



New and Expectant Mothers at Work – Health and Safety Guidance for Managers

Version 6.0

1.0 Introduction

Warwickshire County Council (WCC) takes the view that, pregnancy should not be regarded as ill health and that any issues associated with it can be adequately addressed by normal health and safety management procedures.

Many women work while they are pregnant and may return to work while they are still breastfeeding. Some hazards in the workplace may pose a potential risk and affect the health, safety and well-being of new and expectant mothers and their child(ren). Therefore, some normal working conditions may no longer be acceptable during pregnancy and while breastfeeding and the risks may need to be re-assessed.

In most cases pregnancy usually goes undetected for the first 4-6 weeks, so hazards and these risks must be identified for all female employees of child bearing age within any existing risk assessments. Some hazards can present more of a risk at different stages of pregnancy and it is important to inform workers of the risk and the need for notification of pregnancy, as early as possible so an initial individual risk assessment and if required a specific risk assessment can be undertaken by their manager.

2.0 Definitions

The phrase 'new or expectant 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 documentation may be completed for services as a whole or for individual teams. Managers can decide what is most appropriate for them. The involvement of staff in the completion of this documentation is encouraged.

3.0 Legislation

3.1 The Management of Health and Safety at Work Regulations 1999 (MHSW)

Last Reviewed by	Corporate Health, Safety and Wellbeing Service			
Policy Owner	Ruth Wilkinson, Corporate Health, Safety and Wellbeing Manager	Page 1 of 21		
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The Management of Health and Safety at Work Regulations 1999 requires employers to make a suitable and sufficient assessment of the risks to their employees, including new and expectant mothers, and to do what is reasonably practicable to control those risks. These must be reviewed on a regular basis.

These regulations state the legal requirements that WCC have to comply with to protect employees who are, or in the future could be a new or expectant mother.

Once WCC receives written notification from the employee that she is pregnant her manager is required to assess these risks by completing an **initial** risk assessment for the individual employee and detail any actions required to control these risks **(appendix 1).** This assessment must also be undertaken if an employee notifies their manager that they have given birth in last 6 months or is breastfeeding.

If there are any outstanding risks/issues/queries or where there are significantly high risks that need additional and detailed control measures following this risk assessment, managers will need to complete the more **detailed and specific** risk assessment available with this guide.**(appendix 2)**

Exposure limits for hazardous substances and other agents are set at levels which should not put a pregnant or breastfeeding worker, or her child, at risk. (In some cases, there are lower exposure levels for pregnant workers, or for women of childbearing capacity, than for other workers.)

If all control measures have been considered and a risk cannot be avoided by other means, her manager must take action to remove, reduce or control the risk. If the risk cannot be removed the manager must:

- Temporarily adjust her working conditions hours; e.g. working conditions, working hours, breaks or this is not possible
- Offer her suitable alternative work (at the same rate of pay) if available; or if that is not feasible
- Suspend her from work on paid leave for as long as necessary to protect her health and safety and that of her child
- Liaise with Human Resources accordingly

Where the doctor considers that work adjustments are required during pregnancy and breastfeeding, the doctor should record this advice on a Fit to Work note.

In exceptional circumstances where a woman is unable to carry on working she can be referred to Occupational Health who can/may suggest alternative working arrangements.

Where an employee works nights and produces a certificate from her GP or midwife which says working nights will affect the health of the woman or her unborn child, the employer must suspend her from work, on full pay, for as long as necessary. However the Employment Rights Act states that where appropriate, suitable alternative work should be offered, on the same terms and conditions, before any suspension from work.

3.2 Employment Right Act as amended by Employment Relations Act

This act requires WCC, when offering alternative employment to ensure the work is:

- Suitable and appropriate for her to do in the circumstance
- Or terms and conditions no less favourable than her normal terms and conditions

It is the manager's responsibility to fulfil this requirement.

3.3 The Workplace (Health, Safety and Welfare) Regulations

These regulations require WCC to provide suitable rest facilities for workers who are pregnant or breastfeeding. The facilities should be suitably located (near to toilets) and where necessary WCC should provide appropriate facilities for new or expectant mother to lie down.

3.4 Equality Act

A breach of the MHSW may in addition be unlawful discrimination under the Equality Act depending on the circumstances. There is no length of service qualification and the Act gives protective rights to a broad range of employee including contract (or agency) work and apprentices. A breach of the Equality Act could give rise to civil liability.

4.0 Breastfeeding

Before returning to work the employee must provide written notification to their supervisor/line manager that they are breastfeeding. The manager will need to ensure, on receiving notification, that the employee is not exposed to risks that could damage her health and safety and that of her child for as long as she continues to breastfeed. It is for women themselves to decide how long they wish to breastfeed, depending on individual circumstances.

As a manager, once your employee lets you know that she will be breastfeeding you must talk to her about any arrangements you will need to assess the risks and ensure they are managed appropriately. As a supervisor/line manager you must seek to provide the facilities to support breastfeeding. This could include a private and secure room, ideally lockable and with blinds. The room should have a chair and be located close to somewhere milk can safely be stored (e.g. a fridge). It is not suitable to use toilets for this purpose.

Where a new mother continues to breastfeed for many months after birth, the risks should be reviewed regularly. Where the risks are being controlled in line with the regulations, it is unlikely that workers who continue to breastfeed will be exposed to risks, which will need alternative work to be offered or paid leave given.

5.0 Confidentiality

Medical advice, reports and certificates should take working conditions into consideration. The confidentiality concerning a woman's pregnancy means that it should not be made known that she is pregnant if she does not wish it or if she does not consent to it.

Exceptionally, in certain circumstances, it may be necessary to take steps (including limited disclosure) to protect her health, safety and wellbeing but this should be done with her agreement, following consultation.

The manager must involve the woman in undertaking the risk assessment. The risk assessment **must take into account any advice** provided by the women's GP or midwife on her health.

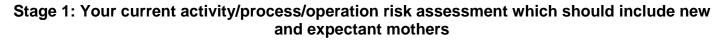
6.0 Employee Responsibilities

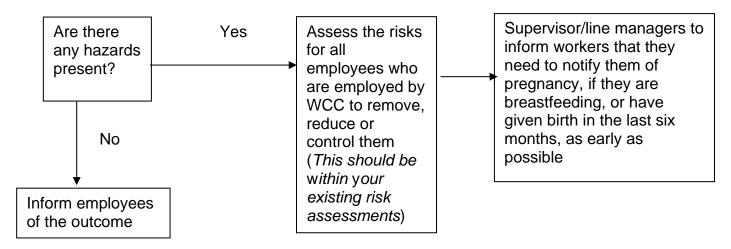
It is the responsibility of the expectant mother to notify their supervisor/line manager of their pregnancy. Until the supervisor/line manager has received written notification from the employee they are not obliged to take any action other than those resulting from the normal risk assessments for all employees.

Once notification has been received by the supervisor/line manager, this guidance must be followed and an individual written risk assessment completed. The supervisor/line manager must discuss with the expectant mother, all aspects of the work and activities that are undertaken that will be the subject of a risk assessment.

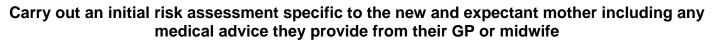
For further advice please contact <u>healthandsafety@warwickshire.gov.uk</u> or telephone 01926 476803.

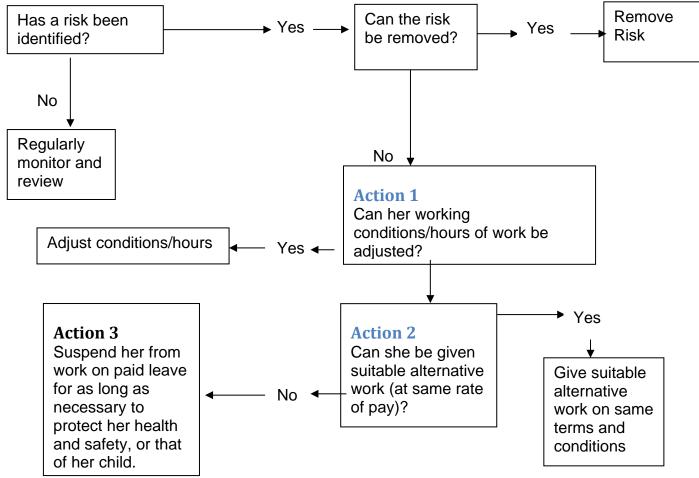
Risk Assessment Flow Chart for manager





Stage 2: After you have been provided with written notification that your employee is pregnant, has given birth in the last six months or is breastfeeding.





N.B. Employees have a legal duty to revisit, review and revise the general risk assessment if they suspect that it is no longer valid, or there have been significant changes to anything it relates to.

7.0 Risk Assessment Completion Guidance

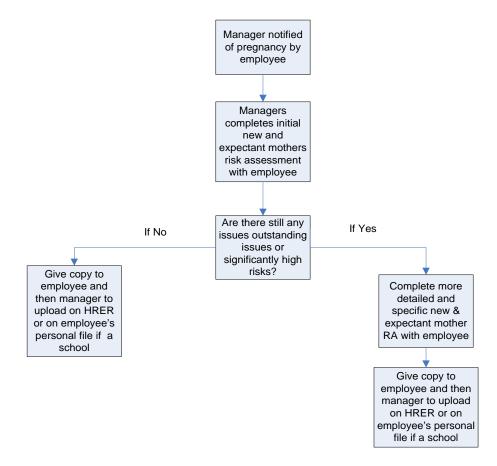
When undertaking the risk assessment, the physical, biological and chemical agents, processes and working conditions which may affect the health, safety and well-being of new or expectant mothers, should be considered e.g. manual handling, use of cleaning products, desk height, accessibility to office.

Employees must be informed about the potential risks and the control measures that are in place as identified in the risk assessment.

You must first undertake an **initial** risk assessment immediately upon notification with the employee and then review it 3 months after that date, and then review monthly until the maternity leave commences.

Once you have completed the <u>initial</u> risk assessment **(Appendix 1)** you will be able to see if you have any outstanding risks/issues/queries that you can action immediately and dates for and/or if there are significantly high risks that need additional and detailed control measures.

If you do still have outstanding risks/issues/queries after completion of this **initial** assessment or where there are significantly high risks that need additional and detailed control measures, you will then need to complete the detailed and **specific** assessment (**Appendix 2**). This risk assessment must also be reviewed at the intervals detailed above.



For further clarification or help please contact <u>healthandsafety@warwickshire.gov.uk</u> or telephone 01926 476803

The following will assist you to assess the possible risks and possible control measures to be included in the risk assessment.

Physical Risks

Movements and Postures

<u>Risks</u>

The extent of possible risks of injury or ill health, will depend on -

- the nature, duration and frequency of tasks/movements
- the pace, intensity and variety of work
- patterns of working time and rest breaks
- ergonomic factors and general working environment
- suitability and adaptability of work equipment

Standing: Continuous standing may lead to dizziness, faintness and fatigue and can contribute to the risk of premature childbirth and miscarriage.

Sitting: Constant sitting can cause a risk of thrombosis or embolism. In later stages, women are more likely to experience backache, intensified by remaining in one position for a long period of time.

Confined space: Working in confined workspaces or with workstations that don't adjust sufficiently to account for increased size, can lead to strain or sprain injuries. Dexterity, agility, Co-ordination, speed or movement reach and balance may also be impaired.

Control Measures

Introduce or adapt work equipment and lifting gear, alter storage arrangements or redesign workstations.

Long periods spent handling loads, or standing or sitting without exercise, should be avoided. This ensures that healthy circulation is maintained. Opportunity to alternate between standing and sitting and providing breaks should be considered e.g. take regular breaks such as micro breaks from desk.

<u>Manual Handling</u>

<u>Risks</u>

Pregnant workers are especially at risk from manual handling injury. Hormonal changes can affect the ligaments and increase susceptibility to injury.

There can also be risks for those who have recently given birth. After a Caesarean section there is likely to be a temporary limitation on lifting and handling capacity. Breastfeeding mothers may experience discomfort due to increased breast size and sensitivity.

Control Measures

It may be possible to alter the nature of the task to reduce risk from manual handling for all workers including new or expectant mothers.

Or the specific needs of the worker will need to be addressed to reduce the amount of physical work she does, or provide aids to reduce the risks.

Physical Shocks and Vibration

<u>Risks</u>

Regular exposure to shocks, low frequency vibration (e.g. driving or riding in off-road vehicles) or excessive movement may increase the risk of a miscarriage e.g. construction site visits

Breastfeeding workers are at no greater risk than other workers.

Control Measures

Pregnant workers and those who have recently given birth are advised to avoid work likely to involve whole body vibration, especially at low frequency, or where the abdomen is exposed to shocks and jolts.

<u>Noise</u>

<u>Risks</u>

Prolonged exposure to loud noise may to increased blood pressure and tiredness.

There are no particular problems for women to have recently given birth or are breastfeeding.

Control measures

Pregnant workers and those who have recently given birth or who are breastfeeding must not be exposed to noise levels exceeding national exposure limits.

lonising radiation

<u>Risks</u>

Significant exposure could be harmful to the unborn child. Conditions of exposure must not exceed a value specified in the Ionising Radiations Regulations 1999.

If working with radioactive materials there may be a risk to the unborn child and it can permeate through the skin and transfer to the placenta to the unborn child

Radioactive material may also pass into the milk of a breast feeding mother and through the skin and therefore affect the sucking infant.

Control Measures

Work procedures should be designed to keep exposure as low as possible.

A risk assessment must be undertaken considering the risk from external exposure to the abdomen.

Female workers must declare that the pregnancy as soon as possible and also inform they are breast feeding.

New and expectant mothers are given training, information and instruction to cover the fundamental and routine requirements in order to work with ionizing radiation.

General Working Conditions

Facilities

<u>Risks</u>

Rest is important for new and expectant mothers as tiredness increases during and after pregnancy. The need for rest is both physical and mental.

Restriction of access to toilets (and associated hygiene facilities) due to distance, work processes etc. significantly increase the risks of infection and kidney disease. Pressure on the bladder means there is a need for more frequent and urgent visits to the toilet.

This also applies to breastfeeding women who may need facilities to promote breast milk production. Appropriate facilities should also be provided for breastfeeding mothers to express and safely store breast milk.

Control Measures

Provision for physical rest, to enable the woman concerned to sit or lie down comfortably in privacy and without disturbance. Clean drinking water should also be available.

Protective measures include adapting work practices to enable expectant and nursing mothers to leave their workstation/activity at short notice more frequently than normal.

Other measures include access to a private room/screened off area where women can express breast milk and use of secure, clean refrigeration for storage and also time off to express or breast feed. Provide facilities for washing, sterilizing, and storing the associated equipment.

Mental and Physical Fatigue and Working Hours

<u>Risks</u>

Long working hours, shift work and night work can have a significant effect on the health of new and expectant mothers, and on breastfeeding.

The risks will vary with the type of work undertaken, the working conditions and the individual's needs. Generally, mental and physical fatigue increases during pregnancy and in the postnatal period.

Some pregnant and breastfeeding women may not be able to work irregular or late shifts, night work, or overtime.

Working time arrangements (including provision, frequency and timing of rest breaks) may affect the health of the pregnant woman and her unborn child, her recovery after childbirth or her ability to breastfeed.

Because of the change in blood pressure which may occur after pregnancy and childbirth, normal patterns of breaks from work may not be adequate.

Control Measures

Consider adjusting working hours temporarily, as well as the timing and frequency of rest breaks.

Change shift patterns and duration of shifts to avoid risks.

For night work, alternative day work should be arranged if possible, on receipt of a medical certificate from their doctor/midwife, which states that night work is affecting the health and safety of the woman and her unborn child.

Occupational Stress

<u>Risks</u>

New and expectant mothers can be particularly vulnerable to occupational stressors, for various reasons:

- hormonal, physiological and psychological changes affecting susceptibility to stress, anxiety or depression
- financial, emotional and changes in economic circumstances
- difficulty in balancing work and home life and other family responsibilities
- anxiety about the pregnancy (e.g. where there is a past history of problems)

Women who have recently suffered loss through stillbirth, miscarriage, adoption at birth or neonatal death will be especially vulnerable to stress.

Women who have experienced serious illness or trauma (including Caesarean section) may also suffer.

Control Measures

These occupational stress factors will need to be considered and measures may include adjustments to working conditions or hours. Support, understanding and recognition of these factors should also be available e.g. temperature adjustments, changes in processes, flexible working.

In some circumstances, returning to work following a loss, illness or trauma may help alleviate the stress, but only where there is a sympathetic and supportive work environment.

Passive Smoking

<u>Risks</u>

Cigarette Smoke is a known risk in pregnancy where the mother smokes but also the effects of passive smoking are known to affect heat and lungs and pose risk to infant health.

Controls

Council has a no smoking policy in all premises. Where the role is to work in environments where smoking is permitted, client/customers own home etc. the supervisor/line manager must consider this risk and eliminate, reduce or control sufficiently through risk assessment.

Extremes of Cold or Heat

<u>Risks</u>

Prolonged exposure of pregnant workers to hot environments should be minimal, as there is a greater risk of suffering from heat stress.

Working in extreme cold may be a risk for pregnant women and their unborn child. Risks are increased generally if there is a sudden change in temperature.

Breastfeeding may be impaired by heat dehydration.

Control Measures

Provide adequate rest and refreshment breaks and unrestricted access to drinking water. Advise expectant mothers to drink water before they feel thirsty, preferable in small and frequent volumes.

Provide warm clothing in extreme cold working environments.

Display Screen Equipment

<u>Risks</u>

The Health and Safety Executive and the National Radiological Protection Board do not consider levels of ionising and non-ionising electromagnetic radiation in display screen equipment to pose a significant risk to pregnant women.

The results of scientific studies have shown that there is no link between miscarriages or birth defects and working with display screens.

Confined space of current workstation set up.

Control Measures

No special measures are needed to protect health from radiation but advice and current information should be given and the opportunity to discuss any concerns.

Redesign or adapt workstations to consider the changes in size of the pregnant woman.

Lone Working

<u>Risks</u>

Pregnant women are more likely to need urgent medical attention.

Control Measures

It is advisable to review the increased risk of lone working and access to communications and adequate supervision. The medical condition of the pregnant woman should also be considered.

Help and support should be available, immediately, when required and emergency procedures should be in place, if necessary. e.g. mobile phone, emergency contact number of supervisor/line manager

Working at Height

<u>Risks</u>

Hazardous for pregnant women to work at height including ladders, platforms

Controls

As risk assessment should include any additional risk due to working at height

Travelling either inside or outside the work

<u>Risks</u>

These include fatigue, stress, vibrations, static posture, discomfort and accidents e.g. slips/falls <u>Controls</u>

Look at reducing travelling outside work – other staff to attend meetings, video conferencing. Provide car parking space closer to office in later stages of pregnancy or bad weather

Work-related Violence (physical/verbal)

<u>Risks</u>

If a woman is exposed to the risk of violence at work during pregnancy, when recently given birth or while breastfeeding, this may be harmful.

It can lead to detachment of the placenta, miscarriage, premature delivery and underweight birth and may affect the ability to breastfeed.

Control Measures

Lone working should be avoided where there is a risk of work-related violence.

If the risk of violence cannot be significantly reduced, suitable alternative work should be offered.

Measures may include provision of adequate training and information, changing the design of the job and improving the design or layout of the workplace.

Work Equipment and Personal Protective Equipment

<u>Risks</u>

Work equipment and personal protective equipment is not generally designed for use by pregnant women. Pregnancy and breastfeeding involves physiological changes, which may make some existing work and protective equipment uncomfortable.

This could also make equipment unsafe for use, for example where it does not fit properly or comfortably and operational dexterity or co-ordination is temporarily impaired.

Control Measures

Substitute for suitable, alternative equipment to allow the work to be conducted safely and without risk to health e.g. substitute tight overalls for maternity wear.

Biological and Chemical Agents

Biological Risks

For most workers, the risk of biological infection is no higher at work than elsewhere, except in exposed occupations e.g. laboratory work, health care, looking after animals or dealing with animal products.

Examples of agents where the child might be infected, during pregnancy or through breastfeeding, are hepatitis B, HIV, herpes, TB, syphilis, chickenpox and typhoid.

Biological agents known to cause abortion or physical and neurological damage are, Rubella, toxoplasma, cytomegalovirus and chlamydia in sheep.

Control Measures

The risk assessment will consider the nature of the biological agent, how infection is spread, how likely contact is, and what control measures there are.

The measures may include physical containment, good hygiene and vaccines if exposure justifies this.

If there is a known high risk of exposure to a highly infectious agent, it will be necessary for the pregnant worker to avoid exposure altogether. If you require any further advice, please contact your Directorate Health and Safety staff in the first instance.

The pregnant woman should not be exposed to the agents that can cause abortion or neurological damage, unless she is protected by her state of immunity.

Chemical Risks

The following substances insofar as it is known, may endanger the health of pregnant women and the unborn child.

Although the substances listed may have the potential to endanger health or safety, there may be no risk in practice; if for example, the exposure is at a level that is known to be safe.

- R40 limited evidence of a carcinogenic effect
- R45 may cause cancer
- R46 may cause heritable genetic damage
- R49 may cause cancer by inhalation
- R61 may cause harm to the unborn child
- R63 possible risk of harm to the unborn child
- R64 may cause harm to breastfed babies
- R68 possible risk of irreversible effects

The actual risk to health of these substances can only be determined following a risk assessment of the use of a particular substance.

There may be other chemical agents that are considered harmful, for example some pesticides, organic mercury compounds, antimitotic drugs, carbon monoxide and lead.

Control Measures

The risk assessment should identify any work with hazardous substances and refer to the appropriate safety data sheet and specific legislation and guidance. This will indicate whether the substance may cause birth defects, harm to the unborn child or to breastfed children and advise on suitable control measures in relation to that particular substance.

Occupational exposure limits should also be referred to (EH40) and for specific substances, these are set giving consideration to the effects on reproductive toxicity.

Eliminating exposure should be the first consideration and then substitution for substances that are not harmful, if possible. Where elimination and substitution is not an option, a combination of technical measures, good work planning and housekeeping should be considered.

Personal Protective Equipment may also be used (gloves, masks etc.), if all other methods have failed and also as secondary protection.

In the case of lead only normally once pregnancy is confirmed women will normally be suspended from work form any wok that significantly exposed them to lead by Occupational health that carry out health surveillance.

Additional Aspects to Consider

Aspect

There are other aspects of pregnancy to consider that may affect work activities. The impact of these may vary during the pregnancy and will need to be reviewed regularly.

Factor to Consider

Азресс	
' Morning sickness Headaches	Early shift work Exposure to nauseating smells
Backache	Standing/Manual handling/posture
Varicose veins	Standing/sitting
Haemorrhoids	Working in hot conditions
Frequent visits to toilet	Difficulty in leaving job/site
Increasing size	Use of protective clothing e. g overalls Working in confined areas Manual handling
Tiredness	Overtime Evening work
Balance	Working on slippery, wet surfaces
Comfort	Tightly fitting work uniforms



Warwickshire County Council



NEW AND EXPECTANT MOTHERS INITIAL RISK ASSESSMENT

This initial assessment is a useful tool to help identify risks that could be harmful to the health and safety of new expectant mothers and their child(ren). Once a manager has been notified of the pregnancy this initial risk assessment must be completed as soon as possible.

Employee Name	Post Title
Group/School/Team	Work Location/Address
Date supervisor/line manager first advised of pregnancy	Name of Assessor (usually manager)
Date of Assessment	Review Date(s)^

[^]This initial assessment must then be reviewed after three months and then continue to be reviewed monthly thereafter until the maternity leave commences. Please also note that the review process must continue monthly for as long as the mother is breastfeeding upon her return to work.

Please answer the following questions to identify the risks. * Please complete fields as necessary. Please ensure you detail any actions that need to be taken. The associated guide will help you.

1. Working with DSE

a.	Is your DSE chair suitable and adjustable?	Yes	No No	NA*
b	Are there any space constraints under/around your desk?	Yes	No	□ NA*
C.	Do you require any adaptation to your workstation?	🗌 Yes	🗌 No	🗌 NA*
d.	Does your workstation allow you to vary your posture sufficiently?	🗌 Yes	🗌 No	🗌 NA*

Action to be taken (please specify if necessary)	By who	Date to be actioned

2. Working Conditions/Work Equipment

а.	Are you able to access washroom facilities and are these satisfactory?	🗌 Yes	🗌 No *
b.	Are you able to take comfort breaks as required?	🗌 Yes	🗌 No *
C.	Do you have ready access to drinking water?	🗌 Yes	🗌 No *
d.	Are you able to take breaks and drink fluids on a regular basis?	🗌 Yes	🗌 No *
e.	Is the lighting and ventilation adequate?	🗌 Yes	□ No *
f.	Is there an area when you can sit down/take a break? e.g. easy chairs	🗌 Yes	🗌 No *
g.	Does your work involve manual handling?	🗌 Yes	🗌 No *
h.	Does your work routine allow you to vary your posture?	🗌 Yes	🗌 No *
i.	Does your work involve standing for long periods of time?	🗌 Yes	□ No *

Action to be taken (please specify if necessary)	By who	Date to be actioned

3. Working Hours/Late Working/Travel

a.	Does your work involve long working hours/late working/working shifts?	🗌 Yes	🗌 No *
b.	Do you lone work?	🗌 Yes	🗌 No *
C.	Do you travel in your own or WCC vehicle on WCC business?	🗌 Yes	🗌 No *
d.	Do you visit customer's homes/attend meetings at other locations?	🗌 Yes	🗌 No *
e.	Do you work from home?	🗌 Yes	🗌 No *
f.	Are you likely to be subject to threats of violence in your workplace?	🗌 Yes	🗌 No *

Action to be taken (please specify if necessary)	By who	Date to be actioned

4. Contact with Agents/Environmental Conditions

a.	Do you come into contact with chemical substances?	🗌 Yes	🗌 No *
b.	Do you come into contact with biological agents?	🗌 Yes	🗌 No *
C.	In your work could you encounter verbal/physical abuse?	🗌 Yes	🗌 No *
d.	Does your work involve:	🗌 Yes	🗌 No *
	Shocks		
	Noise		
	Vibration		
	Extreme heat or cold		
e.	Is there any risk of infection in your role?	🗌 Yes	🗌 No *
f.	Do you wear any Personal Protective Equipment in your role?	🗌 Yes	🗌 No *

Action to be taken (please specify if necessary)	By who	Date to be actioned

5. Medical conditions

a.	Are you aware of any existing medical condition that could affect your	🗌 Yes	🗌 No *
	pregnancy?		
b.	Are you aware of any medical condition specifically relating to your pregnancy?	🗌 Yes	🗌 No *

State Condition/Action to be taken	By who	Date to be actioned

Employees Signature	Date	
Manager signature	Date	

If you still have outstanding high risks/issues/queries after completion of this initial assessment, you will need to complete a detailed and specific new and expectant mother's risk assessment. For further clarification or help please contact <u>healthandsafety@warwickshire.gov.uk</u> or telephone 01926 476803.

Once completed and signed the employee keeps a copy and the manager is responsible for retaining a copy on their employee's records or recording on HRER. In schools a copy should be kept on the personal file.



WARWICKSHIRE COUNTY COUNCIL Detailed and Specific Risk Assessment for New and Expectant Mothers at work – this must be made specific to the individual – the content is only a guide

Employee	Post Title	
Group/School/Team	Work Location/Ad	dress
Date supervisor/line manager first advised of pregnancy	Name of Assessor (usually supervise	
Date of Assessment	Review Date(s) ^	

[^]This assessment must be reviewed three months after the initial assessment and then continue to be reviewed monthly thereafter. Please also note that the review process must continue monthly for as long as the mother is breastfeeding. Don't forget to consider the 'additional aspects' as outlined in the guidance.

Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose?	What existing control measures are in place to reduce the risk?	Risk Level Achieved H/M/L	Further action is required? Yes/No
Activities within the job in normal workplace	Restricted movement and posture	Continuous standing can lead to dizziness Constant sitting can lead to thrombosis or embolism Confined working space can lead to sprains & strains due to increased size as pregnancy progresses	Work routine is varied to allow regular changes of posture, involving walking No lifts used - stairs used as the alternative for exercise Name can take regular breaks within the working	L	

Last Reviewed by Corporate Health, Safety and Wellbeing Service				
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Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose?	What existing control measures are in place to reduce the risk?	Risk Level Achieved H/M/L	Further action is required? Yes/No
		Restricted working space particularly under desk could lead to slips, trip and falls, as speed, movement and balance may be impaired	day as required Workspace around under desk is kept clear to allow space for legs to stretch out straight in front		
	Manual handling	Discomfort, hormonal changes can affect ligaments, therefore more susceptible to injury	No manual handling is to be undertaken by Name. Other staff in team to undertake including moving boxes of paper, water bottles	L	
	Lack of facilities/working conditions	Physical tiredness increased Pressure on bladder	Rest area provided or facility to sit down take break – easy chairs Drinking water provided Name advised to take regular breaks and drink fluids on regular basis Name able to leave desk as required for comfort break and has easy access to toilet facilities	L	
	Mental and physical fatigue	Increased blood pressure Physical tiredness Morning sickness	Manager monitors work load of Name Name to ensures she eats meals on regular basis Name able to eat (nibble) at desk if required Manager has reviewed working hours particularly in relation to late shift if required in later stages of pregnancy Name has opportunity to carry out some work (part/full days) from home Individual and team work loads and responsibilities reviewed by Manager to avoid working of excessive	L	

Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose?	What existing control measures are in place to reduce the risk?	Risk Level Achieved H/M/L	Further action is required? Yes/No
			hours by Name where necessary		
			Manager to review attendance at meetings - alternatives to travel to be sought where possible.		
	Extremes of	Heat Stress	Opening windows available in office	L	
	heat and cold	Sudden change in temperature	Availability of fan for Name to use as required		
			Name - can take breaks in fresh air/rest area if needed		
	Display Screen Equipment	Confined working space can lead to sprains & strains Restricted working space many lead to trips and falls and harm to unborn child.	Work routine is varied regular changes of posture DSE chair is suitable for task and adjusted for personal use for Name	L	
		Speed and movement and balance may be impaired Backache	Layout of desk and space underneath reviewed Desk risers can be provided if required		
	Late Working	Requirement of urgent medical attention	Name - notified of trained first aider available	L	
	Work related violence - verbal	Upset, distress, miscarriage, premature delivery	Phone calls can be passed to other staff if needed Name not to operate on frontline duties if possible	L	
			No home visits to staff are undertaken		
			Support provided by manager		
	Known health issues in relation to pregnancy	Complications in pregnancy (Medical letter provided)	Car parking space to be provided close to workplace (if RA confirms required)	L	
			See also Mental and physical fatigue		
	Work Equipment	Risk of infection	Name - provided with own phone/headsets/PPE	L	

Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose?	What existing control measures are in place to reduce the risk?	Risk Level Achieved H/M/L	Further action is required? Yes/No
	Occupational Stress	Hormonal, physiological and psychological changes susceptibility to stress, anxiety and depression Anxiety about pregnancy Difficulty in balancing home- work life	Support from manager as required 1 to 1 supervision meetings Name to work no additional hours above contracted hours - manager to monitor Managing Resilience within a Team/Role Assessment Tool completed	10002	100,110
	General	Restriction of tight clothing causing harm to baby Slips trips and falls - wet on kitchen surfaces Changes in abilities to carry out role	Relaxed dress code All staff to ensure that all spills in kitchen/corridors are cleaned up immediately		
		as pregnancy progresses Risk of spread of infectious diseases like coughs and colds due to open plan environment and working in close proximity to each other	guidance Name to take appropriate action in respect of own health needs and observe good hygiene practices. Name given option of working from home if possible		
	Shock & Vibration	Specify as applicable to the task	Specify controls as agreed		
	Extreme Heat/ Cold	Specify as applicable to the task	Specify controls as agreed		

Activity/ Process/ Operation	What are the Hazards to Health and Safety	What Risks do they pose?	What existing control measures are in place to reduce the risk?	Risk Level Achieved H/M/L	Further action is required? Yes/No
	Biological Risks	Specify as applicable to the task	Specify controls as agreed		
	Chemical Risks	Specify as applicable to the task	Specify controls as agreed		
	Personal Protective Equipment	Specify as applicable to the task	Specify controls as agreed		
	Driving at work	Specify as applicable to the task	Specify controls as agreed		
	Noise	Specify as applicable to the task	Specify controls as agreed		
Specify others applicable to the role (as this is not an exhaustive list)					

Signature of Person involved in the Activity/Process/Operation	
Signature of Assessor	

Once signed, the Supervisor/Line Manager is responsible for retaining a copy on their employee records or record on HRER