Area Mental Health Program
Policies and Procedures

Policy Name: Staff Pregnancy
Policy No: 2008/03 V4
Department/Contact: Area Mental Health 9350 2489

1. Overview
This policy has been developed to ensure that pregnant staff employed across the Mental Health Program are provided with a work environment that is safe and free from discrimination.

This policy is intended for all mental health staff within SESIH and may have particular applicability for those working in “higher risk” areas such as acute inpatient units, PECCS, Emergency Departments and Acute Community Care Teams. This policy is consistent with the above cited NSW Health and Area Policy Directives, WorkCover Guidelines and relevant legislation.

2. Policy Development
This policy has been developed by the Area Mental Health Office in consultation with the Mental Health Executive of each site/service.

3. Policy Components

3.1 General
This policy has been developed to promote the safety, health, and well-being of pregnant staff and their unborn children and a safe working environment for all. The policy needs to be sufficiently flexible to accommodate a range of individual and work related needs and circumstances.
3.1.1 Through this Policy the Area Mental Health Program aims to inform managers and staff regarding their respective roles and responsibilities including obligations to provide a safe workplace, via identification of current and potential hazards and the effective management of these risks. It also promotes pregnant staff members’ involvement in the risk identification and management process. The staff member should also inform their line manager of any pre-existing condition that might impact on their ability to continue to perform in their role. Managers and staff need to work in active partnership at all stages of the risk assessment and management process to ensure workplace health and safety.

3.2 Notification and Entitlements

3.3 Occupational Health and Safety

3.3.1 Risk Management
As soon as practicable following the notification of staff pregnancy, a collaborative risk assessment process should be initiated. The line manager takes responsibility for the coordination of this process with the participation of the pregnant staff member. The facility OH&S Manager and other specialist expertise should be co-opted in order to conduct a comprehensive assessment. Advice from the staff member’s treating medical practitioner or Obstetrician may be sought in writing in order that specific issues related to the pregnancy and to work duties are considered as part of the ongoing assessment process.

3.3.2 Assessing Risks to Health and Pregnancy
Assessment of risk needs to take into account factors related to the staff member, work role, and practice environment. As noted, this process may be more complex for staff members working in “higher risk” areas but the principles are the same for all employees and all settings.

3.3.3 The aim of the assessment process is to identify actual and potential hazards related to the staff member working in a particular work setting and the risks arising from those hazards. These hazards include: biological, chemical, physical or clinical practice areas with increased risk of patient aggression and postural risks (e.g. prolonged standing. Risks to others (employees/consumers/visitors) must also be considered.

3.4 Risk Control – Developing a Work Plan
Following risk assessment, a Work Plan needs to be initiated by the line manager. This is a collaborative process involving a number of health professionals and individuals. The Work Plan should be in writing and should clearly specify the person’s responsible and appropriate timeframes for its implementation. The Plan should be signed off by both the line manager and staff member. The staff member may be asked to provide documentary evidence that their medical advisor (GP, obstetrician) has reviewed and agreed with the Work Plan.
3.4.1 It is essential that there is clear responsibility and accountability for active ongoing monitoring and review of the Plan to ensure its continued effectiveness. As the pregnancy progresses, it will be necessary to review work duties and settings, and revise the Work Plan at regular intervals or as advised by the staff member’s treating medical officer/obstetrician. The staff member should inform the line manager of any changes in the status of their health and their foetus’ health, and any recent changes in work role and setting would also need to be catered for in a revised work plan.

4. Specific Hazards and Risks to Pregnancy

4.1 Biological Hazards – Infectious Microbes
A wide range of viruses and microbes cause infections in the human population and may also infect pregnant women. They may or may not have an adverse effect on the foetus. These include but are not limited to the following:

- Chlamydia Psittaci
- Human Cytomegalovirus
- Hepatitis A and Hepatitis B
- Human Immunodeficiency Virus 1 and 2
- Listeria Monocytogenes
- Human Parvovirus B19
- Rubella Virus
- Toxoplasma Gondii
- Varicella – Zoster Virus

Any severe infection, whatever the cause, may be detrimental to the health of the mother and child. This should be taken into account in setting up control measures to mitigate the risks of infection in the workplaces.

4.2 Chemical Hazards
A number of chemical hazards and risks may be detrimental to the health of the mother and may or may not have an adverse effect on the foetus. WorkCover NSW, Pregnancy and Work Guide 2002 details a full overview of chemical hazards, their risk assessed, nature of risk and recommended control measures


Potential mental health chemical hazards may include but are not limited to the following:

4.3 Anaesthetic Agents
Occasionally pregnant mental health staff may have to attend Operating Theatres to assist or perform Electroconvulsive Therapy (ECT). Although there is no inhaled Anaesthetic Agents or Nitrous Oxide used in the ECT procedure exposure of pregnant workers to waste anaesthetic gases within the Operating Theatres should be minimised or eliminated. A pregnant Mental Health employee may elect not to work in places where they will be exposed to anaesthetic vapours and can negotiate relocation of duties with the employer in a collaborative Work Plan.


4.4 Cytotoxic Drugs
On occasions mental health clients may have a concurrent medical illness requiring parallel specialist care including Cytotoxic Therapy. Employees who are pregnant, breastfeeding or planning parenthood, and involved in the preparation or administration of Cytotoxic Drugs should be informed of the risks of reproductive effects and possible effects on the foetus. Personnel required to perform these duties may elect not to do so. In such cases, appropriate and suitable alternative duties must be provided in a collaborative Work Plan.

4.5 **Physical Hazards (including Manual Handling and Aggression Management)**

A number of physical including manual handling hazards and risks may be detrimental to the health of the mother and may or may not have an adverse effect on the foetus. WorkCover NSW, Pregnancy and Work Guide 2002 details a full overview of hazards, their risk assessed, nature of risk and recommended control measures.


In developing a Work Plan, it may be agreed by all relevant parties that the staff members’ current duties and work setting are entirely appropriate during the pregnancy. However, if it is determined that risk cannot be safely managed, and then modifications must be put in place to ensure a safe working environment. Transfer to an alternative working environment should only occur via negotiation and only when pregnancy leads to an inability to comply with OH&S requirements.

5. **Dispute Resolution**

SESIMHS recognises its responsibility to identify and resolve work related grievances as effectively and fairly as possible. This extends to taking prompt and effective action to deal with Work Plan grievances. SESIH’s Grievance procedures are designed to maintain and improve the working environment by giving all staff access to a fair, timely, impartial and confidential process for having concerns heard and resolved. Staff members also have rights to procedural fairness as per Anti-Discrimination guidelines and recourse via the Area Grievance Resolution Policy (PD-058).

6. **Responsibility**

It is the responsibility of the Area Mental Health Office to circulate this Policy to the Directors/Managers of each site/service and to have it published on the Area Intranet. It is the responsibility of each site/service Director/Manager to ensure that the policy is circulated and implemented locally.

7. **References**

- SESIAHS, Flexible Work Practices PD 126 Dec 2006
- SESIAHS, Grievance Resolution in the Workplace, PD 058, Jan 2006
- WorkCover NSW, Pregnancy and Work Guide 2002
- WorkCover NSW Handling Cytotoxic Drugs and Related Waste –Draft December 2006
- Occupational Health and Safety Act (NSW) 2000
- Anti-Discrimination Act (NSW) 1984
- Industrial Relations Act (NSW) 1996