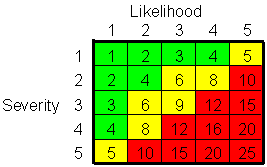
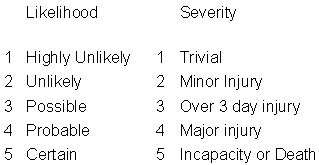
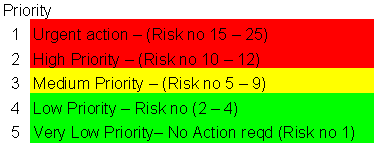
**Pregnancy and New Mother’s Risk Assessment Form**

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| --- | --- | --- | --- |
| **Name of New / Expectant Mother** | **Name of Assessor** | **School** | **Date of Assessment** |
| **Is there any advice provided by the woman’s health professional? (Remember the need for confidentiality)** | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **Identified Hazards** | **Risk Score** | | | **Information about controls / Discussion prompts** | **Action to be taken / by/ whom / date** | **Reviewed Actions** |
| Manual Handling -  Hormonal changes in pregnancy can affect the ligaments increasing susceptibility to injury; postural problems may increase as the pregnancy progresses |  |  |  | * Reduce the amount of physical work or provide aids to reduce the risk. * List the manual handling tasks which should be avoided. * Alter the nature of the task to reduce risks from manual handling. * Breastfeeding mothers may experience discomfort. * Follow guidance as per manual handling policy. |  |  |
| Movement and postures |  |  |  | * Review the workstation provision and learning environment, provide appropriate seating in classroom. * Backache can intensify in later pregnancy by remaining in a static position for prolonged periods. Avoid spending long periods handling loads, or standing/sitting without regular exercise/movement to maintain circulation. * Provide the opportunity to alternate between standing and sitting. * Increasing size can affect dexterity, agility, coordination, speed of movement and reach. Making necessary adjustments to assist. |  |  |
| Working with display screen equipment |  |  |  | * Display Screen Equipment Risk Assessment. Pregnant women do not need to stop working with VDUs. However, postural / ergonomic problems due to changes in body proportions. Ensure adequate adjustable seating and rest breaks. |  |  |
| Working alone |  |  |  | * While it is unlikely the young woman would be working alone, but in the instance please consider the following: * Review and revise access to communications with others. * Levels of supervision involved. * Review and revise with pastoral support to ensure mother has support and assistance where required. |  |  |
| Stress (including pre and post natal depression) - reduction of unnecessary stress |  |  |  | * Adjust working conditions and hours * Ensure that necessary understanding, support and recognition is available (consider return to school). * Take account of known stress factors (exam periods, workloads etc.) and the particular medical and personal factors affecting the individual. * Other factors such as miscarriage, pregnancy loss, morning sickness, impaired ability to breastfeed * Consider the wellbeing of the mother with regards to times when she may feel low and emotionally sensitive |  |  |
| Travelling to or from school |  |  |  | * Consider length of journey to school and method of travel to school, does she have to stand for long periods on public transport. * Consider stress, posture, discomfort and look at alternative arrangements. |  |  |
| School and personal protective equipment during some lessons |  |  |  | * 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. |  |  |
| Mental and physical fatigue and schooling hours |  |  |  | * Adjust schooling hours temporarily, including the timing and frequency of rest breaks (frequent and urgent toilet visits). * The need for physical rest may increase as the pregnancy progresses. As appropriate, allow access to somewhere to sit or lie down comfortably in private and without disturbance. * Consider location of classrooms – are they up many flights of stairs without access to a lift? * Consider school sports, gentle sports may be offered but contact sports avoided. |  |  |
| Health and Safety |  |  |  | * Consider the impact of lesson changes e.g. allow young woman to leave lesson early or arrive late to avoid crowds of other young people. * Provide adequate training and information to staff. * Consider anti-bullying policy and follow up concerns raised in relation to violence or bullying. * Fire procedures. |  |  |
| Hazardous substances with hazardous properties indicated by the following risk phrases: R40, R45, R46, R49, R61, R63, R64, R68 |  |  |  | * Consider type of chemicals to be used in school experiments. Are they appropriate for use by women who are pregnant, have recently given birth or who are breastfeeding. * Exclude all pregnant women from chemical agents such as mercury, lead substances absorbed through the skin and carbon monoxide. * Follow guidance as per COSHH policy |  |  |
| Exposure to contagious disease |  |  |  | * Pregnant women who have been in contact with chickenpox / shingles, measles & mumps and have no history of chickenpox must contact their GP promptly for advice. * All pregnant women should be fully informed of the reproductive hazards. Refer and sign post to antenatal care, school nurse, midwife or GP. |  |  |
| Anti natal physical risks |  |  |  | * Nausea: particularly common in early pregnancy, but may continue throughout the pregnancy. * Exposure to strong smells / poor ventilation / fumes. Frequent breaks and regular snacks. * Circulatory Problems: Varicose veins / swollen ankles / other. Continuous standing may lead to dizziness, faintness and fatigue. It can also contribute to an increased risk of premature childbirth and miscarriage. Specific changes during pregnancy pose a relatively high risk of thrombosis particularly with constant sitting. |  |  |
| Continuing to breastfeed |  |  |  | * It is not suitable for breastfeeding mothers to express milk in the toilets therefore a suitable private room should be made available where a comfortable chair and fridge are provided. * May have increased tiredness and the need to drink more frequently due to thirst. |  |  |
| Post natal considerations: Post-delivery / caesarean section |  |  |  | * Limitations on physical capability after a C-section |  |  |

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| --- | --- | --- |
| **New / Expectant Mother’s name (please print):** | **New / Expectant Mother’s signature** | **Date:** |
| **Parent / Carer’s name (please print):** | **Parent / Carer’s signature** | **Date:** |
| **Line Manager’s name (please print):** | **Line Managers signature** | **Date:** |

**Risk level is calculated High, Medium or Low based on the Severity X Likelihood as shown**

This risk assessment should be held on the personal file of the young person. The young person should keep a copy for their own use and reference.

*Adapted from Norfolk Council, Schools Risk Assessment Form & The University of Exeter, New and Expectant Mothers at work*