapted to allow regular movement/exercise</p> <p>Ensure any work equipment and PPE in use does not interfere with mobility, dexterity, co-ordination etc at this time. Implement a system for ongoing monitoring.</p>

Having considered the above you must now complete the summary risk assessment sheet below.

Summary risk assessment

ESTABLISHMENT: ROOM / AREA:	ACTIVITY/SITUATION:	NAME:
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HAZARDS IDENTIFIED		POPULATION WHICH MAY BE AFFECTED				POPULATION PARTICULARLY AT RISK			
		EMP	C/S	CON	V/P	CRN	YPS	NEM	DIS
a)	Mental & physical fatigue: postural problems: stress								
b)	Standing/Sitting Activities: Welfare: Biological agents:								
c)	Physical agents: Noise: Driving: Chemical agents:								
d)	Working conditions: Manual handling:								
e)	Movement & Posture: Work equipment & PPE								

EMP=Employee, C/S = Client / Student, CON = Contractor, V/P = Visitor / Public,
CRN = Children, YPS = Young Persons, NEM = New & Expectant Mothers, DIS = Disabled

EXISTING CONTROL MEASURES (e.g. procedures, supervision, training, safety signs and information, PPE etc.)	
a)	
b)	
c)	
d)	
e)	

	POTENTIAL SEVERITY				LIKELIHOOD (Taking existing control measures into consideration)				RISK RATING (Sev. x L'hd)	ADDITIONAL CONTROL MEASURES TO BE IMPLEMENTED (if required)
	1	2	3	4	1	2	3	4		
a)										
b)										
c)										
d)										
e)										

COMPLETED BY: Name: Signature: Date:

SEVERITY: 1=Trivial, 2=Minor Injury, 3= Serious injury 4= Major Injury or Death LIKELIHOOD: 1=Remote, 2=Possible, 3=Probable, 4=Likely

RE ASSESSMENT (Following implementation of control measures) OR REVIEW

	POTENTIAL SEVERITY (3)				LIKELIHOOD (3) (Taking existing control measures into consideration)				RISK RATING (Sev. x L'hd)	ADDITIONAL CONTROL MEASURES TO BE IMPLEMENTED (if required)
	1	2	3	4	1	2	3	4		
a)										
b)										
c)										
d)										
e)										

COMPLETED BY:	Name:	Signature:	Date:
SEVERITY: 1=Trivial, 2=Minor Injury, 3= Serious injury 4= Major Injury or Death LIKELIHOOD: 1=Remote, 2=Possible, 3=Probable, 4=Likely			