



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



National Ambulance Service (NAS)

Workforce Support Policy

Protecting Pregnancy at Work

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1.0 POLICY

1.1 Pregnancy is a part of normal everyday life. It is not an illness. Many women work during pregnancy and many return to work while they are breast-feeding. Because there are some hazards in the workplace, which may affect either the health of the woman or her developing child, the “Pregnancy Regulations” provide specific protection during this period. As the earliest stages of pregnancy are the most critical ones for the developing child it is in the employee’s interest to let her employer know she is pregnant as soon as possible.

2.0 PURPOSE

- 2.1 To provide protection to pregnant HSE employees within the National Ambulance Service.
- 2.2 To ensure the HSE complies with current legislation and corporate governance.

3.0 SCOPE

3.1 Anybody under a contract of employment is entitled to protection under the Maternity Protection Act and its amendments. This includes apprentices, employees on probation and employment agency workers.

4.0 LEGISLATION/OTHER RELATED POLICIES

- A. National Ambulance Service Parent Safety Statement
- B. Maternity Protection Act, 1994 & 2004
- C. CERS - Guidelines on Maternity Protection
- D. CERS - Guidelines on the Salient Provisions of the Maternity Protection (Amendment) Act 2004 and Amendments to Adoptive Leave Act 1995
- E. Safety, Health and Welfare at Work Act, 2005
- F. Safety, Health and Welfare at Work (General Application) Regulations, 2007
- G. Social Welfare Services - Health & Safety Leave
- H. Social Welfare Services - Medical Review & Assessment
- I. The European Communities (Social Welfare) Regulations, 1994
- J. Protection of Workers (Noise) Regulations 2005

5.0 GLOSSARY OF TERMS AND DEFINITIONS

5.1 Pregnant Employee (Pregnant, Breastfeeding or Postnatal)

5.1.1 Pregnant employee is an employee who has given the HSE National Ambulance Service a medical certificate (or similar) stating she is pregnant.

5.1.2 Employee who is breastfeeding” means an employee who, having given birth not more than 26 weeks previously, is breastfeeding

5.1.3 Post natal employee means an employee who gave birth not more than 14 weeks preceding a material date

5.2 An employee who has recently given birth

5.2.1 This means an employee during the 14 weeks immediately after giving birth (even if this was a miscarriage or stillbirth).

5.3 Maternity Leave

5.3.1 Entitles a pregnant employee who commences maternity leave at any time on or after 1st March 2007 to 26 consecutive weeks’ maternity leave.

5.4 Notification

5.4.1 In order to ensure this leave, an employee must inform the HSE National Ambulance Service in writing, enclosing a medical certificate, indicating the week during which it is expected the baby will be born. This notification must be given to the HSE National Ambulance Service at least four weeks before the beginning of maternity leave, which includes the mandatory period of two weeks before the expected confinement. Essentially, this notification in writing should be given at a minimum of six weeks before the expected date of confinement.

5.5 Ante-Natal Classes

5.5.1 Under the 2004 Act, there is a now a provision for a pregnant employee to time off work without loss of pay for the purposes of attending one set of antenatal classes, other than the last 3 classes. This right to attend only one set of antenatal classes covers all pregnancies while in employment.

- 5.5.2 It does not mean that employees have the right to paid time off work to attend antenatal classes each time they or their partner are pregnant in employment. Instead, the entitlement covers one set of classes over all the employee's pregnancies. If for any reason the employee is unable to attend some classes due to reasons beyond their control (i.e., premature birth, illness, miscarriage, stillbirth) then the employee can carry over their entitlement to paid time off work to attend any untaken classes to subsequent pregnancies (except the last three).
- 5.5.3 The Act also provides expectant fathers with a once off entitlement to take paid time off to attend the last two antenatal classes. The regulations provide that the entitlement is subject to the employee notifying the HSE National Ambulance Service in writing of the dates and times of these classes, as soon as practicable and in any case not less than two weeks before the first class. If the HSE National Ambulance Service wishes the employee may be required to provide the appropriate documentation outlining the dates and times of classes.
- 5.5.4 The regulations go on to provide that where an employee fails to comply with the notification requirements outlined above, and this failure is not due to her neglect or default, then she will be deemed to have complied with the requirements where she furnishes the HSE National Ambulance Service with evidence (in writing) of her attendance at the classes. The employee is also required to give an indication (in writing) of the circumstances that gave rise to the failure to adhere to the notification requirements.
- 5.6 Maternity leave for women employed under fixed term contracts
- 5.6.1 While all employed women are entitled to maternity leave, sometimes they may not be entitled to the full 26 weeks' leave. Women employed on fixed term contracts are a case in point. If their contract ends while they are still on maternity leave, the leave ends on the same day. For example, an employee is contracted for a years' service. She goes on maternity leave eight weeks before her contract ends. In this case, her maternity leave ends after eight weeks. However, the State usually continues its payments for the full period of maternity leave subject to entitlement.

5.7 Late Births

5.7.1 If an employee has less than four weeks' maternity leave left when her baby is born, then her maternity leave may be extended so that she still has four weeks' maternity leave after her confinement. The maximum extension is of twelve weeks. This means that statutory maternity leave can never exceed 34 weeks. For example, an employee opts to take 18 weeks' maternity leave before her expected confinement. However, the baby is two weeks' overdue. This means that she would then only have two weeks' maternity leave after the confinement. In this situation, the employee can have her maternity leave extended by up to twelve weeks so that she has four weeks' leave after the birth of the child. In such circumstances, an employee must notify the HSE National Ambulance Service in writing of such an extension as soon possible, stating the duration of the extension. This additional maternity leave is unpaid.

5.8 Time Off or Reduction of Working Hours for Breastfeeding

5.8.1 Breastfeeding mothers are entitled to either paid time off for the purposes of breastfeeding or a reduction in working hours (on full pay) to facilitate breastfeeding. Breastfeeding is defined by the Act as "breastfeeding a child or expressing breast milk and feeding it to a child immediately or storing it for the purpose of feeding it to the child at a later time". Where the HSE National Ambulance Service provides facilities for breastfeeding in the workplace, then an employee will be entitled to breast feeding breaks. Where the HSE National Ambulance Service does not provide such facilities, then the employee will be entitled to have her hours reduced to facilitate breastfeeding other than in the workplace.

5.8.2 The HSE National Ambulance Service shall not be required to provide facilities for breastfeeding in the workplace if the provision of such facilities would give rise to a cost other than a nominal cost to the HSE National Ambulance Service. The legislation specifies that breastfeeding breaks, or a reduction of hours for a breastfeeding mother, must be provided for a period not exceeding 26 weeks from the date of confinement (i.e. six months).

5.8.3 The regulations require that a breastfeeding employee will be entitled to take a one-hour break from her work each day as a breastfeeding break. The one-hour break may be taken in the form of one of the following:

- A. One break of 60 minutes
- B. Two breaks of 30 minutes each
- C. Three breaks of 20 minutes each
- D. In such other manner as to number and duration of breaks as may be agreed by her and HSE National Ambulance Service

5.8.4 Where breastfeeding facilities are not provided by the HSE National Ambulance Service, then a reduction of hours must be allowed for the breastfeeding employee. Under the regulations, an employee may apply to have her hours of work reduced by one hour per day. This may comprise of one period of 60 minutes, two periods of 30 minutes or three periods of 20 minutes or such other periods as may be agreed by her and the HSE National Ambulance Service.

5.8.5 A part-time employee will receive a pro-rata entitlement to time off, or a reduction in working hours.

5.8.6 A breastfeeding employee who intends to exercise her right to breastfeeding breaks or to reduce working hours for the purposes of breastfeeding must indicate her intention to do so as soon as possible and in any case not later than the date on which she indicates her intention to return to work following maternity leave (normally 4 weeks). The employee may be required to provide the birth certificate of the child concerned or another document establishing the child's date of birth

5.9 Postponement of Maternity Leave or additional Maternity Leave in the event of hospitalisation of Child

5.9.1 Under the Act, an employee may, if the child in connection with whose birth she is on leave is hospitalised, must apply to the HSE National Ambulance Service to postpone:

- A. part of the maternity leave
- B. part of the maternity leave and the additional maternity leave or
- C. The additional maternity leave or part of it

5.9.2 To qualify for this postponement, the employee must already have availed of 14 weeks of maternity leave and 4 of these must have been after the birth of the child.

5.9.3 The decision to postpone the maternity leave or additional maternity leave is subject to the agreement of the HSE National Ambulance Service. If the HSE National Ambulance Service does agree to postpone the leave, then the employee concerned must return to work on the date agreed between both parties.

- 5.9.4 The remaining leave is postponed and the employee will be entitled to take “resumed leave” not later than seven days after the discharge of the child from hospital. The remaining leave must be taken in one block.
- 5.9.5 The maximum period of postponement of leave will be 6 months from the return to work date. The HSE National Ambulance Service requires an employee to provide a letter from the hospital in which the child is hospitalised, confirming the hospitalisation. The HSE National Ambulance Service also requires a letter, or other appropriate documentation, from the hospital or the child’s GP confirming that the child has been discharged from the hospital in order to allow the employee to commence their postponed leave.
- 5.9.6 If an employee who postpones her maternity leave becomes ill after returning to work and before taking “resumed leave”, she may be considered to have started her resumed leave on the first day of absence because of illness. Alternatively, she may choose to forfeit her right to resumed leave and have her leave treated in the normal manner under the sick pay scheme.

5.10 Termination of additional Maternity Leave in event of sickness of Mother (not pregnancy related)

- 5.10.1 A mother in the last four weeks of her maternity leave who has notified the HSE National Ambulance Service of her intention to take additional maternity leave or is already on additional maternity leave may, if she becomes sick request the HSE National Ambulance Service to terminate the additional maternity leave and to take sick leave instead. If the HSE National Ambulance Service agrees the employee may be entitled to avail of the sick leave scheme. However, the employee will not be entitled to resume their additional maternity leave after this period of sick leave.
- 5.10.2 The Act provides that where additional maternity leave is terminated for sick leave then:
- A. the absence from work of the employee due to sickness following such termination shall be treated in the same manner as any absence from work of the employee due to sickness and
 - B. The HSE National Ambulance Service receiving a request will notify the employee concerned in writing of their decision in relation to the request as soon as reasonably practicable following receipt of the request.

5.11 Additional Leave

- 5.11.1 At the end of Maternity Leave a staff member may, on early application, be allowed up to 8 weeks' special leave without pay (and/or annual leave) to which she is entitled at the time. At least 4 weeks notice of a staff member's intention to take additional leave must be given. Staff are entitled to compensation for Public Holidays falling within this 8-week special leave period.

5.12 Health & Safety Leave

- 5.12.1 Health and Safety Benefit is a weekly payment for women who are granted Health and Safety Leave under the Maternity Protection Act, 1994.
- 5.12.2 Health and Safety Leave is granted to an employee if the risk to her health or safety during her pregnancy or whilst breastfeeding cannot be removed or where re-assignment to alternative 'risk-free' duties is not reasonably, feasibly or practically available.

5.13 Suitable Alternative Work

- 5.13.1 The primary focus of any re-assignment must be to protect the pregnancy
- 5.13.2 The alternative job must be an actual vacancy within the HSE rather than just the NAS
- 5.13.3 No jobs should be created where one did not exist before, e.g. assigning staff to "made up" roles
- 5.13.4 No additional costs should be incurred by the HSE
- 5.13.5 The alternative role if available must also be risk assessed
- 5.13.6 The suitability of any alternative role may be referenced against previous or current work experience or qualifications
- 5.13.7 The employee should continue on the NAS payroll and continue to receive their basic salary relevant to their current grade
- 5.13.8 No claims for additional pay associated with an alternative role can be facilitated.
- 5.13.9 Shift and premia payments do not arise unless the roster associated with the alternative role meets the criteria for such payments
- 5.13.10 The post cannot be a promotional post that would otherwise be filled through competition

6.0 ROLES AND RESPONSIBILITIES

6.1 On receiving notification that an employee is pregnant, management must assess the specific risks to the employee and take action to ensure that she is not exposed to any risk, to the extent that it could damage either her health or that of her developing child.

6.2 Assess the risk (Regulation 149)

6.2.1 This means determining:

- A. To what risks the pregnant woman may be exposed
- B. How often the exposure occurs, for how long and to what extent

6.2.2 All initial risk assessments are carried out by the NAS and the employee referred to OHS for follow up Advice/Recommendations

6.3 Act to ensure there is no damage to health as far as is reasonably practicable

6.3.1 This means a risk of personal injury, which for this purpose means any disease or damage to a person's physical or mental condition or any possible effect on the pregnancy, the unborn infant, or breastfeeding.

6.3.2 If the assessment reveals there is a risk, then management must inform the woman about the risk and what will be done to ensure neither she nor the developing child is injured.

6.3.3 Management must then assess if there are any practical ways the risk can be avoided by:

Step 1 - Adjust the working conditions and/or hours of work
(where it is practical, feasible and reasonable to do so)

(If this does not remove the risk)

Step 2 - Provide suitable alternative work (where it is practical, feasible and reasonable to do so)

If a pregnant employee (here specifically meaning during pregnancy and the 14 weeks immediately following delivery) is regularly involved in night work for a period of at least 3 hours between 23.00 hours and 06.00 hours, or for 25% of their monthly working time, and has a medical certificate stating that this will damage her health, she should also be considered for alternative work.

(If this is not possible)

Step 3 - Provide Health and Safety Leave

Under Section 18 of the Maternity Protection Act 1994. It should be noted that these steps apply where the employer, having undertaken the risk assessment, identifies occupational risks, which arise for normal pregnancies.

7.0 HAZARDS, WHICH AFFECT PREGNANCY

7.1 General Hazards

- A. Physical shocks - including direct blows to the abdomen
- B. Vibration - of whole body
- C. Handling a load
- D. Noise
- E. Excessive heat and cold
- F. Movement and postures, which are abrupt or severe or give rise to excessive fatigue
- G. Ionising radiation
- H. Non-ionising radiation
- I. Biological agents - including viruses, bacteria, etc
- J. Chemicals - including substances which cause cancer, mercury, anti-cancer drugs and carbon monoxide

7.2 Hazards specific to pregnancy

7.2.1 Unless the risk assessment indicates there will be no injury to the employee or the developing child, pregnant employees must not work with:

- A. Pressurisation chambers
- B. Rubella - unless adequately immunised
- C. Toxoplasma
- D. Lead and lead substances

7.3 Hazards specific to breast-feeding

7.3.1 Unless the risk assessment indicates there will be no injury to the employee or the developing child, employees who are breast-feeding must not work with:

- A. Lead and lead substances

8.0 IMPLEMENTATION PLAN

- 8.1 This Policy will be circulated electronically to all Managers, all Supervisors and Staff
- 8.2 This Policy will be available in electronic format in each Ambulance Station and Ambulance Control for ease of retrieval and reference
- 8.3 Each Operational Support and Resilience Manager will ensure that the Manager/Supervisor responsible for updating Policies and Procedures will return the Confirmation Form to NAS Headquarters to confirm document circulation to all staff

9.0 REVISION AND AUDIT

- 9.1 This Policy will remain under constant review and may be subject to change to facilitate any changes/developments in service requirements.
- 9.2 This policy must be adhered to at all times to ensure maximum safety for pregnant employees of the National Ambulance Service.
- 9.3 A Quality, Safety and Risk Manager will review service compliance following each notification of pregnancy.
- 9.4 The Workforce Support Manager will review the effectiveness of this Procedure and propose amendments where deemed necessary.

10.0 REFERENCES

- None applicable

11.0 APPENDICES

Appendix I - Policy Acknowledgement Form

Appendix II - Risk Assessment for Pregnant Employees

Appendix III - Risk Assessment Forms