



Sheffield Occupational Health Advisory Service (SOHAS)

Working to Prevent and Alleviate the Effects of Work on Health

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THIS FACTSHEET IS PART OF THE **MOTHERS AT WORK SERIES**

Health and Safety at Work for pregnant women and new mothers

Information for employers

Pregnancy is not an illness, but working conditions normally considered acceptable may no longer be so during pregnancy and breastfeeding. In many workplaces there are risks which may affect the health and safety of new and expectant mothers and that of their child. In most cases, pregnancy goes undetected for the first 4-6 weeks. There are specific laws which require employers to protect the health and safety of new and expectant mothers.

A new and expectant mother is defined as someone who:

- is pregnant
- has given birth (including still-birth) within the last six months
- is breastfeeding.

'The Management of Health and Safety at Work Regulations' 1999 (MHSW) require employers to assess risks to all employees and to do what is reasonably practicable to control those risks. This applies to all employers of any size.

Employers must:

- identify hazards in their workplace that could pose a health

and safety risk to new and expectant mothers and take appropriate action to remove or reduce the risk. They must make this information known to all their female employees of childbearing age, not just those who have informed them they are pregnant.

- carry out a personal risk assessment for a new or expectant mother when they have received notice in writing that they are pregnant, are breastfeeding or have given birth in the last six months. This should:
 - be based on the initial assessment
 - take account of any medical advice their doctor or other health professional has provided eg by letter or on a Med 3 form
 - be carried out with the help of the woman and if appropriate, her union representative
 - be monitored and reviewed on a regular basis.

An employer may request, in writing, a certificate from a registered medical practitioner or midwife, confirming the pregnancy.



Research by the Equal Opportunities Commission (EOC) shows that on average **only 3% of any workforce will be on maternity leave during the year** but properly managed pregnancy and maternity leave can deliver clear benefits to staff and employers. **Small employers have on average one pregnancy every 10 years.**



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Studies suggest that:

- **20% of premature births are caused by occupational factors** leading to occupational fatigue
- **premature birth is more likely** among women who worked for more than 42 hours a week, stood for more than six hours a day or had low job satisfaction
- **physically demanding work** (such as heavy and/or repetitive lifting or load carrying, manual labour or significant physical exertion) or standing for more than three hours per day may significantly increase a woman's risk of **adverse pregnancy outcome**
- **standing and walking at work** between the third to sixth month of pregnancy may present a particular **risk for preterm delivery**
- In addition, high levels of **work-related stress** can be damaging in both the short and the longer term.

Greater expectations: Final report of the EOC's investigation into discrimination against new and expectant mothers in the workplace, June 2005

What are work hazards for new and expectant mothers?

New and expectant mothers at work: A guide for employers, Health and Safety Executive (HSE) 2002, includes detailed information on hazards, including the risks and how to avoid the risks. The list below outlines the hazards. **Health and safety at work for pregnant women and new mothers: Risk assessment checklist** is available from Sheffield Occupational Health Advisory Service (see Useful Information).

Physical risks

Movements and postures
Manual handling
Shocks and vibrations
Noise
Radiation (ionising and non-ionising)

Biological and chemical agents including

Exposure to infectious diseases
Toxic chemicals
Mercury
Pesticides
Lead

Working conditions

Facilities (including restrooms)
Work-related stress
Passive smoking
Extremes of cold and heat
Working with VDU's

Some of the above are already covered by specific health and safety regulations. It is important to remember that some hazards can present more of a risk at different stages of the pregnancy. The HSE guidance emphasises the risk of musculoskeletal disorders during pregnancy: "Hormonal changes in women who are pregnant or have recently given birth can affect ligaments, increasing susceptibility to injury."

Lifting and handling

This includes nursing/care workers, sales assistants, cleaners and two thirds of factory workers. "Allowance should be made for pregnancy... Pregnancy has significant implications for the risk of manual handling." *The Manual Handling Operations Regulations 1992*

"It is important to pay particular attention to women who may handle loads during the three months following a return to work after childbirth."

New and expectant mothers at work: A guide for employers HSE 2002.

Sitting or standing

"Continuous standing during the working day may lead to dizziness, faintness, and fatigue. It can also contribute to an increased risk of premature childbirth and miscarriage."

"It is hazardous working in confined workspaces, or with workstations which do not adjust sufficiently to take account of increased abdominal size..."

New and expectant mothers at work: A guide for employers HSE 2002.

Infectious diseases

Exposure to infectious agents such as hepatitis B from bodily fluids could be a problem for cleaners, and toxic chemicals used by hairdressers.

Resting

Employers must provide "suitable facilities... for any person at work who is a pregnant woman or a nursing mother to rest." *Workplace (Health, Safety and Welfare) Regulations 1992*

Night work

Special consideration needs to be given to new and expectant mothers who work at night. The Employment Rights Act 1996 require that if an employee who is a new or expectant mother works at night and has a certificate from

a registered medical practitioner stating that night work could affect her health and safety, she has a right to be:

- offered suitable alternative day-time work on terms and conditions no less favourable than her normal terms and conditions; or if that is not reasonable
- suspend her from work, on paid leave, for as long as is necessary to protect her health and safety and that of her child.

Night and evening work can be difficult for pregnant women. It increases the risk of fatigue and exhaustion which can pose a risk to the mother, especially in late pregnancy. The risks associated with night work may be even greater if women are getting inadequate rest during the day because they are travelling to and from antenatal appointments.

What is a risk assessment?

“A risk assessment is a careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm. The aim is to make sure that no one gets hurt or becomes ill.” Health and Safety Executive (HSE) *Five steps to risk assessment* available from HSE (see Useful Information).

EOC research (2004/5) has revealed that only 50% of women who worked whilst they were pregnant said they had received a health and safety risk assessment and for certain groups this was even lower.

Failure to conduct a risk assessment for new and expectant

How to carry out a risk assessment and what to look for in relation to pregnant and new mothers: An example

STEP 1: Look for hazards

- (1) slippery surfaces
- (2) manual handling

STEP 2: Decide who might be harmed and how

- (1) woman in later pregnancy, due to poor balance
- (2) pregnant woman may have increased risk of postural problems

STEP 3: Evaluate the risks and decide whether the existing precautions are adequate or whether more should be done

- (1) clean slippages immediately and ensure sensible footwear is worn
- (2) ensure woman has light duties not requiring excessive physical exertion

STEP 4 Record your findings

STEP 5 Review your assessment and revise it if necessary

(Adapted from *Health and safety of new and expectant mothers in the catering industry HSE information sheet No 19*)

mothers can amount to direct sex discrimination, contrary to the Sex Discrimination Act 1975. Employers also need to take into account women who may not be their employees, but are contractors.

What happens after the risk assessment?

If the risk assessment identifies hazards that could pose a risk to the mother or baby, then the employer must do all they can to eliminate that risk or to reduce it to a safe level. If the risk cannot be removed the employer must take action:

- If it is reasonable and if it avoids the risk, temporarily adjust the mother’s working conditions/hours of work.
- If this is not possible, can the mother be offered suitable and appropriate alternative work? (on terms and conditions not

less favourable than her normal terms and conditions) (Employment Rights Act 1996).

- If this is not possible, the mother has the right to be suspended on full pay for as long as is necessary to avoid the risk (paid suspension from work).

Good Practice

A growing number of employers are taking the time to listen to pregnant women and to work with them to find solutions. Treating pregnant women well helps an employer to retain and get the best out of valued staff.

Helpful changes made by an employer can include:

- re-arranging working hours.
- adjusting the amount of overtime to be worked.
- giving greater flexibility about when breaks could be taken.

One example of good practice is in a pet shop where the pregnant woman was banned from any heavy lifting or contact with birds - because of the danger of infection. She was also provided with protective equipment to wear when she cleaned out animal cages. 'Working and Caring: who pays the price?' **Sheffield Law Centre, June 2000**

- providing training in how work may be altered to accommodate changes in posture and physical capability, including taking breaks.
- offering use of rest facilities.
- allocating tasks to others, eg lifting boxes.

This kind of positive action often costs very little and yet significantly improves the experience of pregnant women. It saves an employer money as women can work longer, are less likely to need to take time off sick and are more likely to want to return to work after the birth of their baby.

Women in manufacturing are most likely to have had a risk assessment. However it is important to remember that environments such as

offices may present serious risks.

Antenatal care

All pregnant women have a right to take reasonable paid time off to attend ante-natal care, including the time taken to travel. This includes;

- appointments with her midwife, GP or hospital.
- ante-natal, parentcraft, and relaxation classes.

Employers should not ask women to make the time up, take annual leave or to change their normal working hours so that appointments fall out of work time. To do so is unlawful. A critical factor in whether women get time off appears to be the attitude or knowledge of their line manager.

Breastfeeding

Employers have a duty to enable their employees to continue breastfeeding once they have returned to work. A woman must notify her employer in writing as early as possible that she is breastfeeding. Her employer must then carry out another specific risk assessment and take the steps set out above.

Specific risks could include:

- Working with organic mercury,
- Working with radioactive material, and
- Exposure to lead.

Useful information

Health and Safety Executive (HSE) infoline 0845 3450055 or www.hse.gov.uk

'Five steps to risk assessment' **free**.

'A guide for new and expectant mothers who work' **free**

'New and expectant mothers at work: A guide for employers' is **£9.50**.

'Working safely with ionising radiation: Guidelines for expectant or breastfeeding mothers' and 'Health and safety of new and expectant mothers in the catering industry' are available **free**.

SOHAS (Sheffield Occupational Health Advisory Service) 'Health and safety at work for pregnant women and new mothers: risk assessment checklist.' **Is available at www.sohas.co.uk**

USDAW (Union of Shop, Distributive and Allied Workers). Web site www.usdaw.org.uk. Search for 'pregnancy risk assessment checklist'.

This leaflet draws from materials from the HSE, the Maternity Alliance and USDAW.

HEALTH AND SAFETY EXECUTIVE GUIDANCE:

- ...the (health and safety) regulations do not put a time limit on breastfeeding. It is for the women themselves to decide how long they wish to breastfeed, depending on individual circumstances.
- Access to appropriate facilities for breastfeeding mothers to express and safely store breastmilk or to enable infants to be breastfed at or near the workplace, may facilitate breastfeeding by working women, and may significantly protect the health of both mother and infant.
- Protective measures include:
 - access to a private room where women can breastfeed or express breast milk
 - use of secure, clean refrigerators for storing expressed breastmilk while at work, and facilities for washing, sterilising and storing receptacles
 - time off (without loss of pay or benefits, and without fear of penalty) to express milk or breastfeed.

New and expectant mothers at work: A guide for employers HSE 2002