

Health and Safety Services

Guidance for New and Expectant Mothers at Work

Introduction

1. The management of Health & Safety at Work Regulations 1999 requires the University to pay particular attention to risks to the health at work of women who are pregnant, have recently given birth or are breast feeding.
2. Pregnancy should not be equated with ill health. It should be regarded as part of everyday life and its health and safety implications can generally be adequately addressed by normal good health and safety procedures.

Definition of "New and Expectant Mothers at Work"

3. The phrase "new or expectant mother" means a worker who is pregnant, who has given birth within the previous six months or who is breast-feeding. "Given birth" is defined in the regulations as; delivered a living child, or after 24 weeks of pregnancy – a stillborn child.

Risk Assessments

4. Many of the risks are already covered by existing legislation, and control measures should already be in place. However, the legislation highlights the need for full written risk assessments of the work environment, materials and activities, to ensure that appropriate protection is offered to the mother and child.
5. The risk assessment should take into account:
 - whether there are any new or expectant mothers working in the department.
 - whether there may be new or expectant mothers working in the department in the future
 - whether any of these employees work with agents or carry out activities that pose a threat to the health and safety of themselves or their child
 - whether any of these employees carry out night work
6. Under the Workplace (Health, Safety and Welfare) Regulations 1992 suitable rest facilities must be provided for workers who are pregnant or breastfeeding
7. The arrangements for making and recording risk assessments must be stated in the School/Directorate Safety Policy
8. If, after taking whatever preventative action is reasonable, there are concerns that an excess risk exists (beyond that present outside the workplace) the Head of School/Directorate must:-
 - temporarily adjust working conditions or hours of work

- if that is not possible or would not avoid the risk, then discuss with the Faculty/Directorate HR Manager the possibility of alternative work or paid leave, for as long as is necessary to protect the health and safety of mother and child
9. A check list of specific hazards is appended, but this is not exhaustive. If there is any doubt about the nature of the hazards, the degree of risk, or the health of the mother or child, advice must be sought from Occupational Health staff in Health and Safety Services, tel 56971.

Responsibilities

Employee Responsibilities

10. Employees are required to inform their line manager as soon as they are aware they are pregnant.
11. If an employee chooses not to inform the manager until a later stage in their pregnancy this will be their responsibility as personal risk assessments cannot be reviewed in relation to the pregnant worker until this is known.
12. Employees should bring to the attention of their manager any concerns they have relating to their health and safety at work due to being a "new or expectant mother".

Occupational Health Responsibilities

13. Occupational Health will provide advice and support to employees and managers regarding any health concerns of a "new or expectant mother".
14. The University Safety Officer (University Safety Co-ordinators) will provide advice to the Line Manager of the legal requirements of undertaking risk assessments and current legislation within the workplace.

Useful Reference/Further Information

Management of Health and Safety at Work Regulations 1999. Approved Code of Practice and Guidance L21 (Second edition) HSE Books 2000 ISBN 0 7176 2488 9

Workplace Health, Safety and Welfare, Workplace (Health, Safety and Welfare) Regulations 1992. Approved Code of Practice L24 HSE Books, 1992 ISBN 0 716 04136

Five Steps to Risk Assessment Leaflet INDG163(REV1) HSE books 1998 (single copy free or priced packs of 10) ISBN 07176 1565 0

New and Expectant Mothers at Work: A guide for employers HSG122 (second edition) HSE books 2002 ISBN 0 7176 2583 4

New and Expecting Mothers at Work: A guide for health professions available at <http://www.hse.gov.uk/pubns/indg373hp.pdf>

[Ensuring the health and safety of pregnant workers.](#) Pregnancy at Work, Department for Business, Enterprise and Regulatory Reform

Working Safely with Ionising Radiation: Guidance for expectant or breastfeeding mothers leaflet INDG334 HSE Books 2001 (single copy free)

Infection Risks to New and Expectant Mothers in the Workplace: A guide for employers guidance booklet HSE Books 1997 ISBN 07176 1360 7

Sex Discrimination Act 1975 The Stationery Office ISBN 0105465755

SOURCES OF HELP

HSE Information Services
Caerphilly Business Park
CAERPHILLY CF83 3GG
Info line: 0845 3450055
Fax: 02920 859260
Email:
hseinformationservices@natbrit.com
Website: www.hse.gov.uk
[HSE Expectant mothers website](#)

Equal Opportunities Commission
Arndale House,
Arndale Centre
Manchester M4 3EQ
Tel: 0845 601 5901
Fax: 0161 838 8312
Email: info@eoc.org.uk
Website: www.eoc.org.uk

Department for Work and Pensions
Public Enquiry Office
The Adelphi
1-11 John Adam Street
London WC2N 6HT
Tel: 020 7712 2171
Fax: 020 7712 2386
Website: www.dwp.gov.uk

[Working Families.org](http://WorkingFamilies.org)

HSE priced and free publications are available from:
Website: <http://www.hse.gov.uk/pubns/index.htm>

The Stationery Office (formerly HMSO) Publications are available from:
Website: <http://www.tso.co.uk>

Appendix 1

Summary Of HSE Guidance On Possible Hazards And Their Implications For New Or Expectant Mothers At Work

Possible Hazard	Risk to New or Expectant Mother or Her Child	Suggested Action
<u>Physical Agents</u>		
Shocks, vibration and movement	Regular shocks, low-frequency vibration or excessive movement may cause increased risk of miscarriage. No increased risk for breastfeeding women	Avoid uncomfortable whole body vibrations or work where abdomen is exposed to shocks, including driving or riding in off-road vehicles.
Manual handling	Hormonal changes in pregnant women may increase risk of ligament injuries. Advanced pregnancy can cause postural problems. Manual handling can be dangerous for those who have recently given birth by Caesarean section. No increased risk for breastfeeding women.	Alter tasks as appropriate.
Noise	No specific risk can be associated with pregnancy or breast-feeding.	
Ionising radiation	Significant exposure can harm the foetus. Exposure can be by direct irradiation of the abdomen or by the mother ingesting or breathing contaminated dust and passing it across to the placenta. A breastfed child could also be exposed to radiation through contamination of its mother's skin.	Reduce exposure to as low as practicable and follow statutory dose limits for pregnant women. Breastfeeding mothers should avoid work with radioactive liquid or dusts.
Optical radiation	No increase in risk.	
Electromagnetic fields	No specific risks to new or expectant mothers.	
Heat and cold	Pregnant women are less tolerant of heat stress. No specific risk from cold work.	Care is needed for work involving excessive heat exposure – such as furnace operation.
Fatigue, posture and movement	Fatigue from standing and other physical work has been associated with miscarriage, premature birth and low birth weight.	Avoid excessive hours and workloads. Allow employees to have some control over how they organise their work.

Hyperbaric atmospheres	The risk of developing the bends is slightly increased in those that have recently given birth. Severe foetal damage from gas bubbles is possible.	Pregnant women should not work in compressed air and should not dive.
Display screen equipment	Levels of ionising and non-ionising radiation generated by display screen equipment are well below international recommendations for limiting health risks. "The National Radiological Protection Board does not consider such levels to pose a significant risk to health". There is no evidence of any link between miscarriages or birth defects and working with display screen equipment.	Pregnant women do not need to stop working with display screen equipment. However, because anxiety has been well-publicised and is widespread, they should be given the opportunity to discuss their concerns with someone who is adequately informed of current scientific information and advice.
<u>Biological agents</u>	Dangerous pathogens can affect the unborn child if the mother is infected during pregnancy. Examples are: Hepatitis B, HIV (AIDS) herpes, chickenpox, typhoid, syphilis. Some agents such as rubella, toxoplasma and chlamydia can cause direct foetal damage or abortion. There may also be a risk of infection from breastfeeding.	Action will depend on the risk assessment which will take into account the nature of the agent and the risk of infection. Containment, vaccination or total avoidance of exposure may be appropriate.
<u>Chemical agents</u> (particular examples are given below)	Under labelling regulations, around 200 substances carry one or more of the risk phrases: R40 (irreversible effects), R45 (cancer), R46 (heritable genetic damage) and R47 (birth defects) to comply with the "Dangerous Substances" Directive (No.67/548/EEC). R47 has now been replaced by the more specific R60 and R62 (may impair fertility), R61 and R63 (may harm foetus) and R46 (may harm breastfed babies).	Particular emphasis in carrying out COSHH risk assessments should be given to the risks to new and expectant mothers.
Mercury and derivatives	Organic mercury compounds may adversely affect the development of the foetus. There is no clear evidence of effects of metallic mercury or inorganic mercury compounds. The effects on the child of exposure of a breast-feeding mother to mercury and its com- pounds are unknown.	Practical guidance is given in HSE guidance notes EH17 and MS12. *

Carbon monoxide	Carbon monoxide readily crosses the placenta and can result in adverse effects on the foetus. Pregnant women may be at heightened susceptibility. There is no evidence that breastfed babies suffer adversely if their mothers are exposed to carbon monoxide.	HSE guidance note EH43* contains practical advice.
Lead and lead derivatives	High-level exposure to lead – as was common in the early 1900's- results in high frequencies of spontaneous abortion, stillbirth and infertility. Low level exposure may reduce intellectual performance of the child. Lead can also enter breast milk.	Maximum permissible blood lead levels are lower for women of reproductive capacity than for men. Once pregnant, women who are subject to statutory medical surveillance under the Control of Lead at Work Regulations (1980) will normally be suspended from work by the Employment Medical Adviser or Appointed Doctor.

* Available from HSE Books, P O Box 1999, Sudbury, Suffolk CO10 6FS

Appendix 3

Aspects Of Pregnancy That May Affect Work

Apart from the hazards listed in Appendix 2, there are other aspects of pregnancy that may affect work. The impact will vary during the course of the pregnancy and will need to be kept under review. For example, the posture of expectant mothers will change to cope with increasing size.

Aspects of Pregnancy

Morning sickness

Backache

Varicose veins

Haemorrhoids

Frequent visits to the lavatory

Increasing size

Tiredness

Balance

Comfort

Dexterity, agility, co-ordination, speed of movement and reach, may be impaired due to increasing size.

Factors in Work

Early shift work

Exposure to nauseating smells

Standing/manual handling/posture

Standing/sitting

Working in hot conditions

Difficulty in leaving job/site of work

Use of protective clothing

Work in confined areas

Manual handling

Overtime

Evening work

Problems of working on slippery, wet surfaces

Problems of working in tightly fitting workspaces

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Related Policies:	Health & Safety Policy
Related Procedures	Title
Related Guidance:	A-Z of documents on specific health & safety topics, at http://www.campus.manchester.ac.uk/healthandsafety/CoPs&Guidance.htm
Related information:	
Policy owner:	Director of Health & Safety Services (currently Dr S A Robson)
Lead contact:	Director of Health & Safety Services (currently Dr S A Robson)