New and Expectant Mothers

Module 2
**Risk assessment**

Risk assessment in general has been covered in some detail in *Health & Safety Essentials - Risk Assessment* but in this module we will examine the aspects that are particularly important to new and expectant Mothers.

The risks to health may change throughout the pregnancy, so the risk assessment needs to be reviewed regularly.

If a specific work risk is identified, that cannot be avoided directly, or the GP/midwife has provided a medical certificate stating that certain work cannot be carried out, then suitable alternative arrangements should be made. This issue may need to be treated with sensitivity and confidentiality. Medical advice, reports and certificates, and concerns of the individual woman should be taken into consideration.

### Identifying the hazards and risks

The issues described below are of particular relevance when assessing risk to women of child bearing age, new and expectant mothers and their unborn child, noting that the degree of risk may vary depending on whether the woman is pregnant, has just given birth or is breastfeeding. It should also be noted that confidential issues and concerns may only be disclosed with the individual’s consent and all efforts made to avoid stress arising from breaches of confidentiality.

The risk assessment should consider the following hazards:

- **Toxic Chemicals** - there are many substances for which exposures could cause harm to the unborn child or result in genetic damage. Note that occupational exposure limits are NOT a safe concentration and do not take into account individuals who may be more vulnerable. Women working with hazardous substances should be made aware of any additional risks to herself and the child e.g. by highlighting chemical agents with classifications of concern and as listed below:

<table>
<thead>
<tr>
<th>Risk phrases</th>
<th>Hazard statements</th>
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<tr>
<td>R40: Limited evidence of a carcinogenic effect</td>
<td>H340: May cause genetic defects</td>
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<tr>
<td>R45: May cause cancer</td>
<td>H341: Suspected of causing genetic defects</td>
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<tr>
<td>R46: May cause heritable genetic damage</td>
<td>H350: May cause cancer</td>
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<td>R49: May cause cancer by inhalation</td>
<td>H351: Suspected of causing cancer</td>
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<tr>
<td>R61: May cause harm to the unborn child</td>
<td>H360: May damage fertility or the unborn child</td>
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<tr>
<td>R63: Possible risk of harm to the unborn child</td>
<td>H361: Suspected of damaging fertility or the unborn child</td>
</tr>
<tr>
<td>R64: May cause harm to breastfed babies</td>
<td>H362: May cause harm to breast-fed children</td>
</tr>
<tr>
<td>R68: possible risk of irreversible effect</td>
<td>H340: May cause genetic defects</td>
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The classification of a chemical can be found on the Safety Data Sheet (SDS). For mixtures, only the overall classification will be shown on the label; consult the SDS for the classification of the substances within the mixture. For more information on where to find the relevant information, see *Health & Safety Essentials – Safety Data Sheets*. 
● **Other chemical agents** – mercury; antimitotic (cytotoxic) drugs; pesticides; lead; carbon monoxide.

● **Biological Agents** – infectious & contagious diseases, contact with animals

● **Physical Agents** –
  ● **Movement and posture** – sitting or standing for extended periods.
  ● **Manual handling** where there is a risk of injury – increased risk due to the presence of the pregnancy hormone relaxin, which relaxes ligaments in the body and can facilitate weakness in the spine and other joints. Ensure natural working postures are adapted and avoiding physically stressful tasks.
  ● **Shocks, Noise and Vibrations** – such as when operating equipment.
  ● **Radiation** – (ionising and non-ionising) for which existing risk assessments may need review.
  ● **Magnetic fields such as those associated with NMR or scanners**

● **Working Conditions** –
  ● **Facilities (rest rooms)** – availability of nutrition, drinks, toilet and rest facilities (should include somewhere to lie down). Easy access is particularly important.
  ● **Passive smoking**.
  ● **Mental and physical fatigue** – long hours, night work & lone working and irregular work patterns.
  ● **Stress** – from the effects of pregnancy and working patterns.
  ● **Travelling** – it is unlikely that suitable facilities will be available for more arduous travelling such as long haul flights.
  ● **Extremes of temperature & general workplace comfort**.
  ● **Work at heights & confined spaces** – stability and balance may be affected.
  ● **Use of PPE** – normal PPE may not fit or will become uncomfortable to wear.
  ● **Availability of facilities for breastfeeding or expressing milk** together with its storage.
  ● **Seating:** additional seating may need to be provided
  ● **Precision work** – dexterity may be affected especially later in the pregnancy

**Risk assessment**

The risk assessment is fundamental in deciding if existing control measures are adequate and proportionate to the new and expectant mother or if additional risk reduction is required. A structured risk assessment approach should consider the issues related to the work place, the work activity and the person. In some circumstances, specific clinical requirements may have been specified by the GP or midwife and the risk assessment must take these into account.

The risk assessment will need to identify the hazards and risks outlined above and consider what would constitute adequate risk reduction. Additionally, the assessment will need to examine both normal work and foreseeable emergencies such as fires, spillages, equipment failure, illness and accidents.

The risk assessor needs to have a thorough understanding of the job role and work tasks of the new and expectant mother.