

Information from NHS trade unions

Joint Union Guidance on Pregnancy and Covid-19

Under the [Management of Health and Safety at Work Regulations 1999](#), and [Management of Health and Safety at Work Regulations Northern Ireland 2000](#) employers must have effective arrangements in place to manage the risks to new and expectant mothers at work.

Section 15 of the [NHS Agenda for Change Handbook](#) covers leave and pay for new parents, including the health and safety of employees pre and post birth. Sections in the various terms and conditions of service for the different medical and dental groups similarly cover these matters for doctors and dentists.

The NHS Staff Council have published an [FAQ on pay protection](#) including staff who need to be temporarily redeployed following a risk assessment. It highlights the need for employers to be mindful of the Equality Act 2010 and to ensure that staff do not suffer discrimination or additional disadvantage as a result of being temporarily redeployed following a risk assessment. This is of particular importance in the case of pregnant staff redeployed during the period used to calculate maternity pay.

Risk to health and safety

There are a number of risks to the health and safety of new and expectant mothers. Those found in the health service include:

- Movements and postures/Manual handling
- Radiation (ionising and non-ionising)
- Infectious diseases
- Toxic chemicals
- Mercury
- Antimitotic (cytotoxic) drugs
- Mental and physical fatigue, working hours
- Stress (including post-natal depression)
- Passive smoking
- Shift work
- Temperature
- Working with visual display units (VDUs)
- Working alone
- Working at height
- Travelling
- Violence
- Personal protective equipment

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A non-exhaustive list can be found in the annexes of the [Pregnant Workers Directive 92/85/EEC](#), or see also the [European Commission's guidelines](#).

COVID-19 specific risks

The UK government has classed pregnant women (at whatever stage of pregnancy) as vulnerable under the Coronavirus Restrictions Regulations, risk assessments should be kept under review and active Government guidance followed.

The latest clinical guidance from the [Royal College of Obstetrics and Gynaecology](#) highlights that pregnant women of any gestation are at no more risk of contracting the virus than any other non-pregnant person who is in similar health. For those women who are 28 weeks pregnant and beyond, there is an increased risk of becoming severely ill should they contract COVID-19 (this is true of any viral illness contracted, such as flu). The clinical advice is that "*social distancing is particularly important*" for all pregnant women who are 28 weeks and beyond, in order to lessen their risk of contracting the virus.

Other risk factors including underlying health conditions and ethnicity may increase the risk of becoming severely ill and must be considered when assessing the risks to individual women.

This guidance should be used alongside the NHS trade unions principles on health and safety risk assessments and vulnerable workers in which can be found [here](#)

Health and safety checklist

Trade union workplace representatives can support members who are pregnant by asking the following questions:

- Does the organisation have policies and procedures in place for managing the risks to new and expectant mothers?
- Are trade union representatives consulted on the development and review of policies and procedures?
- Are risk assessments carried out and reviewed to assess the risks to new or expectant mothers?
- Are all risk factors, including the risk of becoming severely ill from COVID-19 for those who are 28 weeks plus pregnant considered?
- Are other individual risk factors considered as part of the risk assessment (including pregnancy term, underlying conditions, previous complications and ethnicity)?
- Where risk are identified, are employers taking reasonable action to remove the risks by altering working conditions or hours of work; by providing suitable alternative work on the same terms and conditions; or by suspending the member of staff on full pay (if there is no suitable alternative work)

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- Are suitable facilities provided for new and expectant mothers to rest?
- Where a pregnant employee produces a certificate from their GP or midwife showing that it is necessary for their health and safety not to work nights, does the employer seek to offer suitable alternative work on the same terms and conditions?
- Where pregnant employees are redeployed to non patient facing roles within clinical buildings or at home, are DSE risk assessments carried out?
- Where pregnant employees are concerned about the findings of the risk assessment, are they able to escalate their concerns with their occupational health service, union rep, midwife and GP?
- Are risk assessments regularly reviewed should the individual health status or circumstances of the pregnant worker change or following any incidents?

Where there are concerns about the response to these questions, escalate using your organisational mechanisms including joint consultative committees and health and safety committees and speak to your union officer if issues do not get resolved.