

NEW AND EXPECTANT MOTHERS HEALTH, SAFETY AND WELLBEING PROCEDURE

INTRODUCTION

The procedure is designed to support the relevant people in appropriately managing any health, safety or wellbeing risks arising out of work or study which could impact on a new or expectant mother or her baby. The phrase 'new or expectant mother' refers to a woman, who is pregnant, or who has given birth within the previous six months.

Pregnancy is part of everyday life and the health and safety implications can in the vast majority of cases be adequately addressed by normal health and safety management procedures that are already in place throughout the University.

Many women work or study while they are pregnant and may return to work/study while they are still breastfeeding. Some hazards in the workplace may affect the health and safety of new and expectant mothers and their child(ren). Therefore, working/study conditions normally considered acceptable may no longer be so during pregnancy and whilst breastfeeding.

Pregnancy can go undetected so it is important for employers to identify hazards and risks for all female employees/students of childbearing age. It should also be taken into account that some hazards can present more of a risk at different stages of the pregnancy.

This procedure should be read in conjunction with the Students with Parental Responsibilities Guidance available on the [University website](#). See reference below.

RESPONSIBILITIES

Heads of Department/Schools are responsible for ensuring that a risk assessment of the workplace and work/teaching activities are conducted following notification of a new or expectant mother, and that proportionate controls are identified and implemented. Each pregnancy must be individually and frequently assessed for potential risks to the mother's health and the health of the unborn child, and following the birth, the nursing /new mother returning to work.

Line managers/personal tutors and the new or expectant mother should work together to undertake the risk assessment and identify appropriate control measures where necessary.

Colleagues are advised to inform their line manager of their pregnancy as soon as possible. This will allow a risk assessment to be undertaken and any relevant control measures implemented.

Any students who are pregnant or have recently given birth are advised to notify their Programme Leader or academic supervisor as soon as possible, again so a risk assessment can be undertaken and any relevant control measures implemented.

Students, while on placement for Work Based Placement Learning, are regarded as employees of the organisation providing the placement opportunity. It is therefore the legal responsibility of the placement provider to ensure that a suitable and sufficient risk assessment is carried out for a student who informs them of their pregnancy while on work based placement learning. Nonetheless, Programme Leader or Academic Supervisor should still be informed so that any relevant support can be offered.

For information on maternity leave and pay, implications for your pension, keeping in touch days and returning to work after maternity leave you should refer to the P&OD website or contact your assigned school/department HR Business Partner.

For further information or for training in how to carry out a risk assessment please contact ResilienceandSafety@uws.ac.uk

Your Legal Position

The University respects all woman wishing to breastfeed in public areas in line with the following legislation, and the provision of Parenting Rooms is intended as support to offer a choice of privacy for those who may wish it.

Breastfeeding in Public Places. The Equality Act 2010 is UK wide legislation that says it is discrimination to treat a woman unfavourably because she is breastfeeding, and that a business cannot discriminate against mothers who are breastfeeding a child of any age.

In Scotland breastfeeding is protected by the Breastfeeding etc. (Scotland) Act 2005 under which it is an offence to stop someone in a public place from feeding their child, if under two, with milk.

PROCEDURE

To avoid exposure to significant health risks, the University must assess and monitor the ability of pregnant women to perform their work safely throughout the declared term of pregnancy and the post-natal period. This is achieved by undertaking a risk assessment (template available at the end of this document. Where necessary, changes may need to be made to the control measures arising out of previous risk assessments.

The sooner the University is informed of the pregnancy, the sooner a risk assessment can be undertaken to consider any relevant risks, and what, if anything needs done to manage these. This also allows any other support that may be necessary to be discussed.

This risk assessment will consider work/study activities in particular and the environment in which you are based. If any issues around the health of the mother or baby are highlighted, Occupational Health and Student Services should be informed. If you believe there is a risk to your health and safety, or to that of your baby, that has not been considered by the risk assessment, you should immediately bring this to the attention of your Line Manager, Programme Leader, HR Business Partner, the Resilience and Safety Team or Occupational Health. All matters will be treated in confidence.

The new/expectant mother and her Line Manager or Personal Tutor should carry out the risk assessment. This should be reviewed as required throughout the pregnancy. Although hazards are unlikely to change, the risk of damage to the unborn child as a

result of a hazard will vary at different stages of the pregnancy. Dexterity, agility, co-ordination, speed of movement and reach may also be impaired in the expectant mother because of increasing size as the pregnancy progresses. The Resilience and Safety Team can provide further advice, training and support.

While it is difficult to define a frequency for review of the risk assessment as every pregnancy is different, review should be carried out if it is suspected that the risk assessment is no longer valid, if there have been significant changes to anything it relates to or if requested by the expectant mother.

Female contractors or visitors to UWS should be notified of any hazards prior to entering any high risk areas. It is the responsibility of the Head of Department/Dean of School bringing in the contactor or visitors into UWS to ensure that information is given.

Parenting Rooms are provided on each Campus which can be used by new or expecting parents whether staff, students or visitors. Access is normally through the main reception.

The University supports staff and students to continue to breastfeed on their return to work or study. We provide dedicated facilities for breastfeeding, expressing and storage of milk at our campuses. Where dedicated facilities are not available, arrangements can be made on a case-by-case basis with your line manager or Personal Tutor, to provide you with a private, healthy and safe environment to breastfeed/express. Where possible you will also be provided with access to a secure, clean fridge to store the milk.

Ayr – Room 3.039 – the code can be obtained from the main reception

Dumfries – (Dumfries and Galloway College) Room 1023. Access via College reception.

Lanarkshire – Room 1.0.12 – the room accessed via swipe card from main reception.

Paisley – Room P102 – access code obtained from main reception.

London – Please speak to the main reception, Line Manager or Personal Tutor.

If you would like to know more about your local dedicated facility, to arrange a visit or gain longer term access, please contact the [Resilience and Safety](#) Team.

Further References:

<https://www.uws.ac.uk/media/4474/students-with-parental-responsibilities-guidance.pdf>

<http://www.hse.gov.uk/pubns/indg373.htm>

<http://www.hse.gov.uk/mothers/flowchart.htm>

<http://www.hse.gov.uk/mothers/>

<http://www.hse.gov.uk/pubns/books/infection-mothers.htm>

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| Procedure Author– Head of Resilience & Safety | Procedure Owner – University Secretary |
| Parent Policy Statement - Health, Safety and Wellbeing Policy | Public Access or Staff Only Access – Public |
| Version 1 – May 2019 | Changes and Reason for Changes – Procedure Review |

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| Name of New/Expectant Mother | School/Department | Unit | Laboratory |
| Is there any advice provided by the woman's health professional? (remember the need for confidentiality) | | | |

| Identified Hazards | Applies Yes/No | Information about controls | Action to be taken/by whom/date | Date for review/review by (initials) |
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| Manual handling | | <ul style="list-style-type: none"> ▪ Reduce the amount of physical work or provide aids to reduce the risk. ▪ List the manual handling operations which should be avoided. ▪ Alter the nature of the task to reduce risks from manual handling mothers. | | |
| Movements and postures | | <ul style="list-style-type: none"> ▪ Avoid spending long periods handling loads, or standing/sitting without regular exercise/movement to maintain circulation. ▪ Provide the opportunity to alternate between standing and sitting. If this is not possible, you should provide for breaks. | | |
| Working with display screen equipment | | <ul style="list-style-type: none"> • Ensure working posture is appropriate, that a risk assessment has been done and that adequate work breaks can be taken. | | |
| Working alone | | <ul style="list-style-type: none"> ▪ Review and revise access to communications with others. ▪ Consider levels of supervision involved | | |

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| Stress | | <ul style="list-style-type: none"> ▪ Adjust working conditions and hours ▪ Ensure that necessary understanding, support and recognition is available (consider the return to work). <p>Take account of known organisational stress factors (shift patterns, job insecurity, workloads etc) and the particular medical and personal factors affecting the individual.</p> | | |
| Travelling either inside or outside workplace | | See the hazards column for specific information on fatigue, vibrations, stress, static postures etc. | | |
| Work and personal protective equipment | | <ul style="list-style-type: none"> ▪ Wherever possible, the risk should be avoided by adaptations or substitution, e.g. providing suitable alternative equipment to allow the work to be conducted safely and without risk to health. | | |
| Mental and physical fatigue and working hours | | <ul style="list-style-type: none"> ▪ Adjust working hours temporarily, as well as other working conditions, including the timing and frequency of rest breaks. ▪ The need for physical rest may increase. As appropriate, allow access to somewhere to sit or lie down comfortably in private and without disturbance. | | |
| Work related violence | | <ul style="list-style-type: none"> • Change the design of the job i.e., avoiding lone working, reducing use of cash, maintaining contact with workers away from the base. • Improve the design or layout of the workplace • Provide adequate training and information. | | |
| Hazardous substances | | Carry out a COSHH assessment for women who are pregnant, have recently given birth or who are breastfeeding. | | |

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| <p>Infectious Diseases Biological agents of hazard groups 2, 3 and 4, for example, infections which are transmitted from animals and birds to humans through activities at work, hepatitis B.</p> | | <p>Carry out a COSHH assessment for women who are pregnant, have recently given birth or who are breastfeeding.</p> | | |
| <p>Chickenpox / shingles</p> | | <p>Pregnant women who have been in contact with chickenpox or shingles and have no history of chickenpox must contact their GP promptly for advice.</p> | | |

If you identify any further hazards or if any of the following apply to the work carried out please contact health and safety services: Work at height, work related violence, shocks and vibration, ionising and non-ionising electromagnetic radiation, confined spaces, mercury and mercury derivatives, lead and lead derivatives, carbon monoxide. Further hazards should be detailed below as applicable:

| Hazard | Controls | Review Date |
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| Other aspects of the pregnancy which may be affected by work e.g. exposure to smells affecting nausea, breast discomfort due to increased size and sensitivity (The impact will vary during the course of the pregnancy and you will want to keep their effects under review) | | Yes / No |
| Aspect/work issue | Controls | Review Date |
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| <i>The persons below should sign to show that the assessment is a correct and reasonable reflection of the hazards and of the control measures and actions required.</i> | | |
| <i>New/Expectant Mother's name (please print):</i> | <i>New/Expectant Mother's signature:</i> | <i>Date:</i> |
| <i>Line Manager's/Course Leader's name (please print):</i> | <i>Line Manager's/Course Leader's signature:</i> | <i>Date:</i> |

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| <i>Line Manager's/Course Leader's name (please print):</i> | <i>New/Expectant Mother's signature:</i> | <i>Date:</i> |
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Please note. Where a significant risk still remains, i.e. if the task cannot be avoided/carried out by someone else or further controls cannot be implemented, you **must** liaise with your line manager, the Resilience and Safety Team, Occupational Health, and your Human Resources Business Partner.

This risk assessment will be held in the employee's confidential medical notes. The employee and her line manager should be issued with a copy for their own files.