

The Church of St. Patrick Drumbeg Assessment of Pregnant Workers Policy

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1. **INTRODUCTION**

It is our policy to provide a healthy and safe working environment for any employee or worker who is pregnant.

This policy is non-contractual but aims to ensure that any risks on the site are minimised at all times.

A 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 as delivered a living child or, after 24 weeks , a still born child.

2. **SCOPE OF THIS POLICY**

This policy should be followed by all employees and workers who are pregnant.

3. **THE AIMS OF THIS POLICY**

This policy aims to reduce the risks associated with working when pregnant by implementing a series of risk control measures.

4. LEGAL CONSIDERATIONS

European Directive on Pregnant Workers was introduced into the Management of Health and Safety at Work Regulations 1992

Management of Health and safety at work (Amendment) Regulations 1994

The Directive applies to three groups of women; those who are pregnant, those who have recently given birth and those who are breastfeeding.

5. WHAT YOU NEED TO DO?

- Upon notification, either verbal or written, that a member of staff is pregnant, a Risk Assessment of their job must be carried out by **The Rector**.

[A Risk Assessment Form is shown at Annex A to this policy.](#)

- If necessary confirmation of the pregnancy can be requested from a GP or midwife.
- The assessment should look at the physical, biological and chemical effect of the worker's job.
- To carry out an assessment, the manager should be familiar with the Hazards and Aspects of pregnancy.

[A List of the Hazards and Aspects of Pregnancy is shown at Annex B to this policy.](#)

- If the assessment reveals a risk that cannot be removed or controlled, the following steps must be taken:
- **Step 1** - Temporarily adjust her working conditions and/or hours of work.
- **Step 2** - Offer her alternative work at her current rate of pay if any is available.
- **Step 3** - Suspend her from work (giving her paid leave at her current rate of pay) for as long as necessary to protect her safety or health or that of her child.

6. REVIEW OF RISK ASSESSMENT

Once the initial risk assessment has been carried out, it will be the responsibility of **The Rector** to review the risk assessment as necessary. The pregnant worker should also bring any changes to her job or her condition to the manager's attention.

7. RETURN TO WORK FOLLOWING THE BIRTH

It may be necessary for the manager to carry out a further risk assessment if the new mother is breastfeeding or recovering from a caesarean section.

8. IMPLEMENTATION, MONITORING AND REVIEW OF THIS POLICY

This policy will take effect from **13th June 2017**.

The **Rector** and **Health and Safety Officer** has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (**at least annually**) and additionally whenever there are relevant changes in legislation or to our working practices.

Employees will be consulted about any proposed changes, and adequate notice given of these.

Any queries or comments about this policy should be addressed to the **Rector** or **Health and Safety Officer**.

POLICY REVIEW DATES

9th February 2018			

4. What further action is necessary to control the risk?

What more could you reasonably do for those risks which you found were not adequately controlled?

List the risks and the action you will take where it is reasonably practicable to do more. You are entitled to take cost into account unless the risk is high.

5. Review:

You should review your assessment from time to time and revise it if necessary. List your planned review dates here:

6. Recommendations:

Any recommendations should be listed here:

Risk Assessment carried out by:	
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PRINT NAME

Designation:	
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Date:	
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HAZARDS OF PREGNANCY		
Hazard	Risk	Action
MANUAL HANDLING	Risk of soft tissue injury due to hormonal changes. Postural problems and caesarean section.	Reduce, remove or avoid hazardous manual handling.
FATIGUE	Standing and physical work has been associated with miscarriage, low birth weight, premature labour	Avoid excessive hours and workloads. Employee/worker control; over breaks.
HEAT AND COLD	Less tolerant of heat stress.	Avoid excessive heat, mothers can get dehydrated.
DISPLAY SCREEN EQUIPMENT	There is no evidence linking DSE and miscarriage or birth defects.	Ensure worried females have access to professionals for advice.
BIOLOGICAL AGENTS	Rubella and other diseases.	Vaccination and avoidance from those who have the disease. (Toddler Group, Sunday School and children's organisations mainly)

ASPECTS OF PREGNANCY	
Aspects of Pregnancy	Factors in Work
Morning Sickness	Exposure to Nauseating Smells
Backache	Standing/Manual Handling/Posture
Varicose veins	Standing/Sitting
Haemorrhoids	Working in Hot Conditions
Frequent visits to the toilet	Difficulty in leaving site of work
Increasing size	Manual Handling
Tiredness	Evening Work
Balance	
Comfort	
Dexterity, Agility, Co-ordination, Speed of Movement, Reach. All may be impaired because of increasing size.	