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| ****Step 1****  **The checklist should be completed first: this will help you to identify any hazards to the expectant mother.**  ****Step 2****  **Where you have identified there is a hazard and assessed the risk to the pregnant worker, enter this onto the risk assessment action plan, where you will then be able to put any control measures in place to eliminate the risk, or reduce it to an acceptable level for the expectant mother.**  ****Note****  **This checklist is not exhaustive: other issues with the expectant mother’s work conditions/place may need to be considered.**  **The risk assessment should be reviewed on a regular basis throughout the pregnancy and any necessary control measures put in place.** |

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| --- | --- | --- | --- | --- |
| **Employee’s name:** | |  | | |
| **Job title:** | |  | | |
| **Service/school:** | |  | | |
| **Form completed by:** | |  | | |
| **Line manager’s name:** | |  | | |
| **Date form completed:** | |  | | |
| **Recommendations made by the Doctor and/or Midwife:** | | | | |
| **1. Display screen equipment (DSE)** | | | **Yes/No** | **Further action required** |
| 1.1 | Does the employee use a computer for long periods of time? | |  |  |
| 1.2 | Is the DSE work equipment and furniture such as the chair, suitable and comfortable for the employee? | |  |  |
| 1.3 | Has a DSE risk assessment been completed for the employee? | |  |  |
| **Risk**  Inappropriate size, layout, or space in relation to the workstation or work area due to increasing size and reduced mobility, dexterity, balance during pregnancy. | | | **How to avoid the risk**  DSE assessments should be revised for new and expectant mothers to avoid problems caused by stress and anxiety and workstation size and set up. | |
| **2. Driving for work** | | | **Yes/No** | **Further action required** |
| 2.1 | Does the employee do a lot of driving as part of their job, such as to make home visits to clients or visiting other workplace establishments? | |  |  |
| **Risk**  Travelling in the course of your work, and also to and from the workplace can be problematic for expectant mothers, involving risks including fatigue,  vibrations, stress, static posture, discomfort and accidents. These risks can have a significant effect on the health of new and expectant mothers. | | | **How to avoid the risk**  KCC has travel for work guidance and a driving risk assessment prompt sheet which should be used when risk assessing all  staff/journeys where a significant risk is identified; this includes the risk associated with pregnancy.  New and expectant mothers should avoid sitting in static postures for prolonged periods. Additionally as pregnancy progresses space in the car may become increasingly restrictive and uncomfortable for the expectant mother. Prolonged periods of vibration should also be avoided. | |
| **3. Lone working** | | | **Yes/No** | **Further action required** |
| 3.1 | Does the employee work alone in the building or out in the community? | |  |  |
| 3.2 | Are control measures in place for lone working? Such as panic alarms, buddy systems? | |  |  |
| **Risk**  Pregnant women are more likely to need urgent medical attention. | | | **How to avoid the risk**  Location, frequency and working patterns of lone working should be reassessed as part of the new and expectant mother’s risk assessment. | |
| **4. Manual handling** | | | **Yes/No** | **Further action required** |
| 4.1 | Is the employee expected to carry or move heavy loads? | |  |  |
| 4.2 | Is the employee expected to carry or move children? | |  |  |
| 4.3 | Is the employee aware of safe moving and handling techniques? | |  |  |
| 4.4 | Has a moving and handling risk assessment been completed for the employee? | |  |  |
| 4.5 | Does the employee experience backache associated with moving and handling activities and poor work postures? | |  |  |
| **Risk**  Expectant mothers are especially at risk from moving and handling injuries. Hormonal changes can affect the ligaments, increasing susceptibility to injury, and postural problems may increase as the pregnancy progresses.  There can also be risks for those who have recently given birth. For example, after a caesarean section there is likely to be a temporary limitation on moving and handling capability. | | | **How to avoid the risk**  Alter the nature of the task to reduce risks from moving and handling. This could be for all workers including new and expectant mothers, or you may just have to address the needs of the new and expectant mothers, specifically reducing the amount of physical work she undertakes, or providing mechanical aids to reduce the risks. | |
| **5. Physical agents** | | | **Yes/No** | **Further action required** |
| 5.1 | Is the employee exposed to whole body vibration e.g. from machinery? | |  |  |
| 5.2 | Is the employee exposed to excessive noise e.g. from noisy machinery? | |  |  |
| 5.3 | Is the employee expected to work in awkward/confined spaces? | |  |  |
| 5.4 | Is the employee exposed to excessive heat? | |  |  |
| 5.5 | Is the employee exposed to excessive cold? | |  |  |
| 5.6 | Does the employee have to sit or stand for long periods of time? | |  |  |
| **Risk**  **Confined spaces** – Working in confined spaces, or at workstations which do not adjust sufficiently to take account of the increased abdominal size, particularly during the later stages of pregnancy. This may lead to sprain or strain injuries. Dexterity, agility, co-ordination, speed of movement, reach and balance may also be impaired and an increased risk of accidents may need to be considered.  **Sitting** – Constant sitting during pregnancy poses a relatively high risk of thrombosis or embolism. In the later stages of pregnancy, women are likely to experience backache, which can be intensified for remaining in a specific position for a long period of time.  **Standing** – Standing for a prolonged period of time may cause dizziness, faintness and fatigue.  **Extremes of heat and cold** – Expectant mothers that are exposed to prolonged periods in hot environments are at a far greater risk of suffering from heat stress. Working in extreme cold may pose a hazard for expectant mothers and their unborn child. These risks are particularly increased if there are sudden changes in temperature. Also breastfeeding may be impaired by heat dehydration. | | | **How to avoid the risk**  **Confined spaces –** Introduce or adapt work equipment. Redesign the workstation and/or work area. Redesign the job content.  **Sitting** – Avoid sitting for long periods. Expectant mothers should have the opportunity to alternate between standing and sitting and to exercise/move to maintain healthy circulation. Regular rest breaks should be provided.  **Standing** – Avoid standing for long periods of time.  **Extremes of heat and cold** – Adequate rest breaks and unrestricted access to drinking water should be provided. Also the provision of a desk fan may be necessary. Relocation if possible or adjustment to working hours should be investigated. New and expectant mothers should drink water before they get thirsty, preferably in small and frequent volumes. | |
| **6. Slips, trips and falls** | | | **Yes/No** | **Further action required** |
| 6.1 | Is the employees work area free from slips trips and fall hazards? | |  |  |
| **Risk**  Major/minor injuries as a result of slips/trips/falls falls which could cause injury both to mother and baby. | | | **How to avoid the risk**   * ensure there are no loose/trailing cables in working environment * clear any spillages on floor/stairs * awareness of environment, e.g. changes in floor levels and floor surfaces, particularly from wet to dry floors. * avoid walking in poorly lit areas * hold handrails when walking down stairs * wear appropriate footwear * avoid walking in severe weather conditions such as snow/ice * take sensible precuations when using mobile phones, e.g. texting and walking at the same time * do not obscure vision when carrying objects. | |
| **7. Violence and aggression** | | | **Yes/No** | **Further action required** |
| 7.1 | Is the employee exposed to potentially violent situations from:   * children * adults * members of the public. | |  |  |
| **Risk**  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. It can lead to miscarriage, premature delivery and underweight birth, and it may affect the ability to breastfeed. | | | **How to avoid the risk**  All face to face contact with service users where there is believed to be a significant risk above that identified by the generic risk assessment must be risk assessed.  Change the design of the job – avoid lone working, reduce/remove the face to face client contact, reassign difficult cases.  If you cannot significantly reduce the risk of violence you should offer the expectant mother and new mothers suitable alternative work. | |
| **8. Welfare** | | | **Yes/No** | **Further action required** |
| 8.1 | Is there a rest room or a suitable area for the employee to rest? | |  |  |
| 8.2 | Has the employee received any advice from the doctor or midwife that has any bearing on her role? | |  |  |
| 8.3 | Are there any other specific welfare issues mentioned by employee? | |  |  |
| 8.4 | Is the employee allowed regular breaks? | |  |  |
| 8.5 | Is the employee allowed to take a comfort break when needed? | |  |  |
| 8.6 | Does the employee suffer from morning sickness? This may be relevant where early morning shifts are worked, or where there may be exposure to nauseating smells. | |  |  |
| 8.7 | The employee’s posture is also significant if varicose veins and/or haemorrhoids develop – the latter also being linked with a hot work environment. | |  |  |
| 8.8 | Can nursing mothers frequently re-hydrate? | |  |  |
| 8.9 | Do nursing mothers have a facility for privately expressing milk? | |  |  |
| **Risk**  **Rest facilities** – Tiredness increases during and after pregnancy and may be exacerbated by work related factors.  **Hygiene facilities** – Because of pressure on the bladder and other changes associated with pregnancy, expectant mothers often have to go to the toilet more frequently and urgently than others. Breastfeeding women may also need to, due the increased fluid intake to promote breast milk production. | | | **How to avoid the risk**  **Rest facilities** – There must be facilities to sit or lie down in comfort and in privacy. Access to drinking water should also be available.  **Hygiene facilities** – If necessary measure should be put in place to ensure that new and expectant mothers can leave their workstations at short notice. | |
| **9. Working at Height** | | | **Yes/No** | **Further action required** |
| 9.1 | Does the employee have to carry out any work that requires them to work from height e.g. putting up displays, ladder use? | |  |  |
| **Risk**  It is hazardous for expectant mothers to work at heights, for example for short duration work off of ladders. | | | **How to avoid the risk**  Working at height should be avoided by new and expectant mothers. | |
| **10. Stress at work** | | | **Yes/No** | **Further action required** |
| 10.1 | Is the employee exposed to undue pressure? | |  |  |
| 10.2 | Has a management standards risk assessment been carried out? | |  |  |
| **Risk**  New and expectant mothers can be particularly vulnerable to occupational stressors for a variety of reasons:   * 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 * financial, emotional and job insecurity may be issues, due to changes in economic circumstances brought about by pregnancy * it may be difficult to organise work and private life, especially with long, unpredictable or unsocial working hours or where other family responsibilities are involved.   Stress is associated in some studies with increased incidence of miscarriage and also with impaired ability to breastfeed.  Where women have recently suffered loss through stillbirth, miscarriage, adoption at birth, or neonatal death, they will be especially vulnerable to stress, as will women who have experienced serious illness or trauma associated with pregnancy or childbirth. | | | **How to avoid the risk**  The KCC Managing Stress at Work Policy requires all teams to conduct and record a management standards risk assessment. If individuals are experiencing stress than an individual management standards risk assessment should be completed.  The KCC Managing Stress at Work Policy details initiatives, sources of advice, training and support systems available to staff.  Protective measure may include adjustments to working conditions or working hours, and ensuring that the necessary understanding, support and recognition is available when the women return to work, while her privacy is also respected. | |
| **11. Biological** | | | **Yes/No** | **Further action required** |
| 11.1 | Is the employee exposed to any infectious diseases particularly the following:   * swine flu * coronavirus disease (covid 19) * rubella (measles) * chickenpox * slapped cheek disease * chlamydia psittaci (from lambs)   other (specify).  For more information on infectious diseases refer to the Public Health England list of A-Z infectious diseases which can be found on [www.gov.uk](http://www.gov.uk) | |  |  |
| 11.2 | Is the employee exposed to any bodily fluids? (Protective gloves must be worn) | |  |  |
| **Risk**  The level of risk will depend on the type of work carried out, the infectious disease the worker is exposed to and the control measures in place. There will be an increased risk of exposure to staff who have contact with:   * human blood and body fluids * infected animals including parrots, turkeys, pigeons, ducks, cats, rodents and sheep as well as household pets. * laboratory cultures * water or food contaminated by human or animal faeces * first aid duties.   Usually during pregnancy, women are no more likely to catch an infection than at other times, however in some cases, the infection may be more severe in pregnancy. It is important to remember that if the mother does become infected, some infections may be dangerous for the baby | | | **How to avoid the risk**  When assessing the infection risks to all staff the following should be considered:   * the types of infection likely to be transmitted at work * the possible sources of infection * the likelihood that a possible source of infection i.e. pet, service user, is actually infected * the number of different sources of infection that staff may come into contact with and how often it may occur * the control measures already in place to protect employees * the medical history of the employee * the history of previous infection or immunisation * the need for suitable information, instruction and training for employees which may help them to prevent or reduce the risk from infection. | |
|  | | | Guidance on infections that are known to present a risk to the foetus and new-born baby are detailed in appendix 2 of the HSE publication ‘Infection Risks to new and expectant mothers in the workplace’. | |
| **12. Chemical agents** | | | **Yes/No** | **Further action required** |
| 12.3 | Is the employee exposed to any chemical agents? (Check COSHH risk assessments and chemical datasheets) | |  |  |
| 12.4 | Is the employee exposed to cigarette smoke? | |  |  |
| 12.5 | Is the employee exposed to Ionising Radiation? (Work procedures should be designed to keep exposure of the expectant mother as low as reasonably practicable and certainly below the statutory dose limit for expectant mothers). | |  |  |
| **Risk**  **Hazardous substances** – Some substances are classified with the following warnings: - R61 may cause harm to the unborn child, R63 possible risk of harm to the unborn child and R64 may cause harm to breastfed babies. However, the actual risk to health of these substances is determined by how they are used in the workplace.  **Ionising radiation** –Significant exposure to ionising radiation can be harmful to the foetus. There may also be a risk to the foetus from significant amounts of radioactive contamination breathed in or ingested by the mother and transferred across the placenta. If nursing mothers work with radioactive liquids or dusts, these can cause exposure if the child, particularly through contamination of the mother’s skin. | | | **How to avoid the risk**  **Hazardous substances** – All hazardous substances should have a COSHH assessment carried out upon it. COSHH data sheets should be supplied by the chemical company and COSHH assessment then carried out and the appropriate control measure put in to place.  **Ionising radiation** –Safe working practices should be designed to keep exposure of the expectant mother as low as is reasonably practicable, and certainly below the statutory dose limit for pregnant women. Special attention should be paid to the possibility of nursing mothers receiving radioactive contamination. They should not work in areas where the risk of contamination is high and therefore alternative work should be arranged. | |
| **13. Any other issues** | | | **Yes/No** | **Further action required** |
| 13.1 | Increasing size may present problems: consider personal protective clothing (PPE) and uniforms that may be worn by employees. | |  |  |
| 13.2 | Dexterity, agility, co-ordination, speed of movement and reach may all be impaired due to increasing size. | |  |  |

Further guidance and information to help you complete an expectant mother risk assessment can be obtained from the following sites:

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| KNET/KELSI: | The following free leaflets can be downloaded from the HSE website: [www.hse.gov.uk](http://www.hse.gov.uk) |
| * Blood borne viruses – principles of infection control * DSE workstation assessment form * Lone working and personal safety guidance * Managing stress at work policy * New and expectant mothers guidance * Travel for work guidance and risk assessment prompt sheet | * COSHH essentials * Display screen equipment * Infection risks to new and expectant mothers in the workplace * Violence at work * Manual handling * Noise at work advice for employers * New and expectant mothers * Working at height. |

**If a risk has been identified, indicate the action to be taken to remove the hazard or reduce the risk within the expectant mother risk assessment action plan below.**

Pregnant workers and new mother’s risk assessment action plan

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee’s name:** | | | **Establishment:** | |
| **Line manager’s name:** | | | **Form completed by:** | |
| **Date completed:** | | | **Review date:** | |
| **Source of hazard** | **What control measures are**  **in place now** | Further action required and by whom  (include reference to other assessments if applicable) | | **Date action completed** |
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