



University Occupational Health and Safety Standard

NEW AND EXPECTANT MOTHERS / BIRTHING PARENTS

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1. PURPOSE

The University is committed to meeting its legal obligations by ensuring that it has adequate arrangements, facilities and trained personnel to reduce the risk of injury or ill health to new and expectant mothers / birthing parents whilst undertaking University activities.

This document sets out the minimum requirements to control the risks to the health and safety of new and expectant mothers / birthing parents at the University of Strathclyde, in order to comply with relevant legislative obligations and University requirements.

2. SCOPE

This document applies to all staff, students and visitors (for example visiting academics) who are a new and expectant mother / birthing parent, or have managerial responsibilities for new and expectant mothers / birthing parents who are undertaking work-related activities at the University of Strathclyde.

3. ABBREVIATIONS

DSC	Department Safety Coordinator
EWC	Expected Week of Childbirth
HoD	Head of Department
NEM	New or Expectant Mother / birthing parent
OHS	Occupational Health and Safety
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
SDS	Safety Data Sheet
SHaW	Safety, Health, and Wellbeing

4. DEFINITIONS

4.1 Child bearing age is indicative of the age at which people can give birth.

4.2 Given birth is defined as having delivered a living child, or a still born child after 24 weeks gestation.

4.3 New or Expectant Mother, or new or expectant birthing parent means an individual who is: pregnant; has given birth within the previous 6 months; or is breastfeeding / chestfeeding (including expressing milk).

5. ROLES AND RESPONSIBILITIES

The University [OHS Standard for Roles, Responsibilities and Accountabilities](#) document defines the roles, responsibilities and accountabilities necessary to implement the Occupational Health, Safety and Wellbeing Policy at each level of the organisation.

The roles and responsibilities specifically in relation to NEMs are detailed as follows:

5.1 Executive Deans

Responsible for performance monitoring of this Standard within their area of responsibility including the University's significant partnerships, collaborations and wholly owned companies. They must ensure that departments are resourced such that this Standard is fully implemented.

5.2 Heads of Department / Heads of School / Professional Services Directors

Responsible for ensuring compliance with this Standard throughout their area of responsibility through provision of adequate resources and performance monitoring. They will be assisted by the DSC or other nominated person(s) to carry out delegated tasks as deemed appropriate. Specifically, they will ensure:

- That upon notification of a NEM, appropriate management, administrative and technical arrangements are in place to eliminate or effectively control risks, and ensure that these arrangements are regularly reviewed;
- Activities undertaken by NEMs have been identified by the department are risk assessed through an individual risk assessment, and significant findings are recorded;
- Risks to NEMs are considered in all risk assessment processes;

- Risks to people of child bearing age are considered in all risk assessment processes;
- That individual NEMs risk assessments are reviewed regularly proportionate to the progression of pregnancy and birth;
- Mechanisms are in place to monitor, audit and review OHS performance in relation NEMs;
- Incidents (including near misses) are reported and investigated appropriately with corrective action taken where required.

5.3 Departmental Safety Coordinator

The DSC (or another nominated person) is responsible for ensuring that:

- Line Managers / Principal Investigators / Academic Supervisors (or other nominated person) implement the requirements of their risk assessments;
- They provide advice to those undertaking a NEMs risk assessment, or they contact SHaW or the Occupational Health Service / the Disability and Wellbeing Service for support;
- Information in relation to the implementation of this OHS standard is made available to SHaW for audit purposes as required.

5.4 Line Managers / Principal Investigators / Academic Supervisors

Line Managers / Principal Investigators / Academic Supervisors (or other nominated person) are responsible on a day-to-day basis for ensuring that risks to NEMs are managed within their area of responsibility. Specifically, they will ensure:

- Upon written notification of a NEM, that they undertake an individual NEMs risk assessment to consider all work activities undertaken by the NEM;
- Individual NEMs risk assessments are reviewed regularly to reflect changing conditions of both the NEM and the work activities;
- Risks to NEMs are considered in all risk assessment processes, and the significant findings shared with relevant personnel;
- Risks to people of child bearing age are considered in the risk assessment processes, and the significant findings shared;
- Risk assessments are reviewed regularly and updated where necessary;
- The provision of adequate information, instruction and training;
- That they refer the NEM or person of child bearing age to the Occupational Health Service / the Disability and Wellbeing Service for further advice where necessary;
- Read and complete the [Maternity Leave – Manager Guidance and Checklist](#) that is part of the [Maternity Toolkit](#), or for Students the Student Support Plan ([Guidance for students and staff on student maternity / paternity support and adoption](#)) should be completed by the appropriate member of staff

Note: For students the responsible person may for be example an Academic Supervisor, Adviser of Studies, Course Director, Research Supervisor or senior member of Faculty Support Staff.

5.5 Safety, Health and Wellbeing

In relation to this OHS Standard, SHaW are responsible for:

- Setting the requirements of this Standard, and reviewing at appropriate intervals;
- Providing advice on NEMs risk assessment;
- Managing the reporting of incidents through SIRIS, including RIDDOR;
- Implementing the Occupational Health and Safety Management System audit to provide assurance of compliance with this standard.

5.6 Occupational Health Service

In relation to this OHS Standard, the Occupational Health Service is responsible for:

- Providing information on occupational health issues as relates to NEMs and people of child bearing age;
- Keeping medical records in a suitable form for 6 years from the point of leaving employment.

5.7 Disability and Wellbeing Service

- Providing information and support on health matters to students as relates to NEMs and people of child bearing age;
- Keeping medical records in a suitable form for 6 years from the point of graduation date.

5.8 Human Resources

In relation to this OHS Standard, Human Resources is responsible for:

- Providing advice and guidance to help staff navigate through pregnancy, maternity leave and their return to work.
- Providing advice on maternity entitlements and provisions;
- Ensuring all appropriate HR related documentation is completed in relation to the pregnancy.

5.9 All New and Expectant Mothers / Birthing Parents

In relation to NEMs, workers:

- Are encouraged to notify their Line Manager / Principal Investigator / Academic supervisor (or other nominated person) that they are pregnant as soon as possible after the pregnancy is confirmed (see Section 6.1);
- Must participate in the risk assessment process and inform their Line Manager / Principal Investigator / Academic supervisor (or other nominated person) of any changes to their circumstances that may require a review of the risk assessment;
- Must comply with the significant findings of the risk assessment;
- Must read and complete the [Maternity Leave – Employee Guidance and Checklist](#), that is part of the University's [Maternity Toolkit](#) or for Students the Student Support Plan ([Guidance for students and staff on student maternity / paternity support and adoption](#))

6. THE MANAGEMENT OF HEALTH AND SAFETY FOR NEW AND EXPECTANT MOTHERS / BIRTHING PARENTS

6.1 Notification of Pregnancy

To assist the University in discharging its responsibilities towards the health and safety of the pregnant employee and their unborn child it is advisable that written notification of the pregnancy is made to the HoD at an early stage in the pregnancy.

Although early notification of pregnancy is encouraged as above, staff **must** notify the University in writing that they are pregnant no later than the 15th week before the EWC or as soon as reasonably practicable stating the EWC and the date they want maternity leave to start (no earlier than the 11th week before the EWC).

Students should normally inform an appropriate member of staff in their Faculty as soon as they can. If a student does not feel ready or able to discuss their situation with an appropriate member of Faculty staff, they may wish instead to speak in the first instance to one of the University's support services – the Disability and Wellbeing Service, the Chaplaincy or the Advice Centre. Advice can also be sought from the Strathclyde Union Advice Hub.

For further information on staff maternity leave see the University's [Maternity Toolkit](#).

Further information for students can be found in the [Guidance for students and staff on student maternity / paternity support and adoption](#).

6.2 Risk Assessment

Pregnancy is a dynamic and ever-changing condition, the health and safety implications of which can largely be addressed by normal management procedures. All risk assessments should consider the risks posed to people of child bearing age as well as to NEMs, however an individual risk assessment must be undertaken for each NEM.

Some hazards in the workplace may affect the health and safety of NEMs and of the unborn child. The risks posed by these hazards must be assessed and adequate risk control measures implemented. It is therefore necessary to undertake an individual NEMs risk assessment for each NEM. The usual starting point for the risk assessment process is to

review the existing risk assessment(s) and controls and identify any further hazards and risks and decide on additional control measures.

Note: It is only when the HoD receives formal written notification by the NEM, that the completion of the NEMs risk assessment **must** be initiated. If informal notification is given prior to this, then it is advised that the NEMs risk assessment process is initiated at the earlier date. If the NEM does not wish to notify the HoD, then it is advised that the Occupational Health Service is contacted for advice.

The risk assessment should be completed on the University's electronic risk assessment system, [eRISK](#). Prior to undertaking the risk assessment or signing off as the 'Responsible Person', the [Principles and Practice of Risk Assessment](#) training must be successfully completed. To ensure confidentiality, when undertaking a NEMs Risk Assessment, 'visibility' in Section 5 must be set to 'specific users'.

See [Information Sheet 'New and Expectant Mothers / Birthing Parents Flowchart'](#) for further information on the NEMs risk assessment process.

6.2.1 Identifying the hazards

There are a number of hazards which may pose a risk to NEMs, many of which will be identified in the existing risk assessment(s). These hazards must be identified through the individual NEMs risk assessment.

The occupational hazards which may affect a NEM may be categorised into:

- Physical agents;
- Biological agents;
- Chemical agents;
- Working conditions and process.

Further information on these hazards in the context of NEMs can be found in [Guidance Note New and Expectant Mothers / Birthing Parents Hazard Identification and Risk Control](#). **This list is not an exhaustive list.**

6.2.2 Specific hazards

Some hazards of biological, chemical and radioactive nature require particular attention during the NEMs risk assessment process.

Biological Agents: For most workers, the risk of infection is not higher at work than from living in the community; but in certain jobs, exposure to infections is more likely, for example, laboratory workers, health care, people looking after animals and dealing with animal products.

Some biological agents are known to cause abortion of the foetus or physical and neurological damage. **Work involving potential exposure to pathogens which cause harm to the foetus (teratogenic) should not be permitted.**

People who have been vaccinated against or are known to be immune to pathogens such as Rubella and Toxoplasma may be able to continue their work with such biological agents subject to robust risk assessment.

Further information on working with biological agents can be found in the [Information Sheet New and Expectant Mothers working with Biological Material](#). Advice can be sought from the Departmental Biological Safety Co-ordinator or the University Biological Safety Advisor.

Chemical Agents: Some chemical agents are considered substances hazardous to health and may pose a particular risk to NEMs and the unborn child. The risks will depend on the hazardous properties of the agents and the way they are used. The SDS provides information on hazards for the chemical agent and should always be consulted during the risk assessment process. It will include hazard statements to describe the nature and severity of a chemical hazard and precautionary statements to describe recommended measures to minimise or prevent adverse effects resulting from exposure to a hazardous substance.

Where chemical agents have been classified as carcinogens or mutagens, to comply with the [Control of Substances Hazardous to Health Regulations 2002 \(COSHH\)](#), exposure must be controlled to [as low as is reasonably practicable \(ALARP\)](#).

Careful consideration should be given to any work involving chemical agents to ensure that proper protection is provided to new and expectant mothers / birthing parents, and where significant risk remains, the NEM should not be permitted to work with them.

Further information on working with substances hazardous to health can be found in the [Local Rule for Substances Hazardous to Health](#). Further advice can be sought from the Departmental Chemical Safety Co-ordinator or the University Chemical Safety Adviser.

Ionising Radiation: Whilst there is no specific prohibition of pregnant workers from working with ionising radiations, it is extremely important that members of staff and students are informed of the importance of declaring their pregnancy, in writing, to the HoD (or Supervisor in the case of students) and Human Resources as soon as possible.

However, under the Ionising Radiation Regulations 2017 (IRR17) special dose limits do apply to pregnant workers and the University may need to review the employee's work with ionising radiations for the remainder of their pregnancy and for the duration of breastfeeding / chestfeeding.

For the majority of NEMs, there will likely be no requirement to alter their work activities / research practices involving ionising radiation, provided the expected radiation dose to the foetus is kept as low as reasonably practicable and the dose is unlikely to exceed 1mSv during the remaining term of pregnancy.

In general, taking into account the above and the work being done at the University, external radiation should not be a risk to a developing foetus. However, any internal hazard may be a factor dependent on the quantities and radionuclides used, and in certain circumstances it may be desirable to limit the handling of certain stock materials, and it may be necessary to restrict the work of the employee where there is the potential for a significant intake of radionuclides or where there is a potential for contamination.

Further information on working with Ionising Radiation can be found in the [OHS Ionising Radiation Standard](#). Further advice can be sought from the Department Radiation Protection Supervisor or the University Radiation Protection Officer.

6.2.3 Evaluating the risks and deciding on risk control measures

Risk assessments must be carried out for all work-related activities. Some factors associated with pregnancy, childbirth and/or breastfeeding / chestfeeding may increase the risk to NEMs and require additional control measures. Following the identification of hazards relating to work-related activities undertaken by the NEM, the risks those hazards pose must be assessed and the control measures decided on.

If significant risk to the health and safety of the NEM is identified, steps must be taken to remove the hazard or seek to prevent exposure to the risk. If elimination of the risk is not feasible, then the risk should be controlled.

Control measures for a range of hazards identified in the context of the NEMs risk assessment can be found in [Guidance Note New and Expectant Mothers / Birthing Parents Hazard Identification and Risk Control](#). **This is not an exhaustive list.**

If there is still a significant risk following the implementation of risk control measures, then the following steps can be taken:

- Step 1: Temporarily adjust the working conditions and / or hours of work;
- Step 2: If Step 1 is not feasible, offer the NEM suitable alternative work if any is available;
- Step 3: If Step 2 is not feasible, advice should be sought from Human Resources to suspend the NEM from work (i.e. paid leave) for as long as necessary to protect the safety or health of the NEM or that of the child.

These three steps are only necessary if there is a genuine concern following a risk assessment. If the NEM feels they would wish to discuss the risk assessment prior to any of the above three steps being taken by the Department they should contact [Human Resources](#).

For students refer to the [Guidance for students and staff on student maternity / paternity support and adoption](#).

6.2.4 Aspects of pregnancy that may affect risk

There are aspects of pregnancy which may affect the work of an expectant mother / birthing parent and may change the risk associated with the work activity. The impact will vary during a pregnancy, e.g., the posture of an expectant mother / birthing parent changes to cope with increasing size and the risk assessment must therefore be continually reviewed throughout the term of the pregnancy to take account of these aspects of pregnancy. Agile working may be considered for NEMs to alleviate any aspects of pregnancy and mitigate associated occupational risks (see [Agile Working Toolkit](#)). The following table highlights factors to consider in relation to aspects of pregnancy (please note that this is not an exhaustive list).

Aspect of Pregnancy	Factors to Consider
Morning Sickness	Night shift or shift work Exposure to nauseating smells Consider agile working – Agile Working Toolkit
Backache	Standing/manual handling/posture
Varicose veins	Standing/sitting
Haemorrhoids	Working in hot conditions
Frequent visits to the toilet	Difficulty in leaving job (site of work)
Increasing size	Use of protective clothing Work in confined areas Manual handling
Tiredness	Overtime/Evening work
Comfort	Working in tightly fitting workplaces
Balance	Working on slippery, wet or moving surfaces

Note: In some circumstances a [Personal Emergency Evacuation Plan \(PEEP\)](#) may be required if mobility is adversely affected or other medical issue caused by or exacerbated, by the pregnancy, that would impact ability to evacuate. Contact safety@strath.ac.uk for further information.

6.2.5 Recording the significant findings

Upon completion of the NEMs risk assessment, the significant findings should be shared with the NEM.

6.2.6 Monitor and review

The individual NEMs risk assessment must be reviewed regularly. There is no predetermined frequency at which the review should be undertaken, however it should be reviewed and updated if necessary to reflect:

- Changes that occur as the pregnancy progresses.
- Any significant changes to the work activity or workplace.

Working conditions could present a risk to the NEM and/or child at different stages. As the pregnancy progresses, it may affect the worker's:

- Dexterity.
- Agility.
- Coordination.
- Speed of movement.
- Reach.

New knowledge and technological advancements should also be considered when risk assessments are being reviewed. For example, SDSs are often updated.

6.3 Adjustment of working conditions and / or hours

If the adjustment of working conditions and / or working hours is not feasible, consideration should be given to providing alternative work or changing working hours to protect the safety,

health and wellbeing of the NEM and the unborn child. If moving to another job is not possible employment can be suspended on full pay. It is unlawful to dismiss or discriminate against a worker because of pregnancy, childbirth, or breastfeeding / chestfeeding. Contact [Human Resources](#) for further information.

6.4 Maternity Leave - Managers Guidance and Checklist

The [Maternity Leave – Managers Guidance and Checklist](#) aims to assist Line Managers / Principal Investigators / Academic Supervisors with planning and supporting a period of maternity leave. It is recommended that the items on the checklist are discussed at a meeting, or a number of meetings if required, to ensure that any period of maternity leave is managed as effectively as possible within appropriate timescales. Managers should also ensure that they are familiar with the [Maternity Leave and Pay Policy](#) in advance of any meeting to discuss maternity leave. Risk assessment and consideration of any reasonable adjustments to ensure the health, safety and wellbeing of the NEM is addressed in this checklist.

For further information contact [Human Resources](#).

6.5 Maternity – Student Support Plan

The Student Support Plan should be completed by the appropriate staff within the Faculty and agreed in discussion with the student. The form should be reviewed at key stages of the pregnancy or if the student’s circumstances change.

For further information see: [Guidance for students and staff on student maternity / paternity support and adoption](#)

6.6 Provision of welfare facilities

The University fully supports NEMs who are returning to work following a period of Family Leave and who choose to continue to breastfeed / chestfeed or express milk during working hours. When working on-campus, NEMs are welcome to breastfeed /chestfeed or express milk in spaces that suit their circumstances. Rooms have been established in University buildings equipped with a chair where staff can breastfeed / chestfeed or express milk privately (see table below). Fridges for the storage of expressed milk are also available in some of these rooms, please check arrangements locally. If preferable, any comfortable, private room that can be accessed and that is deemed more suitable can be used for this purpose.

Building	Department	Room
Curran	IS Library and Information Resources	417
Hamnett Wing	SIPBS	214*
James Weir	Estates Services	5.01**
John Anderson	Estates Services	733a
McCance	Estates Services	450
TIC	Estates Services	205
Thomas Graham	Pure and Applied Chemistry	TG303***

*Only accessible to Science Faculty staff who have a staff card that allows access to the Hamnett Wing.

**Booking is required and can be done so by emailing eng-enquiries@strath.ac.uk.

*** Only accessible to Pure and Applied Chemistry staff.

HoDs / Line Managers are required to support nursing colleagues by giving staff time during the working day to express milk or, where the staff member is working in an agile manner, to breastfeed / chestfeed. For staff who are working agilely, Line Managers will consider and

provide additional flexibility to ensure that the staff member can breastfeed /chestfeed or express milk at a location/time which suits them and their child. Departments / Schools may wish to make additional arrangements for students to support continued expression of milk and breastfeeding / chestfeeding.

The NEMs risk assessment should be reviewed and updated accordingly so that any further support needed for expressing milk or breastfeeding / chestfeeding can be discussed.

The University **cannot take responsibility for the storage of milk that is left in fridges within our buildings**. However, advice on the safe storage of expressed milk can be found [here](#).

6.7 Information, Instruction, Training and Supervision

On completion of the NEMs risk assessment, the NEM must be provided with information, instruction, supervision and training about the risks relating to their work activities, and a written record retained.

6.8 Occupational Health Service / Disability and Wellbeing Service

If a NEM or person of child bearing age has any concerns about any aspect of their health and wellbeing, whilst preparing for or during pregnancy, then they should discuss this with their health care provider / GP.

If they have concerns in relation to work, they should discuss this with their line manager. Where required, a referral by the line manager, or self-referral should the individual not wish to speak with their line manager, can be made to the Occupational Health Service for advice.

If they have concerns in relation to study, they should discuss this with their Department / School or the Disability and Wellbeing Service.

7. DOCUMENTATION AND RECORDS

7.1 The requirements to meet the OHS Standard for New and Expectant Mothers / Birthing Parents are described in this document. Some aspects are covered in more detail in other documents which are referenced throughout.

7.2 Written records must be maintained to comply with this standard.

8. COMMUNICATION AND REPORTING

8.1 A copy of the latest Standard will be available on the SHaW website.

8.2 Departments are expected to report on compliance with this standard as part of regular OHS performance monitoring, further information can be obtained from SHaW.

8.3 With regard to this Standard, incidents involving NEMs must be reported through [SIRIS](#). If more than one person is involved in an incident then a separate report should be completed for each individual involved.

8.4 Some incidents may be reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). These regulations require that certain work-related injuries, cases of ill health and dangerous occurrences are reported to the Health and Safety Executive. SHaW manage the reporting of incidents under RIDDOR.

9. COMPLIANCE

This standard aims to meet the requirements of:

- Health and Safety at Work Act (1974)
- Management of Health and Safety at Work Regulations (1999)
- Managing for Health and Safety HSG65 (2013)
- Workplace (Health, Safety and Welfare) Regulations (1992)
- Employment Rights Act (1996)
- The Equality Act 2010
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (2013)

10. DOCUMENT HISTORY

Recorded changes to this document are maintained in the SHaW Document Control Register.