

## Postgraduate School of Paediatrics

# Pregnancy and Maternity Leave: Guidance for Paediatric Trainees

Many trainees have asked for guidance about working and training during pregnancy. There are several important areas including the legal framework, service commitments, individual circumstances and training needs. This document aims to cover these pertinent issues but is only intended as general advice. Specific issues should always be discussed with your employer and many, if not all, of these will form part of their Maternity Leave policy.

Human Resources (HR) owns the Expectant and New Mothers policy. In compliance with the Management of Health and Safety at Work Regulations, 1999, the employer has a duty to carry out a risk assessment when an employee notifies the employer of being pregnant.

## Pregnancy

### *Informing work about pregnancy*

This is a personal decision but if you are experiencing pregnancy-related problems that are interfering with your work (eg morning sickness) then you may decide to tell them sooner rather than later.

You must inform your employer (human resources) by the 15<sup>th</sup> week before the baby is due (at about 25 weeks pregnant), if you haven't already informed them before then.

You will need to tell your clinical supervisor / line manager, medical staffing and your training programme director. Let your clinical supervisor / line manager know as soon as possible when you become pregnant. Employers have a statutory obligation to protect the health and safety of new and expectant mothers and are obliged to undertake an individual risk assessment when informed of the pregnancy, in writing, by the woman. The assessment should review the specific job role, the potential hazards and the possible risks to the pregnant woman and her baby. There are no explicit guidelines regarding the level of risk at which adjustments to work should be made for pregnant workers.

### *Paperwork*

Human resources will send you relevant paperwork.

You are advised to keep copies of your MatB1 form which your midwife will give you from the 21<sup>st</sup> week of your pregnancy as you will probably need to provide several copies.

### *Antenatal appointments*

All pregnant workers are entitled to reasonable time off to attend antenatal appointments. If these can be scheduled to coincide with days off this would be greatly appreciated by your colleagues, but if this is not possible then please inform the rota coordinator / clinical director/ clinical supervisor / line manager so that appropriate cover can be arranged if necessary.

### *Health during pregnancy*

It is important to eat well, exercise regularly and rest appropriately. Trainees should try to continue to carry out their normal duties whenever possible during pregnancy but it is recognised that many pregnant women feel tired and need to rest. Employers are legally required to provide suitable rest facilities for workers who are pregnant (paediatric and neonatal on-call rooms may be used for this purpose – discuss this locally).

### *Illness during pregnancy*

The majority of women remain well throughout their pregnancy and there may be no contraindication to any aspect of work or training. Other women experience difficulties which may prevent them from continuing with their normal or previous duties.

Sick leave arrangements are not usually different from those for non-pregnant colleagues; you are advised to consult your Trust's absence policy. The exception is if you are unwell with a pregnancy-related illness within 4 weeks of your EDD when your employer may start your maternity leave and pay.

If you are unable to continue to work full-time because of ill health during pregnancy, then reduced hours or sick leave may be arranged. Generally, the following provisos apply (please refer to your local Trust policy):

- your health has been discussed with your medical advisor (GP or hospital consultant)
- the employing Trust receives a letter from the advising medical practitioner stating that you should reduce your hours of work or stop work
- you make contact with the Trust's Occupational Health department.
- the Trust reviews your working week taking into consideration the health and safety of their employee
- a trainee should not have to lose pay as a result of their health problems during pregnancy

Although the trainee is guaranteed employment doing reduced out of hours duties, hours at work etc, this may not be recognised for training or be sufficient to complete the necessary competencies. When a trainee has been unable to continue with their normal duties during pregnancy this should be recorded at the time of their next Annual Review of Competency Progress (ARCP). The ARCP panel will then be able to assess their progress in the light of their current educational progression and competency level, and thus their predicted Certificate of Completion of Training (CCT) date. Training will be

accredited only if all of the necessary aspects of training are being fulfilled. For some trainees who temporarily stop working night shifts, they may be required to complete the necessary night shifts at a later date.

#### *Difficulty carrying out normal duties during pregnancy*

If you are finding it difficult carrying out your normal duties you should meet with your clinical supervisor / line manager and in partnership should identify areas of the work where adjustments can be implemented if necessary.

If the line manager requires support with managing the employee's health at work, it is recommended that they seek advice and formally refer the trainee to the Occupational Health Department using the standard referral form.

A flexible approach to working is encouraged with regular reviews.

Some trainees have difficulties in early pregnancy but then find the situation improves and they can resume all or more of their full duties again.

#### *Working nights / long shifts / late shifts*

A National Guideline has been produced entitled "Physical and Shift Work in Pregnancy: Occupational Aspects of Management" by the Royal College of Physicians, Faculty of Occupational Medicine and NHS Plus. 2009.

The guideline looks at the evidence for adverse effect on pregnancy in relation to

1. Physical work, including lifting
2. Prolonged standing
3. Long working hours
4. Shift work including night work

The evidence indicates only a small risk of preterm birth and low birth weight in pregnant employees working more than 40 hours per week. Therefore, any decision to reduce working hours below 40 should be made on an individual basis. There is no evidence to support the stage of pregnancy at which this should be applied. There is no current evidence to suggest a risk to pregnant women working shifts; including rotating nights and evenings. However, it is appreciated that night work, in particular, may be increasingly difficult as the pregnancy advances. Pregnant doctors can therefore still work at night unless there is a specific work risk and a GP / midwife / obstetrician has provided a medical certificate stating that nights must not be worked. If this is the case then suitable day work should be provided (or a trainee suspended from work on paid leave) as long as is necessary to protect the health and safety of the mother and/or child.

If trainees are struggling then they should seek advice from the employer's Occupational Health Department.

### **Before going on Maternity Leave**

Consider how long you are likely to remain on maternity leave and whether you want to return to work on a full time or less than full time (LTFT) basis. You will need to speak to the Associate Dean who will confirm your eligibility to work LTFT and initiate the paperwork needed and then the TPD will work out the logistics of the proposed post.

It is important to try and give as much notice as possible to the Training Programme Director (TPD), Deanery and your employer about your plans to return to work and if these change, to keep them all fully informed.

Start thinking about what sort of childcare you will need on your return to work. Discuss this with colleagues, see what works for them. Remember, you will have to continue to work nights, evenings and weekends (even if you return LTFT) and this can be difficult to juggle with young children.

You will need to inform human resources and Training Programme Director when you want your maternity leave to start and give your employer your MATB1 certificate. You have to give 28 days notice of any change of start date.

If you are signed off sick for a pregnancy-related reason at any time after the beginning of the fourth week before your expected week of childbirth, your maternity leave will automatically be triggered, irrespective of when you intended to start it.

If you are changing Trusts/employer etc. you are advised to speak to your local HR department at BOTH your current and prospective future employers (where the latter is known).

## **Maternity Leave**

You will need to inform your employer when you want your maternity leave to start and give your employer your MATB1 certificate which your midwife will give you from the 21<sup>st</sup> week of your pregnancy.

The main considerations are when to start maternity leave and how long to remain on maternity leave.

You are entitled to up to 52 weeks maternity leave, this is divided in to 26 weeks ordinary maternity leave (OML) and 26 weeks additional maternity leave (AML). You can change your mind about when you start or finish your maternity leave but you have to give 28 days notice of any change of start date and 8 weeks notice if you change the return date.

Whilst on maternity leave you continue to accrue annual leave – however, you may need to discuss this before your maternity leave if you are changing Trusts/employer etc. When this happens you are advised to speak to your local HR department at BOTH your current and prospective future employers (where the latter is known).

It is possible to count three months of maternity leave or sick leave towards CCT. This decision is made on an individual basis and will depend on the level of competency achieved during training and assessed at the ARCP. Once a decision has been agreed, it will not normally be changed.

*Keep in touch days* – these are designed for you to remain in touch with work and colleagues whilst on maternity leave. Check your maternity leave policy locally to see how many KIT days you are entitled to (you may be allowed a certain number of paid days work without affecting your maternity pay).

## Maternity Pay

There are 2 main types of maternity pay – Statutory maternity pay (SMP) and NHS maternity pay. The rules on who is eligible are different for both.

**SMP** – To be eligible for SMP there must be continuous employment for at least 26 weeks ending with the 15<sup>th</sup> week before the expected week of confinement with one employer. SMP is paid for 39 weeks of your maternity leave. If a trainee is rotating to another Trust less than 26 weeks before the 15<sup>th</sup> week before the due date, then she is not entitled to Statutory Maternity Pay (SMP). If you are not eligible for SMP you may be eligible for a Maternity Allowance.

**NHS maternity pay** – you must have one year's continuous employment by the NHS (not necessarily the same Trust employer), without a break of more than 3 months, by 11 weeks before the expected week of confinement.

Under the NHS scheme you are entitled to 8 weeks full pay (less SMP/MA) and 18 weeks' half pay (plus SMP/MA providing the total pay does not exceed full pay) and then a further 13 weeks SMP or MA leaving 13 weeks maternity leave unpaid if you were to take the full 52 weeks maternity leave.

Your NHS maternity leave is calculated on the basis of your average weekly earnings for the 8 weeks ending with the qualifying week, which is the 15<sup>th</sup> week before the expected week of confinement. Gross earnings are taken into consideration including banding. It is important that you agree any changes to your working pattern with your employer as this may well affect your maternity pay.

However if, for example, you have agreed with your employer to stop night work then provided you continue with your normal duties and no alternative work is available to cover the part of the job that you are not doing then you would continue to receive your normal pay. So if you stop night work in agreement with your employer and occupational health they could expect you to do other duties instead at this time and as long as you have complied with this your pay should not be affected.

## Returning to Work

An employee has the right to return to her job under her original contract and on no less favourable terms and conditions. Trainees participating in a planned rotation of appointments as part of a training programme, have the right to return to the same post or in the next planned post with the same or another Trust, irrespective of whether the contract would have ended if pregnancy and birth had not occurred. In this case, the contract will be extended to enable the training programme to be completed.

Maternity leave of up to one year can be taken with a right to return to a specialty training post. It may be a different Trust to the one prior to maternity leave. If a time-limited post finishes before the end of this maternity leave, the job does not have to be kept open. In order to keep maternity pay and continuity of benefits, the trainee must return to another post in the NHS within a year of starting maternity leave.

The main considerations are how long to remain on maternity leave and whether to return to work on a full time or less than full time (LTFT) basis. This will be an individual decision based on personal circumstances and may be affected by the availability of the sort of childcare you have chosen. It is also important to have a flexible approach as sometimes plans need to be changed.

It is important to try and give as much notice as possible to the Training Programme Director (TPD), Deanery and your employer about your plans to return to work and if these change, to keep them all fully informed. There is plenty of information available to help you decide what is best for your circumstances (see LTFT training sections of Oxford Deanery School of Paediatrics and RCPCH websites). It is often helpful to speak to other trainees who have or are currently working LTFT, and some Deaneries have a contact group already set up.

Trainees wishing to return to work should provide as much notice as possible of their intentions. Most posts commence first Wednesday in March / September and it would be appreciated if trainees could return from maternity leave on these dates. *Trainees returning to work before the end of ordinary maternity leave are entitled to return to the same job that they were in prior to going on maternity leave.* Those returning to work following extended maternity leave should realise that although employment under the same terms and conditions is guaranteed, a post specific to their needs may not be available until the next March / September intake of trainees.

Employees intending to return to work before the expected return date agreed must provide their Manager and Training Programme with at least 8 weeks notice prior to her new return date. If an employee wishes to return to work after the planned return date she must also give at least 8 weeks notice of this change prior to her original return date. N.B. full entitlement is 52 weeks.

If you have decided to work LTFT there may be some delay to the date you actually return to work following your period of maternity leave as the TPD will have to fit you in to the rotation rather than putting you back into the full time slot you were in previously.

Finalise child care arrangements and make sure you have back-up plans for when your childcare goes wrong – which it will do occasionally! It is also important to have a flexible approach as sometimes plans need to be changed.

#### Alteration of CCT

For StRs and SpRs one period of 3 months of maternity leave and/or sick leave can be allowed without extending the duration of training and therefore altering the CCT date.

#### Breastfeeding

Breastfeeding mothers need a clean, private place to express and store their milk. Employers are legally required to provide suitable rest facilities for workers who are breastfeeding. Although not a legal requirement, employers are encouraged to provide a healthy and safe environment for nursing mothers to express and store milk. (Some Neonatal units may be able to provide expressed milk storage facilities for their paediatric trainees – it's worth asking locally).

## References and Sources of Information

[www.bma.org.uk/maternity](http://www.bma.org.uk/maternity)

[www.direct.gov.uk](http://www.direct.gov.uk)

[www.hse.gov.uk](http://www.hse.gov.uk)

[www.hmrc.gov.uk](http://www.hmrc.gov.uk)

HSE Information Services  
Caerphilly Business Park  
Caerphilly  
CF83 3GG  
Infoline: 0845 345 0055  
Fax: 0845 408 9566  
Textphone: 0845 408 9577  
e-mail: [hse.infoline@natbrit.com](mailto:hse.infoline@natbrit.com)  
Website: [www.hse.gov.uk](http://www.hse.gov.uk)

Department for Work and Pensions  
Website: [www.dwp.gov.uk](http://www.dwp.gov.uk)

Department for Business Enterprise and Regulatory Reform  
Enquiry Unit: 020 7215 5000  
Fax: 020 7215 0105  
Textphone: 020 7215 6740  
Website: [www.berr.gov.uk](http://www.berr.gov.uk)

Equality and Human Rights Commission  
Helplines: 0845 604 6610 (England) 0845 604 5510 (Scotland)  
0845 604 8810 (Wales)  
Website: [www.equalityhumanrights.com](http://www.equalityhumanrights.com)

Maternity Action  
The Grayston Centre  
28 Charles Square  
London N1 6HT  
Tel: 020 7324 4740  
Website: [www.maternityaction.org.uk](http://www.maternityaction.org.uk)

Tommy's, the Baby Charity  
Nicholas House  
3 Laurence Pountney Hill  
London EC4R 0BB  
Tel: 0870 777 7676  
e-mail: [mailbox@tommys.org](mailto:mailbox@tommys.org)

Website: [www.tommys.org](http://www.tommys.org)

Further reading:

*Management of health and safety at work. Management of Health and Safety at Work Regulations 1999. Approved Code of Practice and guidance L21 (Second edition) HSE Books 2000 ISBN 978 0 7176 2488 1*

*Workplace health, safety and welfare. Workplace (Health, Safety and Welfare) Regulations 1992. Approved Code of Practice L24 HSE Books 1992 ISBN 978 0 7176 0413 5*

*Five steps to risk assessment* Leaflet INDG163(rev2) HSE Books 2006 (single copy free or priced packs of 10 ISBN 978 0 7176 6189 3 [www.hse.gov.uk/pubns/indg163.pdf](http://www.hse.gov.uk/pubns/indg163.pdf))

*New and expectant mothers at work: A guide for employers* HSG122 (Second edition) HSE Books 2002 ISBN 978 0 7176 2583 3

*New and expectant mothers at work: A guide for health professionals* available at [www.hse.gov.uk/pubns/indg373hp.pdf](http://www.hse.gov.uk/pubns/indg373hp.pdf)

*Guidance giving information on rights for pregnant women* available at [www.berr.gov.uk](http://www.berr.gov.uk)

*Physical and shift work in pregnancy. Occupational aspects of management. A national guideline.* Royal College of Physicians 2009

*Working safely with ionising radiation: Guidance for expectant or breastfeeding mothers* Leaflet INDG334 HSE Books 2001 (single copy free) [www.hse.gov.uk/pubns/indg334.pdf](http://www.hse.gov.uk/pubns/indg334.pdf)

*Infection risks to new and expectant mothers in the workplace: A guide for employers* Guidance booklet HSE Books 1997 ISBN 978 0 7176 1360 1

*Sex Discrimination Act 1975* The Stationery Office 1975 ISBN 978 0 1054 6575 1 The Stationery Office publications are available from The Stationery Office, PO Box 29, Norwich NR3 1GN Tel: 0870 600 5522

e-mail: [customer.services@tso.co.uk](mailto:customer.services@tso.co.uk) Website: [www.tso.co.uk](http://www.tso.co.uk)

(They are also available from bookshops.)

Statutory instruments can be viewed free of charge at [www.opsi.gov.uk](http://www.opsi.gov.uk)

Medical Women's Federation [Medical Womens Federation](http://MedicalWomensFederation.org.uk)  
[medicalwomensfederation.org.uk](http://medicalwomensfederation.org.uk)

“So you want to be a medical mum” by Emma Hill from the ‘Success in Medicine’ series published by the Oxford University Press in Feb 2008  
ISBN 978-0-19-923758-6

Your employer's Maternity Leave Policy