

Policy on support for pregnant students and students with very young¹ children

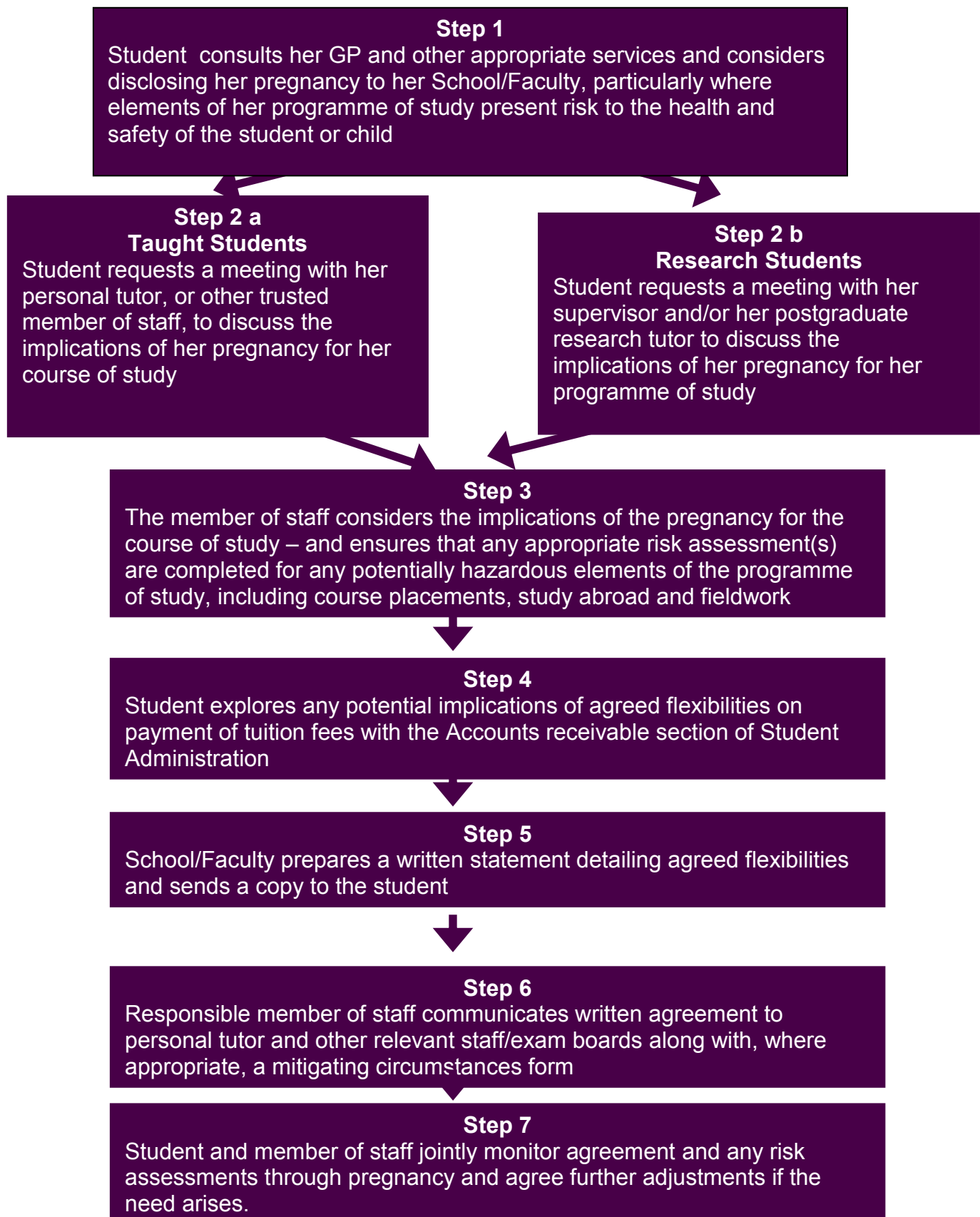
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¹ Reference to very young children relates to children under the age of 6 months and, with particular regard to health and safety considerations, those beyond 6 month who are still being breastfed

Flowchart

This flowchart summarises the steps that could most usefully be taken when a student or applicant discloses a pregnancy – Section 6 of this document contains more information about each stage.



Policy on support for pregnant students and students with very young² children

This document provides both students and staff – particularly personal tutors, academic tutors, programme managers, postgraduate research tutors and all other staff who have a role in advising or supporting students – with information about the University’s approach to supporting a student, or prospective student, who is pregnant or has decided to terminate a pregnancy or is a primary adopter. It also provides some information relating to supporting a student (whether female or male) who has recently become a parent (including through adoption) or is the partner of someone who has a very young child.

The University has a separate policy on support for students who are parents or carers covering the support available to students with dependants. <http://www.equality.leeds.ac.uk/university-policies-2/>

1. Key guiding principles

The University of Leeds believes that being or becoming pregnant, terminating a pregnancy or having a very young child (including through adoption) should not, in itself, be a barrier to a student starting, succeeding in, or completing a programme of study at the University. The University is committed to being as flexible as possible, whilst, at the same time, making sure that any accommodations made for the student do not compromise academic standards. The special arrangements which can and should be made for a student in these circumstances will vary from Faculty to Faculty and from programme to programme. However, the general approach to be taken in these circumstances is consistent across the University – as is the legal framework in which the University operates.

This policy is based on a set of important guiding principles, namely:

- **Avoiding less favourable treatment.** The University and its staff shall make sure they avoid treating a student less favourably than other students on the grounds that she is pregnant³ or has terminated a pregnancy. Whilst particular arrangements may need to be made for an individual student (for example, a student should not return to University for two weeks after giving birth for health reasons and 4 weeks in the event that she is on a factory based work placement), the University will seek to make sure that such arrangements do not place the student at a particular disadvantage compared to other students
- **Taking a flexible approach.** The University recognises its obligations under the Equality Act 2010 and its staff will take a flexible approach to facilitating the continued learning of – and maintaining a high-quality and safe student experience for – a pregnant student, a student who is the parent of a very young child or a student whose partner is in either of these positions

² Reference to very young children relates to children under the age of 6 months and, with particular regard to health and safety considerations, those beyond 6 month who are still being breastfed

³ The Equality Act 2010 prohibits organisations, including the University, from treating a person (including a student, staff member or visitor) less favourably than others on the grounds of pregnancy or maternity. Discrimination on the grounds that a student is pregnant or breastfeeding can constitute unlawful discrimination. The University also has a statutory duty to promote equality of opportunity for those with a protected characteristic. These guidelines have been drafted with these legal obligations in mind.

- **Demonstrating a non-judgmental and sensitive approach.** When supporting and working with a student on these matters, staff must take an open-minded and non-judgmental approach. Information provided by the student should be treated sensitively and only passed on to others on a need-to-know basis (for example, in order to set up appropriate adjustments for the student)
- **Enabling informed choices.** Members of staff will not attempt to direct or unduly influence a student's decisions. Their role is to provide context and advice to the student, and to explore, in consultation with the student and others, flexibility that can be applied to the student's programme or period of study to provide appropriate support

2. Summary of Key Responsibilities

The University will ensure that:

- Any student who becomes pregnant before or during a period of study at the University is accommodated as far as practicable to allow her to complete her programme of study, providing academic standards are upheld
- Relevant staff are made aware of the terms of this policy and their responsibilities arising under it
- Support and guidance is available for staff undertaking risk assessments on elements of the programme of study that are likely to result in a risk to the health and safety of the student or unborn child
- Staff in the Equality Policy Unit are available to discuss with staff the best way to support the continuing study of a pregnant student to ensure she is able to complete her programme of study
- Appropriate support is available to students through various support services
- The policy is kept under review and updated as necessary

Schools and faculties must ensure that:

- The policy is widely publicised and available to staff and students
- Female students are made aware of the policy and encouraged to disclose a pregnancy in confidence at an early stage, ***particularly where elements of their programme of study might result in a risk to the health and safety of the student or unborn child*** (see Section 3)
- Staff are aware of the policy so that they can respond appropriately when a student discloses her pregnancy and seeks support to continue her programme of study
- As soon as a student discloses that she is pregnant, a risk assessment, or series of risk assessments, are undertaken to ensure that there are no elements of the programme of study that present a risk to the health and safety of the student or the unborn child (See Section 3)
- Wherever practicable, accommodation is made to ensure that a pregnant student, or student with a very young child, is able to complete her programme of study
- If requested, a female member of staff is identified with whom a pregnant student can discuss her support needs
- The student is given information on other sources of advice/support (particularly immigration advice for international students, available from the International Student Office) (see Section 12)

Individual staff members

All individual staff members are **advised to**:

- Familiarise themselves with this document and the University's responsibilities towards students who are pregnant or have very young children

Individual staff members to whom a pregnancy is disclosed are **responsible for**:

- Reading the policy and, in particular, becoming familiar with the procedure for supporting pregnant students
- Treating any disclosure of a pregnancy seriously and making students aware of appropriate sources of support
- Respecting a student's right to confidentiality and verifying that a student has no objections to their pregnancy being discussed with others – particularly when information needs to be passed on to other staff members to arrange any agreed accommodations to the programme of study or adjustments to fees
- Ensuring accurate information is given to prospective students regarding the availability of support for students who are pregnant or have very young children
- Seeking advice from colleagues or central support services within the University if they are unsure of how best to support the continued study of a pregnant student (see Section 9)

Students (and applicants)

Students and applicants covered by this policy are **responsible for**:

- Disclosing their pregnancy to a trusted member of staff within their School or Faculty at an early stage of their pregnancy, with a view to discussing any necessary support arrangements or adjustments – particularly where elements of their programme of study might present a health and safety hazard to the student or unborn child (see Section 3)
- In the case of applicants, it is advisable to inform their Admissions Tutor at an early stage so that consideration can be given to appropriate support being available from the commencement of their programme of study
- Ensuring the safe supervision of any child they may bring onto campus

Students and applicants covered by this policy are **advised to**:

- Read the policy in order to understand the University's approach to supporting pregnant students and students with very young children
- Ensure that they have a clear idea of what will be expected of them on their course of study in order to understand the potential impact of pregnancy related absence
- Discuss any concerns they have relating to their pregnancy with the Leeds Student Medical Practice or their own GP and, if required, staff in one or more of the following services: the LUU Student Advice Centre, Student Counselling Centre, Health and Safety Services, Accommodation Services and the Chaplaincy (see Section 12 for contact details)

3. Does a student need to notify her School/Faculty⁴ of her pregnancy?

Please note that it is particularly important that a student informs her School/Faculty at an early stage of a pregnancy where there is a potential risk to the health and safety of the student and/or her child (see below). The School or Faculty should then carry out a risk assessment as soon as possible to minimise any potential risk.

Students are not under any obligation to inform their School/Faculty if they become pregnant, have a child, or decide to terminate a pregnancy whilst they are a student here. However, it is important to note that a School/Faculty will not be able to take a flexible approach to her programme of study, or provide specific support to the student, unless it knows about the situation. If requested, the School/Faculty will identify a female member of staff to discuss such support needs.

Whilst making a decision on whether or not to inform their School/Faculty, students are encouraged to consider the following:

- There may be elements of a programme of study that could present a health and safety risk to a pregnant student and/or her child⁵. A student's School/Faculty will not be able to arrange appropriate risk assessments unless it is aware of her pregnancy.
- If a student's pregnancy-related absence (for example, for antenatal appointments) impacts significantly on the student's studies, the School/Faculty will only be able to take proper account of the reasons for absence if they are notified of these⁶.
- In some cases, a student's pregnancy-related absence from University might be something that needs to be discussed with other organisations. For example, if a **postgraduate research student** is in receipt of a University or Departmental Scholarship or funding from a Research Council or other external body, she should refer to the terms and conditions relating to her award. The student will generally be required to notify her supervisor and in some cases a relevant Maternity Leave Request form will have to be completed, supported by a MATB1 certificate or doctor's letter. This could make it more important for the student to notify the School/Faculty of the situation
- Sometimes, the absence of a student from University can adversely affect the work of other students s/he is working alongside (for example, on a group project or in a research team), which might make it more important to notify the School/Faculty, so that plans can be made to deal with any such issues arising from the absence

Various sources of advice and support are available to students, whether or not they decide to notify their School/Faculty of their circumstances (see Section 12 for more information).

Note for International Students: If an international student requires a Tier 4 General Student visa to remain in the UK during her period of study, UK Visas and Immigration (UKVI) regulations must be taken into consideration. Where a student is in the UK with a Tier 4 (General) student visa the University is required to notify the Home Office of any suspension

⁴ In most cases, the most appropriate place to report, and receive support for, pregnancy related needs will be the student's School. In Unitary Faculties (LUBS and Biological Sciences) it may be the Faculty or a sub-unit within the Faculty.

⁵ It is important to point out that, in the case of students with a potential exposure to hazardous radiation or chemicals, the greatest risk to the health of an embryo or foetus arises within the first 13 weeks of pregnancy. Students in these circumstances are strongly advised to inform their School of their pregnancy in order to allow a risk assessment to be undertaken. Further guidance on such risks can be found in the annex to this policy.

⁶ In the case of pre-arranged antenatal appointments, the School/Faculty would normally need to be notified of these in advance in order to take these into account.

of study. This may result in the curtailment of immigration permission. Both the School/Faculty and the student should seek advice from the International Student Office as early as possible during the pregnancy. This will enable colleagues to ensure that the student understands any implications for her immigration status and that any arrangements agreed with the student comply with UKVI requirements. Early discussions are also important because a late or unexpected decision to fly home could be affected by health considerations. <http://www.internationalstudentsupport.leeds.ac.uk/>

4. What support is available to assist a student in deciding whether or not to continue with a pregnancy?

Whilst only the woman herself can make the decision as to whether or not to continue with her pregnancy, a range of services across the University and students' union can assist by providing confidential support and information about the options available, and, in some cases, other practical assistance. These services include, for example:

- the Leeds University Union (LUU) Student Advice Centre (<http://www.leedsuniversityunion.org.uk/helpandadvice/>)
- the Student Counselling Centre (<http://www.leeds.ac.uk/uscs/>)

See Section 12 for links to these and other services.

Students also have access to external organisations for information, advice or support. These include the student's own GP, Brook Advisory Centres (www.brook.org.uk), the Marie Stopes International Leeds Centre (www.mariestopes.org.uk/Our_centres/Leeds.aspx), the Family Planning Association (www.fpa.org.uk)

At this stage, a student may also wish to consider the impact that having a child may have on her studies. Section 6 describes the procedure for a student to discuss with her School how her programme of study might be adjusted to take account of her pregnancy and/or childcare responsibilities.

5. What support is available in the event of a miscarriage or stillbirth?

In the event of a miscarriage or stillbirth a student may wish to access support from:

- the Student Counselling Centre (<http://www.leeds.ac.uk/uscs/>)
- SANDS - the stillbirth and neonatal deaths society: <http://www.uk-sands.org/>

6. What process should be followed for a student and her School/Faculty to discuss the impact that the student's pregnancy or childcare responsibilities may have on her studies?

This section outlines a series of steps for students and staff to follow in order to discuss and respond to the requirements of an individual student who is pregnant. ***This section should be read in conjunction with the flowchart presented at the beginning of this document.***

Step 1: The student is strongly advised to consult the Leeds Student Medical Practice or her GP to discuss medical issues relating to her pregnancy prior to approaching her School/Faculty. *It is particularly important to take advice at an early stage if there is any possible health and safety risk.⁷*

Since the focus of this 7-step process is on considering the implications of pregnancy on the student's programme of study and academic work, students are also reminded that they can, at any stage, contact other sources of non-academic advice and support (including the Student Counselling Centre, the LUU Student Advice Centre, the Chaplaincy, Health and Safety Services, etc. – see Section 12 for contact details).

Step 2a: Taught Students

The student has the right to request a meeting with her personal tutor or other trusted staff member. (Some Schools/Faculties may choose to identify another member of pastoral support staff for students to contact to discuss these issues. Any School/Faculty taking this route must publicise the appropriate point of contact to all students – e.g. on its website and in School handbooks.) If so requested, the School/Faculty will identify a female member of staff to discuss the implications for the continuation of her study.

The student and the relevant staff member must meet to discuss and agree a plan for her continuation of study. Whenever possible, the member of staff should contact the student within 5 working days of the request being received from the student and meet her as soon as possible thereafter. Where the agreed accommodations fall under mitigating circumstances, the relevant form should be completed and submitted as normal.

At the meeting, it is essential that urgent consideration is given to undertaking a risk assessment (see Step 3 below). In addition, careful consideration must be given to the variety of ways in which the student can be enabled to continue her studies during her pregnancy or after the birth. For example, these might include:

- agreeing periods of absence and making arrangements for the student to catch-up on lectures/tutorials missed for pregnancy/birth related reasons to ensure that she is not at an academic disadvantage

⁷ Guidance on health and safety issues during pregnancy is included as an annex to this policy.

- adjusting timescales/deadlines for assessed coursework or exam submission deadlines if the pregnancy or birth prevents compliance
- consulting the Faculty or School Special Cases/Special Circumstances/Mitigating Circumstances Committee (local names vary - FSCC⁸) about the potential for flexibility in relation to the way in which credits are scheduled/distributed
- seeking approval, as appropriate, from the FSCC for alternative means of assessment for the student (for example, a written assessment instead of a physical performance) if the pregnancy or birth prevents the normal methods of assessment
- allowing the student first attempt re-sits at future examination periods, for example in a situation in which the pregnancy or birth prevents the student from taking an examination at the normal time for her programme of study
- the student taking some time out from her studies which would involve the student completing a Temporary Leavers Form (taught students) or speaking to their Research Tutor to discuss suspension/extension of study (research students), normally for a pre-determined amount of time. The period of temporary leave may be extended if the time required to complete the programme of study will still fall within the maximum time limit allowed for the programme either by the University (and/or, where applicable, professional bodies)
- consideration of a transfer to part-time study (information on the financial support available to part-time students is available from the Financial Aid section within Student Administration tel 0113 343 2007 e-mail financialaid@leeds.ac.uk).

As well as covering the student's longer-term plans relating to her studies, the continuation of study plan should also:

- accommodate the student's antenatal care
- include a break from attending University of at least two weeks after giving birth (or 4 weeks in the event of a work placement in a factory environment) for health reasons, and
- include provision for re-integrating the student to the programme of study on return from any prolonged absence.

The staff member overseeing the support arrangements should refer to the guidance below when considering what flexibility might be appropriate in any given situation.

Step 2b: Postgraduate Research Degree Students

If a research degree student becomes pregnant, the appropriate individual to contact will normally be her supervisor(s) and/or the postgraduate research tutor within the School/Faculty. The postgraduate supervisor(s) and research tutor will work together with the student to consider the impact of the pregnancy and any resulting suspension of study. This will include a risk assessment as described in step 3 below. Postgraduate students who are paid by the university will have employment status and the University's Maternity Leave regulations will apply.

The Postgraduate Research Tutor may request permission from the Graduate Board, on behalf of the student, for a period of suspended study for reasons of maternity leave. The Research Student Administration suspension/extension policy can be found at <http://www.leeds.ac.uk/rsa/policies.html#progress> The student is responsible for checking the

⁸ If the flexibility required is not within the remit of the local FSCC, that Committee may put forward a recommendation to the University Special Cases Committee

implications of a suspension of study with her scholarship awarding body or provider at an early stage. For students funded by a Research Council, or on a University Research Scholarship, advice is available from Research Student Administration (<http://www.leeds.ac.uk/rsa/>).

Step 3: The staff member overseeing the support arrangements for the student (e.g. the personal tutor, research supervisor or other designated person) should ensure that appropriate steps are taken in relation to health and safety issues. In most cases, this will involve a risk assessment for the individual student.

Advice can be sought from the School/Faculty Safety Supervisor and/or the University Health and Safety Service.

For some students – for example, those participating in field trips, studying a laboratory-based subject, working with equipment which poses a danger to the health of a pregnant woman or unborn child (e.g. equipment producing radiation) or taking a programme of study which involves high levels of physical activity – it will be even more important that the health and safety implications of pregnancy are given serious consideration. In these situations, staff should seek advice as soon as possible from the School/Faculty Health and Safety Coordinator or Health and Safety Manager and/or University Health and Safety Services and a full risk assessment should be completed – see Annex for guidelines and a risk assessment form.

If it is not practicable to alter the study conditions to respond to the risk(s) highlighted by this assessment, or if such an alteration would not avoid any identified risk(s), the student may need to take time out from her study to ensure she avoids them – although a concerted effort should be made by the School/Faculty to manage the health and safety risks and find alternative ways of allowing a student to continue her course in any situation where a temporary withdrawal is not in line with her wishes.

Step 4: A student who is considering suspending studies or changing the mode of study from full time to part-time should explore this at an early stage with her School and the Accounts Receivable section of Student Administration to identify any potential impact that the flexibility proposed may have in terms of payment of tuition fees. Please note that international students in the UK with a Tier 4 General Student Visa are not permitted to change to part-time study.

In the event that a student needs to suspend her studies, every effort will be made to ensure that she is not financially disadvantaged e.g. if studies are suspended, the tuition fee would be reduced pro rata for the current year and would normally be at the same rate on return (subject to a small inflationary increase).

Please note that, if the student is in receipt of a bursary or scholarship, she must also discuss the implications of any absence with the funding body.

Step 5: The student and staff member should meet to discuss and agree a written plan for the student's continuation of study (detailing any specific flexibility agreed to allow the student to continue her studies) and a copy held by the student and the School. Where the agreed accommodations fall under mitigating circumstances, the relevant form should be completed and submitted as normal.

Where a student is dissatisfied with the degree of flexibility offered, she may ask her School/Faculty for information about the local complaints procedures or make a formal complaint, if appropriate – in line with the Student Complaints Procedure (http://www.leeds.ac.uk/secretariat/student_complaints.html). The LUU Advice Centre is available to advise on submitting and appeal or complaint. <http://www.leedsuniversityunion.org.uk/helpandadvice/>

Step 6: The staff member overseeing the support arrangements should communicate the agreed continuation plan to the Personal Tutor/Research Supervisor and other relevant teaching staff and/or examination boards, as appropriate. Information should be passed on sensitively.

Step 7: The student and her personal tutor/supervisor (or other chosen/designated staff member) should monitor the situation on an ongoing basis, particularly to assess the effectiveness of any special arrangements that have been agreed to facilitate the student's continued study.

The student can request further meetings with her School/Faculty, particularly if she is experiencing any difficulties with her academic work as a result of these arrangements.

7. How should a School/Faculty determine an appropriate degree of flexibility?

It is not possible to provide a definitive list of special arrangements that might be considered reasonable in every possible situation because the decisions about which arrangements are appropriate in each particular case will vary according to a wide range of factors. These factors include the student's individual circumstances, the time of year, the structure and content of the particular programme of study, restrictions imposed by professional bodies and any related health and safety matters.

Staff members are advised to take into account the following when considering what might be appropriate in a given case:

- A student's own views on her options are very important and it is vital that staff consult her openly on the way forward, rather than seeking to implement a predetermined set of adjustments
- At the same time, it is important to note that Schools/Faculties do not have to agree to any or all requests made by the student. There may be some situations in which it is impossible or unreasonable for a School/Faculty to agree to a particular request.
- To ensure best practice, and avoid any inadvertent discrimination, a School/Faculty should not normally decline a request from a pregnant student for particular special arrangements solely on grounds that they are too costly to implement (although this may be one factor taken into account when deciding on the overall reasonableness of meeting the request)
- If a School/Faculty decides to decline a flexibility request from a pregnant student, it is considered good practice for the School/Faculty to document its reasons for refusing the request and discuss with the student why this particular request is not considered "reasonable" in the particular circumstances
- In cases where deferring her studies would lead to a student taking longer to complete a degree programme than would normally be permissible, the School/Faculty may decline a request for further time out from studies (in order to ensure that the information gained in previous parts of the programme remains current enough to count towards the qualification in question). However, in these circumstances the School/Faculty should still strive to demonstrate a flexible approach, where practicable, in relation to this deadline for programme completion, whilst ensuring that the student does not exceed the overall time limit allowed for her programme of study by the University or a relevant professional body.
- In some cases, it might be appropriate for a School/Faculty to show flexibility in relation to which modules count towards a particular qualification to accommodate a pregnant student, providing academic standards are upheld. In such circumstances normal procedures would need to be followed in terms of gaining approval for such changes e.g. via the School/Faculty or University Special Cases/Special Circumstances/Mitigating Circumstances Committee (local names vary). In some situations, however, such flexibility could lead to a student missing a piece of work or module which is required for professional or vocational accreditation. Care should, therefore, be taken to check that any missed work will not adversely affect the accreditation of the student or, at the very least, the student should be made aware of the potential impact in terms of her future employability

Staff members are also welcome to seek bespoke advice on what might constitute appropriate flexibility in a particular case from the Equality Policy Unit (see Section 9 below).

Occasionally, a situation may arise in which a School/Faculty is already making allowances for an individual student for reasons not related to pregnancy (for example, for reasons linked to disability or religion). This does not mean that it is unreasonable for her to benefit from separate/additional flexibility relating to her pregnancy. It is important that, in these situations, the School/Faculty strives to separate out these different issues and clarify with the student what flexibility relates to which reasons⁹. This approach will help Schools/Faculties to ensure that the flexibility remains in place only for as long as it is required and also that they are complying with the Equality Act 2010.

8. What advice is available on Study Abroad and Work Placements?

For students who become pregnant before or during a period of study abroad or a work placement there may be circumstances where the University is limited in the support it can realistically offer to the student. Where this is judged to present a particular risk to the student or her unborn child, she may be strongly advised to take time out or transfer to a different programme of study.

If a student becomes pregnant before, or during a period of study abroad, advice may be taken from the Study Abroad Office – tel: +44 (0)113 343 7900.

If a student becomes pregnant before, or during a work placement, advice should be sought from their School/Faculty Work Placement Support Tutor and/or the Work Placement Support Officer in the Careers Centre – tel: +44 (0) 113 343 5295.

It should be noted that the University's travel insurance limits the amount payable for medical care for a child born outside of the UK during an insured journey to £50,000 (as at March 2012) while such child is under the age of 6 months.

9. What support is available to staff members to help them to advise, or take a flexible approach to, a pregnant student?

Support from the Equality Policy Unit

If, at any stage, a member of staff would like some assistance in thinking through the practical implications of an individual student's pregnancy, they are welcome to request a meeting with an Equality and Inclusion Manager from the Equality Policy Unit to act as an initial sounding board.

Since this meeting is intended to assist the member of staff in thinking through options, and because the Equality Policy Unit does not normally provide advice to individual students, the student would not normally be present at the meeting. (The student, of course, is welcome to make use of the LUU Student Advice Centre at any stage as an alternative.)

⁹ If, for example, a pregnant student is already receiving reasonable adjustments relating to disability, the School/Faculty should ask itself what flexibility it would permit for a non-disabled student who is pregnant and ensure that the same flexibility is permitted to the pregnant student. Otherwise, the School/Faculty would be in danger of treating the disabled student less favourably than a non-disabled student would be treated in the same situation. The same approach should also be taken by Examinations Boards or those dealing with academic appeals in cases like these.

The Equality and Inclusion Managers may be contacted by e-mail at equality@leeds.ac.uk or by telephoning 0113 34 37546 or 0113 34 33964.

Members of staff may also wish to consult their own manager/supervisor or one of their local Equality & Inclusion Coordinators as alternative sources of advice on these matters (bearing in mind the need to respect confidentiality if so requested by the student).

Support relating to health and safety issues

Advice on health and safety issues relating to pregnant students may be sought from a School/Faculty Health and Safety Coordinator or Health and Safety Manager and/or University Health and Safety Services. The Annex to this policy provides guidelines on potential risks and a template for a risk assessment.

10. What support is available for a student whose partner is pregnant?

In most cases, full-time and part-time programmes are likely to be flexible enough to enable a student whose partner is pregnant, or whose partner is about to adopt a child, to take occasional breaks – perhaps to attend antenatal appointments with their partner and/or take some time to be with their partner around the time of the birth or adoption.

In the case of research students, some funding bodies may allow a period of time for paternity leave. Students should refer to the terms and conditions relating to their award.

Where circumstances are more complex, a student – whether female or male – whose partner is pregnant or about to adopt may still wish to discuss this with their School/Faculty (normally their personal tutor/research supervisor) – especially if they feel that this may significantly affect their studies. In these circumstances, staff members are encouraged to demonstrate a similar degree of flexibility to that described in Section 6 step 2a above.

In such circumstances a student may wish to seek support from the Student Counselling Centre: www.leeds.ac.uk/uscs

If a student requires legal advice concerning parental status etc. the LUU Advice Centre can direct the student to appropriate sources of such advice:

<http://www.leedsuniversityunion.org.uk/helpandadvice/>

Such advice will also be available from the Leeds Citizen's Advice Bureau:

<http://www.leedscab.org.uk/>

11. What support and facilities are available for a student who has recently become a parent?

Whilst the procedure proposed in section 6 above relates to a student during pregnancy, this also provides a helpful model for considering flexibility for a student (female or male) who has recently become a parent, including through adoption. As above, what constitutes a reasonable degree of flexibility to take account of a student's caring/parental responsibilities

will vary from Faculty to Faculty and from programme to programme¹⁰. The University has developed a separate policy on support for students who are parents or carers which covers this in more detail. <http://www.equality.leeds.ac.uk/university-policies-2/>

There are also sources of practical support available, administered by either the University or LUU, to assist parents with the costs associated with studying at this University. (Links to more information about these funds are provided in section 12 below.)

Bringing children onto campus

Students may be accompanied by children in **general public areas** such as the refectory, or in one-to-one tutorials if the tutor permits. Children brought onto the campus are the responsibility of the adult who brings them and must be supervised at all times. From a Health and Safety perspective, the University environment is not, in general, designed for, nor does it take specific account of, the needs of young children and toddlers; therefore close and continuous supervision by the parent / carer will be required at all times. Under no circumstances should children be brought into areas where there is the possibility of a risk to health and safety (notable examples would include laboratories and workshops) unless specific authorised approval has been given by an authorised member of the relevant School, in relation to an individual proposed entry.

Parents are allowed to bring their children into **the University Library** for a short time providing that they are supervised at all times. The University Library cannot be held responsible for what might happen to an unattended child in University Library buildings. There are silent study areas that are unsuitable for children to use. If a child causes disruption to other University Library users the parent and child may be asked to leave. The libraries may house materials on open access shelves or have available on PCs that some parents would find unsuitable for their children to see.

Parents are able to take children swimming at The Edge, where a specific family swimming session is held on Sundays from 12.30pm – 3.30pm, with a defined shallow end, segregated from deeper water. Children are welcome at all other times that the pool is open for general swimming but parents should note that in there will be a smaller shallow end, without clear division from deeper water. There are also times when swimming is in deep water only. An up to date timetable is available at www.leeds.ac.uk/sport

Students **should not** normally bring their child with them into any **public teaching and research areas** – such as lecture theatres, seminar or teaching rooms, laboratories or shared work spaces – and so they will need to make arrangements for the care of their child whilst they are in these locations. (See Section 12 for details of the University childcare centre, called Bright Beginnings, which provides a service for children between the ages of 3 months and 5 years.)

Breastfeeding facilities on campus

Whilst there are no restrictions on feeding (bottle feeding or breastfeeding) at the University, there are currently no specific facilities available for these purposes or for the preparation of food or expression of milk. Should a student require a private space for these purposes, she

¹⁰ The same services that are referred to in sections 3 and 6 of this document (i.e. Equality Policy Unit for staff members and a range of different support services, such as the LUU Student Advice Centre, for students) are also open to staff and students who are seeking advice about the implications of a student's new parental responsibilities for their studies.

can speak to her School/Faculty (normally her personal tutor/research supervisor) who should endeavour to provide a private, safe area for the student's use. If a parent intends to feed her child regularly in a space provided by the School/Faculty, a further health and safety risk assessment should be considered. If requested, rest facilities will, where possible, be provided which are near to toilets and which include the facility to lie down.

Leeds University Union supports the City of Leeds' initiative to become the first breastfeeding friendly city in Europe and the Advice Centre will make available one of the guidance rooms on request. The Advice Centre is located on the first floor of the Leeds University Union building in the centre of the campus.

The Lifelong Learning Centre in the Marjorie and Arnold Ziff Building welcomes student parents and will make a quiet room available for their use if possible

Bright Beginnings childcare centre may also be able to make suitable facilities available by arrangement (see Section 12 for contact details).

Emergency short term child care

In some circumstances, Bright Beginnings childcare centre may be able to provide emergency support for parents who have need for short term emergency childcare; for example in the event of their regular childcare provider being ill, or for students who need to take examinations and have no other childcare cover (see Section 12 for contact details).

Accommodation

The University has a small number of flats suitable for family accommodation, although there is generally a waiting list for these. For more information, students should contact the Staff and Family Accommodation Co-ordinator in Accommodation Services, who can also provide advice to students about finding non-University owned family accommodation.

Some University accommodation will be unsuitable for children, or may, in some circumstances, be difficult for women in the later stages of pregnancy to access. If a student wishes to discuss such issues, s/he should approach the relevant Warden or Accommodation Services in the first instance. Pregnant students may also consider disclosing their pregnancy to the relevant Warden if they are concerned that they may need support in an emergency situation, such as early labour or miscarriage.

UNIPOL student homes provides housing for students, including those with families:

<http://www.unipol.org.uk/Housing/default.asp>

The LUU Advice Centre is also available to provide housing advice

<http://www.leedsuniversityunion.org.uk/helpandadvice/>

12. Links to sources of further information and support

Here are some frequently asked questions concerning sources of further information or support for students and staff members:

- **Is there anywhere that lists student advice services covering a range of different problems?**

Help@Leeds - <http://help.leeds.ac.uk/> - is a web site devoted to identifying sources of help for students facing a variety of problems.

- **Is there any financial support available from the University to help me to continue with my studies?**

The Access to Learning Fund (ALF) is Government funding to help students access and remain in Higher Education – particularly those who need financial help to meet extra costs which cannot be met from other sources of support.. More information **is available from Access to Learning Fund** – www.leeds.ac.uk/ssc/alf.htm or telephone: 0113 3432007

- **Where can I find out about family accommodation available through the University?**

Accommodation Services – <http://accommodation.leeds.ac.uk/>

- **Where can I find out about other family accommodation in Leeds?**

Unipol specialises in providing houses for students who are not adequately catered for in the private rented sector. An important part of Unipol's housing is reserved specially for students with dependants. **UNIPOL student homes** - <http://www.unipol.org.uk/Housing/default.asp>

- **Who do I need to talk to about the impact on my fees of any temporary absence?**

Accounts Receivable (Fees) - www.leeds.ac.uk/ssc/fees.htm

- **Is there anybody who can provide advice to me as a member of staff who has been approached by a student to help me to determine the best way to support him/her?**

The **Equality Policy Unit** can provide **advice to staff members** on how to provide flexible support for a pregnant student/student parent/student carer – www.equality.leeds.ac.uk

- **Is there anywhere on the University's web site that has information on support and networking for student parents?**

The **Lifelong Learning Centre**, has a web site dedicated to information for student parents - <http://www.llc.leeds.ac.uk/students/students-2/support-for-part-time-and-mature-undergraduates/information-for-student-parents>

- **What support can I expect from the Students' Union?**

Leeds University Union (LUU) has a student advice centre which can provide **advice to students on a whole range of topics** – The service is open 9.30 – 5.00 Monday to Friday. Tel: 0113 380 1290 e-mail advice@luu.leeds.ac.uk <http://www.leedsuniversityunion.org.uk/helpandadvice/> *The following sections of the LUU website may be particularly relevant:*

- *Information about the University's Access to Learning Fund*

- *Information about the LUU Abortion Fund*
- *Information about the LUU New Born Baby Fund*
- *General information about pregnancy*
- *Information about the Student Advice Centre*
- *Information about the Student Parents Society*
- *Information on where to seek legal advice*

- **Where can I seek advice about health and safety during my pregnancy or when I'm breastfeeding?**

The annex to this policy gives guidance on potential hazard during pregnancy and breastfeeding and the need to carry out a risk assessment. Further advice is available from **Health and Safety Services** – <http://www.leeds.ac.uk/safety/>

- **Is there anywhere I can go to discuss my circumstances outside of my School/Faculty?**

The **Student Counselling Centre** is open 8.30 – 5.00 Monday to Friday and offers the opportunity to talk to a BACP accredited Counsellor. The web site also contains various on-line self help resources to help cope with stress etc. – <http://www.leeds.ac.uk/studentcounselling/>

- **Is there anywhere I can discuss my circumstances in confidence outside of the University?**

The **Stillbirth and Neonatal Deaths Society**: <http://www.uk-sands.org/> offers on-line advice and support

- **Where can I go for spiritual guidance?**

The Chaplains at **Universities Chaplaincy in Leeds** are experienced at listening and offering support and guidance to students and staff of all faiths and none – www.leeds.ac.uk/chaplaincy

- **Is there any advice available specifically for research students at the University?**

The staff in **Research Student Administration** have an understanding of the needs of and regulations relating to research students: <http://www.leeds.ac.uk/rsa/>

- **I'm an international student. Where can I go for advice?**

International Student Office - <http://www.internationalstudentsupport.leeds.ac.uk/>

- **Does the University have childcare facilities on site?**

Bright Beginnings, Mount Preston Street, LS2 9JT – <http://www.brightbeginningschildcare.co.uk/> - nursery for children aged 3 months and 5 years – holiday play scheme for children aged between 5 and 11 years – Tel. **0113 343 1818**, E-mail a.foley@luu.leeds.ac.uk

- **Is there any additional financial help available to me as a student parent?**

Home students with dependent children who are in full time higher education may be able to get extra financial help. A Childcare Grant is available to help with childcare costs, and

the Parents' Learning Allowance with learning costs. Other help includes Child Tax Credit and the Access to Learning Fund:

http://www.direct.gov.uk/en/EducationAndLearning/UniversityAndHigherEducation/StudentFinance/Typesoffinance/DG_171503

- **Is there any additional financial support available to me a student with caring responsibilities for an adult dependant?**

A home student in full-time higher education who has an adult who depends on him/her financially may be entitled to extra help through the Adult Dependants' Grant:

http://www.direct.gov.uk/en/EducationAndLearning/UniversityAndHigherEducation/StudentFinance/Typesoffinance/DG_171617

- **Is there any general advice available concerning my rights as a parent in the UK?**

The government has produced a guide to childcare which covers child health and safety, preschool provision, school provision, care during pregnancy, financial support etc. This is available on the web at: <http://www.direct.gov.uk/en/Parents/index.htm>

This document has been produced by the Equality Policy Unit, with thanks to all those from across the University who commented on previous draft versions.

Last updated: February 2015

Health and Safety Risk Assessment Guidance Notes

These guidance notes provide detailed guidance for *assessor/s*¹¹ and the individual student about the specific hazards for pregnant women, how to avoid them and minimise risk.

The notes are designed to assist in the completion of the “student pregnancy risk assessment” and as a general source of information.

The level of risk to which a student is exposed will depend on the requirements and nature of the course. For **many courses and related activities, the risk will be low**; the following are more likely to present greater risks;

- General conditions; “working” alone, “work” at heights, travelling, fatigue
- Physical activity; including lifting, handling and carrying, compressed air environments, vibrations
- The use of chemical agents including paints, pesticides, mercury, lead, carbon monoxide, and cytotoxic drugs.
- Biological agents; exposure to infections disease, laboratory work, animals , healthcare provision

In some cases where significant hazards are present the activity may need to be avoided in totality (Avoidance) by timetabling adjustments / other flexible approaches in accordance with the University’s “*Policy on support for pregnant students and student with very young children*” and articulated within the “written agreement”.

Special considerations are required if the student is scheduled to undertake Fieldwork, Study Abroad or Work Placement.

The Risk Assessment should take into account any medical advice the student has received.

Where existing workplace / activity risk assessments already clearly identify risks to female employees of childbearing age and, in particular, risks to new and expectant mothers (for example, from working conditions, or the use of physical, chemical or biological agents). These can be referred to where relevant rather than fully replicated in the Student Pregnancy Risk Assessment.

¹¹ Assessor/s – who this will be determined at local level by Schools and Faculties with H&SS and or specialised input /support as necessary refer to “*Policy on support for pregnant students and student with very young children*”

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
GENERAL ISSUES	1	Facilities	<p>Resting facilities – Rest is important for new and expectant mothers. Tiredness increases during and after pregnancy. The need for rest is both physical and mental.</p> <p>Hygiene facilities – without easy access to toilets (and associated hygiene facilities), there may be increased risks to health and safety, including significant risks of infection and kidney disease. Because of pressure on the bladder and other changes associated with pregnancy, pregnant women often have to go to the toilet more frequently and more urgently than others. Breastfeeding women may also need to do so because of increased fluid intake to promote breast milk production.</p> <p>Storage facilities – Access to appropriate facilities for breastfeeding mothers to express and safely store breast milk or to enable infants to be breastfed may facilitate breastfeeding and evidence shows that breastfeeding can help protect the health of both mother and infant.</p>	<p>The need for physical rest may require that the woman concerned has access to somewhere where she can sit or lie down comfortably in privacy, and without disturbance, at appropriate intervals.</p> <p>Protective measures include taking appropriate measures to enable expectant and nursing mothers to take more frequent hygiene / toilet breaks.</p> <p>Access to clean drinking water should also be available.</p> <p>Protective measures include:</p> <ul style="list-style-type: none"> • Access to a private room where women can breastfeed or express breast milk; • Use of secure, clean refrigerators for storing expressed milk and facilities for washing, sterilising and storing receptacles;
	2	Mental and physical fatigue	<p>Long hours, early mornings, late nights etc can have a significant effect on the health of new and expectant mothers, and on breastfeeding. Not all women are affected in the same way, and the associated risks vary with the type of activity and individual concerned. This applies especially to mental & physical fatigue that increases during pregnancy and in the postnatal period due to the various physiological and other changes taking place.</p> <p>Increasing tiredness, may affect the health of the</p>	<p>Due regard should be afforded to mental and physical fatigue related risks as part of the health and safety risk assessment with any adjustments /flexibility to timescales, periods of absence etc in accordance with the University's <i>"Policy on support for pregnant students and students with very young children"</i> and articulated within the "written agreement".</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
			<p>pregnant woman and her unborn child, her recovery after childbirth, or her ability to breastfeed, and may increase the risks of stress and stress-related ill health.</p> <p>Changes in blood pressure may occur during & after pregnancy and childbirth and normal patterns of breaks may be inadequate.</p>	
GENERAL ISSUES	3	Extremes of cold or heat.	<p>Prolonged exposure to hot environments should be kept to a minimum, as there is a greater risk of heat stress. Breastfeeding may be impaired by heat dehydration. Extreme cold may be a hazard for pregnant women and their unborn children. The risks are particularly increased if there are sudden changes in temperature.</p>	<p>Extra rest and refreshment breaks should be available alongside unrestricted access to drinking water.</p> <p>New and expectant mothers should note that thirst is not an early indicator of heat stress. They should drink water before they get thirsty, preferably in small and frequent volumes. Warm clothing / PPE would be required for activities in extreme cold (this should have already been identified as part of the existing activity risk assessment.)</p>
	4	Stress	<p>Hormonal, physiological and psychological changes occur and sometimes change rapidly during and after pregnancy, sometimes affecting susceptibility to stress, or to anxiety or depression.</p> <p>Financial, emotional and academic concerns may cause anxiety and stress, due to changes in circumstances brought about by pregnancy.</p> <p>Additional stress may occur if a woman's anxiety about her pregnancy, or about its outcome (e.g. where there is a past history of miscarriage, stillbirth or other</p>	<p>Due regard should be afforded to stress as part of the health and safety risk assessment however it should be remembered that the University's <i>"Policy on support for pregnant students and students with very young children"</i> is designed to support students who are pregnant or have decided to terminate a pregnancy.</p> <p>The risk of stress should be considered within the context of the overall support arrangements and "written agreement" for each student, taking into account particular medical and psychosocial factors</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
			<p>abnormality) is heightened or as a result of peer group or other pressure. This can lead to increased vulnerability to stressors.</p> <p>Stress is associated in some studies with increased incidence of miscarriage and pregnancy loss, and also with impaired ability to breastfeed.</p> <p>Women who have recently suffered loss through stillbirth, miscarriage, adoption at birth or neonatal death will be especially vulnerable to stress, as will women who have experienced serious illness or trauma (including Caesarean section) associated with pregnancy or childbirth. However, in some circumstances, returning to study after such events may help to alleviate stress, but only in those cases where there is a sympathetic and supportive environment.</p> <p>It is known that stress can lead to anxiety and depression. Equally, if someone is already suffering from anxiety or depression, they may be more vulnerable to stressors in their environment. It is important to remember that some women may develop postnatal depression after childbirth, which could make them more vulnerable to stressors.</p>	<p>affecting the individual. This also includes ensuring that the necessary understanding, support and recognition is available when the student returns to study while her privacy is also respected.</p>
GENERAL ISSUES	5	Passive smoking	<p>Cigarette smoke is mutagenic and carcinogenic and is a known risk to pregnancy where the mother smokes. Cigarette smoke can also aggravate preconditions such as asthma. The affects of passive smoking are less clear but are known to affect the heart and lungs, and to pose a risk to infant health.</p>	<p>To reduce the risk to all including new and expectant mothers; Smoking is strictly prohibited:- within all University buildings, at entrances to University buildings, including doorways and covered walkways. In vehicles owned and operated by the University and leased vehicles used during University business. For full details refer to: http://www.hr.leeds.ac.uk/policies/Default.aspx?search=smoking</p>

	Potential Hazards	What is the Risk?	How to avoid/ control the risk
			<p>Consideration should be given to activities outside of the University campus which may expose the student to cigarette smoke e.g. Fieldwork. Alternative arrangements may be necessary to avoid exposure.</p>
6	<p>Use of DSE (Display Screen Equipment i.e. Computers)</p>	<p>Anxiety about radiation emissions from display screen equipment and possible effects on pregnant women has been widespread. However, there is substantial evidence that these concerns are unfounded. The HSE has consulted the National Radiological Protection Board, which has the statutory function of providing information and advice on all radiation matters to Government Departments, and the advice below summarises scientific understanding.</p> <p>The levels of ionising and non ionising electromagnetic radiation which are likely to be generated by display screen equipment are well below those set out in international recommendations for limiting risk to human health created by such emissions and the National Radiological Protection Board does not consider such levels to pose a significant risk to health. No special protective measures are therefore needed.</p> <p>In the latter stages of pregnancy increased abdominal size can affect posture and circulation.</p>	<p>In the light of the scientific evidence, pregnant women do not need to stop work with DSE; however, to avoid problems caused by stress and anxiety, women who are pregnant or planning children and are worried about working with DSE should be given the opportunity to discuss their concerns. Further advice can be provided by Health and Safety Managers / Local H&S Contacts and medical professionals GP's / Leeds Student Medical Practice.</p> <p>To take account of increased abdominal size, it is important to regularly change position / take micro breaks to minimise potential postural problems.</p>
7	<p>"Working" alone</p>	<p>Pregnant women are more likely to need urgent medical attention.</p>	<p>Depending on their medical condition you may need to review and revise women's access to communications with others and levels of (remote) supervision involved, to ensure that help and support is available when required, and that emergency procedures (if needed) take into account the needs of new and expectant mothers.</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
GENERAL ISSUES	8	“Work” at height	It is hazardous for pregnant women to “work” at heights for example ladders, platforms etc	Avoid all “work” at height.
	9	Travelling	Travelling can be problematic for pregnant women, involving risks including fatigue, vibrations, stress, static posture, discomfort and accidents. These risks can have a significant effect on the health of new and expectant mothers.	The different activities the student is involved in will have an effect on the level of fatigue therefore please refer to specific entries within this table to assess how to reduce the risk.
	10	Violence	<p>If a woman is exposed to the risk of violence during pregnancy, when she has recently given birth or while she is breastfeeding this may be harmful. It can lead to detachment of the placenta, miscarriage, premature delivery and underweight birth, and it may affect the ability to breastfeed</p> <p>The risk may affect students in direct contact with customers and clients e.g. during placements, fieldwork and research situations</p>	<p>Where a risk of exposure to violence is identified measures to reduce the risk include:</p> <ul style="list-style-type: none"> • Providing adequate training and information • Changing the design of the task – e.g. avoiding lone working, and maintaining contact with students <p>If the risk of violence cannot be significantly reduced then adjustments / flexibility may be necessary in accordance with the University’s <i>“Policy on support for pregnant students and students with very young children”</i> and articulated within the “written agreement”.</p>
	11	Pre-existing medical conditions	This guidance document assumes a healthy individual with no pre-existing medical conditions or disability. Risk may be increased in the presence of disease or disability.	Further advice may be required where students have pre-existing conditions or disabilities e.g. GP / Leeds Student Medical Practice, Disabled Students’ Assessment & Support, student support
	12	Equipment and personal protective equipment (PPE)	Equipment and personal protective equipment is not generally designed for use by pregnant women. Pregnancy (and breastfeeding) involves physiological changes which may make some personal protective equipment not only uncomfortable but also unsafe for use in some cases – for example, where equipment does not fit properly or comfortably, or where the operational mobility, dexterity or co-ordination of the women concerned is temporarily impeded by her pregnancy or recent childbirth.	<p>Where activities & existing risk assessments (lab work etc) require the use of PPE to control risks e.g. Goggles, Respiratory Protection etc then it should be ensured that the equipment provides the pregnant student with adequate protection from the outset and as the pregnancy develops.</p> <p>If the risk cannot be significantly reduced then adjustments / flexibility adjustments /flexibility to timescales, periods of absence etc in accordance</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
				with the University's <i>"Policy on support for pregnant students and students with very young children"</i> and articulated within the "written agreement".

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
	13	Movements and posture	<p>The nature and extent of any risks of injury or ill health resulting from movements or posture during and after pregnancy will depend on a number of factors, including;</p> <ul style="list-style-type: none"> • The nature, duration and frequency of tasks/movements; • Pace, patterns and intensity of activity and rest breaks; • Ergonomic factors and the general environment; and • The suitability and adaptability of any equipment involved. <p>Hormonal changes in women who are pregnant or have recently given birth can affect the ligaments, increasing susceptibility to injury.</p> <p>The resulting injury may not be apparent until some time after the birth. Attention should also be paid to women who may handle loads during the three months following a return to work after childbirth.</p> <p>Postural problems can arise at different stages of pregnancy, and on return to work, depending on the individual and the environment. These problems may increase as the pregnancy progresses, especially if there are awkward movements or long periods of standing or sitting in one position</p> <p>Standing: Continuous standing during the working day may lead to dizziness, faintness, and fatigue. It can also contribute to an increased risk of premature childbirth and miscarriage.</p> <p>Sitting: Pregnancy-specific changes pose a relatively high risk of thrombosis or embolism, particularly with constant sitting. In the later stages of pregnancy, women are more likely to experience backache, which can be intensified by remaining in a specific position for a long period of time.</p> <p>Confined space: It may be hazardous working in confined spaces, or where adjustments cannot be made</p>	<p>Some adaptations may be required where practical e.g. to equipment and lifting gear, storage arrangements.</p> <p>Pregnant women should avoid long periods spent handling loads, or standing or sitting without regular exercise or movement to maintain healthy circulation. There should be the opportunity to alternate between standing and sitting. If this is not possible, additional breaks may be required.</p> <p>A pregnant woman may need more space, or adaptations may be necessary as pregnancy changes both her size and the ways in which she can move, stand or sit still for a long time in comfort and safety.</p>

	Potential Hazards	What is the Risk?	How to avoid/ control the risk	
PHYSICAL	14	Manual handling	<p>Pregnant women are especially at risk from manual handling injury, e.g. hormonal changes can affect the ligaments, increasing susceptibility to injury and postural problems may increase as the pregnancy progresses. There can also be risks for those who have recently given birth, e.g. after a caesarean section there is likely to be a temporary limitation on lifting and handling capability.</p> <p>Breastfeeding mothers may experience discomfort due to increased breast size and sensitivity.</p>	<p>Any changes necessary will depend on the risks identified in the assessment and the individual circumstances. For example, it may be possible to alter the nature of the task to reduce risks from manual handling for everyone including new or expectant mothers. Or you may have to address the specific needs of the student and reduce the amount of physical work she does, or provide aids for her to reduce the risks she faces.</p>
	15	Shocks, vibration or movement	<p>Regular exposure to shocks, low frequency vibration, e.g. driving or riding in off road vehicles, or excessive movement may increase the risk of a miscarriage. Long term exposure to whole body vibration does not cause abnormalities to the unborn child. However, there may be an increased risk of prematurity or low birth weight.</p> <p>Breastfeeding women are at no greater risk than other women.</p>	<p>Pregnant students and those who have recently given birth are advised to avoid work likely to involve uncomfortable whole body vibration, especially at low frequency, or where the abdomen is exposed to shocks or jolts.</p>
	16	Noise	<p>There appears to be no specific risk to new or expectant mothers or to the unborn child, but prolonged exposure to loud noise may lead to increased blood pressure and tiredness.</p> <p>No particular problems for women who have recently given birth or who are breastfeeding.</p>	<p>The requirements and compliance with the Noise At Work Regulations 2005 should be sufficient to meet the needs of new or expectant mothers.</p>
	17	Ionising radiation	<p>Significant exposure to ionising radiation can be harmful to the unborn child. The employer is required to ensure that the conditions of exposure during the remainder of the pregnancy are such that the dose to the unborn child is unlikely to exceed a value specified in the Ionising Radiations Regulations 1999.</p> <p>If the work involves radioactive materials there may be a risk to the unborn child if significant amounts are</p>	<p>Procedures at the University of Leeds are designed to keep the exposure of all individuals including the pregnant woman as low as reasonably practicable and certainly below the statutory dose limit for pregnant women. Please refer to the following links for further information and advice.</p> <p>http://www.leeds.ac.uk/rps/</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
			<p>ingested or inhaled by the expectant mother or permeate through her skin and are transferred via the placenta to the unborn child. In addition, radiation from radioactive substances taken into the mother's body irradiates the unborn child through the wall of the womb.</p>	<p>http://www.leeds.ac.uk/rps/ionising/hos.html#</p>
PHYSICAL	18	Non – ionising electromagnetic radiation (NIEMR)	<p>Optical Radiation - Pregnant or breastfeeding mothers are at no greater risk than other workers. Electromagnetic fields and waves (e.g. radio frequency radiation) - Exposure to electric and magnetic fields within current recommendations is not known to cause harm to the unborn child or the mother, however, extreme over exposure to radio frequency radiation could cause harm by raising body temperature. Lasers /UV / Magnets /NMR / EMF / RF / Microwaves</p>	<p>Procedures at the University of Leeds are designed to keep the exposure of all individuals including the pregnant woman as low as reasonably practicable and certainly below the statutory exposure limits for pregnant women. Exposure to electric and magnetic fields should not exceed their restrictions on human exposure published by the National Radiological Protection Board. http://www.leeds.ac.uk/rps/</p>
	19	Diving (work in hyperbaric atmospheres)	<p>Compressed Air: Risk of decompression illness (DCI) commonly known as the bends. Little scientific information whether pregnant women are at more risk but potentially the unborn child could be seriously harmed. For those who have recently given birth there is a small increase in the risk of DCI. No physiological reason why a breastfeeding mother should not work in compressed air. Diving: Pregnant women are advised not to dive at all during pregnancy due to the possible effects of exposure to a hyperbaric environment on the unborn child. There is no evidence to suggest that breastfeeding and diving are incompatible.</p>	<p>Pregnant women should not work in compressed air. They should notify the University and a health professional e.g.GP / Consultant) as early as possible if they are pregnant; and the obstetrician at their routine antenatal appointments.</p> <p>Pregnancy is viewed as a medical reason not to dive. Diving regulations include the requirement to disclose pregnancy to the dive supervisor and /or refrain from diving.</p>
BIOLOGICAL	20	Any biological agent of hazard groups 2, 3 and 4. (Categorisation of	<p>Many biological agents within the three risk groups can affect the unborn child if the mother is infected during pregnancy. These may be transmitted through the placenta while the child is in the womb, or during or after</p>	<p>The University has set standards for biological safety which requires risk assessments for all work with biological hazards to be completed before the work commences. For deliberate work the</p>

	Potential Hazards	What is the Risk?	How to avoid/ control the risk
	biological agents according to hazard and categories of containment - Advisory Committee on Dangerous Pathogens).	birth, e.g. breastfeeding or through close physical contact between mother and child. Examples of agents where the child might be infected in one of these ways are hepatitis B, HIV, herpes, TB, syphilis, chickenpox and typhoid. For most individuals, the risk of infection is no higher at work than from living in the community, but in certain activities, exposure to infections is more likely, e.g. laboratory workers, health care, people looking after animals and dealing with animal products	assessments must also approved by Committee. See: http://www.leeds.ac.uk/safety/biological_safety/bio_safety_intro_page.htm Control measures may include physical containment, hygiene measures, and using vaccines if exposure justifies this. If there is a known risk to a highly infectious agent, then it will be appropriate for the pregnant woman to avoid exposure altogether.
21	Biological agents known to cause abortion of the unborn child, or physical and neurological damage. These agents are included in hazard groups 2, 3 and 4.	Rubella (German Measles) and toxoplasma can harm the unborn child, as can some other biological agents, e.g. cytomegalovirus (an infection common in the community) and Chlamydia in sheep. The risks of infection are generally no higher for workers than others, except in those exposed certain activities, e.g. laboratory workers, health care, people looking after animals and dealing with animal products see above).	See above: http://www.hse.gov.uk/pubns/priced/infection-mothers.pdf http://www.hse.gov.uk/biosafety/infection.htm The pregnant woman should avoid exposure to these biological agents unless she is protected by her state of immunity.
CHEMICAL	21 Substances labelled with a hazard statement (previously risk phrases) <i>The Control of Substances Hazardous Health Regulations. 2002 (COSHH)</i>	There are about 200 substances labelled with these hazard statements: (previously known as risk phrases) H351 - Suspected of causing cancer H350 - May cause cancer H340 - May cause genetic defects H350i - May cause cancer H360 - May damage fertility or the unborn child H361 - May damage fertility or the unborn child H362 - May cause harm to breast fed children H341 - Suspected of causing genetic defects The actual risk to health from these substances can only be determined following a risk assessment of a particular substance at the place of work. Although	With the exception of lead (see below) and asbestos all these substances fall within the scope of The Control of Substances Hazardous Health Regulations. 2002 (COSHH) and reference should be made to the University's Protocol for Hazardous Substances. http://www.leeds.ac.uk/safety/hazardous_substances/index.htm For work with hazardous substances, including chemicals which may cause heritable genetic damage, employers are required to assess the health risks to workers arising from such work, and

	Potential Hazards	What is the Risk?	How to avoid/ control the risk
		<p>the substance listed may have the potential to endanger health or safety there may be no risk in practice, for example if exposure is at a level that is known to be safe.</p>	<p>where appropriate prevent or control risks. In carrying out assessments employers should have regard for women of childbearing age, who are pregnant, or who have recently given birth.</p>
22	<p>Mercury and mercury derivatives.</p> <p><i>The Control of Substances Hazardous Health Regulations. 2002 (COSHH)</i></p>	<p>Organic mercury compounds could have adverse effects on the unborn child. Animal studies and human observations have demonstrated that exposure to these forms of mercury during pregnancy can slow the growth of the unborn baby, disrupt the nervous system, and cause the mother to be poisoned.</p> <p>There is no indication that mothers are more likely to suffer greater adverse effects from mercury and its compounds after the birth of the baby.</p> <p>Organic mercury can be transferred from blood to milk, causing a potential risk to the newborn baby if being breastfed.</p>	<p>Preventing exposure must be the first priority. Where it is not possible to eliminate exposure, you can control, it by a combination of technical measures, along with good work planning and housekeeping, and the use of personal protective equipment (PPE). PPE should only be used for control purposes if all other methods have failed. It can also be used as secondary protection in combination with other methods.</p>
23	<p>Antimitotic (cytotoxic) drugs</p> <p><i>The Control of Substances Hazardous Health Regulations. 2002 (COSHH)</i></p>	<p>These drugs are used in cancer chemotherapy and have the ability to arrest the multiplication of living cells. They achieve this by interfering with essential functions of the cell, especially those involving cell division and can, in the long term cause damage to the sperm and egg cells. Some can cause cancer. Occupational exposure is by inhalation or absorption through the skin.</p> <p>These substances are exempt from the normal labelling requirements because they are drugs.</p> <p>Further guidance on this subject is available</p>	<p>There is no known threshold limit and exposure must be reduced to a low a level as is reasonably practicable. Assessment of the risk should look particularly at preparation of the drug for use (nurses, pharmacists), administration of the drug, and the disposal of waste (chemical and human). All females of childbearing age should be fully informed of the reproductive hazard.</p> <p>Those who are trying to conceive a child or are pregnant or breastfeeding should be fully informed</p>

	Potential Hazards	What is the Risk?	How to avoid/ control the risk	
		http://www.hse.gov.uk/pubns/misc615.pdf	of the reproductive hazard and should avoid exposure to such materials.	
CHEMICAL	24	<p>Chemical agents of known and dangerous percutaneous absorption (i.e. that may be absorbed through the skin). This includes some pesticides</p> <p><i>The Control of Substances Hazardous Health Regulations. 2002 (COSHH) And The Control of Pesticides Regulations 1986 (COPR) (as amended 1997)</i></p>	<p>The HSE guidance booklet EH40 Occupational Exposure Limits, updated annually, contains tables of inhalation exposure limits for certain hazardous substances. Some of these substances can also penetrate intact skin and become absorbed into the body, causing ill health effects.</p> <p>These substances are marked “Sk” in the tables. As with all substances, the risks will depend on the way that the substance is being used as well as on its hazardous properties. Absorption through the skin can result from localised contamination, e.g. from a splash on the skin or clothing, or in certain cases, from exposure to high atmospheric concentrations of vapour.</p>	<p>Take special precautions to prevent skin contact. Where possible, use engineering methods to control exposure in preference to personal protective equipment, such as gloves, overalls or face shields, e.g. perhaps you could enclose the process or redesign it so that less spray is produced. Where you must use personal protective equipment (either alone or in combination with engineering methods), ensure that it is suitable. The Control of Pesticides Regulations 1986 (COPR) (as amended 1997) sets out general restrictions on the way that pesticides can be used. In addition all pesticides must be approved before they can be advertised, sold, supplied, used or stored</p>
	25	<p>Carbon monoxide.</p> <p><i>The Control of Substances Hazardous Health Regulations. 2002 (COSHH)</i></p>	<p>Pregnant women may have heightened susceptibility to the effects of exposure to CO.</p> <p>Carbon monoxide readily crosses the placenta and can result in the unborn child being starved of oxygen. Data on the effects of exposure to carbon monoxide on pregnant women are limited but there is evidence of adverse effects on the unborn child. Both level and duration of maternal exposure are important factors in the effect on the unborn child.</p> <p>There is no indication that breastfed babies suffer</p>	<p>The best preventative measure is to eliminate the hazard by changing process or equipment. Where this is not possible consider technical measures, in combination with good working practices and personal protective equipment.</p> <p>Avoid chronic exposure of female workers. Even occasional exposure to CO could potentially be harmful.</p>

		Potential Hazards	What is the Risk?	How to avoid/ control the risk
			adverse effects from their mothers' exposure to carbon monoxide, or that the mother is significantly more sensitive to carbon monoxide after giving birth.	
	26	<p>Lead and lead derivatives, in so far as these agents are capable of being absorbed by the human organism.</p> <p><i>Control of Lead at Work Regulations 2002</i></p>	<p>There are strong indications that exposure to lead, either before or after birth via the mother or during early childhood, can impair the development of the child's nervous system.</p> <p>The effects on breastfed babies of their mothers' lead exposure have not been studied. However, lead can enter breast milk. Since it is thought that the nervous system of young children is particularly sensitive to the toxic effects of lead, the exposure of breastfeeding mothers to lead should be viewed with concern.</p>	<p>The Approved Code of Practice associated with the Lead Regulations Control of Lead At Work sets out the current exposure limits for lead and the maximum permissible blood lead levels for workers who are exposed to lead to such a degree that they are subject to medical surveillance. It gives a blood lead level for men and lower level for women of reproductive capacity. This lower level is set to help ensure that women who may become pregnant have low blood lead levels. This is to help protect the unborn child from injury in the weeks before a pregnancy is confirmed. Once the pregnancy is confirmed the woman should cease any work which exposes them significantly to lead.</p>

Risk Assessment Template

Health and safety considerations that arise during pregnancy, breastfeeding or giving birth within previous 6 months, and the risks to which students could be exposed to require assessment. Students should be encouraged to notify the university as early as possible so that this assessment can be conducted as evidence suggests that the first 13 weeks of pregnancy is a critical time for the unborn child.

“The School and Faculties must ensure that as soon as a student discloses that she is pregnant a risk assessment is undertaken to ensure that there are no elements of the programme of study that present a risk to the health and safety of the student or the unborn child.”¹² This template and associated guidance note provides a useful starting point for the risk assessment. Refer to the Policy Section 12 for additional sources of advice. The risk assessment should be regularly monitored and reviewed taking into account possible risks that may occur at different stages of the pregnancy.

The level of risk to which a student is exposed will depend on the requirements and nature of the course. For **many courses and related activities, the risk will be low**; the following are more likely to present greater risks;

- General conditions; “working” alone, “work” at heights, travelling, fatigue
- Physical activity; including lifting, handling and carrying, compressed air environments, vibrations
- The use of chemical agents including paints, pesticides, mercury, lead, carbon monoxide, and cytotoxic drugs.
- Biological agents; exposure to infections disease, laboratory work, animals , healthcare provision

In some cases where significant hazards are present the activity may need to be avoided in totality (Avoidance) by timetabling adjustments / other flexible approaches in accordance with the University’s *“Policy on support for pregnant students and student with very young children”*

Special considerations are required if the student is scheduled to undertake Fieldwork, Study Abroad or Work Placement.

The Risk Assessment should take into account any medical advice the student has received.

Existing workplace / activity risk assessments may already identify any risks and suitable control measures to protect females of childbearing age and, in particular, risks to new and expectant mothers but this should not be assumed as being the case.

It is recognised that students may wish the information to be treated in confidence and this will be respected, except where it is judged necessary to take expert advice.

Postgraduate students who become employees of the University should follow the existing staff Human Resources Policy on ‘Health and Safety Risk Assessment for New or Expectant Mothers’. <http://www.hr.leeds.ac.uk/policies/Default.aspx?PGId=9>

¹² Extract from the University’s *“Policy on support for pregnant students and student with very young children”*

Student Pregnancy Risk Assessment Form – STRICTLY CONFIDENTIAL

Name of student:.....

Contact details:

Student Number/ Identifier

Faculty/School:.....

Course Title:.....

Student Type:..... **Year of study:**.....

Personal Tutor/ Academic Supervisor.....

Student Signature..... **Date:**.....

Assessor/s¹³ name and signature (if different from above)

Date:

Expected date of confinement:

Date of planned review/ reviews :.....(*as required*)

¹³ Assessor/s – who this will be will be determined at local level by Schools and Faculties with H&SS and or specialised input /support as necessary refer to “*Policy on support for pregnant students and student with very young children*”

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	Potential Hazards	Risk Identified Yes / No	Identify the risk	How will risk be avoided / controlled	Action Taken Y / N
GENERAL ISSUES	1	Facilities:			
		Rest			
		Hygiene			
		Storage			
	2	Mental and physical fatigue			
	3	Extremes of cold or heat			
	4	Stress			
	5	Passive smoking			
	6	Use of display screen equipment (DSE)			
	7	“Working” alone			
	8	“Work” at heights			
	9	Travelling			
10	Violence				
11	Pre-existing medical conditions				
12	Equipment and personal protective equipment				
PHYSICAL	13	Movements and posture			
	14	Manual handling			
	15	Shocks and vibration or movement			
	16	Noise			
	17	Ionising radiation			

	Potential Hazards		Risk Identified Yes / No	Identify the risk	How will risk be avoided / controlled	Action Taken Y / N
	18	Non-ionising electromagnetic radiation				
	19	Hyperbaric atmospheres / Compressed Air / Diving				
BIOLOGICAL	20	Biological agents				
	21	Infectious Diseases				
CHEMICAL *	22	Substances labelled with a risk phrase				
	23	Mercury and mercury derivatives				
	24	Antimitotic (cytotoxic) drugs				
	25	Chemical agents				
	26	Carbon monoxide				
	27	Lead and lead derivatives				

 Potentially higher risks in these areas - Refer to supporting guidance note, Section 12 for additional sources of advice and or seek specialised advice.

Consider the following in relation to the aspects of pregnancy that may impact upon the student's activities

Aspects of pregnancy	Factors in studying	Aspects of pregnancy	Factors in studying
'Morning' sickness /	Early lectures / Exposure to nauseating	Frequent visits to	Difficulty in leaving lectures / practical's etc

Headaches	smells	toilet	
Backache	Standing / manual handling / posture	Increasing size	Use of protective clothing / Work in confined areas / Manual Handling
Varicose veins	Standing / sitting	Tiredness	Evening Early morning activities
Haemorrhoids	Working in hot conditions	Balance	Floor surfaces – slips and trips
Stress	Increased levels of stress / anxiety		

Additional Comments

Summary of measures taken to reduce any identified risks

Further actions – reviews

This template can be supported by additional detailed information – as appropriate

This document has been produced by the Equality Policy Unit with thanks to all those from across the University who commented on previous draft versions.

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