HEALTH OF THE NEW OR EXPECTANT MOTHER AND HER CHILD

1. PURPOSE

The purpose of this document is to describe the policy and procedures for protecting the health of the new or expectant mother as required by the Management of Health and Safety at Work Regulations 1999.

2. LEGAL REQUIREMENTS

**Management of Health and Safety Regulations 1999 (MHSW)** provides the legal requirements on employers to protect their employees who are or in the future could be a new or expectant mother.

Employers are required to assess risks to all their employees and to do what is reasonably practicable to control those risks. They must include any hazards/risks to new and expectant mothers, when conducting this risk assessment. More information on how to do a risk assessment can be found in HSE's guidance *Five Steps to Risk Assessment*.

It is important that female employees inform their employers that they are pregnant, have given birth in the previous six months or are breastfeeding. The notification should be given in writing, as early as possible.

When employers receive written notification from an employee that she is pregnant, has given birth within the previous six months or is breastfeeding, they must conduct a specific risk assessment. The assessment must take into account any advice provided by the woman's GP or Midwife on her health.

If any risks are identified then employers must take action to remove, reduce or control the risk. If the risk cannot be removed employers must:

**Action 1**
Temporarily adjust her working conditions and/or hours of work; or if that is not possible

**Action 2**
Offer her suitable alternative work (at the same rate of pay) if available; or if that is not feasible

**Action 3**
Suspend her from work on paid leave for as long as necessary to protect her health and safety and that of her child.

3. RESPONSIBILITIES

1. Employee’s Midwife/General Practitioner has the responsibility to enquire about the employee's occupation and inform the employer of any specific risks regarding that employee (for example if the employee has an underlying medical condition that needs to be taken into account when carrying out the risk assessment).
Health of the New and Expectant Mother and her Child

2. The employer has the responsibility to carry out a specific pregnancy risk assessment (taking into account the information supplied by the GP/midwife) and put in place the necessary measure to protect the employee/pregnancy. There is no legal obligation for this to be done by an OH professional but this is the usual course that good employers take.

3. The University Safety Office is responsible for the University wide prevention and protection aspects of the policy

4. The School Safety function is responsible for the School level issues especially the risk assessment and control aspects of the policy.

5. The University Occupational Health Service is responsible for the health aspects of the policy.

6. Heads of Schools and Directors of Services are responsible for ensuring that the procedure is applied within their areas of responsibility and that recommendations regarding individuals and their work are complied with.

7. Individuals are responsible for notifying the Occupational Health Department of their pregnancy and complying with appropriate advice and recommendations.

Female employees considering becoming pregnant and/or attempting to conceive are also advised to contact Occupational health in confidence to seek advice on workplace hazards and guidance on any actions required.

4 DEFINITIONS

4.1 New or expectant mother

Is pregnant, has given birth within the previous six months or who is breastfeeding

4.2 Given birth

Delivered of a living child or, after 24 weeks of pregnancy, a still born child

5 PROCEDURE

5.1 INTRODUCTION

Pregnancy is not an illness and although it is important to realise that there is a natural incidence of problems for the new or expectant mother and for the unborn child, it is known that their health may be affected by external physical or chemical factors.

Such factors include heavy smoking, excessive alcohol intake, drug abuse and virus infections. It is known that some external factors including exposure to biological agents, chemicals, ionising radiations and physical stress may cause problems and this has led to concern that exposure of new or expectant mothers in the workplace may produce adverse effects.

There is no totally reliable test for detecting potentially harmful agents and it is not therefore possible to rely entirely upon known harmful effects when formulating a policy for dealing with this problem. This policy therefore concentrates on minimising the exposure of new or expectant mothers to all chemicals and other potentially harmful agents. However it is also necessary to consider the action to be taken when information on adverse effects is available.
Health of the New and Expectant Mother and her Child

It is also known that excess physical work, fatigue and poor working conditions may cause adverse effects to the new or expectant mother or unborn child, particularly in the later stages of pregnancy. The policy is therefore also concerned with ensuring that expectant mothers are provided with satisfactory working conditions and do not put themselves or the unborn child at risk by carrying out excessive physical work

5.2 Procedure

1. All practicable measures will be taken both by the University and by the employee to minimise exposure to chemicals and other potentially harmful agents to all employees.

2. Possible adverse effects on the new or expectant mother and the unborn child will be taken into account during any assessment of the risks posed by working conditions or in the setting of any handling standards or exposure limits. These assessments will be made available to the relevant employees.

3. The Occupational Health department will draw up Generic Pregnancy Risk Assessments for those occupations where a specific risk in pregnancy has been identified (exposure to hazardous agents, high level of manual handle, work with radiation etc).

4. Employees will be asked to report to the Occupational Health Department as soon as pregnancy is suspected so that any necessary advice can be given.

5. On notification of pregnancy the occupational health department will see the employee concerned and using the appropriate Generic Pregnancy Risk Assessment determine if a specific pregnancy risk assessment is required. This specific risk assessment will be the responsibility of the line management and Occupational Health will assist with this risk assessment where required.

6. New or expectant mothers will be given advice by Occupational Health on the possible hazards of exposure to harmful agents during pregnancy. They will receive appropriate levels of information, instruction and training on what is required of them, and the particular risks and measures in place to effectively manage these risks - the findings of any risk assessments.

7. As required by the Workplace (Health, Safety and Welfare) Regulations, appropriate facilities will be made available for expectant and breastfeeding mothers to rest e.g. rest room equipped with a comfortable chair and provision for privacy and quiet.

8. If in spite of all practicable measures being taken, the University Occupational Health Service considers that there is an unacceptable reproductive risk to a new or expectant mother; the University will take all reasonably practicable steps to find alternative employment for her. If satisfactory alternative employment cannot be found the employee will be medically suspended from employment in accordance with the terms of the Employment Protection (Consolidation) Act 1978 as amended by the Trade Union Reform and Employment Rights Act (1993).

9. Where a new or expectant mother is unhappy about continuing her employment because of fears about the effects on her pregnancy, the University, even though the occupational health service feels that there is no risk, should sympathetically consider finding suitable alternative employment. No guarantee can be given however that such suitable employment will be available.
10. Information will be given to employees as part of their induction and on-going safety training on any known reproductive problems associated with their employment. Any such problems must be properly explained in a sensible and understandable fashion.

11. Guidelines will be issued by the Occupational Health Service on the materials and types of work which have the potential to give rise to risks to the new or expectant mother or the unborn child. Managers of departments involved with such materials or work should discuss this with Occupational Health and the Safety Office in the usual manner so that safe working conditions can be established.

12. The University will treat sympathetically requests for special working conditions which are medically required as a result of pregnancy or breastfeeding.

5.3 ACTION IN THE EVENT OF PREGNANCY

1. Members of staff must inform their School/Service and HR as soon as possible after receiving confirmation that they are pregnant – see flowchart. The School or Service will request confirmation of the pregnancy from the expectant mother and review, and where necessary revise risk assessments to take account of the individual's pregnancy and potential return to work.

2. All employees will be asked to report to the Occupational Health Service as soon as pregnancy is confirmed. Employees working in areas where there is a possible risk are encouraged to notify the Occupational Health Service as soon as pregnancy is suspected or planned.

3. The Occupational Health Service will apply the generic pregnancy risk assessment for the employee’s job.

As a result of these risk assessments the Occupational Health Service will supply:

- Verbal advice
- Specific advice leaflets where appropriate

and, with the employee’s permission, will send a report to the line manager of the employee detailing:

- Suitability for overtime/night working
- Specific restrictions on weight or physical work
- Specific restrictions on exposure to chemical and other harmful agents

4. Employees working with agents with a specific risk in pregnancy will be seen for review by the Occupational Health department 12 weeks before the expected date of delivery and any changes in work restrictions will be notified to managers.
5.4 GUIDELINES FOR THE WORK CAPABILITIES OF THE NEW OR EXPECTANT MOTHER

Advice on the specific hazards of work for new and expectant mothers is given in HSG122 New and expectant mothers at work - A guide for employers. This document should be read in conjunction with the advice given below.

5.4.1 General

New or expectant mothers should seek advice from the Occupational Health Service if they wish to work any of the following:

- In excess of 48 hours per week
- Nightshifts
- After the 36th week of pregnancy

5.4.2 Working conditions and facilities

Pregnant employees may be particularly susceptible to the effects of such factors as temperature, lighting and noise. Special consideration will be given to the needs of pregnant employees when conditions are outside the comfort zone (normally taken to be between 18 and 24 deg C).

Suitable facilities will be provided by Schools and Services for pregnant employees to rest, and for breastfeeding mothers to express and store milk. e.g. rest room equipped with a comfortable chair and provision for privacy and quiet.

Adequate toilet facilities as detailed within Workplace (Health & Safety Welfare) Regulations 1992 will be provided by Schools and Services for pregnant employees.

5.4.3 Overtime and work out of normal hours

Reasonable amounts of overtime are acceptable provided that there are no problems with the pregnancy that could be exacerbated by excessive overtime. Exact levels cannot be laid down as it is dependent on the stage of pregnancy, the age of the pregnant mother and her general state of health. However specific advice should be sought from the Occupational Health Service on each occasion in which:

- Overtime exceeds eight hours per week
- There is not a break of at least twelve hours between shifts

Pregnant employees should seek advice from the doctor/midwife in charge of the pregnancy of the advisability of night work and shift work. On receipt of a recommendation the University will provide alternative day shift work.

MHSW Regulations also states that where a new or expectant mother works nights and provides a medical certificate from her GP or Midwife which says that working nights will affect the health of the woman, then the employer must suspend her from work, on full pay, for as long as necessary. However, the Employment Rights Act 1996 provides that where appropriate, suitable alternative work should be offered, on the same terms and conditions, before any suspension from work.
For the purposes of this document overtime is assumed to be any working time over 40 hours per week. This will be applied in all cases (including those cases where no specified working hours exist in the contract of employment).

### 5.4.4 Ergonomic considerations

Pregnant employees may have restricted ability to perform certain physical tasks.

Physical capacity will vary according to stage of pregnancy and general physical capacity, however a specific risk assessment should be carried out where there is:

- Work which because of problems with posture, reach or clearance could cause ergonomic problems to the pregnant employee.
- Heavy or strenuous work
- Repeated heavy lifting

Strict limits on weights are not laid down as much depends on the stage of the pregnancy, the physique of the person involved, on the nature and shape of the materials to be lifted and the nature of the lift, but as a general guide after 20-24 weeks lifts should not exceed one half of the guidance weights issued by the HSE under the Manual Handling of Loads Regulations for female operators.

### 5.4.5 Ionising Radiations

It is known that Ionising radiations may cause adverse reproductive effects.

With respect to sealed sources of radiation the dose limits for any woman of reproductive capacity are:

<table>
<thead>
<tr>
<th>Location</th>
<th>Dose Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdomen</td>
<td>13.0 mSv in any 3 months</td>
</tr>
<tr>
<td></td>
<td>10.0 mSv during the declared term of a pregnancy.</td>
</tr>
</tbody>
</table>

However the principal danger is with unsealed sources because of the risk of absorption into the body.

In all cases of pregnant employees and new mothers working with ionising radiations or radioactive material a specific risk assessment should be carried out.

Pregnant employees should not handle unsealed sources where there is a risk of exposure.

### 5.4.6 Industrial and Laboratory Chemicals

Most such chemicals have not been tested for reproductive effects and therefore all must be handled with extreme care during pregnancy. It should be noted that all toxic chemicals and carcinogenic chemicals are very likely to have serious reproductive effects and great care must be taken in handling these during pregnancy. The guidance under the regulations points out the particular hazard of working with chemicals toxic by skin absorption.

Information is available on the reproductive effects of a limited number of Industrial and Laboratory chemicals. The Occupational Health Service can be consulted on the problems of specific chemicals, however as a general rule chemicals covered by the
label risk phrases set out below pose a specific risk and will require a specific risk assessment to be carried out.

- Toxic (R23, R24 or R25) or Very toxic ((R26, R27 or R28)
- Danger of cumulative effects (R33)
- Danger of very serious irreversible effects (R39)
- Limited evidence of a carcinogenic effect (R40)
- May cause cancer (R45, R49)
- May cause heritable genetic damage (R46)
- Danger of serious damage to health by prolonged exposure (R48)
- Possible risk of impaired fertility (R60)
- May impair fertility (R62)
- Possible risk of harm to the unborn child (R61)
- May cause harm to the unborn child (R63)
- May cause harm to breast fed babies (R64)
- Possible risk of irreversible effects (R68)

For these compounds where an official exposure limit exists exposure should be controlled to a level below 10% of the exposure limit. Otherwise exposure should be controlled to less than 0.01 mg/m³ for solids and less than 0.1 ppm for gases and vapours. Within laboratories these materials must be handled to a high level of containment within a tested and validated fume cupboard, weigh hood or biosafety cabinet. Where large quantities are handled or procedures such as sieving or milling are being carried out further advice should be sought.

5.4.7 Potent carcinogens, cytotoxic and anti-neoplastic agents (anti-cancer drugs)

Most cytotoxic and antineoplastic agents have severe reproductive adverse effects. Pregnant employees should not handle these materials where there is any risk of exposure including accidental exposure resulting from spillage or failure of primary controls.

5.4.8 Agricultural, horticultural and animal work

This type of work can pose significant biological hazards in pregnancy. Pregnant women must not work with calving cows, farrowing sows, or lambing ewes, and must not handle cat faeces.

Significant risk may also attach to work with pesticides and weed killers which are toxic by skin absorption. Work with these compounds can only be carried out following a specific risk assessment which indicates that no exposure will occur. Reliance on personal protective equipment to achieve this is not permissible.

5.4.9 Microbiological hazards in laboratories

Pregnant women and new mothers must not work with, or be exposed to at work, those agents which are known to present n especially high risk as listed in the ACDP Infection Risks to new or Expectant Mothers in the Workplace 1997. The following is a list of these agents as detailed in the ACDP guidance that are considered to present a special risk in pregnancy. Work with any these agents should requires a specific risk assessment. Additionally, pregnant women and new mothers should not work with, or be exposed to at work, any HG2 or HG3 biological agents because of the general risks associated with infections.
<table>
<thead>
<tr>
<th>Type of Agent</th>
<th>Species of Agent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bacteria</td>
<td>Brucella spp.</td>
</tr>
<tr>
<td></td>
<td>Chlamydia psittaci</td>
</tr>
<tr>
<td></td>
<td>Chlamydia trachomatis</td>
</tr>
<tr>
<td></td>
<td>Listeria monocytogenes</td>
</tr>
<tr>
<td></td>
<td>Treponema pallidum</td>
</tr>
<tr>
<td>Protozoa</td>
<td>Toxoplasma gondii</td>
</tr>
<tr>
<td>Viruses</td>
<td>Rubella</td>
</tr>
<tr>
<td></td>
<td>Cytomegalovirus</td>
</tr>
<tr>
<td></td>
<td>Herpes simplex virus 1 and 2</td>
</tr>
<tr>
<td></td>
<td>Varicella zoster virus</td>
</tr>
<tr>
<td></td>
<td>Parvovirus B19</td>
</tr>
<tr>
<td></td>
<td>Mumps virus</td>
</tr>
<tr>
<td></td>
<td>HIV</td>
</tr>
</tbody>
</table>

5.4.10 Visual Display Units

The Health & Safety Executive do not feel that there is any risk to pregnant employees from such work except where ergonomic problems occur due to problems with posture, reaches and clearances. However all cases where concern is expressed by an employee should be treated sympathetically.

5.4.11 Diving

Diving should be avoided during pregnancy.
Appendix I – Management of Pregnancy

Pregnant Employee

Notify Manager/HR As Soon As Pregnancy Is Confirmed

HR Referral to Occupational Health for Assessment

Pregnancy Risk Assessment Decision If Detailed Risk Assessment Required

Information on risks obtained from School Safety Office

Detailed risk assessment by OH in conjunction with school safety office

Advice to Management and Employee on Controls Required And/Or Redeployment If Risk Cannot Be Controlled

Periodic Review of Female Pregnancy/Post Delivery

Management Update

Detailed Risk Assessment Not Required

Advice Given To Pregnant Female
Health of the New and Expectant Mother and her Child

Appendix II – Occupational Health risk Assessment form to be completed by Occupational Health

**OCCUPATIONAL HEALTH RISK ASSESSMENT FOR THE EXPECTANT MOTHER**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Payroll Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department:</td>
<td>Shift</td>
</tr>
<tr>
<td>E.D.D:</td>
<td>Pregnancy Stage: Weeks</td>
</tr>
</tbody>
</table>

*Description of principal work area:*

*Does the employee's usual work involve:*

<table>
<thead>
<tr>
<th>Sitting</th>
<th>Sitting/Standing</th>
<th>Standing</th>
</tr>
</thead>
<tbody>
<tr>
<td>No lifting</td>
<td>Minimal Lifting</td>
<td>Lifting to guidelines</td>
</tr>
</tbody>
</table>

*Does the employee find their workstation Comfortable Uncomfortable*

Details

*Does the Employee work regular overtime? Yes No*

If Yes, average weekly hours ....................

Does the employee have an existing medical problem that may affect their health during pregnancy? (eg diabetes, varicose veins)

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*Does the Employee have any minor discomforts of pregnancy e.g. morning sickness*

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### Health of the New and Expectant Mother and her Child

<table>
<thead>
<tr>
<th>Family history:</th>
<th>Twins</th>
<th>Hypertension</th>
<th>Diabetes</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Family History: 
- Twins
- Hypertension
- Diabetes
- Other

Previous Obstetric History:
- 
- 
- 
- 

Does the employee work with:
- Chemicals
- Pharmaceuticals
- Biological agents
- Radioactive materials
- In agriculture or horticulture

If YES give details:
Name and Address of Family Doctor:

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…………………………………………………………………………………………
…………………………………………………………………………………………Tel:…………
………………………….

Risk assessment

Applicable generic risk assessment

Specific Risk Assessment required Yes/No

Additional comments, adaptations or restrictions

Information supplied