



**EAST RIDING**  
OF YORKSHIRE COUNCIL

## **Safety Guidance Document**

### **For New and Expectant Mothers at Work**

<b>Lead Directorate and Service:</b>	Corporate Resources - Human Resources, Safety Services.
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<b>September 2010</b>	<b>September 2012</b>	CMT 12 April 2010 Minute 12716	New Guidance
<b>June 2012</b>	<b>September 2014</b>		Reviewed with minor amendments making reference to potential risk associated with moving and handling of people
<b>December 2013</b>	<b>September 2014</b>		Removed reference to Arvato government services.
<b>August 2014</b>	<b>June 2014</b>		Minor amendments to text – Risk assessment amended

## CONTENTS PAGE

Background .....	1
Foreword.....	1
Implementation .....	1
Roles and Responsibilities .....	2
Directors and Heads of Service .....	2
Managers and Headteachers.....	2
Employees .....	2
Safety Services.....	2
Occupational Health .....	3
Human Resources .....	3
Arrangements .....	3
Risk Assessment .....	3
Hazard Identification .....	3
Physical Hazards .....	3
Shocks, Vibration or Movement .....	3
Manual Handling.....	3
Noise .....	4
Radiation.....	4
Other Physical Hazards.....	4
Biological Hazards .....	4
Chemical Hazards .....	5
Working Conditions .....	5
Ergonomic Factors .....	5
Thermal Comfort .....	5
Mental and Physical Fatigue .....	6
Other Working Conditions .....	6
Physical Aspects of Pregnancy.....	6
Recording the Risk Assessment and Agreed Actions .....	8
Implications of the Risk Assessment .....	8
Pregnancy-related Sickness Absence .....	9
Links with Other Council Guidance Documents .....	9
Appendix 1 .....	10
Appendix 2.....	11

## **1. Background**

This safety guidance document provides information on the risks associated with new and expectant mothers at work, and the management of such risks. It is important to note that employers have a duty to assess the hazards and risks to all females of child-bearing age, but specific assessment should be made in relation to new and expectant mothers.

A new or expectant mother is defined in the Management of Health and Safety at Work Regulations 1999 as an employee who is pregnant, who has given birth within the past six months, or who is breastfeeding.

Pregnancy is not an illness and most women continue to work during pregnancy, and return to work whilst breastfeeding, they may be more vulnerable to specific risks within the working environment. This document seeks to identify particular hazards and offers guidance to managers and headteachers on how to reduce the risks, so far as is reasonably practicable.

## **2. Foreword**

In accordance with the Council's Corporate Safety Policy, the Council is committed to pursuing continual improvements in health and safety. This safety guidance document supports this commitment and forms part of the Council's health and safety management system.

## **3. Implementation**

Directorates are responsible for the implementation of this safety guidance document, and communication of its content as appropriate.

This safety guidance document is available on the Safety Services intranet page and, where employees do not have access to the Council's intranet, via their line manager/headteacher.

The Council relies on the co-operation of all employees, and trades unions for the successful implementation of this safety guidance document.

A review of this safety guidance document will be undertaken three years after its implementation, and where significant changes in legislation or working practices deem this appropriate.

## **4. Roles and Responsibilities**

### **4.1 Directors and Heads of Service**

Directors and heads of services are ultimately responsible and accountable to the Chief Executive for ensuring this safety guidance document is issued to their management team.

### **4.2 Managers and Headteachers**

Managers and Headteachers are responsible for achieving the objectives of this safety guidance document where relevant to their area of service delivery and are responsible for ensuring that:

- The information contained within this safety guidance document is implemented and complied with;
- An individual risk assessment is carried out (Appendix 2), as soon as notification of the pregnancy is provided;
- Control measures, safe systems of work or alternative working arrangements are introduced to remove or reduce any potential risks to a reasonable level;
- Procedures for reducing risks are monitored every 4-6 weeks, to ensure they are still suitable and sufficient;
- They make reference to the Maternity Pay and Leave Policy and Procedures where necessary
- Relevant information, instruction and training is provided to staff to enable them to undertake their job safely and without risk;
- Adequate personal protective equipment is provided and staff are suitably trained in its use.

### **4.3 Employees**

Employees must ensure they carry out assigned tasks and duties in accordance with information, instruction, training and agreed safe systems of work. Specifically they must ensure that:

- This safety guidance document is complied with;
- They notify their manager of any pre-existing health conditions, of themselves or the unborn child, which may be exacerbated during normal work activities;
- They participate in the completion and review of risk assessments adopting control measures, as relevant;
- They notify their manager of any subsequent information provided by their health care professionals;
- Inform the employer that they are, or plan to return to work, whilst breastfeeding;
- They cooperate to enable their manager/headteacher to formulate and implement effective management systems;
- Their own health and safety and that of others are not put at risk by their actions.

### **4.4 Safety Services**

The primary function of Safety Services is to support the Council and its employees by providing professional, authoritative, impartial advice on all aspects of health, safety and

wellbeing. Where managers/headteachers require further assistance, Safety Services will advise on achieving compliance with this safety guidance document.

#### **4.5 Occupational Health**

The Occupational Health Unit will support this safety guidance document by providing managers, headteachers and employees with guidance on all work related health issues, including providing advice on reasonable adjustments to the working environment, and return to work assistance. Further information on the role of Occupational Health can be found on the Council's intranet.

#### **4.6 Human Resources**

Human Resources can provide comprehensive advice on the application - and implications of the relevant policies, and on the terms and conditions of employment, including remuneration and leave.

### **5. Arrangements**

#### **5.1 Risk Assessment**

As soon as an employee notifies the Council of their pregnancy, be it verbally or otherwise, the manager must carry out a risk assessment (Appendix 2) as soon as possible. Employees should be aware that the Council is not required to take action until notification has been provided. Employees are therefore advised to notify of pregnancy, for the benefit of the health and safety of themselves, and their child/children, as early as possible.

#### **5.2 Hazard Identification**

Physical, biological, and chemical agents, working conditions and the physical and psychological side effects of pregnancy may affect the health and safety of new and expectant mothers. The risk assessment should consider whether the following hazards are applicable:

##### **5.2.1 Physical Hazards**

These are regarded as agents, which have the potential to cause foetal wounds and/or are likely to disrupt the placenta.

##### **Shocks, Vibration or Movement**

Regular exposure to shocks, low frequency vibration, for example driving or riding in off road vehicles, or excessive movement, may increase the risk of a miscarriage. Long-term exposure to vibration does not cause foetal abnormalities but as often occurs with heavy physical work, there may be an increased risk of prematurity or low birth weight.

##### **Manual Handling**

Pregnant workers are especially at risk from manual handling injury - for example hormonal changes can affect the ligaments, increasing susceptibility to injury; and postural problems may increase as the pregnancy progresses. It should be noted that

moving and handling of people including the use of some equipment, may also increase the risk of injury and if applicable should be reflected in the risk assessment.

There can also be risks to those who have recently given birth. For example after a caesarean section there is likely to be a temporary limitation on the lifting and handling capacity of the employee.

There is no evidence to suggest that breast-feeding mothers are at greater risk from manual handling than that of any other employee.

## **Noise**

There appears to be no specific risk to new or expectant mothers or to the foetus, but prolonged exposure to loud noise may lead to increased blood pressure and tiredness. In addition exposure to loud noise may cause additional discomfort to an expectant mother due to the increased movements of the baby.

## **Radiation**

Exposure to electric and magnetic fields within current recommendations is not known to cause harm to the foetus or the mother. However, extreme over-exposure to radio frequency radiation could cause harm by raising body temperature.

## **Other Physical Hazards**

Pregnant workers may experience problems in working at heights, for example ladders, platforms, due to their dexterity, agility, balance or coordination being impaired.

### **5.2.2 Biological Hazards**

This is any biological agent, as defined by the Control of Substances Hazardous to Health Regulations (COSHH), which may have health implications to both the mother and unborn baby, including miscarriage, or physical or neurological damage. Primarily this would relate to the transmission of infectious diseases. The risk associated with this would need to be assessed, where the likelihood of infection is higher than the normal risk of infection through life or social interaction.

Many biological agents can affect the unborn child if the mother is infected during pregnancy. These may be transmitted through the placenta while the child is in the womb, or during or after birth, for example through breast-feeding. Examples of agents which could affect the health of the mothers' child/children or unborn baby are hepatitis B, human immunodeficiency virus (HIV), herpes, tuberculosis, syphilis, chickenpox and typhoid, or rubella (German measles).

In addition, expectant mothers may be exposed to animals during their pregnancy. Risks associated with contact with animals include zoonoses, which are defined as infections transmitted from animals to humans. These may include, for example, E-coli, toxoplasmosis, weils disease or ringworm. Contact with animals should be considered through the COSHH risk assessment process and appropriate controls implemented.

As with most infections, the most effective means of reducing the likelihood of becoming ill, is through good hygiene practices. This may include limited contact with the source of infection if possible. Where contact takes place, stringent hygiene measures should be followed. This would include hand washing with warm water and soap immediately after contact. All cuts and grazes must be covered with waterproof dressing and/or gloves to reduce skin contact with bacteria and the effective use and disposal of disposable PPE. Food and drink should be consumed away from the infection source, where possible, to avoid hand-to-mouth contact with bacteria.

Expectant mothers should be advised that if they begin to suffer ill health symptoms they should seek medical advice immediately.

### **5.2.3 Chemical Hazards**

Chemical substances, including toxic cleaning agents or pesticides, may have the potential to cause harm to both the mother and the foetus, through inhalation, ingestion, or skin contact. The risks associated with exposure to chemical hazards must be identified through a COSHH assessment, which takes in to consideration the information from the manufacturer on the safety data sheet, including work exposure limits. Key risk phrases to consider are R61 (May cause harm to unborn child), R63 (Possible risk of harm to unborn child), R64 (May cause harm to breast-fed babies) and R68 (Possible risk of irreversible effects), amongst others. Use of products displaying these on the labelling should be avoided.

### **5.2.4 Working Conditions**

#### **Ergonomic Factors**

The levels of electromagnetic radiation which are likely to be generated by display screen equipment are well below those set out in international recommendations for limiting risk to human health and the Health Protection Agency - Public Health England does not consider such levels to pose a significant risk to health to new or expectant mothers or an unborn child. No special protective measures are therefore needed to protect the health of new or expectant mothers from such radiation.

Where employees may be working in restrictive workspaces or with workstations, which do not adjust sufficiently to take account of increasing abdominal size, particularly during the later stages of pregnancy, it may lead to strain or sprain injuries. Workspace assessments should be carried out as part of an ongoing review of working conditions throughout the pregnancy, if necessary.

#### **Thermal Comfort**

When pregnant, women tolerate heat less well and may more readily faint or be more susceptible to heat stress. The risk is likely to be reduced after birth but it is not certain how quickly an improvement comes about. Breast-feeding may be impaired by heat-induced dehydration.

## **Mental and Physical Fatigue**

Fatigue from standing, long working hours or other physical work may pose a hazard with regard to fatigue. Excessive physical or mental pressure may cause stress and can give rise to anxiety and raised blood pressure.

## **Other Working Conditions**

Within the risk assessment, other job factors which may have implications on the health, safety or wellbeing of employees should be considered. This may include, for example, night work. Where necessary suitable alternative working arrangements must be provided in accordance with Regulation 17 of the Management of Health and Safety at Work Regulations.

Similarly the risks associated with lone-working or potential exposure to violent or aggressive behaviour should be included in the individual assessment. Depending on the nature of the employees work, it may be necessary to eliminate or reduce the level or nature of interaction with some client groups. In accordance with the Council's Corporate Safety Policy and the Council's accident reporting guidelines, each manager is responsible for reporting and investigating all accidents and violent incidents. A review of incidents or any increased likelihood of exposure should also be incorporated in to the individual employee assessment.

## **6. Physical Aspects of Pregnancy**

In addition to work activities, consideration should be given to the common physical aspects of pregnancy. The table below summarises the aspects of pregnancy, which should be considered. This list is not exhaustive and other aspects of pregnancy may be highlighted during the risk assessment process.

<b>ASPECTS OF PREGNANCY</b>	<b>FACTORS IN WORK</b>
'Morning' Sickness and Headaches	Shift patterns, normal working hours, exposure to nauseating smells
Backache	Standing/sitting /manual handling/posture
Varicose Veins	Standing for prolonged periods Manual handling Posture
Haemorrhoids	Working in hot conditions
Frequent Visits to Toilet	Difficulty in leaving job/site of work Availability of Facilities Travelling
Increasing Size	Use of protective clothing Work in confined areas or restrictive work spaces Manual handling Use and handling of tools Work at height Negotiating hazards
Tiredness	Overtime Shift work Temperature Ventilation Mental fatigue
Balance and Co-ordination	Problems of working on slippery, wet surfaces, negotiating hazards, use of and handling tools, working at height (eg hop-ups)
Comfort	Problems of working in tightly fitting work uniforms, can be prone to feeling hotter
Breast Feeding	It should be clarified what facilities will be made available for expressing breast-milk in private, as this could effect the mothers decision on when to stop breast-feeding

## **7. Recording the Risk Assessment and Agreed Actions**

The risk assessment should be carried out as soon as notification of the pregnancy is received. Thereafter, it should be subject to a review every 4-6 weeks, as a minimum, as the pregnancy progresses, and should also be revisited should the employee decide to return to work following delivery.

The risk assessment process should be based upon two-way communication, and provide an opportunity to ensure that both the employee and employer are fully informed as the pregnancy progresses.

Throughout the risk assessment process, the Agreed Action Plan (Appendix 2) should be used to document discussions and to record any adjustments to the working practices which are to be taken. This includes any measures to remove or reduce hazards within the working environment. The manager will then be responsible for ensuring that the remedial actions take place as soon as practicable.

## **8. Implications of the Risk Assessment**

It may not always be possible to remove or reduce the risks to a new or expectant mother or her baby, despite taking all reasonably practicable precautions.

Should this be the case, alternative working arrangements should be sought. This will be through consideration of the following:

- Temporarily reorganising the employee's duties;
- Temporarily adjusting the employees working conditions and/or hours of work;

Where the work cannot be temporarily reorganised or adjusted, the manager must discuss arrangements for finding suitable, alternative work with Human Resources. The alternative work offered must be:

- Suitable and appropriate for the employee to do in the circumstances and;
- Be on terms no less favourable than her normal terms and conditions of employment.

Ideally, the alternative work should be in the employee's current directorate, although where this is not possible, Human Resources will attempt to seek alternative opportunities within other directorates.

Whilst every effort will be made to find the employee suitable, alternative employment for the temporary period necessary, this may not always be feasible. In these circumstances, there is a possibility that the employee may not be able to attend work for any period where there is a risk to the safety or health of either her or her child. The employee would be entitled to paid remuneration at her normal rate for as long as the risk remains, or until the commencement of maternity leave.

If the employee is offered alternative work, deemed suitable and sufficient, yet unreasonably refuses to accept it, following consultation with the Occupational Health Unit and Human Resources, the employee may be suspended on the grounds of health and safety due to pregnancy, and may lose her right to paid remuneration during the period of suspension.

Appendix 1 gives an overview of the risk assessment process and the actions recommended by the HSE.

## **9. Pregnancy-related Sickness Absence**

In accordance with the Councils Attendance at Work Policy, sickness absences which are directly attributable to pregnancy are discounted when calculating absence for the formal warning stage. However all absences regardless of their nature must be included for any case review or case conference in line with good management practice and employee support. All absences should also be reviewed as part of the ongoing risk assessment for new and expectant mothers.

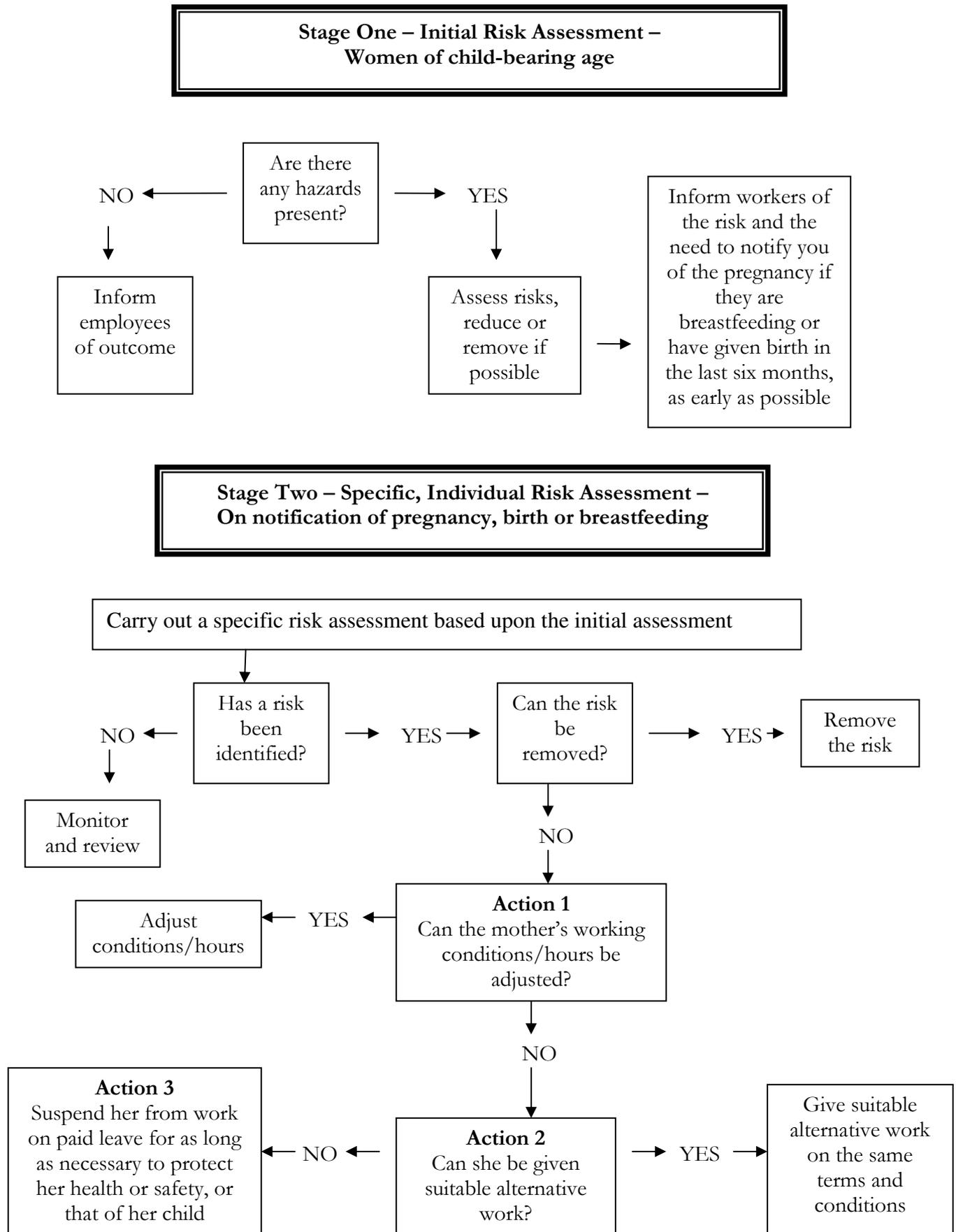
Any absence related to pregnancy in the 4 weeks prior to the expected confinement period will automatically trigger the commencement of maternity leave. This would count towards continuous employment for the purposes of assessing pension rights and other employee benefits dependent on the length of service, such as annual leave.

These apply regardless of the employee's length of service or hours of work.

## **10. Links with Other Council Safety Guidance Documents**

Control of Substances Hazardous to Health Guidance  
Employee Personal Protection Safety Guidance  
Accident/Incident Reporting and Investigation Safety Guidance Document  
Infection Control  
Wellbeing at Work Policy

Appendix 1 – HSE Risk Assessment Flowchart



# Individual Assessment

## Assessment Form for New and Expectant Mothers at Work



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Assessment of:	
Directorate:	
Department:	
Line Manager:	
Date of Assessment:	

For further help or advice please contact  
Safety Services on (01482) 391117 or email  
[safety.services@eastriding.gov.uk](mailto:safety.services@eastriding.gov.uk)

or

Occupational Health on (01482) 391225

## Assessment Form for New and Expectant Mothers at Work

### 1.0 Movement and Posture

- 1.1 Tasks which require climbing stairs repeatedly during the course of your working day
- 1.2 Continuous standing during your working day.
- 1.3 Regular and prolonged periods of driving during your normal working day (business travel).
- 1.4 Prolonged periods of being seated without having an opportunity to rotate work activities.
- 1.5 Entry and working in a confined space (as per legal definition)
- 1.6 Manual Handling and movement of items and/or equipment.
- 1.7 Work which could involve exposure to vibration and shocks (for example driving off road vehicles, using floor cleaning machines, power tools etc).

<i>Area of Concern?</i>	

## Assessment Form for New and Expectant Mothers at Work

**1.8** Physical moving and handling of people who have significantly reduced weight bearing ability

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**2.0 Noise**

**2.1** Working for prolonged periods in a noisy environment.


**2.2** Frequently using noisy equipment as part of your job.

**3.0 Temperature & Humidity**

**3.1** Is the temperature and humidity in your room comfortable (consider extremes of heat and cold).

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**4.0 Ventilation**

**4.1** Do you have open and closing windows or other means of ventilation?

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## Assessment Form for New and Expectant Mothers at Work

### 5.0 Infectious Disease

5.1 Exposure to sources of infectious disease (for example - blood borne virus, bodily fluids, bodily waste, air borne viruses, risk of needle stick injuries etc).

5.2 Working with animals (for example handling animals, coming in to contact with animal waste etc).


5.3 Exposure to the Rubella virus (German measles/measles virus) as a direct consequence of your work.


### 6.0 Pesticides

6.1 Using pesticides as part of your job.

6.2 Working in/visiting areas where pesticides are actively being applied.


### 7.0 Cleaning Products - *Does your job involve any of the following?*

7.1 Use of/exposure to products, which state they may affect an unborn child.


## Assessment Form for New and Expectant Mothers at Work

### 8.0 Carbon Monoxide

8.1 Exposure to fumes which could give rise to raised levels of carbon monoxide (for example working in poorly ventilated vehicle workshops).

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### 9.0 Resting Facilities

9.1 Access available to a suitable area where you can rest if necessary.

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9.2 Access available to an appropriate place where breast milk can be expressed and stored.

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### 10.0 Hygiene Facilities

10.1 Access available to toilets and associated hygiene facilities.

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### 11.0 Mental and Physical Fatigue

11.1 Do your contractual working hours require adjusting?

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## Assessment Form for New and Expectant Mothers at Work

### 12.0 Working with Display Screen Equipment

12.1 If applicable, have you and/or your Manager undertaken a DSE/Workstation Assessment (found under My Apps on the insight homepage)

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### 13.0 Lone Working

13.1 Lone working as part of your normal work.

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13.2 Has your manager undertaken a lone working risk assessment (refer to Employee Personal Protection guidance document)

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### 14.0 Work Related Violence

14.1 Could you be exposed to the risk of physical violence?

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### 15.0 Work Equipment and Personal Protective Equipment (including clothing)

15.1 Do you have to use Work Equipment (tools, machinery etc) which you consider may be detrimental to your condition and/or difficult to use during your pregnancy and after you have given birth.

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15.2 Do you have to use Personal Protective Equipment which you consider may be difficult to use during your pregnancy and after you have given birth.

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## Assessment Form for New and Expectant Mothers at Work

### AGREED ACTION PLAN

For Manager/Supervisor use in conjunction with the employee

<b>Name of person assessed:</b>		<b>Estimated Date Of Delivery:</b>	
<b>Directorate:</b>		<b>Group/Unit/Location:</b>	
<b>Date of Assessment:</b>			
<b>Manager/Supervisor who will action the assessment:</b>			

Section	Actions

**Managers/Supervisors Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Employees Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Action Plan Reviewed:**      **Date:** \_\_\_\_\_      **Date:** \_\_\_\_\_      **Date:** \_\_\_\_\_

## Assessment Form for New and Expectant Mothers at Work

### AGREED ACTION PLAN - RETURN TO WORK

For Manager/Supervisor use in conjunction with the employee

Name of person assessed:		Date Of Delivery:	
Directorate:		Group/Unit/Location:	
Date of Assessment:	Return to Work		
Manager/Supervisor who will action the assessment:			

Section	Actions

Managers/Supervisors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employees Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Action Plan Reviewed:      Date: \_\_\_\_\_      Date: \_\_\_\_\_      Date: \_\_\_\_\_