

Pregnancy in Early Childhood Policy

Pregnancy is a time of great physical and emotional change for a woman. It can lead to changes in her ability to perform and manage certain types of work. Our Service is committed to ensuring the health, safety and wellbeing of pregnant employees by providing information, strategies and ongoing support, as well as information on entitlements available to them.

National Quality Standard (NQS)

Quality Area 2: Children’s Health and Safety		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.

Quality Area 7: Governance and Leadership		
7.1.2	Management System	Systems are in place to manage risk and enable the effective management and operation of a quality Service.

Education and Care Services National Regulations

Children (Education and Care Services) National Law NSW	
168	Education and care service must have policies and procedures.

RELATED POLICIES

Control of Infectious Diseases
Hand Washing Policy
Work Health & Safety Policy

Nappy Change & Toileting Policy
Sick Children Policy

PURPOSE

To ensure that pregnant employees are provided with the support and information needed in compliance with Regulations, Laws and Work Health & Safety.

SCOPE

This policy applies to Educators, staff and management of the Service.

IMPLEMENTATION

As all pregnancies will vary, so will the needs of the individual. As appropriate, variations to duties will be negotiated, and equipment that supports the health, safety and wellbeing of pregnant employees will be provided.

HEALTH & SAFETY

Manual handling

During pregnancy there is more strain on a woman's back due to the pregnancy hormones allowing ligaments and joints to loosen, and muscles to stretch. To avoid or minimise the risk of back pain and back injury our Service will ensure that pregnant employees are aware of the following strategies:

- Avoid bending over. Use your knees and hips to lower yourself to the children's level or when picking something up from a low level.
- Try to maintain a correct posture as the growing uterus can frequently cause postural problems.
- Try not to stand in any one position for too long.
- Ensure you use correct lifting and carrying techniques.
- Ensure that furniture such as nappy change tables are at the correct height to avoid unnecessary bending.
- Use stepladders and trolleys if required.
- Use adult-sized furniture, for example, adult-sized chairs rather than children's chairs.
- Ensure that heavy or awkward items are stored at an appropriate height and close to where they are needed.

Infectious Diseases and Immunisation

Due to constant close contact with children, early childhood employees may be at an increased risk of contracting some vaccine-preventable diseases. Recognised authorities advise against pregnant women receiving live viral vaccines during pregnancy, or within 28 days prior to falling pregnant. Therefore, women of childbearing age should ensure that vaccinations are up to date. Common vaccine-preventable infections that may have an adverse effect on pregnancy include:

Rubella (German measles)

The greatest risk to the unborn baby occurs in the first twenty weeks of pregnancy, with a higher risk if the mother contracts Rubella in the first ten weeks. Employees planning pregnancy should have a blood test to ascertain immunity, as the vaccination must be given one month before becoming pregnant.

Note: The vaccination for Rubella is given together in the MMR vaccination - Measles, Mumps, Rubella.

Measles

This is a highly infectious viral disease that can cause serious complications to the unborn child. It spreads through direct and indirect contact from contaminated people or surfaces. It can also remain in the air for up to two hours after the infected person has left. Employees can minimise the risk of infection by paying particular attention to hand hygiene, and ensuring that all staff and children use correct cough and sneeze hygiene practises. Employees must also ensure that cleaning practises are being conscientiously followed throughout the Service. This vaccination is not recommended during pregnancy: the non-immune employee should ensure that the vaccination has been received one month before falling pregnant.

Note: The vaccination for Measles is given together in the MMR vaccination - Measles, Mumps, Rubella.

Varicella (Chickenpox)

If exposed to varicella during the first three months of pregnancy the employee must seek medical advice. A blood test will reveal the mother's immune status. This vaccination is not recommended during pregnancy: the non-immune employee should ensure that the vaccination has been received one month before falling pregnant.

Hepatitis B

Hepatitis B is transmitted through blood and other bodily secretions. Adult vaccinations are available but should not be received during pregnancy. However all babies born in NSW receive the Hepatitis B vaccination at birth. Employees must ensure that policies are followed for managing exposure to blood and bodily fluids, including ensuring that children's wounds are covered appropriately.

Influenza

Influenza vaccinations are recommended for pregnant women and can be safely given at any stage of the pregnancy.

Pertussis (Whooping cough)

Pertussis can be a life-threatening disease for the newborn. It is recommended that the pregnant employee receive a pertussis vaccination in the third trimester of pregnancy as evidence indicates this is more beneficial to the newborn than receiving the vaccination prior to pregnancy.

Pregnant employee must also be aware of infections for which there are no vaccinations and take the necessary precautions. These infections include:

Cytomegalovirus (CMV)

CMV is spread through infected saliva and urine. Pregnant employees should therefore pay particular attention to hand hygiene, especially after changing nappies, assisting with toileting, or feeding infants where there is a high risk of coming into contact with body secretions. Alternatively, a pregnant employee may be relocated to an age group where she is less likely to be required to perform these tasks.

Hand, foot and mouth disease

Although the risk is minimal, employees who acquire this disease in late pregnancy can pass it on to the unborn child. The employee should therefore pay particular attention to hand hygiene at all times.

Human parvovirus B19 (erythema infectiosum, fifth disease)

This virus can be transmitted to the unborn baby. The employee should therefore pay particular attention to hand hygiene at all times.

Listeriosis

Listeriosis is a bacterial infection that can be avoided by ensuring that raw or partially cooked foods are avoided during pregnancy, and by thoroughly washing all fruit and vegetables in clean running water.

Toxoplasmosis

This disease is caused by a parasite that can be found in raw fruit and vegetables, and spread by animals such as cats and birds. During pregnancy the parasite can pass through the placenta to the developing baby. A blood test can reveal if the mother is immune. The employee should pay attention to hand hygiene, avoid cleaning the sand pit (where there may be cat faeces) or bird cages, and should wash and peel fruit and vegetables.

HIV (human immunodeficiency virus), AIDS (acquired immunodeficiency syndrome)

HIV is a virus that can lead to AIDS. Like Hepatitis B, these viruses are transmitted through blood and other bodily secretions. Employees must ensure that policies are followed for managing exposure to blood and bodily fluids, including ensuring that children's wounds are covered appropriately.

The Approved Provider and Nominated Supervisor will:

- Ensure that the health and safety needs of pregnant employees are considered and act in a flexible manner as far as is reasonably practicable.
- Ensure that all employees are familiar with recommended vaccinations for early childhood employees in accordance with The Australian Immunisation Handbook.
- Recommend to all employees that they consult their Doctor to seek advice on immunisation prior to planning a pregnancy.
- Encourage all employees to undergo blood tests to ascertain immunity status to common childhood infections, and take the appropriate action dependent upon results.
- Alert all employees and families if a child or staff member contracts an infectious disease.
- Ensure that all employees are practising effective hand hygiene at all times.
- Ensure that all employees are familiar with infection control policies and procedures and actively adhering to these at all times.
- Put systems into place to address increased risk due to having a pregnant employee in the workplace.
- Consult with a pregnant employee to examine how work can be modified to eliminate or minimise risks.

- Negotiate with a pregnant employee to ensure a safe work environment. For example, the pregnant employee may be temporarily placed in a room with older children to minimise the requirement to do nappy changes and assist with nose wiping.
- Provide information to the employee Doctor as requested with regard to normal duties performed on a day-to-day basis.
- Meet anti-discrimination law obligations by ensuring pregnant employees are not subjected to negative comments or remarks about their pregnancy.

The Employee will:

- Maintain updated immunisation records.
- Consult with their Doctor if planning a pregnancy to establish their immunity status for common childhood infections, and receive vaccinations as required.
- Be familiar with, and adhere to policies and procedures pertaining to infection control and hand hygiene.
- Consult with their Doctor should there be an outbreak of an infectious disease in the Service that they are not immune to, in regard to whether they should continue to attend work.
- Immediately advise the Approved Provider and/or Nominated Supervisor if they believe there is a hazard or potential risk to the pregnancy in the workplace.
- Notify the Approved Provider and/or Nominated Supervisor of the pregnancy if health and safety issues that may affect the pregnancy are experienced or may be foreseen.

PREGNANT EMPLOYEE ENTITLEMENTS

Under the Fair Work Act and Anti-discrimination laws, pregnant employees are entitled to certain leave entitlements. Our Service will at all times act to ensure that entitlements are made available to pregnant employees in accordance with these laws.

Whilst employees are not required to notify their employer that they are pregnant, in some high-risk occupations such as early childhood education and care, it may be advisable to notify the employer as soon as possible. Employees will also need to notify their employer in order to access certain entitlements.

The below table sets out when employers must be notified of a pregnant employee’s intention to take, shorten, and/or extend unpaid parental leave under the Fair Work Act.

Action	Notice period
Telling your employer of your intention to take unpaid parental leave under the Fair Work Act	At least 10 weeks before you wish to commence unpaid parental leave (or as soon as practicable). This must be in writing and you must specify the intended start and end dates.

Action	Notice period
Confirming the start and end dates of your unpaid parental leave or advising your employer of any changes	At least 4 weeks before you start unpaid parental leave unless this is not practicable (e.g. the child is born prematurely). This must be in writing.
When can you stop working and start your unpaid parental leave?	The leave may start up to 6 weeks before the expected birth of the child but can start earlier if you and your employer agree. If you continue working during the 6 week period before the birth of the child your employer may request that you provide certain medical evidence that states you are fit to work and may require you to take unpaid parental leave if you cannot provide that evidence.
Shortening your original period of unpaid leave (e.g. from 12 months to 9 months)	The original leave period can generally only be shortened by agreement with your employer.
Telling your employer that you are extending your initial period of unpaid parental leave (e.g. from 9 months to 12 months)	At least 4 weeks before your expected date of return. This must be in writing. This is a right under the Fair Work Act and cannot be refused by your employer.
Requesting an extension to unpaid parental leave beyond the initial 12 months (e.g. 12 months to 18 months)	At least 4 weeks before the end of the initial 12 month unpaid parental leave period. This request must be in writing. Your employer must respond to this request within 21 days .

Australian Human Rights Commission 2015. Supporting working parents: Employee guide.

Approved Provider and Nominated Supervisor will:

- Maintain current information regarding their legal responsibilities to pregnant employees.
- Ensure that all pregnant employees are notified of their legal right to parental leave and all entitlements when the pregnancy is disclosed.
- Not ask if an employee is pregnant unless there are genuine health and safety concerns.
- Respect a pregnant employee's right to confidentiality regarding their pregnancy and when this information should be disclosed to colleagues.

Educators will:

- Disclose the pregnancy in a timely manner to ensure that the employer can support her health, safety and wellbeing in the workplace.
- Provide the required notice of intended leave in writing to the Approved Provider and/or Nominated Supervisor.
- Provide medical evidence from Doctors and/or specialists as required to the Approved Provider and/or Nominated Supervisor in a timely manner.

Special Maternity Leave

A pregnant employee who is eligible for unpaid parental leave can take unpaid special maternity leave if:

- She has a pregnancy-related illness or
- Her pregnancy ends after 12 weeks because of a miscarriage, termination or stillbirth.
- If an employee takes special maternity leave because of a pregnancy-related illness, the leave will end when the pregnancy or illness ends, whichever is earlier. If she takes leave because of a miscarriage, termination or stillbirth it can continue until she is fit for work.
- Special maternity leave won't reduce the amount of unpaid parental leave that an employee can take.

Employee Responsibilities:

- To apply for special maternity leave, the employee must provide evidence that:
 - She is able to work but cannot do her normal job (including why their normal job is not safe)
 - How long she should not work in her normal job. This can be a medical certificate from a registered Doctor.

Returning to work after Maternity Leave

Employees who are entitled to unpaid parental leave under the Fair Work Act have the right to return to their pre-parental position at the end of the leave (the 'Return to work guarantee').

Approved Provider and Nominated Supervisor will:

- When replacing employees on parental leave, during the hiring process, replacement employees must be notified by the employer that:
 - (a) The role is temporary;
 - (b) The employee on leave has a right to their pre-parental leave job back when they return to work; and
 - (c) The employee and the employer may have a right to cancel or end the leave early in certain circumstances (e.g. stillbirth or infant death).
- Maintain contact with the employee on parental leave and negotiate a return date at the appropriate time.
- Provide the employee with the same job they had prior to leave, or an available position for which she is qualified and suited, and that is closest in pay and status to the pre-parental leave position.
- Consider any requests from the employee for a variation and/or flexibility in hours on their return to work.

Employees returning to work after parental leave will:

- Maintain contact with the Approved Provider and/or Nominated Supervisor and negotiate a return date at the appropriate time.

Sources

- Australian Children’s Education & Care Quality Authority.
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations.
- ECA Code of Ethics.
- Guide to the National Quality Standard.
- NSW Department of Community Services.
- Work Cover Authority NSW.
- Revised National Quality Standard.
- Fair Work Ombudsman: <http://www.fairwork.gov.au>
- Fair Work Commission: <https://www.fwc.gov.au>
- Fair Work Act 2009.
- Australian Human Rights Commission: <https://www.humanrights.gov.au>
- Australian Human Rights Commission. Supporting Working Parents.
<https://supportingworkingparents.humanrights.gov.au/employees/working-while-pregnant-or-potentially-pregnant>
- The Pregnancy Centre 2016. <http://www.thepregnancycentre.com.au/pregnancy/well-being/taking-care-of-your-back>
- Australian Government Department of Health 2017. The Australian Immunisation Handbook (10th ed.).
<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>
- Child Australia 2012. Work, health and safety in education and care services.
<http://www.echr.edu.au/docs/default-source/resources/ipsp/work-health-and-safety-in-education-and-care-services.pdf?sfvrsn=8>
- NSW Health 2016. Handle with care: Looking after yourself in pregnancy.

Review

Policy Reviewed	Modifications	Next Review Date
June 2017	No adjustments required.	June 2018
October 2017	Updated references to comply with the revised National Quality Standard.	June 2018
March 2018	Updated to comply with Fair Work requirements.	June 2018
June 2018	Minor terminology improvements made.	June 2019