



EAST RIDING
OF YORKSHIRE COUNCIL

Safety Guidance Document

For New and Expectant Mothers at Work

Lead Directorate and Service:	Corporate Resources - Human Resources, Safety Services
Effective Date:	September 2017
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Approved by:	CMT 6 th August 2018 Minute 18182

Date Reviewed	Comments
September 2012	New Guidance CMT 12 April 2010 Minute 12716
September 2014	Reviewed with minor amendments making reference to potential risk associated with moving and handling of people
September 2014	Removed reference to Arvato government services.
June 2014	Minor amendments to text – Risk assessment amended
July 2018	Clarified guidance relating to generic risk assessment. Minor amendments to format and wording.

1. Background

- 1.1 This safety guidance document provides information on the management of hazards and risks which could affect new and expectant mothers at work. It is important to note that as an employer the council has 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.
- 1.2 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.
- 1.3 This document seeks to identify particular hazards and offers guidance to managers and headteachers on how to reduce the risks, to pregnant workers so far as is reasonably practicable.

2. Foreword

- 2.1 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

- 3.1 Directorates are responsible for the implementation of this safety guidance document, and communication of its content as appropriate.
- 3.2 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.
- 3.3 The Council relies on the co-operation of all employees, and trades unions for the successful implementation of this safety guidance document.
- 3.4 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

- 4.1.1 Directors and Heads of Service 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

- 4.2.1 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;
- All risk assessments must consider the risks to expectant/nursing mothers and the unborn child where they exist; An individual risk assessment is carried out using the assessment form for new and expectant mothers at work 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;
- Procedures for reducing risks are monitored regularly (at least 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

4.3 Employees

4.3.1 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 inform their manager in writing that they are pregnant or intend to return to work whilst breastfeeding at the earliest opportunity;
- They notify their manager of any pre-existing health conditions, of themselves or the unborn child;
- 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;
- 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

4.5.1 The Occupational Health Unit will support managers and employees with guidance on work related issues.

4.6 Human Resources

4.6.1 Human Resources can provide comprehensive advice on the application and implications of the relevant policies.

5. Arrangements

5.1 Risk Assessment

- 5.1.1 Any risk assessment that has identified risks to expectant/nursing mothers or the unborn child must develop appropriate control measures that protect them. Additionally, as soon as an employee notifies the Council of their pregnancy, be it verbally or otherwise, the manager must carry out an individual risk assessment with the employee as soon as possible.
- 5.1.2 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

- 5.2.1 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:

5.3 Physical Hazards

- 5.3.1 These are regarded as environmental hazards, which have the potential to cause harm with or without contact, for example foetal wounds and/or are likely to disrupt the placenta.

5.4 Shocks, Vibration or Movement

- 5.4.1 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.

5.5 Manual Handling

- 5.5.1 Pregnant workers are at risk from manual handling injury. The moving and handling of people including the use of equipment may also increase the risk of injury and if applicable should be reflected in the risk assessment.
- 5.5.2 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.

5.6 Noise

- 5.6.1 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.

5.7 Radiation

- 5.7.1 Exposure to electric and magnetic fields within current recommendations is not known to cause harm to the foetus or the mother.
- 5.7.2 Radiation protection measures for all staff, documented in risk assessments and local rules, are likely to be sufficient to protect new and expectant mothers, but will form part of the individual assessment for the employee.
- 5.7.3 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.

5.8 Other Physical Hazards

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

5.9 Biological Hazards

- 5.9.1 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.
- 5.9.2 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).
- 5.9.3 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.
- 5.9.4 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.

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

5.10 Chemical Hazards

5.10.1 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.

5.10.2 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.

5.10.3 Key risk phrases to consider are:

- R46 (May cause heritable genetic damage)
- 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).

5.10.4 Use of products displaying these on the labelling should be avoided.

5.10.5 The following hazard and precautionary statements should also be looked for:

- H340 – May cause genetic defects
- H341 – Suspected of causing genetic defects
- H360 – May damage fertility or the unborn child
- H361 – Suspect of damaging fertility or the unborn child
- H362 – May cause harm to breast fed children
- P263 – Avoid contact during pregnancy or while nursing

5.10.6 Use of products displaying these on the labelling should be avoided.

5.11 Ergonomic Factors

5.11.1 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.

5.12 Thermal Comfort

5.12.1 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.

5.13 Mental and Physical Fatigue

5.13.1 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.

5.14 Other Work Conditions

5.14.1 Within the new and expectant mothers 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.

5.14.2 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.

6. Physical Aspects of Pregnancy

6.1 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.

ASPECTS OF PREGNANCY	FACTORS IN WORK
'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	Working hours/pattern 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
Swelling/Oedema of Feet, Ankles and Fingers	Standing for prolonged periods Working hours/pattern Working in hot environment

7. Recording the Risk Assessment and Agreed Actions

- 7.1 The individual 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.
- 7.2 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.
- 7.3 Throughout the risk assessment process, the Agreed Action Plan 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.
- 7.4 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.

8. Implications of the Risk Assessment

- 8.1 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.
- 8.2 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;
- 8.3 Where the work cannot be temporarily reorganised or adjusted, the manager must discuss any alternative work which must be:
- Suitable and appropriate for the employee to do in the circumstances and;
 - On terms not substantially less favourable than her normal terms and conditions of employment.
- 8.4 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.
- 8.5 If the employee is offered alternative work, deemed suitable and sufficient, yet 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. An overview of the risk assessment process and the actions recommended by the HSE is detailed on page 14 of this document.

9. Links with Other Council Safety Guidance Documents

Control of Substances Hazardous to Health Guidance

Employee Personal Protection Safety Guidance

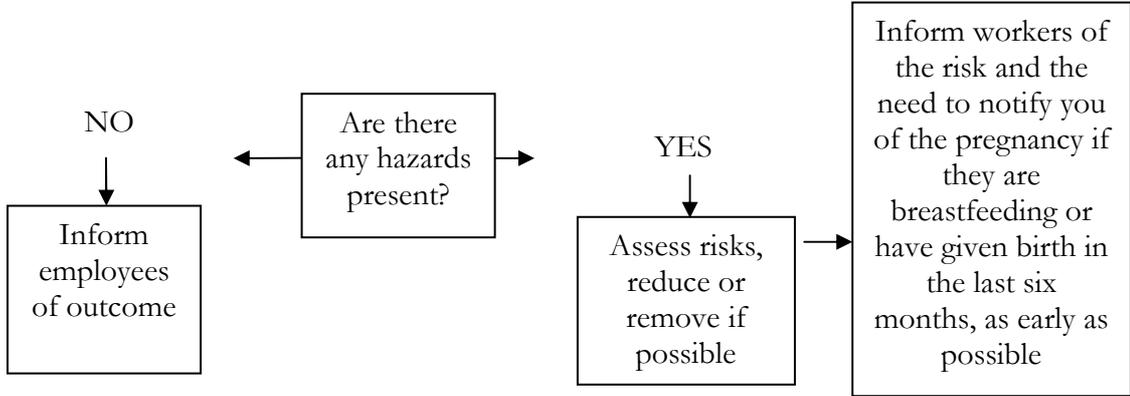
Accident/Incident Reporting and Investigation Safety Guidance Document

Infection Control

Wellbeing at Work Policy

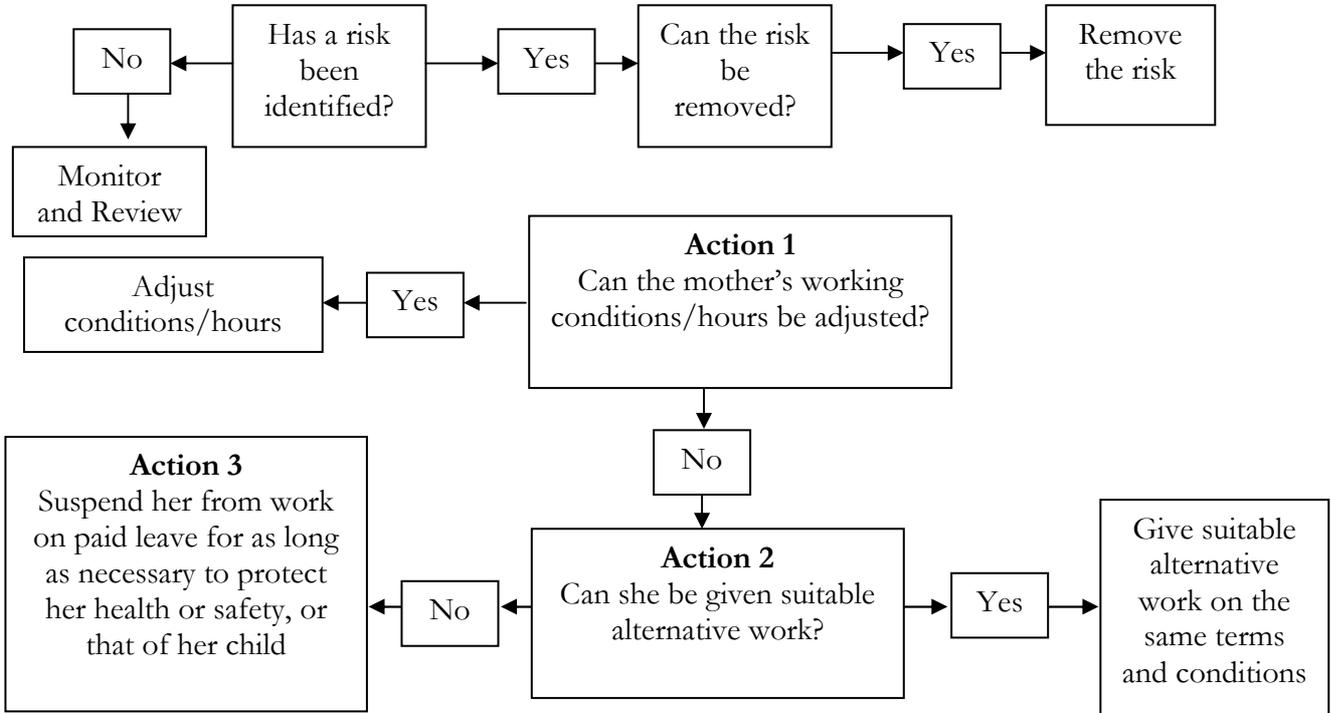
**Stage One – Initial Risk Assessment –
Women of child-bearing age**

Consider as part of the general risk assessment process and record appropriate task-related controls to reduce the risk of harm to women of child bearing age and new and expectant mothers



**Stage Two – Specific, Individual Risk Assessment –
On notification of pregnancy, birth or breastfeeding**

Carry out a specific risk assessment based upon the initial assessment



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

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.
- 1.6 Work which could involve exposure to vibration and shocks (for example driving off road vehicles, using floor cleaning machines, power tools etc).
- 1.7 Manual Handling and movement of items and/or equipment.
- 1.8 Physical moving and handling of people who have significantly reduced weight bearing ability

Area of Concern?

2.0 Noise

- 2.1 Working for prolonged periods in a noisy environment.
- 2.2 Frequently using noisy equipment as part of your job.

Area of Concern?

3.0 Temperature & Humidity

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

Area of Concern?

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4.0 Ventilation

Area of Concern?

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

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5.0 Infectious Disease

Area of Concern?

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).

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

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

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6.0 Pesticides

Area of Concern?

6.1 Using pesticides as part of your job.

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

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

Area of Concern?

7.1 Use of/exposure to products, which state they may affect an unborn child (see risk phrases or hazard and precautionary statements on safety data sheets)

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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).

Area of Concern?

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9.0 Welfare Facilities

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

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

Area of Concern?

10.0 Hygiene Facilities

10.1 Access available to toilets and hand washing facilities.

Area of Concern?

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11.0 Mental and Physical Fatigue

11.1 Do your contractual working hours require adjusting?

Area of Concern?

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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)

Area of Concern?

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13.0 Lone Working

13.1 Lone working as part of your normal work.

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

Area of Concern?

14.0 Work Related Violence

*Area of
Concern?*

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

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15.0 Work Equipment and Personal Protective Equipment (including clothing)

*Area of
Concern?*

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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AGREED ACTION PLAN

For Manager/Supervisor use in conjunction with the employee

Name of person assessed:			
Expected Date of Birth:			
Directorate:		Service:	
Date of Assessment:			
Manager/Supervisor who will action the assessment:			

Section	Actions

Managers/Supervisors Signature: _____ **Date:** _____

Employees Signature: _____ **Date:** _____

Action Plan Reviewed: Date: _____ **Date:** _____ **Date:** _____

AGREED ACTION PLAN - RETURN TO WORK

For Manager/Supervisor use in conjunction with the employee

Name of person assessed:			
Date of Birth:			
Directorate:		Service:	
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:** _____