

**URN:** 20-096

**Subject:** Review and Update of Maternity Policy

**Report to:** Policy and Resources Committee

**Report by:** Angela Sallis, HR Advisor (Policy), requested by Sarah Tate, Head of OD

**Date:** 8<sup>th</sup> November 2020

**SUBJECT MATTER/RECOMMENDATIONS**

Revised and updated Maternity Policy

**Recommendation:**

1. proposes the new Maternity Policy for approval
2. Agrees to carry out a review of this policy after three years unless there is a significant change in legislation requiring earlier review.

**1. Introduction/Background**

The current Maternity Guidance Note was reviewed and incorporated into the new Maternity Policy, which also includes additional information and guidance for employees, managers and HR. It includes current legislation, ACAS guidance, relevant information from the GYBC Handbook and provisions within the Green Book.

The policy has been reviewed and updated by HR, feedback has been given by ELT, UNISON HR, and Senior Performance and Data Protection Officer. The policy was considered by ELT in August 2020 and following this, minor changes were made. The policy was reviewed by JCWG on 2<sup>nd</sup> November and their comments have been reviewed and the policy amended as appropriate. Once the policy is approved it will be made available to staff via the Loop and training will be given to managers as and when required.

**2. FINANCIAL IMPLICATIONS**

None.

**3. RISK IMPLICATIONS**

None at this stage.

**4. POLICY IMPLICATIONS**

None at this stage.

## 5. RECOMMENDATIONS

1. proposes the new Maternity Policy for approval
2. Agrees to carry out a review of this policy after three years unless there is a significant change in legislation requiring earlier review.

## 6. BACKGROUND PAPERS

Maternity Policy

Area for consideration	Comment
Monitoring Officer Consultation:	Carried out
Section 151 Officer Consultation:	Carried out
Existing Council Policies:	Maternity Guidance, Staff Handbook and Green Book
Financial Implications:	NA
Legal Implications (including human rights)	Employment Law Legislation
Risk Implications:	Considered
Equality Issues/EQIA assessment:	NA
Crime & Disorder:	NA
Every Child Matters:	NA



# Maternity Policy

<b>Author</b>	HR
<b>Version No.</b>	2
<b>Updated by</b>	AS
<b>Date of update</b>	30 September 2020
<b>Description of changes to this version</b>	Includes all relevant information and incorporates previous GYBC guidance document
<b>Document Status</b>	<b>DRAFT– for P&amp;R (17/11/20)</b>
<b>Next review due by (unless change required earlier i.e. due to legislation)</b>	August 2023

## **MATERNITY POLICY**

### **Introduction**

This policy outlines the statutory rights and responsibilities of employees who are pregnant or new parents and details arrangements relating to maternity leave and maternity pay.

If an employee wishes to meet with a member of the human resources team after they have read this document, they should contact the HR team.

### **1.0 Notification of pregnancy**

On becoming pregnant, an employee should inform their line manager and HR as soon as possible, but no later than 15 weeks before the baby is due. This is important, including in respect of health and safety considerations; their line manager will work with them to assess and manage any health and safety risks during their pregnancy. Employees and managers should refer to Appendix 4 and the New and Expectant Mothers Policy on the Loop. It is the responsibility of managers to ensure that risks to new and expectant mothers are managed in areas under their control.

### **2.0 Ante-Natal Care**

- 2.1 Once an employee has informed the Council about her pregnancy, she can take paid time off to attend ante-natal care appointments on the advice of a registered medical practitioner, midwife, nurse or health visitor. Antenatal care can include antenatal or parent craft classes, if recommended by a doctor or midwife. Time off for an antenatal appointment includes the length of the appointment or class and travel to and from it.
- 2.2 Employees are requested to give their line manager as much notice as possible of antenatal appointments and, wherever possible, try to arrange them as near to the start or end of the working day. If the appointment is in the middle of a working day, employees should talk with their line manager about how long it will take and, if, for example, it will take too long to get back to work, consider requesting a change to their start and finish times on the day of the appointment or to work from home for the remaining time, if this would be possible.
- 2.3 After the first appointment the employee may be requested to produce evidence of appointments (i.e. an appointment card or an email confirming a class booking) to her line manager.
- 2.4 An employee who is the expectant father or the partner of a pregnant woman will be entitled to take unpaid time off work to accompany the woman to up to two of her antenatal appointments, for a maximum of 6.5 hours for each appointment, including travelling time and attendance at the appointment. Employees are requested to give their line manager as much notice as possible of such appointments. Also see Maternity Support Leave, Parental Leave and Shared Parental Leave (SPL).

### **3.0 Maternity Leave (for Maternity Pay see section 4.0)**

#### **3.1 Eligibility and procedure**

- 3.1.1 All pregnant employees, regardless of their service, are entitled to take Maternity Leave of up to 52 weeks; the first 26 weeks are known as Ordinary Maternity Leave (OML) and the last 26 weeks as Additional Maternity Leave (AML). If taken, AML must follow immediately after OML.

- 3.1.2 Whilst there is no qualifying period for maternity leave, there is a qualifying period for some of the statutory maternity pay and occupational maternity pay. See section 4.0 for details of Maternity Pay.
- 3.1.3 In order to take Maternity Leave, the employee must:
- inform HR and their line manager that they are pregnant as soon as reasonably possible, and no later than 15 weeks before the due date. The employee should complete and submit the Employers Notification Form Mat E1 (Appendix 2) to HR by the specified time, stating the dates she wishes to start and end maternity leave.
  - provide HR with a medical certificate or MAT B1 form, issued by their doctor or midwife from the 20th week of pregnancy
- If it is not possible for the employee to comply with the above, (for example, because they did not know they were pregnant), they must inform HR as soon as possible.
- 3.1.4 Once HR have received the completed Mat E1 form from the employee, they will reply in writing, within 28 days, confirming that they are entitled to 52 weeks' maternity leave and their return to work date, assuming they will be taking 52 weeks, unless otherwise advised. The employee may change it later if they want to take less, but must give notice in order to do so.
- 3.1.5 During maternity leave an employee has a right to benefit from the terms and conditions that would have applied to her had they been at work, the only exception being salary.
- 3.1.6 If an employee is having a difficult pregnancy, including if it is affecting their work, they should talk with the line manager or HR; they may also wish to contact the Council's Employee Assistance Programme. It may also be possible for an employee to ask for a change to their working arrangements, for example different start and finish times, an occupational health assessment, time working from home and/or extra breaks for when you're feeling unwell. Employees who want to make more permanent changes to their job, should make a flexible working request (see Flexible Working Policy).
- 3.2 When maternity leave will start / informing of birth of baby**
- 3.2.1 Maternity leave will start on whichever date is the earlier of:
- the employee's chosen date – which can be at any time after the beginning of the 11<sup>th</sup> week before their expected week of childbirth (as long as she is fit to continue working and it does not contravene health and safety guidelines);
  - the day after the employee gives birth if the baby is early;
  - the day after any day on which the employee is absent for a pregnancy-related reason in the four weeks before the expected week of childbirth, irrespective of anything agreed previously; in this case maternity leave will start automatically.
- 3.2.2 If the employee gives birth before her maternity leave was due to start, she (or her partner or a member of her family) must let the Council know that the baby has arrived early and when, as soon as possible, by contacting their line manager or HR. Following this and as soon as practicably possible, HR will write to the employee confirming the new end date for their leave.
- 3.2.3 If the baby is late and the employee gave a specific date they wanted maternity leave to start, they can still start the leave from that date but must inform the Council of the date they gave birth so that they start their compulsory maternity leave from then.

### **3.3 Changing the date Maternity Leave starts**

- 3.3.1 If an employee wishes to change her maternity leave start date, she must give the Council 28 days' notice in writing. If she is unable to give 28 days' notice (for example, if it is late in the pregnancy) she should speak to her line manager, agree the new date with them and confirm it in writing to the line manager and HR. The revised date to start maternity leave cannot be before the start of the 11th week before the expected week of childbirth.
- 3.3.2 HR will write to the employee within 28 days of the commencement of the employee's ordinary maternity leave, to acknowledge the employee's intentions and to inform of the date on which the 52-week maternity leave entitlement will end.

### **3.4 Compulsory maternity leave following the birth**

- 3.4.1 Although the employee can decide how much maternity leave they wish to take (up to a maximum of 52 weeks), the law requires that they take a minimum of two weeks maternity leave immediately following the birth, starting with the day of the birth, for health and safety reasons. This is called compulsory maternity leave, applies in all circumstances and forms part of the period of Ordinary Maternity Leave.
- 3.4.2 The employee can decide how many of the remaining 50 weeks they wish to take.

### **3.5 Multiple births**

Employees will receive the same amount of maternity leave and pay whether they have one baby or more than one, for example twins.

### **3.6 Contact during maternity leave**

- 3.6.1 The Council is required by law to tell employees on maternity leave about important changes or news at work, including promotion or other job opportunities, redundancies and/or any reorganisation that could affect their job. Therefore, before maternity leave starts, the line manager and employee should agree the best way to keep in touch and whether they prefer email to phone calls or vice-versa.
- 3.6.2 Employees may also want to be told about things such as social events and colleagues who are leaving or joining and discuss arrangements for their return to work. The line manager and employee should discuss and agree how much contact they want (unless the contact is about the things we must tell them about).
- 3.6.3 Employees may also wish to make contact with their line manager during their maternity leave, for example, to discuss KIT days or any flexible working arrangements that they may wish to request.

### **3.7 Changing the date of the return to work**

- 3.7.1 Unless otherwise notified or agreed, the employee will return to work on the date which they are due to return to work, which will normally be the first working day 52 weeks after their maternity leave began or as per the date specified on their Mat E1 form. It will be helpful if the employee contacts her line manager or HR to confirm that she will be returning to work as expected, if possible, in the 8 weeks before retuning.
- 3.7.2 Where the employee wishes to curtail part of their leave to enable her partner to take SPL, or to return to work earlier than planned, they should give at least eight weeks' notice in writing.

- 3.7.3 If the employee wishes to return earlier than 8 weeks, they should discuss it with their line manager first and if agreed, confirm it in writing.
- 3.7.4 If less than 8 weeks' notice is given, and the line manager has not agreed to it, the Council may postpone the employee's return to work to ensure 8 weeks' notice is given, but not beyond the end of the maternity leave period.
- 3.7.5 In any event, maternity leave cannot be extended beyond the maximum entitlement of 52 weeks.
- 3.7.6 If an employee becomes pregnant while on maternity leave, they are entitled to another 52 weeks' maternity leave, and are required to notify their line manager and HR in line with this policy. By law, the employee cannot start their next maternity leave until the 11th week before their baby is due, so if their first maternity leave ends before that point, they will be required to return to work until at least the 11th week before the baby is due or submit a request to their line manager and HR to remain off work by taking another type of leave (i.e. annual leave). If agreed, the employee is required to give the Council the correct notice.

### **3.8 Keeping in touch (KIT) days**

- 3.8.1 The Council and the employee have up to 10 optional keeping in touch (KIT) days which can be worked by the employee during their maternity leave (but not within the first two weeks of giving birth), if the line manager and employee agree, without it affecting maternity leave and pay. KIT days can be worked one at a time, or in blocks of several days in a row.
- 3.8.2 Before working a KIT day the line manager and employee should agree what work the employee will do and when it will be worked. KIT days can include joining training sessions, appraisal meetings or team meetings.
- 3.8.3 An employee wishing to work KIT days should discuss and agree with their manager in advance of the KIT day:
- what work they will be doing/what training they will be attending
  - whether they wish to use the KIT days consecutively, singly or in blocks.
  - how many hours they wish to work on those days
- 3.8.4 Employees should be aware that any work on a day (even as little as an hour) will count as a whole KIT day and they will only be able to claim for, and be paid for, the hours they work, in units of ¼ hour, at the normal contractual rate of pay, agreed with their line manager in advance.
- 3.8.5 Employees will be paid for work carried out on a KIT day a month in arrears. Their manager must submit a [KIT Form](#) (Appendix 3) by the third working day of the month for inclusion in that month's payroll.
- 3.8.6 If an employee works more than 10 KIT days their maternity leave and pay will automatically end.
- 3.8.7 As well as taking up to 10 KIT days, an employee taking Shared Parental Leave (SPL) might be able to take 20 extra days for keeping in touch, known as Shared Parental Leave in touch days (SPLIT days). The employee and employer can agree on up to 20 Shared Parental Leave keeping in touch ('SPLIT') days, which work in a similar way to keeping in touch ('KIT') days. SPLIT days can be useful for the employee to keep up to date with work, go to a work-related activity or training session, work part of a week to help the team, return from leave in a gradual way, for example taking 2 SPLIT days and working 3 days a week to start with. The line manager and employee should agree whether to use SPLIT days and how many of the 20 to use.

### **3.9 Returning to work after maternity leave**

- 3.9.1 An employee may take her full period of maternity leave entitlement and return to work at the end of this period.
- 3.9.2 Alternatively, an employee may return to work at any time during ordinary maternity leave or additional maternity leave, except during the first two weeks from the day of childbirth (see compulsory maternity leave) provided that she has given the appropriate notification.
- 3.9.3 New mothers should refer to the New and Expectant Mothers Policy, on The Loop or available from Health & Safety or HR, which includes information for new mothers who are breastfeeding.
- 3.9.4 Where the employee has taken maternity weeks of 26 weeks or less (OML), she has the right to return to the same job.
- 3.9.5 Where the employee has taken more than 26 weeks maternity leave (AML) she will still have the right to return to the same job on the same terms as before she left, but if it is not possible because there have been significant changes, she could be offered a similar job, on terms and conditions which are not less favourable i.e. pay, benefits, holiday entitlement, seniority, and where the job is.
- 3.9.6 If the employee fails to return to work by the end of maternity leave without notification or good reason, it may be treated as an unauthorised absence unless the employee is absent due to ill health and produces a current medical certificate before the end of the maternity leave period.
- 3.9.7 If the employee decides during maternity leave that she does not wish to return to work, she should give written notice of resignation to the Council as soon as possible and in accordance with the terms of her contract of employment. The same principles apply to an employee who does not intend to return after a period of shared parental leave.
- 3.9.8 An employee who has received Occupational Maternity Pay and decides not to return to work after their maternity leave, may be liable to repay the Occupational Maternity Pay portion of their pay.
- 3.9.9 If an employee wants to change her hours when she returns from maternity leave, she should consider making a flexible working request (see Flexible Working Policy).

### **4.0 Maternity Pay**

- 4.1 Qualification for maternity pay depends on a number of factors including how much local government continuous service an employee has and also their average weekly earnings in the relevant earnings period. Employees who do not qualify for maternity pay may be able to claim Maternity Allowance (MA).
- 4.2 For employees who qualify for maternity pay, there are two types of maternity pay which they may be eligible for – SMP for weeks 1 to 39 **or** SMP for weeks 1-6 inclusive and Occupational Maternity Pay for weeks 7 to 39. Weeks 40-52 are unpaid.
- 4.3 Maternity pay starts as soon as the employee commences maternity leave. SMP / OMP is paid into the employee's bank account on the 15th of every month and is subject to Tax and National Insurance Contributions. It is payable only for complete weeks; there is no daily rate. For the purposes of Occupational Maternity pay, a week's pay is calculated by dividing annual gross salary by 52.142.
- 4.4 HR will send the employee a schedule of the maternity pay.



## 1. Maternity Allowance (MA)

An employee who is not entitled to SMP may be able to get Maternity Allowance instead, which is payable directly by the Government.

If the employee is not entitled to SMP, the Council will provide the employee with an SMP1 form to enable her to pursue a claim for maternity allowance through Jobcentre Plus.

OR

## 2. **Statutory Maternity Pay (SMP)** - To qualify for SMP the employee must:

- have been continuously employed by GYBC for at least 26 weeks, ending with the 15<sup>th</sup> week before the week the baby is due and
- their average weekly earnings must be over the National Insurance Lower Earnings Limit up to the end of the 15<sup>th</sup> week before the baby is due.

OR

## 3. **SMP (weeks 1-6), OMP (weeks 7-18) and SMP (weeks 19 to 39)** – to qualify employees must:

- have at least 12 months continuous service with local government by the 11th week before EWC and earn over the National Insurance Lower Earnings Limit
- provide a Mat B1 to the HR Department at least 28 days prior to the start of their maternity leave and
- return to work for a minimum of 3 months immediately after maternity leave.

If an employee is unsure whether they want to return to work, they may postpone the receipt of OMP until they have returned to work for 3 months. Payment of OMP is made by the Council during maternity leave on the understanding that the employee will return to local authority employment for a period of at least three months which may be varied by the local authority on good cause being shown. In the event of the employee not returning, they will be required to refund the monies paid, or such part thereof, as the authority decides.

<b>1. Maternity Allowance (MA)</b> Less than 26 weeks continuous service at the 15 <sup>th</sup> week before the EWC and/or earnings less than the National Insurance Lower Earnings Limit <a href="http://www.hmrc.gov.uk/payee/rates-thresholds.htm#1">www.hmrc.gov.uk/payee/rates-thresholds.htm#1</a>	Weeks 1-39	Employees will not qualify for SMP but can claim Maternity Allowance, paid at the current flat rate (or 90% of average weekly earnings if this is less) for 39 weeks.  Maternity Allowance is not processed by Payroll, but by your local Jobcentre Plus.  A copy of the Maternity Allowance form is available from Payroll or <a href="http://www.dwp.gov.uk">www.dwp.gov.uk</a> .
	Weeks 40 - 52	Unpaid

<b>2. Statutory Maternity Pay (SMP)</b>  More than 26 weeks continuous service at the 15 <sup>th</sup> week before the EWC (but less than 1 year's continuous service at 11th week before EWC) and earn over the National Insurance Lower Earnings Limit	Weeks 1 – 6	9/10ths of your average earnings for six weeks'
	Weeks 7 – 39	SMP rate (or 9/10 <sup>th</sup> of a week's pay if this is less) for 33 weeks
	Weeks 40 – 52	Unpaid
<b>3. Occupational Maternity Pay (OMP)</b>  At least 1 year's continuous service at 11 <sup>th</sup> week before EWC	Weeks 1 – 6	9/10ths of a week's pay for 6 weeks
	Weeks 7 – 18	SMP for 12 weeks if employee has indicated they do not intend to return.  OR If the employee has indicated their intent to return, SMP (or MA) plus 12 weeks occupational maternity pay, which is equal to half pay. However, this will not exceed 100% of your contractual weekly salary including SMP.
	Weeks 19 – 39	SMP for a further 21 weeks
	Weeks 40 – 52	Unpaid

## 5.0 Other information

### 5.1 Car Park Permit

Pregnant employees who currently have a GYBC car park permit may wish to use the King Street Car Park whilst working, which is closer to the council offices. Alternatively, new or expectant mothers who wish to purchase a car park permit should apply on The Loop <https://the-loop.great-yarmouth.gov.uk/do-something-for-me/staff-car-park-permit> These permits start on the 1st of the month and are not able to be pro rata; therefore please allow a few days before the start of the month to ensure you receive your permit in time (this will be sent through the internal post) and to enable payroll to set up your deductions before their deadline.

### 5.2 Annual Leave

5.2.1 Although annual leave continues to accrue during maternity leave, it cannot be taken during maternity leave and can only be taken at the start or end of the maternity leave period.

- 5.2.2 Employees are encouraged to take any annual leave accrued and outstanding before the commencement of their maternity leave.
- 5.2.3 It is common for employees to take the annual leave accrued before returning to work. This should be agreed with their manager before they are due to return to work.
- 5.2.4 On return to work employees will also be given substitute days of paid leave for all bank holidays that have fallen during the maternity leave.

### **5.3 Health and Safety**

- 5.3.1 The Council has a duty to take care of the health and safety of all employees and is required to carry out a risk assessment to assess the workplace risks to women who are pregnant or who have recently given birth.
- 5.3.2 A New and Expectant Mothers risk assessment (Appendix 4) should be carried out by the employee and their manager at the initial stage of informing the Council that they are pregnant and then again during the pregnancy if appropriate. Risk assessment should also be carried out on return to work if this is within six months of childbirth and/or on return to work if the employee is breastfeeding.
- 5.3.3 Consideration will be given to any health and safety implications for pregnant or breast-feeding employees.
- 5.3.4 Risks could be caused by heavy lifting or carrying, standing or sitting for long periods without adequate breaks, exposure to toxic substances and long working hours. Where there are risks, the Council will take reasonable steps to remove them, for example by offering the employee different work or changing their hours.
- 5.3.5 If it is not possible for the Council to alter the employee's working conditions to remove the risks to her health and there is no suitable alternative work available to offer her on a temporary basis, the employee may be suspended from work on maternity grounds until such time as there are no longer any risks to her health. During this time the employee will be entitled to her normal salary and contractual benefits, unless she has unreasonably refused an offer of alternative employment. Suspension on maternity grounds may be for the remainder of an employee's pregnancy until the commencement of her maternity leave. Where an employee is suspended in these circumstances, her employment will continue during the period of the suspension and will not affect her statutory or contractual employment and maternity rights.
- 5.3.6 If a pregnant employee thinks they are at risk they should speak to their line manager, health and safety advisor or HR as soon as possible.

### **5.4 Sickness absence**

- 5.4.1 If an employee is absent from work during pregnancy owing to sickness, she will receive pay in the same manner as she would during any other sickness absence, provided that she has not yet begun ordinary maternity leave and it is not in the 4 weeks before the baby is due.
- 5.4.2 If the employee is absent from work due to a pregnancy-related illness after the beginning of the fourth week before her expected week of childbirth, her maternity leave will start automatically.
- 5.4.3 Employees are not entitled to sick pay whilst on maternity leave.
- 5.4.4 Where an employee is unable to return to work on the expected day after maternity leave due to sickness, the sickness absence policy will apply.
- 5.4.5 In all cases of sickness absence employees are required to comply with the Sickness Management Policy, including notification of absence and provision of fit notes.

## **5.5 Maternity Support Leave/Statutory Paternity Leave**

- 5.5.1 Maternity support leave of 5 days (pro rata) with pay shall be granted to the child's father or the partner or the nominated carer of an expectant mother at or around the time of the birth. This is an enhanced benefit for GYBC employees and is in place of 1 of the 2 week's statutory paternity leave.
- 5.5.2 Employees may also be eligible for the remaining/additional week of statutory paternity leave, dependant on length of service, which is provided by legislation.
- 5.5.3 Employees should refer to the Paternity Leave Policy for further information.

## **5.6 Parental Leave**

- 5.6.1 An employee who has continuous service with the Council of more than one year and is named on the child's birth or adoption certificate, or they have or expect to have parental responsibility for a child under 18 may qualify for Parental Leave.
- 5.6.2 Parental leave is unpaid and eligible employees are entitled to 18 weeks' leave for each child and adopted child, up to their 18th birthday, up to 4 weeks a year which must be taken as whole weeks rather than individual days, unless the Council agrees otherwise, or if their child is disabled.
- 5.6.3 A new parent can take up to four weeks unpaid parental leave after the birth to look after their child's welfare if he / she chooses to take it at this stage rather than subsequently.
- 5.6.4 Employees are required to give notice to take Parental Leave.
- 5.6.5 The line manager or HR may ask for proof (i.e. a birth certificate).
- 5.6.6 Employees should refer to the Parental Leave Policy for more information.

## **5.7 Shared Parental Leave (SPL)**

- 5.7.1 If eligible, an employee and their partner may be able to get Shared Parental Leave (SPL) and Statutory Shared Parental Pay (ShPP) if they are having a baby or adopting a child. They can share up to 50 weeks of leave and up to 37 weeks of pay between them, in the first year after their child is born or placed with their family.
- 5.7.2 SPL can be used to take leave in blocks separated by periods of work, or all in one go and parents can choose to be off work together or to stagger the leave and pay.
- 5.7.3 Employees should refer to the Shared Parental Leave Policy for eligibility and further information

## **5.8 GYBC Employee Assistance Programme**

All employees, whatever the circumstances, can access the Council's Employee Assistance Programme, which offers free confidential advice and counselling. The service is available 24 hours per day / 7 days a week, 365 days a year, provided by an external provider. Details are available on The Loop or from HR.

## **5.9 Miscarriage, stillbirth or the baby dies soon after birth**

We recognise that, while dealing with any bereavement is extremely difficult, the death of a child is among the most devastating events that any parent can ever face. The Council is committed to providing support to employees who experience loss in their lives and, in particular, understands that the death of a child, or a stillbirth, can be one of the most harrowing experiences of someone's life.

When a baby is stillborn after the 24th week of pregnancy or dies soon after birth, the employee will still be able to take their maternity leave and pay. In these circumstances, we ask that they, or a friend or family member, contact their line manager or HR, as soon as reasonably possible. If it would be helpful to the employee, we can arrange to contact a friend or family member, for a limited time, regarding work related matters, upon request, including leave and flexibility around their return to work i.e. phased return.

The employee will also be able to take Parental Bereavement Leave after they finish their maternity leave. Please see 5.10 below.

#### **5.10 Statutory Parental Bereavement Leave (SPBL)**

The Council recognises that, while dealing with any bereavement is difficult, the death of a child is among the most devastating events that an employee can ever face. We wish to assure employees of our commitment to support bereaved parents through their grief and to make them aware of the leave and support available to them.

Where their child dies under the age of 18 or is stillborn after 24 weeks of pregnancy, employees will be able to take two weeks statutory Parental Bereavement Leave, to be taken in the 56 weeks following their child's death; eligible employees will also be entitled to two weeks SPBL pay.

We would encourage employees to refer to the GYBC Parental Bereavement Leave Policy, which is available on the Loop, for further information and seek guidance from HR if needed.

#### **5.11 Loss of a baby before 24 weeks**

Where the baby dies before 24 weeks (miscarriage) or there is a termination the Council will give sympathetic consideration to the circumstances and may grant special leave or sick leave as appropriate. Employees should speak to Human Resources.

#### **5.12 Tax free childcare vouchers**

The Council provides Tax Free Childcare Vouchers for employees as an employee benefit. For more information please visit The Loop and <https://www.gov.uk/tax-free-childcare>.

#### **5.13 Pensions**

Employees will continue to pay the same percentage contributions to the pension scheme during their paid maternity leave. On their return they will have the option to make up pension contributions for any period of unpaid leave.

If an employee has any queries about how their pension may be affected by their maternity leave, they can contact Norfolk Pension Fund on 01603 495923 or at [pensions@norfolk.gov.uk](mailto:pensions@norfolk.gov.uk).

#### **5.14 IVF / fertility treatment**

It is recognised that fertility treatment can be time-consuming, expensive and traumatic. Although there is currently no legislation around time off for this treatment, the Council will endeavour to be supportive equally to both male and female employees.

Although there is no statutory right for employees to take time off work for IVF treatment, medical appointments related to IVF will be treated the same as any other medical appointment, employees can talk with their line manager about any time off they need during their IVF treatment, for example using flexible working, annual leave or unpaid paid time off. Managers should, in consultation with HR, authorise paid time off (this will be subject to regular review to ensure continuing eligibility) when specialist, hospital or prolonged treatment is required.

In some cases, the employee may be unable to work due to the effects of the treatment and be issued with a fit note by their GP. This sickness absence will be treated in the same way as sickness for other reasons in accordance with the normal Council rules.

Once an employee informs the Council that they have reached the embryo transfer stage, she will be regarded as being pregnant and this policy will apply. If after informing the Council of this, the IVF was unsuccessful, the employee should inform HR as soon as reasonably possible.

#### **5.15 Retaining records of proof provided**

The Council is required to keep records of the proof the employee provides.

#### **5.16 Data protection**

When managing an employee's maternity leave and pay, the Council processes personal data collected in accordance with its data protection policy. Data collected from the point at which an employee informs the Council that she is pregnant is held securely and accessed by, and disclosed to, individuals only for the purposes of managing her maternity leave and pay. Inappropriate access or disclosure of employee data constitutes a data breach and should be reported in accordance with the Council's data protection policy immediately. It may also constitute a disciplinary offence, which will be dealt with under the Council's disciplinary procedure.

## **Appendix 1 Line manager & Human Resources checklists**

### **1. Line Manager (or equivalent)**

<b>Upon receipt of written notification (refer to Policy) from the employee:</b>	<b>Date actioned</b>
Ensure that proof has been obtained within the required timescales and required notice given.	
Inform HR as soon as possible and ensure they have been provided with a copy of the written notification and proof.	
Complete a New and Expectant Mothers risk assessment (Appendix 4) with the employee at the initial stage of informing the Council that they are pregnant and then again during the pregnancy if appropriate. Risk assessment should also be carried out on return to work if this is within six months of childbirth and/or on return to work if the employee is breastfeeding. Revisit and update as required.	
Agree time off for antenatal appointments and sight of appointment card as required for employee; if appointment is in the middle of the day, consider any request to work from home or adjust start/end times.	
Agree (unpaid) time off for an employee who is the expectant father or the partner of a pregnant woman to accompany the woman to up to two of her antenatal appointments, for a maximum of 6.5 hours for each appointment, including travelling time and attendance at the appointment.	
Consider staffing requirements during employee's maternity leave, including any temporary staff required to cover the leave period. Discuss with HR and ensure the temporary member of staff is aware of the reason for the temporary role, periods of work, end date and notice which may be given to end contract early if required. Provide HR with the information ASAP for contract and recording purposes.	
Discuss plans for maintaining contact and option for Keeping In Touch days and/or SPLIT days, where the employee and their partner intend to use Shared Parental Leave.	
Discuss plans for returning to work and the procedure for requesting flexible working.	
Confirm the amount of annual leave accrued and discuss when it will be taken (i.e. usually before starting maternity leave). Inform HR.	
Discuss any handover of work and employee's preferred method of contact during leave i.e. phone or email, for any required communications.	
Keep HR informed as to any changes, for example to the employee's leave start and end dates.	
Refer to the Maternity Policy if you have any queries. Contact Human Resources if you require clarification or further information.	
Complete Appendix 2 and submit to HR ASAP.	

### **During maternity leave / prior to an employee's return to work and on return to work:**

Keep in contact with employee as agreed during maternity leave. Ensure they are kept informed of any required changes etc. Also maintain contact where agreed for other matters in line with agreed timing/method.	
Discuss any requests for working KIT days and SPLIT days, as appropriate, for returning to work.	

Where received, consider a request for flexible working (refer to Flexible Working Policy and HR).	
Complete KIT / SPLIT form for any work undertaken during maternity leave, in terms of hours worked, and ensure that HR are provided with information ASAP.	
Review any temporary staffing in place to cover the employee's leave. If the employee is returning earlier than originally planned, or the temporary cover is no longer required, seek HR advice and meet with the temporary employee. HR will confirm any changes or notice in writing.	
Follow New and Expectant Mothers policy (on The Loop or available from H&S), including conducting a risk assessment on employees return to work if this is within six months of childbirth and/or on return to work if the employee is breastfeeding. Revisit and update as required.	
Ensure that HR is kept informed, including notifying of any changes to that previously advised, including return to work, and / or if you have any queries.	

## 2. Human Resources checklist

### Upon receipt of the written notification (in accordance with Policy):

Within 28 days of receipt of notification (Appendix 2 should be completed), write to employee regarding arrangements for maternity leave, confirming their start and end date. Also, how much maternity pay they will get, SMP or OMP and when it will start and end. Liaise with and provide a copy to the line manager. Calculate employee's SMP or paternity leave and pay using the <i>maternity and paternity calculator if needed</i> : <a href="http://www.gov.uk/maternity-paternity-calculator">www.gov.uk/maternity-paternity-calculator</a>	
If the employee is not eligible for SMP, give them form SMP1 within 7 days of making the decision and explain why.	
Ensure MATB1 has been provided and required notice given.	



**Appendix 2 MATERNITY LEAVE - NOTIFICATION FORM (MAT E1) FOR COMPLETION BY THE EMPLOYEE**

I am completing this form to inform you of my pregnancy and intention to take maternity leave

<b>Name:</b>		<b>Manager's name:</b>	
<b>Employee No.</b>		<b>Department</b>	
<b>NI Number</b>		<b>Post</b>	
		<b>Work Location</b>	

<b>Date child expected (EWC)</b>		<b>Maternity Leave Start Date</b>	
<i>The expected week of childbirth is the week beginning Sunday, in which it is expected that you shall have your baby</i>		<i>This is the date on which you wish to start your maternity leave. This date can be changed by giving 28 days' notice in writing to your manager and the HR department. You can start your maternity leave <b>11 weeks</b> prior to the due date on any day of the week. However, if you are absent from work with a pregnancy related illness during the 4 weeks prior to the EWC your Maternity Leave will start automatically.</i>	
<b>Expected return to work date</b>			

**MAT B1 Certificate – indicate as appropriate:**

<b>Certificate is enclosed with this form</b>		<b>Certificate has already been sent to HR</b>		<b>Certificate still to be sent to HR</b>	
<i>If you qualify for SMP you must supply a MAT B1 certificate giving the expected week of childbirth as soon as possible after the 15<sup>th</sup> week prior to that date. This should be provided no later than 28 days prior to the date that you wish to commence your maternity leave. This certificate cannot be accepted if signed by your midwife or doctor more than 20 weeks before your baby is due.</i>					

<b>Declaration:</b>  It is my intention to return to work after maternity leave. I understand that OMP will be reclaimed if it has been paid and I do not return to work after maternity leave.	Y / N  <i>Delete as appropriate</i>	<b>My preferred method of maintaining contact:</b> 1. The Council is required by law to tell employees on maternity leave about important changes or news at work, including promotion or other job opportunities, redundancies and/or any reorganisation that could affect their job. Please state your preferred way for us to keep in touch with you, i.e. email or phone calls	1. Email / telephone  2. Email / telephone  Weekly / monthly / other
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		2. Employees may also want to be told about things such as social events and colleagues who are leaving or joining, and discuss arrangements for their return to work; please state your preferred way for us to keep in touch and how regularly/ how much contact you want).	<i>Delete as appropriate</i>
--	--	---	------------------------------

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Ext: \_\_\_\_\_

PLEASE RETURN THIS COMPLETED FORM 15 WEEKS BEFORE BABY IS EXPECTED TO THE HR DEPARTMENT

DRAFT

### Appendix 3 Keeping in Touch (KIT) Days / Shared Parental Leave In Touch (SPLIT) days

This form is to be used by managers to record the days and hours worked as part of “keeping in touch days” taken by employees on maternity leave, and SPLIT days, taken during Shared Parental Leave, for the employee to be paid for the hours worked.

NB: (i) An employee is not allowed to do any work during the first 2 weeks following childbirth. (ii) Employees can work up to 10 Keeping In Touch (KIT) days during their maternity leave. (iii) Employees and their partner may also be eligible to each work up to 20 days while they are taking Shared Parental Leave (SPL). These are called ‘Shared Parental Leave in touch’ (or SPLIT) days. See SPL Policy.

Payment will be made a month in arrears for the actual hours worked, in units of ¼ hour, at the normal contractual rate of pay on a KIT day.

Please submit this form to HR by 4.30pm on the third working day of the month in order for it to be paid in that month’s payroll.

#### Employee details (please print)

Payroll Number:	
Surname:	Forenames(full):
Name of Manager:	Maternity leave start date:

#### Keeping in touch days - hours worked

Keeping in touch days (date)	Start Time	Finish Time	Total hours worked
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

#### SPLIT days - hours worked

SPLIT days (date)	Start Time	Finish Time	Total hours worked
1.			
2.			
3.			
4.			
5.			
6.			
7.			

8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Authorised by:

Date:

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**For payroll purposes only**

Hours Worked

Hourly Rate

A      KITD

## ***Appendix 4 Guidance Notes and Risk Assessment Form –***

### ***New and Expectant Mothers***

#### **Introduction**

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This document contains standards and guidance on undertaking a new and expectant mother's risk assessment. It is the responsibility of managers to ensure that risks to new and expectant mothers are managed in areas under their control.

#### ***Definitions***

Pregnancy should not be regarded as ill health. It is part of everyday life and its health and safety implications can be adequately addressed using this procedure.

A **new and expectant mother** is an employee who has notified the employer that she is pregnant, has given birth in the last twelve months, or is breast-feeding.

For the purpose of this guidance **maternity** means the pregnancy, the twelve months after giving birth and the breastfeeding period.

A **hazard** means anything that can cause harm e.g. manual handling.

A **risk** is the chance, high or low, that someone will be harmed by the hazard. e.g. back injury caused by manual handling.

**Controls** are the means by which risks to health and safety are controlled or reduced, e.g. by substituting a chemical with a less hazardous one, altering the way an activity is carried out, following a written procedure, providing training or information, using personal protective equipment, etc.

The risk assessment process provides a structured way to identify actions needed to control health and safety risks relating specifically to new and expectant mothers.

### *Manager's Checklist*

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The checklist below identifies key actions involved in controlling the health and safety risks to new and expectant mothers. Further information about each of these issues in the checklist is contained in this document. Further information can be found from HR, the Environmental Health and Safety Officer, the intranet and <http://www.hse.gov.uk/mothers/index.htm>

1. Have you been notified by an employee that they are pregnant, have recently given birth or are breast-feeding?
2. Have you carried out a risk assessment with the employee concerned and recorded it using the New and expectant mother's Risk Assessment Form?
3. Have you considered new and expectant mothers who work at night?
4. Have you considered the risks to the employee if she is breast-feeding?
5. Have any additional control measures been put in place as a result of carrying out the risk assessment?
6. Is further action necessary to adequately control risks to the employee?
7. Have you arranged suitable periods of time to review the assessment as the maternity progresses?
8. Have you received a medical statement from a doctor (Med 3) that identifies specific work adjustments required for this person?

### *When an employee notifies you she is pregnant, has given birth in last 12 months or is breastfeeding*

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When an employee notifies you that she is pregnant, has given birth within the previous twelve months, or is breastfeeding, you should carry out a specific risk assessment. You should ensure that you take any advice provided by the woman's health professional into account in the risk assessment process (Med 3)

Confirmation of the pregnancy by means of a certificate (MAT B1) from a registered medical practitioner or a registered midwife is required and should be sent direct to HR. Please contact HR for advice on production of written confirmation.

It is good practice to carry out a new and expectant mother's risk assessment if you are notified by an employee that they may be pregnant even though it is too early to confirm the pregnancy.

### *Who should carry out a risk assessment and confidentiality*

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Line managers are responsible for ensuring that risk assessments are carried out and reviewed regularly. Therefore, managers can either carry out risk assessments themselves or delegate this task to individuals within their area.

If managers delegate the task of carrying out risk assessments, they must ensure that whoever carries out the assessment on their behalf is competent for the task and takes all reasonable care when carrying out the assessment.

The risk assessment should be carried out with the employee that the assessment is for. The manager and the assessor must ensure that a woman's pregnancy is not made known without her consent to other colleagues.

Exceptionally, in certain circumstances, it may be necessary to take steps (including limited disclosure) to protect the employee's health and safety, but this should be done with the woman's agreement following consultation.

### *Carrying out and recording a new and expectant mother's risk assessment*

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A new and expectant mother's risk assessment form is included in this procedure;

- The first column includes a list of hazards which may apply to the work.
- You should identify whether they do apply in the second column.
- The third column provides information about suggested controls, which can be adopted as appropriate to the work.
- Any required controls should be detailed in the fourth column.

You should consider whether these controls affect others i.e., employees, visitors. You may need to review other risk assessments to reflect these changes for the period of time they are in place for.

### *What other actions can you take?*

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If there is still a genuine concern about the level of remaining risk it may be necessary to take the following steps:

- Temporarily adjust her working conditions and/or hours of work.
- If it is not reasonable to do so, or would not avoid the risk, offer her suitable alternative work (at the same rate of pay) if available.
- If that is not feasible, you must suspend her from work on paid leave for as long as necessary to protect the health and safety of her and her child.

Contact the HR Team when these actions may be necessary.

If you are unsure about the risk(s) you should contact the Environmental Health and Safety Officer for further advice and assistance.

### **When to review a new and expectant mother's risk assessment**

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You will need to keep your risk assessments for the employee concerned under review and agree dates for review with them. Although hazards are likely to remain constant, the risk of damage to the mother and unborn child will vary at different stages of pregnancy. Dexterity, agility, co-ordination, speed of movement and reach may be impaired because of increasing size. In addition, a doctor may consider that adjustments are required and provide information usually by a Med 3 Form which will need to be included in the risk assessment process.

Use the review column in the new and expectant mother's risk assessment form to identify review dates as the maternity period progresses. You may need to complete a new risk assessment or amend the existing one as necessary.

### *Night work*

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You need to give special consideration to new and expectant mothers who work at night. If an employee has a medical certificate stating that night work could affect their health and safety, you must either:

- Offer her suitable alternative daytime work, if any is available, 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.

Contact your HR Team when these actions may be necessary.

### *Breast feeding*

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There are other risks to consider for workers who are breastfeeding. You will need to ensure, on receiving notification that a worker is breastfeeding, that she is not exposed to risks that could damage her health and safety and that of her child for as long as she continues to breastfeed.

Where workers continue to breastfeed for many months you will need to review the risks regularly. The new and expectant mother's risk assessment form should be used for this. Additional aspects/work issues relating to this can be detailed in the risk assessment under 'other aspects of the pregnancy which may be affected by work'.



It is good practice to provide a healthy and safe environment for nursing mothers to express and store milk. This could be included in the suitable resting facilities you must provide for pregnant and breast feeding mothers. These issues should always be discussed with the employee.

### Maternity rights

Please contact the HR Team for information on maternity rights.



### Risk Assessment Form – New and Expectant Mothers

<b>Name of New/Expectant Mother</b>	<b>Service</b>	<b>Team</b>
<b>Is there any advice provided by the woman's health professional? (Med 3 Form) (remember the need for confidentiality)</b>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
<b>Manual handling</b>  Lifting files to and from shelves at various heights requiring stretching and bending. Increasing susceptibility to injury and postural problems as pregnancy increases and ligament		<ul style="list-style-type: none"> <li>Reduce the amount of physical work or provide aids to reduce the risk.</li> <li>Change work so that others moving files</li> <li>List the manual handling operations which should be avoided, e.g. lifting boxes of paper.</li> <li>Alter the nature of the task to reduce risks from manual handling mothers.</li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
<p>damage due to hormonal changes</p> <p>After birth (a temporary limitation to lifting and handling)</p> <p>Breastfeeding mothers may experience discomfort and sensitivity</p>		<p>Note: Manual handling regulations require employers to avoid the need for hazardous manual handling so far as is reasonably practicable</p>		
<p><b>Mental and physical fatigue and working hours</b></p> <p>Increased tiredness, reduced well-being, headaches, slow recovery after birth, blood pressure, health of unborn child and stress</p>		<ul style="list-style-type: none"> <li>• <i>Adjust working hours temporarily as well as other working conditions including timing and frequency of rest breaks</i></li> <li>• <i>If working at night consider changing to day work or reducing hours of work (may need to discuss with HR) and may receive notification from her doctor or midwife of need to change</i></li> <li>• See also Stress section below</li> </ul>		
<p><b>Movements and postures</b></p> <p>Increasing susceptibility to injury and postural problems as pregnancy increases and ligament damage due to hormonal changes before and after birth</p> <p><b>Continuous Standing</b> may lead to dizziness, faintness, backache, varicose veins and fatigue as well as increased risk of premature childbirth and miscarriage</p> <p><b>Continuous Sitting</b> increases risk of</p>		<ul style="list-style-type: none"> <li>• <i>Avoid spending long periods handling loads, or standing/sitting without regular exercise/movement to maintain circulation.</i></li> <li>• <i>Provide the opportunity to alternate between standing and sitting. If this is not possible, you should provide for breaks</i></li> <li>• <i>Consider making more space to enable her to interact with others as she changes in size and the ways in which she can move, especially look at work in awkward spaces</i></li> <li>• <i>Ensure not working in slippery, wet surfaces or where likely to lose balance</i></li> <li>• <i>If no lift available, consider arranging for working on the ground floor to avoid breathlessness</i></li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
<p>varicose veins, thrombosis, or blood clot and in the later stages of pregnancy backache when remaining in a specific position for a long time</p> <p><b>Poor working posture and excessive movements</b> may cause backache</p> <p><b>Confined Space</b> may not take account of increased abnormal size leading to strain or sprain injuries as well as the increased risk of accidents through impaired mobility, reach and balance</p> <p><b>Excessive Climbing up Stairs</b> may cause breathlessness and other health problems</p>				
<p><b>Working at height</b></p> <p>In ability to climb on to steps or 'elephant foot' as increasing susceptibility to injury due to increased size, and balance issues</p>		<ul style="list-style-type: none"> <li>Stop work at height altogether as her increasing abnormal size will not enable safe balance for climbing on to steps or 'elephant foot'</li> <li>Consider other alternative ways to remove the need for any work at height</li> </ul>		
<p><b>Working with display screen equipment</b></p> <p>Increasing susceptibility to injury due to increased size, ability to be comfortable</p>		<ul style="list-style-type: none"> <li>Undertake the workstation safety training web module for new or expectant mothers on the intranet</li> </ul> <p>Note: Pregnant women do not need to stop working</p>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
at desk, etc.		with display screen. However, the opportunity to discuss concerns like birth defects or miscarriage over using this type of equipment should be given to her to avoid potential problems caused by stress and anxiety over these issues		
<b>Working alone</b>  Visits on to various sites. Could need urgent medical attention		<ul style="list-style-type: none"> <li>Review and revise access to communications with others.</li> <li>Levels of supervision (remote) involved to ensure support available when required</li> <li>Revisit emergency procedures taking into account her needs and any additional risk due to her condition</li> </ul>		
<b>Occupational Stress</b>  Increased vulnerability due to: <ul style="list-style-type: none"> <li>hormonal, physiological and psychological changes during and after pregnancy as well as anxiety or post natal depression</li> <li>financial, emotional and job insecurity</li> <li>difficulty to organise work and private life</li> <li>anxiety over the pregnancy e.g. previous miscarriage etc.</li> </ul>		<ul style="list-style-type: none"> <li>Adjust working conditions and hours</li> <li>Ensure that necessary understanding, support and recognition is available (Remember to consider this when she returns to work as well).</li> <li>Take account of known organisational stress factors (shift patterns, job insecurity, workloads etc) and the particular medical and personal factors affecting the individual</li> <li>Provide understanding, support and recognition when returning to work, especially if there have been problems with the pregnancy etc.</li> </ul>		
<b>Travelling either inside or outside workplace</b>		<p>See also the specific sections for information on fatigue, stress, static postures etc.</p> <ul style="list-style-type: none"> <li>Consider the issues of discomfort and restricted</li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
Travelling by car to meetings, homes etc. via own car or ability to use public transport. May cause fatigue, stress, static posture, discomfort and accidents		<p>areas and vision while driving</p> <ul style="list-style-type: none"> <li>Consider the need for travelling and look at alternatives like working from home</li> </ul>		
<p><b>Work equipment and personal protective equipment (including clothing)</b></p> <p>Clothing not normally designed for use by pregnant or breastfeeding women so could be uncomfortable or unsafe to use restricting the operational mobility, dexterity or co-ordination of the woman</p>		<ul style="list-style-type: none"> <li>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.</li> <li>You must not allow unsafe working</li> <li>Carry out a risk assessment which takes into account the changes as pregnancy progresses</li> </ul>		
<p><b>Extremes of cold or heat</b></p> <p>In hot environments greater risk of suffering from heat stress and breastfeeding may be impaired by heat dehydration</p> <p>Cold conditions hazardous to mother and unborn child as are sudden changes in temperature</p>		<ul style="list-style-type: none"> <li>Ensure adequate rest and refreshment breaks alongside unrestricted access to drinking water for both cold and hot environments</li> <li>Thirst is not an early warning sign of heat stress and they need to drink water before they get thirsty</li> <li>For cold environments ensure adequate warm clothing provided</li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
<b>Workplace Facilities</b>  Rest facilities to prevent mental and physical fatigue during pregnancy and after birth as well as arrangement to check she is ok  Private area after birth to encourage breastfeeding to reduce the likelihood of cancer in the mother and prevent certain diseases in infancy to the baby. This needs to include facilities for washing, sterilising and storing receptacles		<ul style="list-style-type: none"> <li>Adjust working hours temporarily, as well as other working conditions, including the timing and frequency of rest breaks.</li> <li>The need for physical rest may increase. As appropriate, allow access to somewhere to sit or lie down comfortably in private and without disturbance</li> <li>Ensure easy access to clean drinking water, toilets and associated hygiene facilities</li> <li>Provide appropriate facilities for breastfeeding and for mothers to express and store breast milk as well as washing, sterilising and storing receptacles</li> <li>Give details of the rest facilities/arrangements for use as required (at the same time agree arrangements for checking that she is ok)</li> </ul>		
<b>Work related violence</b>  Increased vulnerability and lack of mobility etc causing miscarriage, premature delivery, underweight birth and the ability to breastfeed		<ul style="list-style-type: none"> <li><i>Change the design of the job i.e., avoiding lone working where likelihood of receiving abuse, maintaining contact with worker regularly when away from the base.</i></li> <li>Improve the design or layout of the workplace</li> <li>Provide adequate training and information</li> <li>Provide a suitable alternative work if unable to significantly reduce the risk.</li> </ul>		
<b>Hazardous substances</b>  Like those labelled with the following risk phrases: R40, R45, R46, R49, R61, R63, R64, R 68		<ul style="list-style-type: none"> <li><i>Carry out a COSHH assessment for women who are pregnant, have recently given birth or who are breastfeeding to assess the risk and where possible prevent or if not control the risks.</i></li> <li><i>Only use PPE if all other methods have failed and</i></li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
May cause harm to an; unborn child, baby, cancer or possibly irreversible effects		<i>be aware of the need for the PPE to be suitable and to be fit correctly</i>  <i>Note: there is a requirement not to allow a women of child bearing age to be exposed to substances which could affect her unborn child</i>		
<b>Infectious Diseases –</b>  Biological agents of hazard groups 2, 3 and 4, e.g., infections which are transmitted from animals and birds to humans through work activities like hepatitis B.		<ul style="list-style-type: none"> <li>Look at the nature of the biological agent, how infection is spread, the likelihood of contact and the control measures in place</li> <li>Carry out a COSHH assessment for women who are pregnant, have recently given birth or who are breastfeeding.</li> <li>If a vaccination is recommended you must provide information including perceived benefits and drawbacks to allow the individual to make an informed choice</li> </ul>		
<b>Rubella (German Measles)/Chickenpox/Shingles/Influenza</b>  Harm to unborn child and mother		<ul style="list-style-type: none"> <li>Pregnant women who have been in contact with these or other know agents that could affect the unborn child must contact their GP promptly for advice.</li> <li>Consider where you send or could put the person at risk while working for you</li> </ul>		
<b>Noise</b>  Prolonged noise my lead to increased blood pressure and tiredness		<ul style="list-style-type: none"> <li>Ensure noise levels to not reach above the Noise at Work Regulations</li> </ul>		
<b>Hazards as a result of inappropriate</b>		<ul style="list-style-type: none"> <li>Establish the particular needs concerning rest, meal and refreshment breaks by consulting the</li> </ul>		

Identified Hazards and risks (Some suggestions below)	Applies Yes/No	Information about controls  (Some examples below to help you consider the issues)	Action to be taken/by whom/date	Date for review/by whom (initials)
<b>nutrition</b>  Hormonal and physiological changes resulting in 'morning' sickness, position of unborn child in womb, the nutritional needs of mother and unborn child or breastfeeding child  Inability to tolerate food at normal mealtimes requiring little and often etc due to 'morning' sickness, discomfort or other problems during pregnancy		<i>individual concerned, making changes as the pregnancy progresses</i> <ul style="list-style-type: none"> <li>You must take protective measures to deal with these constraints, particularly with regard to the need for rest, meal and refreshment breaks as well as maintaining appropriate hygiene standards</li> </ul>		

<b>If you identify any further hazards give details below:</b>		
<i>Hazard</i>	<b>Controls</b>	<i>Review Date</i>
<i>Other aspects of the pregnancy which may be affected by work</i>  <i>e.g. exposure to smells affecting nausea, breast discomfort due to increased size and sensitivity</i>  <i>(The impact will vary during the course of the pregnancy and you will want to keep their effects under review)</i>		<i>Yes / No</i>
<i>Aspect/work issue</i>	<b>Controls</b>	<i>Review Date</i>



<p><i>If any of the following apply to the work carried out please contact your H &amp; S Advisor:</i>          Shocks and vibration, ionising and non-ionising electromagnetic radiation, confined spaces, mercury and mercury derivatives, lead and lead derivatives, carbon monoxide, pesticides.</p>		
<i>Hazard</i>	<b>Controls</b>	<i>Review Date</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.		
<b>New/Expectant Mother's name (please print):</b>	<b>New/Expectant Mother's signature:</b>	<b>Date:</b>
<b>Line Manager's name (please print):</b>	<b>Line Managers signature:</b>	<b>Date:</b>

Reviews Carried out	Signatures of both from above to confirm agreement of the review actions
<b>Date:</b>	
<b>Date:</b>	
<b>Date:</b>	

Please note. Where a significant risk still remains, i.e. the task cannot be avoided/carried out by someone else or further controls cannot be implemented, you must liaise with the Environmental Health and Safety Officer and the HR Team. Keep this risk assessment in the personal file (with Line Manager or HR). A copy should be given to the employee for her own use. Review this assessment on a regular basis to ensure that it is kept up to date.