**Risk Assessment for New and Expectant Mothers**

# Important information

The practice manager must ensure that this risk assessment is completed for any expectant mother at each stage of the pregnancy and a further re-assessment upon returning to work following childbirth.

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| Name: |  |
| Job Title: |  |
| Assessor: |  |
| Date of assessment: |  |
| Due date: |  |
| Current stage: | Pregnant [ ]  New Mother [ ]  |

The potential hazards detailed below must be reviewed and risk assessed in relation to the employee’s working activities and environment. Record any action required to reduce or eliminate any risks as necessary and re-evaluate as appropriate.

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| Stage | Review date |
| 1-3 months |  |
| 4-6 months |  |
| 7-9 months |  |
| New mother |  |
| Breast feeding mother |  |

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| Slips, trips and falls |  | Further action |
| Is the working environment free from slip, trip and fall hazards (trailing cables, uneven flooring, spilt liquids)? | Yes [ ]  No [ ]  |  |
| Are stair wells maintained and free from obstructions? | Yes [ ]  No [ ]  |  |

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| Display screen equipment |  | Further action |
| Does the employee use display screen equipment for significant periods of time? | Yes [ ]  No [ ]  |  |
| Has the workstation been re-assessed since notification of the pregnancy? | Yes [ ]  No [ ]  |  |
| Is the chair, other equipment and furniture suitable and comfortable for the employee? | Yes [ ]  No [ ]  |  |
| Is the employee able to take sufficient breaks/changes of activity away from the screen? | Yes [ ]  No [ ]  |  |

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| Manual handling |  | Further action |
| Is the employee expected to carry or move heavy loads? | Yes [ ]  No [ ]  |  |
| Is the employee aware of safe moving and handling techniques? | Yes [ ]  No [ ]  |  |
| Has a manual handling assessment been completed? | Yes [ ]  No [ ]  |  |

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| Driving (occupational road risk) |  | Further action |
| Does the employee drive as part of their job?  | Yes [ ]  No [ ]  |  |
| Do they have to drive long distances with infrequent breaks? | Yes [ ]  No [ ]  |  |

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| Lone working |  | Further action |
| Does the employee work alone in the building or out in the community?  | Yes [ ]  No [ ]  |  |
| Are control measures in place for lone working such as panic alarms or buddy systems? | Yes [ ]  No [ ]  |  |
| Is the employee able to take sufficient breaks? | Yes [ ]  No [ ]  |  |

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| Working at height |  | Further action |
| Does the employee have to complete tasks which require them to work at height (e.g. step ladder or foot stool) or reach awkward shelves or unstable items? | Yes [ ]  No [ ]  |  |

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| Violence and aggression |  | Further action |
| Is the employee exposed to potentially violent situations from members of the public? | Yes [ ]  No [ ]  |  |

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| Stress |  | Further action |
| Is the employee exposed to any undue stress? | Yes [ ]  No [ ]  |  |
| Is the exposure to stress at an acceptable level? | Yes [ ]  No [ ]  |  |

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| Welfare |  | Further action |
| Does the employee have to sit or stand for long periods of time? | Yes [ ]  No [ ]  |  |
| Is there a rest room or suitable area for the employee to rest? | Yes [ ]  No [ ]  |  |
| Is the employee able to take breaks when required? | Yes [ ]  No [ ]  |  |
| Does the employee suffer with morning sickness which may affect morning shifts or when exposed to nauseating smells? | Yes [ ]  No [ ]  |  |
| Do nursing mothers have a facility for privately expressing milk and adequate cold storage available? | Yes [ ]  No [ ]  |  |
| Does the employee work nights, cover night shifts or long working hours? | Yes [ ]  No [ ]  |  |
| Are workplace temperatures reasonable? | Yes [ ]  No [ ]  |  |

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| Biological and chemical agents |  | Further action |
| Is employee exposed to any infectious diseases (e.g. rubella)? | Yes [ ]  No [ ]  |  |
| Is the employee exposed to any bodily fluids? | Yes [ ]  No [ ]  |  |
| Is the employee exposed to any chemicals (as defined by COSHH)? | Yes [ ]  No [ ]  |  |
| Is the employee exposed to radioactive material? | Yes [ ]  No [ ]  |  |
| Is the employee at risk of needlestick injuries? | Yes [ ]  No [ ]  |  |

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| Other issues |  | Further action |
| Consideration should be given to increasing size which may present problems if wearing personal protective equipment and uniforms. | Yes [ ]  No [ ]  |  |
| Dexterity, agility, co-ordination, speed of movement and reach may all be impaired due to increasing size. | Yes [ ]  No [ ]  |  |
| Consider that pre-existing medical conditions may affect a woman during pregnancy or afterwards (e.g. diabetes, heart condition, previous miscarriage). | Yes [ ]  No [ ]  |  |
| Consider the increase in mental and physical fatigue depending on the work activities. | Yes [ ]  No [ ]  |  |

The new or expectant mother is responsible for informing the practice manager or other point of contact if she has a medical condition that should be recorded. This is a requirement throughout the pregnancy term.

**Data Protection**

The handling of your personal data is controlled by the General Data Protection Regulation (GDPR) and associated legislation. GDPR requires us to comply with a number of principles regarding privacy and disclosure when handling personal data (including 'special categories of data'), including ensuring such data are processed, stored and used for limited purposes, and always in accordance with Article 9 of the GDPR. The GDPR includes measures to ensure that information is processed fairly and seeks to protect individuals' rights to confidentiality.

This document will be processed in accordance with the GDPR and data protection legislation, further details can be found in the Practice's [Data Protection Policy/ Employee and/or Job Applicant Privacy Statement / Other [state your relevant document]] which can be found [state where e.g. Practice Website / Job Application Pack].

Individuals have, on written request, the right of access to personal data held about them.

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| Employee’s signature: |  |
| Date: |  |
| For and on behalf of the practice: |  |
| Date: |  |