

Isle of Anglesey County Council

New and Expectant Mothers Policy

Version 1.0 February 2016

About this policy

Being pregnant or a new mother does not prevent an employee from working and developing a career. Many women work while they are pregnant and return to work while they are breastfeeding.

Specific laws relating to new and expectant mothers at work are mainly contained in:

- The Management of Health and safety at Work Regulations 2002 as amended (MHSW) which require employers to protect the health and safety of new and expectant mothers;
- The Workplace (Health, Safety and Welfare) Regulations 1992 which require employers to provide suitable rest facilities;
- The Equality Act 2010 which provides protection to pregnant women and those on maternity leave against discrimination. Depending on the circumstances, this can include failing to carry out a risk assessment under MHSW regarding a pregnant worker.

These regulations cover female employees of childbearing age and expectant or new mothers, including those who are breastfeeding.

The policy also sets out what action an employer should take to protect the health and safety of their employees and that of their employees and their children.

The Policy is supported by resources on the Council's website.

Revision history

Version	Date	Summary of changes
1.0	February 2015	Document created
1.0	May 2017	No change
1.0	April 2018	No change
1.0	April 2019	No change
1.0	January 2021	No change

Date of next review	
This policy will be reviewed in:	April 2021
The review will be undertaken by:	Corporate Health and Safety Team

Contact Details:

Corporate Health and Safety Team (healthandsafety@anglesey.gov.uk)

We are happy to provide this policy in alternative formats on request. Please use the above contact details.

Mae'r ddogfen yma ar gael yn y
Gymraeg.

This document is available in Welsh.

Contents

1. Introduction

Being pregnant or a new mother does not prevent an employee from working and developing a career. Many women work while they are pregnant and return to work while they are breastfeeding.

Specific laws relating to new and expectant mothers at work are mainly contained in:

- The Management of Health and safety at Work Regulations 2002 as amended (MHSW) which require employers to protect the health and safety of new and expectant mothers;
- The Workplace (Health, Safety and Welfare) Regulations 1992 which require employers to provide suitable rest facilities;
- The Equality Act 2010 which provides protection to pregnant women and those on maternity leave against discrimination. Depending on the circumstances, this can include failing to carry out a risk assessment under MHSW regarding a pregnant worker.

These regulations cover female employees of childbearing age and expectant or new mothers, including those who are breastfeeding.

The Health and Safety Executive has published guidance (INDG 373 (rev2) – New and expectant mothers who work (<http://www.hse.gov.uk/pubns/indg373.pdf>)) providing advice to employees answering some basic questions they may have about carrying on working while they are pregnant or returning to work after giving birth.

The policy also sets out what action an employer should take to protect the health and safety of their employees and that of their employees and their children.

2. Definitions

“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 described in the Management of Health and Safety at Work Regulations 1999 (the Management Regulations) as having ‘delivered a living child or, after 24 weeks of pregnancy, a stillborn child’.

3. Risk Assessment

As an employer Ynys Mon County Council has a duty to assess the health and safety risks that their employees may be exposed to at work, including any specific risks to female employees of childbearing age and new or expectant mothers and their new baby.

If an employee is pregnant, has given birth in the last six months or is breastfeeding, they are not required to inform their employer. However, it is important for the employee and their child’s health and safety protection, and for maternity leave purposes, that they provide their employer with written notification as early as possible.

Upon receipt of written notification, Line Managers should endeavor to revisit their original general risk assessment to identify if further measures are required to ensure that the employee and their baby are not exposed to unnecessary risk. If the risk cannot be removed the following steps are recommended:

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

Action 2: suitable alternative work should be offered (at the same rate of pay) if available – if that is not feasible;

Action 3: The employee should be suspended from work on paid leave for as long as necessary, to protect their health and safety, and that of their baby.

5. Hazards and Risk Control Measures

Within INDG373 (rev2) it is explained that employees may be at varying degrees of risk from processes, working conditions or physical, biological and chemical agents depending on their health, and at different stages of pregnancy. Some of the more common risks that should be given consideration are:

- Lifting/ carrying heavy loads;
- Standing or sitting still for long lengths of time;;
- Exposure to infectious diseases
- Exposure to lead
- Exposure to toxic chemicals
- Work-related stress
- Workstations and posture
- Exposure to radioactive material
- Threat of violence in the workplace
- Long working hours
- Excessively noisy workplaces

As part of the Authority's general duties as an employer the employee must be informed (either directly or through their safety representative) about the preventative and protective measures implemented to reduce, remove or control risk.

It is also important that the employee inform their Line Manager about any advice they have had from their doctor or midwife (e.g. pregnancy-related medical conditions such as high blood pressure, a history of miscarriages etc.) that could affect the risk assessment. The Line Manager should use this information to review their risk assessment and if necessary adjust the employee's working conditions accordingly. Line Managers should regularly monitor and review any risk assessment as circumstances may change, particularly at different stages of the pregnancy.

The flowchart contained within Appendix 1 outlines the actions a Line Manager should take to do this.

Further guidance on the potential hazards and possible control measures are outlined in Appendix 2.

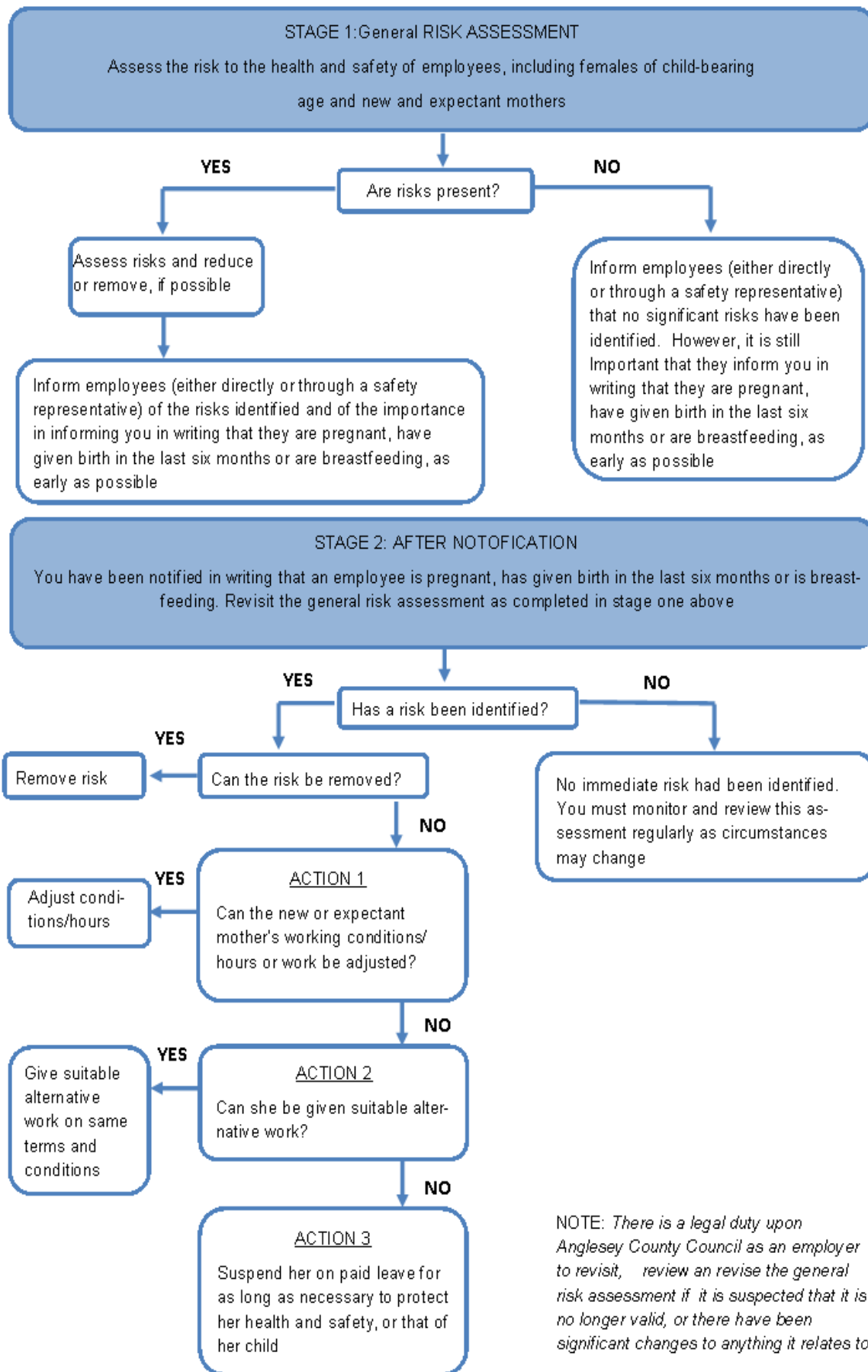
6. Employees Choosing to Breastfeed upon Their Return to Work

There may be risks other than those associated with pregnancy to consider, if an employee plans to continue to breastfeed once they have returned to work. These depend on working conditions and could include:

- Working with organic mercury;
- Working with radioactive materials;
- Exposure to lead.

It is advised that an employee should inform their employer, in writing, as early as possible, that they plan to continue breastfeeding when they return to work. Line Managers should then take the same action as when notification of pregnancy is provided (see the flowchart in Appendix 1)

Suitable rest facilities should be provided for pregnant and breastfeeding mothers and it is recommended that a private, healthy and safe environment is provided for nursing mothers to express and store milk. (*Toilets are specified as not being suitable for this*)



Enghraifft o Asesiad Risg Iechyd a Diogelwch / Example Health and Safety Risk Assessment



Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 1)											
Cyfadrn/ Directorate		Adran/ Department				Rhif adnabod yr asesiad risg/ Risk assessment ID no					
Swyddog Asesu/ Assessing Officer		Dyddiad/Date:	Dyddiad Adolygu/Review Date:			Lleoliad/ Location					
Peryglon Sylweddol/ Significant Hazards	Pwy sy'n gallu cael eu brifo a sut? Who might be harmed & how?	Sut mae'r risg yn cael ei reoli ar hyn o bryd? How is the risk currently controlled?	Lefel Risg Dechreuol/ Initial Risk Level			Pa gweithrediad sydd angen i lleihau y risg ymhellach? What action is required to further reduce the risk?	Lefelau risg gweddilliol ar ôl systemau rheolaeth? Residual risk level after controls?			Gweith-rediad gan Bwy/ Action By Whom	Dyddiad Terfyn/ Deadline
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Facilities Hygiene facilities: Without easy access to toilets (and associated hygiene facilities) at work there may be increased risks of infection and kidney disease. Because of pressure on the bladder and other changes associated with pregnancy, pregnant women often have to go to the toilet more frequently and more urgently than others. Breastfeeding women may also need to do so because of increased fluid intake to promote breast milk production.	New/Expectant Mother	Access to clean drinking water should be available. Adapting rules governing working practices to enable expectant and nursing mothers to leave their workstation/activity at short notice more frequently than normal Making temporary adjustments to working conditions.				Access to a private room where women can breastfeed or express breast milk Allowing access to private room to rest/ breast feed.					

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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 2)											
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Mental and physical fatigue and working hours Long working hours, shift work and night work can have a significant effect on the health of new/ expectant mothers. Tiredness increases during and after pregnancy and may be exacerbated by work-related factors.	New/Expectant Mother Working time arrangements (including provisions for rest breaks, and their frequency and timing) may affect the health of the pregnant woman and her unborn child, her recovery after childbirth, or her ability to breastfeed, and may increase the risks of stress and stress-related ill health	Ensure provision of adequate breaks Provide regular opportunity to discuss working arrangements with new/expectant mother It may be necessary to adjust working hours temporarily, as well as other working conditions, including the timing and frequency of rest breaks or changing shift patterns to avoid risks.				The need for physical rest may require that the woman concerned has access to somewhere where she can sit or lie down comfortably in privacy, and without disturbance, at appropriate intervals. Where new/expectant mother can not change shift pattern/working hours due to their role, seek alternative post within the authority as a temporary measure / suspend employee from work on paid leave for as long as necessary to					

Enghraifft o Asesiad Risg Iechyd a Diogelwch / Example Health and Safety Risk Assessment



Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 3)											
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Occupational Stress New and expectant mothers can be particularly vulnerable to occupational stressors, for various reasons:	New/Expectant Mother Hormonal, physiological and psychological changes occur and sometimes change rapidly during and after pregnancy, sometimes affecting susceptibility to stress, or to anxiety or depression in individuals.	It will be necessary to take account of known organisational stress factors (such as shift patterns, workloads, etc) Protective measures may include adjustments to working conditions or working hours, and ensuring that the necessary understanding, support and recognition is available when the woman returns to work, while her privacy is also respected.				Support/ advice is also available via Authority's Occupational Health Service					



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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 4)												
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Passive Smoking	New/Expectant Mother Cigarette smoke is mutagenic and carcinogenic and is a known risk to pregnancy where the mother smokes. Cigarette smoke can also aggravate preconditions such as asthma. The effects of passive smoking are less clear but are known to affect the heart and lungs, and to pose a risk to infant health.	The Authority operates a smoking policy whereby smoking is prohibited within buildings and at main entrances to buildings.				Departmental smoke-free guidance for staff who work with clients is available						

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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 5)												
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<p>Work with Display Screen Equipment (VDU's)</p> <p>National Radiological Protection Board provides the following advice: The levels of ionising and non-ionising 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 created by such emissions. The Board does not consider such levels to pose a significant risk to health. No special protective measures are therefore needed to protect the health of people from this radiation.</p>	<p>New/Expectant Mother</p> <p>There has been considerable public concern about reports of higher levels of miscarriage and birth defects among some groups of visual display unit (VDU) workers, in particular due to electromagnetic radiation. Many scientific studies have been carried out, but taken as a whole their results do not show any link between miscarriages or birth defects and working with VDUs</p>	<p>To avoid problems caused by stress an anxiety, new/ expectant mothers who are worried about working with VDUs should be given the opportunity to discuss their concerns with someone adequately informed of current authoritative scientific information and advice</p> <p>Competent persons to carry out/ review DSE/Workstation assessment and ensure any amendments required are carried out</p>				<p>Ensure new/expectant mother has regular rest periods whilst using the DSE equipment</p> <p>If further advice is required refer to Occupational Health Service</p>					
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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 6)											
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Working Alone	New/Expectant Mother Pregnant women are more likely to need urgent medical attention.	Ensure that emergency procedures take into account the needs of new and expectant mothers. Mobile phones are provided to staff Pre-determined visits and regular contact with supervisor during first weeks of pregnancy - which is subject to regular review No out of office hours working alone				Working in pairs at all times					

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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 7)												
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Work at Heights	New/Expectant Mother	A specific risk assessment should consider any additional risks due to work at height (e.g. working on ladders)									
Travelling either inside or outside the workplace Travelling in the course of work, and to and from the workplace, can be problematic for pregnant women	New/Expectant Mother Fatigue, vibrations, stress, static posture, discomfort and accidents. These risks can have a significant effect on the health of new and expectant mothers	Review working practices with a view to reduce amount of driving/ travelling outside the workplace required Ensure all persons who drive as part of their duties have provided appropriate legal documentation				If working in pairs ensure other member of staff is the allocated driver where possible and has had appropriate driver safety training					

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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 8)											
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Work-related violence (WRV) If a woman is exposed to the risk of violence at work during pregnancy, when she has recently given birth or while she is breastfeeding, this may be harmful. This risk particularly affects those in direct contact with customers and clients.	New/Expectant Mother It can lead to detachment of the placenta, miscarriage, premature delivery and underweight birth, and it may affect the ability to breastfeed.	Separate specific WRV risk assessment should be conducted by a competent person taking into account client's known history etc Ensure that any incidents/accidents are recorded via Authority's ADIR forms and reported directly to supervisors. Mobile phone is provided and should be used in the event of an emergency. Provide new/ expectant mother with adequate training and information				Ensure regular contact with supervisor/ manager during shift Supervisors to conduct violent incident investigation and act upon findings as soon as possible. If the risk of violence cannot be significantly reduced then the new/ expectant mother will be offered suitable alternative work.					

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<p>Chemical Agents</p> <p>Chemical agents may enter the body through different pathways- inhalation, ingestion, cuts and abrasions and dermal absorption</p> <p>There are a number of substances with hazardous properties indicated by risk phrases, including about 1000 substances in the Approved Supply List</p>	<p>New/Expectant Mother</p> <p>Chemical agents with the risk phrases listed below insofar as it is known may endanger the health of women and the unborn child</p> <p>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.</p>	<p>The actual risk to health of these substances can only be determined following a COSHH assessment of a particular substance which should be conducted by a competent person</p> <p>Although the substances listed may have the potential to endanger health or safety, there may be no risk in practice, for example if exposure is at a level that is known to be safe.</p>				<p>Ensure that the findings from COSHH assessments are acted upon as soon as possible</p> <p><i>Preventing exposure must be the first priority. This can be achieved through substitution of harmful agents, if possible. Where it is not possible to eliminate exposure, it must be controlled by a combination of technical measures, along with good work planning and housekeeping, and the use of Personal Protective Equipment (PPE). PPE for control purposes must be used only if all other methods have failed. It may also be used as secondary protection in combination with other methods.</i></p>					
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<p>Manual handling</p> <p>Pregnant workers are especially at risk from manual handling injury.</p> <p>There can also be risks for those who have recently given birth.</p>	<p>New/Expectant Mother</p> <p>Hormonal changes can affect the ligaments, increasing susceptibility to injury; and postural problems may increase as the pregnancy progresses.</p> <p>Breastfeeding mothers may experience discomfort.</p>	<p>Avoid the need for hazardous manual handling, so far as is reasonably practicable</p> <p>Competent person to assess the risks from those operations that cannot be avoided</p> <p>Take steps to reduce risks to the lowest level reasonably practicable</p> <p>Provide new/expectant mother with adequate training and information</p>				<p>Continually monitor working practices</p> <p>Refer to Occupational Health Service where necessary</p>					
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Tasg/ ardal i'w asesu/ Task/area to be assessed: New and Expectant Mothers (Page 11)											
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Peryglon Sylweddol/ Significant Hazards	Pwy sy'n gallu cael eu brifo a sut? Who might be harmed & how?	Sut mae'r risg yn cael ei reoli ar hyn o bryd? How is the risk currently controlled?	Lefel Risg Dechreuol/ Initial Risk Level			Pa gweithrediad sydd angen i lleihau y risg ymhellach? What action is required to further reduce the risk?	Lefelau risg gweddilliol ar ôl systemau rheolaeth? Residual risk level after controls?			Gweith-rediad gan Bwy/ Action By Whom	Dyddiad Terfyn/ Deadline
			Tebygoli aethLike	Llymder Severity	Lefel o Risg Risk		Tebygoli aethLike lihood	Llymder Severity	Lefel o Risg Risk		

<p>Biological Agents</p> <p>Infectious diseases</p> <p>Any biological agent of hazard groups 2, 3 and 4</p> <p><i>(Categorisation of biological agents according to hazard and categories of containment - Advisory Committee on Dangerous Pathogens. Copy available from Health and Safety Advisor)</i></p>	<p>New/Expectant Mother</p> <p>Many biological agents within these three risk groups can affect the unborn child if the mother is infected during pregnancy.</p> <p>These may be transmitted through the placenta while the child is in the womb, or during or after birth, for example through breastfeeding or through close physical contact between mother and child.</p> <p>Examples of agents where the child might be infected are hepatitis B, HIV, herpes, TB, syphilis, chickenpox and typhoid</p>	<p>Competent person to conduct specific risk assessment which must take account of the nature of the biological agent, how infection is spread, how likely contact is, and what control measures there are.</p> <p>Provide new/expectant mother with adequate training and information</p>				<p>Control measures may include physical containment, hygiene measures, and using vaccines if exposure justifies this.</p> <p>If there is a known high risk of exposure to a highly infectious agent, then it will be appropriate for the pregnant worker to avoid exposure altogether.</p>					
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