



Oxenhope Church of England Primary School

Policy for New and Expectant Mothers

March 2018

Introduction and Policy Statement

All the normal rules relating to risk assessment apply for expectant and new mothers though, because certain hazards present more significant risks for this group, the law requires employers to follow a slightly stricter regime of preventative or precautionary measures. The table below briefly summarises the main points. The same general principles apply in relation to students who are expectant or new mothers and, though the employer's legal duties do not specifically apply in such situations, our policy is that risks must be assessed. Appropriate precautions must be taken to protect people to whom we owe a duty of care.

The majority of simple risks are already covered by advice based on generic risk assessments. On particular topics, Bradford Diocesan Academies Trust (BDAT) may publish its own detailed advice, but it may also refer schools to advice published by other organisations. Where such guidance exists, schools may not need to undertake further risk assessment. **However, there are circumstances in which schools must always undertake specific risk assessments; for example when a member of staff notifies the school that she is pregnant.** The school must produce a risk assessment specific to her. A suitable record form is provided in this guidance. The law requires that adjustments are made to an employee's work and/or environment where these are necessary to ensure that the woman and the baby remain healthy and safe. These adjustments may have to be varied as a pregnancy progresses as the woman's capabilities and tolerances are likely to change. Remember that, even after giving birth, certain risks may still need to be controlled to ensure the safety of the new mother and, if she is breastfeeding, the safety of her baby.

In certain cases it may be necessary to move the member of staff to alternative work or, in extreme cases, grant paid leave. Under the Sex Discrimination Act 1975, if an employer fails

to protect the health and safety of their pregnant workers, it is automatically considered to be sex discrimination.

Some risks (some chemicals, physical risks such as radioactive substances and some biological risks) may have more significance very early on in the pregnancy. The risk of damage to the foetus and of miscarriage may be greater and it is therefore important that expectant mothers in some occupations give their employer as much notice as possible so that adjustment can be made.

POLICY STATEMENT

- It is **health and safety policy** in the School that work-related risks to employed expectant and new mothers must be adequately assessed and controlled. Managers and first line supervisors of this group of staff must be able demonstrate that appropriate and adequate preventative or precautionary measures are in place. Written risk assessments must be produced as soon as the member of staff has notified the employer that she is pregnant. Schools must create and keep up to date records of the control measures in force.
- In the interests of their own health and safety and that of their unborn child, employed women must inform their employer as soon as possible when they are pregnant. The headteacher is responsible for ensuring the risk assessment is completed and for informing women in the school about the need for notification.
- **Pregnant Students**
Schools should produce a similar risk assessment when it is notified that a student is pregnant. As students may be unaware, or reluctant to inform the school, of being pregnant, teachers should be alert to the possibility and respond to clues. Participation by a pregnant student in routine PE and by the student's parent/guardian and medical adviser.

Notifying the employer

It is sensible for the expectant mother to consult her doctor (or other competent adviser) at an early stage of the pregnancy and discuss how the pregnancy may affect her while she works. The adviser should help the employee to decide how soon the employer needs to know about the pregnancy – as a general rule this should be as soon as possible, though for very low risk work and conditions this may not be essential. As soon as the school is made aware it must start the process of risk assessment specific to the woman and her work. The employer may require a member of staff to produce a doctor's certificate confirming the pregnancy – a doctor's certificate may also be provided by the employee confirming a need for work to be suspended or shifts to be altered.

Risk Assessment

It is necessary to assess risks arising from work activities and those presented by the workplace. It is not necessary to assess risks which arise which are incidental to work, such as those occurring during travel to or from work at the start or end of the normal working day. However, risks arising in travel **during** work should be assessed.

As a general rule, employer's risk assessments are only needed where the risks associated specifically with work would generally be considered to be greater than the risks encountered in normal day to day life outside the work situation. This is particularly relevant in connection with the risk of infections that may exist in the workplace. For example, when considering such risks, pregnant or breastfeeding mothers may well be exposed to infections from other staff, just as they might from their friends and family outside the workplace. Control of these infection risks is not the school's responsibility. However, schools must bear in mind the following **significant** factors:

- close proximity to large numbers of children who may continuously present a wide range of infection risks (specially chicken pox or rubella);
- school visits to farms, etc;
- work in sciences;
- students with special needs may present unusual infection risks (as well as risks related to uncontrolled, unexpected or aggressive behaviour).

Other factors include:

- Exposure to chemicals with potentially significant risks and/or radioactive materials may occur in some schools.
- The movement of large numbers of children around a school or the lifting of equipment, etc. may pose physical hazards.
- Assessors need to bear in mind student, visitor and colleagues' behaviour and the possible need for restraint or other physical interventions.
- Temporary or intermittent hazards such as slippery floors, trip hazards, display screen equipment work, environmental conditions, or prolonged standing need to be noted.

Pregnancy may affect the expectant mother's ability to continue with existing work patterns; fatigue and other factors may require that schedules to enable the expectant mother to work successfully and safely. Pregnancy may also affect the woman's tolerance to environmental factors such as noise, smells, temperature and humidity. Where this is the case the school may be able to make adjustments but, when that is not feasible or successful, changes to working patterns may be required. The table below summarises the main factors: are adjusted or are more flexible. In lone worker situations additional support or cover may be required

Working conditions

- Work patterns, shifts and schedules
- Facilities (including rest rooms)
- Mental and physical fatigue
- Stress (including postnatal depression)
- Temperature (including extremes of heat or cold)
- Working with computers and display screen equipment
- Working alone or at height
- Travelling
- Violence or excessive hustle and bustle in school
- Work equipment (requiring standing or awkward posture)
- Personal protective equipment, including comfort and fit
- Night work or extended working days

Physical risks

- Movements and postures
- Manual handling and/or restraint
- Noise, vibration and shocks
- Radiation (ionising and non-ionising)
- **Slip, trip or fall hazards**

Chemical risks

- **Toxic chemicals, including Mercury**
- Antimitotic (cytotoxic) drugs
- Pesticides
- Carbon monoxide
- Lead

Biological & Infection Risks

A wide range of microbes cause infections in the human population and may also infect pregnant women. They may or may not have an adverse effect on the baby. These include: Chlamydia psittaci, Cytomegalovirus, Hepatitis and HIV, Listeria monocytogenes, human Parvovirus, Toxoplasma, **Rubella**, Varicella-zoster (**chickenpox**), Borrelia burgdorferi (Lyme disease); Goxiella burnetii (Q fever); Campylobacter and Salmonella (gastroenteritis); Lymphocytic choriomeningitis virus (LCM),

Mycobacterium tuberculosis (TB).

Exemplary hygiene practice and standard first aid procedures should minimise risks from these organisms. In some cases (farm visits) it may be better for vulnerable staff not to participate.

Definitions

The phrase '**expectant or new mother**' means an "employee who is pregnant; who has given birth within the previous six months; or who is breastfeeding;"

'**Given birth**' is defined in the Management of Health and Safety at Work Regulations as "delivered a living child or, after 24 weeks of pregnancy, a stillborn child;"

The term '**controls**' is used in Health and Safety Executive publications as a shorthand term for preventative and precautionary measures. The two terms may be used in this guidance and are interchangeable without affecting the meaning of the sentence.

'People to whom we owe a duty of care': this means all staff, pupils and students in schools and other learning settings. The definition also includes, within the bounds of common sense and in any work situation where a CYPs manager has control, visitors, guests or customers who might reasonably expect to be advised of risks relevant to an expectant or new mother. However, for this group a personal, written risk assessment will not normally be required and it will normally be sufficient for general precautions to be brought to the attention of such people.

Solutions

A reduction in the amount, or type of, manual handling and similar work;

It is impossible to specify a specific weight that new or expectant mothers should avoid moving or lifting. The normal rules relating to manual handling risks should be applied first, which will mean unnecessary lifting and handling tasks should be avoided and that handling aids, such as trolleys, should be employed where possible. The woman's medical adviser(s) may be able to provide more specific advice about her capabilities. However, where there is any doubt it is sensible to work within the limits to which the woman says she feels capable and confident.

PE teachers will need to be more careful about their active involvement in some activities in class, but as a general rule, there should be no need for them not to continue teaching as long as they feel able and the medical adviser agrees.

- Variation in workload or type of work to reduce pressure and stress;
- Changes to workplace layout or workstation including seating, etc to allow for altered mobility and other physical changes to the expectant mother as the pregnancy progresses;
- A reduction or cessation of work with radioactive substances (probably relevant only in high schools);
- For pregnant teachers and other classroom staff (and students), flexibility with or alteration to routines so that she can avoid moving around the school between normal lesson change times –avoiding the busiest times in corridors etc;
- Alteration to the hours of work to compensate for early onset of fatigue and other effects associated with the pregnancy;
- Swapping a classroom to enable quick access to a toilet or other privacy may prove helpful.
- Arrangements to ensure lone working activities are more closely monitored.

In all cases, the pregnant woman should keep the school informed of any advice she receives from her medical adviser(s).

Evaluation

This policy will be reviewed by the School Support Manager. She will ensure that the policy is up to date and relevant to current practice. In addition, she will check that it reflects current legislation.

Written by Alice Jones March 2018

To be reviewed Spring 2020

Appendix 1

New and Expectant Mothers Risk Assessment Document

Workplace

New or Expectant Mother Risk Assessment for: (name)

Assessed by: **Date:**

| Activity or Task | Hazards (refer to table above) | Existing controls Preventative and precautionary measures | Residual Risk Level H/M/L | Further actions required (where residual risk is medium or high) |
|------------------|--------------------------------|--|-------------------------------------|---|
| | Working conditions | | | |
| | Chemical or Physical Risks | | | |

| | | | | |
|--|---|--|--|--|
| | Biological and Infection Risks | | | |
|--|---|--|--|--|

Signed (Assessor) _____ **Date** _____

Signed (New or Expectant Mother) _____ **Date** _____

Risk level:

(H) HIGH

Unacceptable likelihood that injury or damage will be severe – further management controls are essential

(M) MEDIUM

Injury or damage is very unlikely to be severe, but minor injury could occur from time to time

(L) LOW

The risk of injury is well controlled and harm is likely to be minor if it occurs.

