

**"As unique individuals, we do our best at work and play for the love of God and others."**



**St Benedict's Catholic Primary School**

# **Pregnancy Policy**

**Written by: EBS March 2019**

**Adopted by St Benedict's Catholic Primary School: February 2020**

**Reviewed March 2022**

**Review Date: April 2025**

This statement of Pregnancy Policy is produced in respect of St. Benedict's RC Primary School and forms the basis of future planning and implementation for the support of related Pregnancy matters within the school.

It is the school belief that when a member of staff becomes pregnant specific matters regarding her work and its surroundings must be assessed. The School and its Governors endeavour to identify, reduce and if possible eliminate any risks by creating a safe working environment while supporting staff during the whole period of pregnancy and beyond.

Furthermore, this policy endeavours to promote the safeguard and support of any issues related to rights, equalities, and possible discrimination.

### **STATEMENT OF GENERAL POLICY.**

- 1.1 The Governing Body is working in conjunction with current requirements, information and procedures in order to implement this Pregnancy Policy. All Information is to be properly communicated to the Governing Body along with any relevant issues indicated in this policy.
- 1.2 The planning and implementation of the policy is the direct responsibility of the Head-teacher, ensuring that Managers, Teachers and Supervisors at all levels and all other employees are required to co-operate with it. Arrangements are also to be made to bring it to the notice of all staff, including new employees and supply teachers.
- 1.3 The Governors recognise the need to implement a system to protect and support any pregnant member of staff.
- 1.4 It is the Governors' policy to take steps within their power to prevent any physical ill health to the expecting mother and child to come.
- 1.5 The Governors recognise their responsibility as far as is reasonably practicable to:
  - complete a risk assessment.
  - provide an environment where risk will be assessed and hazards removed as soon as discovered.
  - make arrangements for ensuring that a system is in place to provide extra support to expecting mothers.
  - provide adequate, information, instruction and supervision in order to enable a pregnant member of staff employed or working at the school to perform their duties in safety and efficiency.
  - promote the development and maintenance of sound health and welfare practices by means of support and information.
  - provide and maintain a working environment that is reasonably and practicably safe, and includes adequate welfare facilities for staff.
  - encourage an atmosphere of openness and mutual support and respect.
  - maintain a close interest in all Pregnancy-related matters insofar as they affect activities in and out the premises under the control of the school.
- 1.6 The school Governors will require reviewing periodically information on Pregnancy matters in order to determine the strengths and weaknesses of the current policy.
- 1.7 The Governors recognise that Pregnancy is an area where the school needs to be aware, including issues at work and outside the school.
- 1.8 Governors are aware that the employees' responsibilities fall on every individual member of staff and that they all have a degree of accountability for implementing this policy.

- 1.9 Finally, it should be indicated that all employees have a legal responsibility to co-operate with the employer and therefore the Head-teacher and/or delegated representative(s) so as to achieve a healthy and hazard-free workplace and to take reasonable care for themselves and others who may be affected by their actions and/or omissions.

## **2. RESPONSIBILITIES.**

### **2.1 The Governors:**

- 2.1.1 Recognise the need to identify organisational arrangements in the school for implementing, monitoring, and controlling Pregnancy matters. Governors will meet when a member of staff becomes pregnant to discuss specific and general issues connected with the Pregnancy policy and its risk assessment.

### **2.2 The Head-teacher is:**

- 2.2.1 To report to the Chair of Governors as soon as a member of staff indicates that they are pregnant.
- 2.2.2 To have the right to request a certificate from any member of staff indicating that they are pregnant. This can be either from the employee's doctor or midwife.
- 2.2.3 To make sure that new and expectant mothers at the school are not made ill by their work.
- 2.2.4 Responsible and accountable to the Governors for implementing this Pregnancy Policy and all other matters relating to Health, Safety and Welfare of expecting mothers within the establishment.
- 2.2.5 To make sure that all new, amended, or outdated material regarding Pregnancy matters is brought to the attention of the relevant personnel.
- 2.2.6 To ensure that agreed procedures for reporting related problems function efficiently and effectively.
- 2.2.7 To seek advice (when appropriate) from outside agencies that are able to offer expert opinions and/or support.
- 2.2.8 To have the right to stop what is considered unsafe practices, or any other circumstances that could result in a stressful or unsafe situation.
- 2.2.9 To ensure that the Pregnancy policy, its codes of practice and guidance notes are readily available for staff reference.
- 2.2.10 to make sure that a good communication process is in place relating to Pregnancy matters within the school and with and within members of staff.
- 2.2.11 responsible for offering help and support in a respectful and confidential manner.

### **2.3 School Staff/Employees must:**

- 2.3.1 Contact the Head-teacher as soon as they are pregnant.
- 2.3.2 Provide a certificate from a registered medical practitioner or a registered midwife.

- 2.3.3 Be aware of the facilities available to them and use these facilities when judge required.
- 2.3.4 Take responsibilities under this policy to provide a safe environment for pregnant colleagues and themselves individually when expecting.
- 2.3.5 Be given access to the School's Pregnancy policy and are asked to make themselves familiar with all documents relating to it.
- 2.3.6 Be made aware that copies of the School's Pregnancy policy will be available at all times on the staff shared server.
- 2.3.7 Support and facilitate the new arrangement and settings made available at the school when a member of staff becomes pregnant.

### **3. AREAS OF ASSESSMENT**

#### **3.1 Diseases**

- 3.1.1 As system must be in place to assure that pupil coming to school while having or just recovering from diseases such as Rubella (German measles), Varicella (Chickenpox) or Human Parvovirus (Slapped Cheek / Fifth Disease), are recorded if any Pregnant Member of staff is present.
- 3.1.2 Pregnant member of staff should avoid contact or close proximity to any pupils who might be affected by any of these diseases and/or any other relevant ones.
- 3.1.3 Furthermore, good ventilation should be kept at all time to reduce the risk of airborne infection.

#### **3.2 Chemicals**

- 3.2.1 Pregnant member of staff should not use chemicals unless a proper assessment has been carried out.
- 3.2.2 Cleaning staff should make sure that chemicals are never left in classrooms.

#### **3.3 Classrooms and teaching areas**

- 3.3.1 Space and position of furniture should be reassessed for a pregnant member of staff. This should include any possible falling items, etc.
- 3.3.2 Coats, bags and shoes should be hooked or stored away from walkways. Furthermore, good housekeeping should always be kept.
- 3.3.3 Additionally to the fact that excessive period of standing should be avoided, a comfortable and suitable chair should be available (If not already available).
- 3.3.4 Temperature should be monitored and possibly the provision of a fan or additional heating should be provided if required.

#### **3.4 Manual Handling**

- 3.4.1 Pregnant member of staff should not lift any pupil, goods and equipment. Support from another member of staff should be sought when necessary.
- 3.4.2 If manual handling is unavoidable handling aids should be used.

3.4.3 The same applies for reaching at high level where assistance should be required as the usage of stools and ladders should be avoided.

### **3.5 PE**

3.5.1 Pregnant member of staff teaching PE should consult their doctor or midwife before undertaking these classes.

3.5.2 A clear agreement should be established to assess the level of involvement and what is considered safe and comfortable.

### **3.6 Playground Activities**

3.6.1 Areas where sports are played during breaks (especially ball playing) should be assessed for risk to a pregnant member of staff.

3.6.2 Any activities that could create a risk to expecting mothers which would involve running or other risks of bumping, etc. should be taken into consideration when affiliating duties to a pregnant member of staff.

### **3.7 School Trips**

3.7.1 Pregnant member of staff should be incorporated in any risk assessment when long journeys are expected.

3.7.2 The allocation of duties should also be reviewed if a pregnant member of staff is involved in a school trip or off-site visit.

3.7.3 Pregnant member of staff should not be involved in any farm visit or at least make contact with farm animals to avoid Toxoplasmosis, etc.

### **3.8 Violence**

3.8.1 Pregnant member of staff should not get involved in any situation with a violent or threatening person or pupil. Any form of restraint or involvement with a violent situation should be avoided.

3.8.2 If a recognised violent pupil is to be taught by any pregnant member of staff a risk assessment should be carried out.

3.8.3 The same applies to any other duties, e.g. lunchtime activities, playground duties, etc.

3.8.4 If the school has a pregnant member of staff visiting parents/carers this should be incorporated into the home visit risk assessment and guidelines.

#### 4. IMPORTANT CONTACTS.

<u>ACAS</u>	0161 833 8500	/ <a href="http://www.acas.org.uk">http://www.acas.org.uk</a>
<u>BACP</u>	0870 4435252	/ <a href="http://www.bacp.co.uk">http://www.bacp.co.uk</a>
<u>BABCP</u>	01254 875 277	/ <a href="http://www.babcp.org.uk">http://www.babcp.org.uk</a>
<u>CICA</u>	0800 358 3601	/ <a href="http://www.cica.gov.uk">http://www.cica.gov.uk</a>
<u>HSE Info Line</u>	08701 545 500	/ <a href="http://www.hse.gov.uk/contact">http://www.hse.gov.uk/contact</a>
<u>NHS Direct</u>	0845 4647	/ <a href="http://www.nhsdirect.nhs.uk">http://www.nhsdirect.nhs.uk</a>
<u>Teacher Support Line</u>	0800 056 2561	/ <a href="http://www.teachersupport.info">http://www.teachersupport.info</a>

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Name:		Date:			
Areas of assessment	Low risks	Medium Risks	High Risks	N/A / Info	
<u>Diseases:</u>					
<u>Chemicals:</u>					
<u>Classroom / Teaching Areas:</u>					
<u>Manual Handling:</u>					
<u>PE:</u>					
<u>Playground Activities:</u>					
<u>School Trips:</u>					

## **Additional information regarding pregnancy**

### **Chickenpox / Varicella**

Once a person has had the illness he/she is usually immune to it.

Caused by the Varicella -zoster virus

Passed from person to person through the air and by direct contact with the rash.

If the mother contracts chickenpox during the first 20 weeks of pregnancy, problems can occur in the developing baby. Babies who are born to mothers who are infectious at the time of birth may develop neonatal chickenpox which can have serious consequences.

If you are unsure about your chickenpox exposure, you can have your immunity confirmed by a blood test.

You can get the VSIG vaccine if you have not previously developed immunity to chickenpox.

### **Cytomegalovirus (CMV)**

This virus is a member of the herpes virus group

Found in bodily fluids, including urine, saliva, tears, semen and breast milk.

If a woman becomes infected with her first CMV infection during the first trimester of her pregnancy, the foetus may be at risk for serious congenital defects.

Good personal hygiene.

Hand washing with soap.

### **Fifth Disease Human Parvovirus B19**

An acute viral disease. It causes mild flu-like illness in adults.

Infected respiratory secretions

Many unborn babies are unaffected when their mothers contract the virus. When affected, this can lead to fatal anaemia and other health problems.

There is no vaccine against fifth disease.

Good personal hygiene.

Hand washing with soap.

### **Rubella**

Also called **German measles**, this is a contagious illness that is caused by a virus.

Nasal and throat secretions from an infected person

The risk for serious congenital defects when contracted by during the first trimester of pregnancy, which includes birth defects, vision problems, hearing loss, heart defects, mental retardation or cerebral palsy as well as miscarriage or stillbirth.

Find out if you are protected. Ask your health care professional for a rubella titre.

If you receive the vaccine, wait one month before getting pregnant.

### **Toxoplasmosis**

Parasitic infection. Mild non-threatening disease in adults.

Found in raw or undercooked meats. Also found in the stool of many animals and in the contaminated garden soil.

Early trimester infection may result in foetal death, miscarriage or neonatal defects, such as hearing loss, visual impairment or learning disabilities.

Make sure meat is well-cooked.

Always wash your hands after touching raw meat and before eating.

Wear gloves when gardening.

Avoid changing cat litter. If you must do so, wear gloves and wash your hands after.

### **Listeriosis**

A bacterial infection

Eating contaminated food.

Infection during pregnancy can lead to premature birth, miscarriage, stillbirth, or serious health problems for the baby.

Wash your hands and kitchen surfaces often.

Keep raw meats and cooked foods separate.

Make sure meat is well-cooked and refrigerated or freeze leftovers promptly.