



Pregnancy, Maternity, Paternity & New and Expectant parents

Police *Family Support* Guidance



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Guidance written by Detective Sergeant Keri Alldritt & Superintendent Louise Harries, supported by the National Family Support Group chaired by Assistant Chief Constable Julie Dean and Inspector Liz Barnett . Additional content relating to *Supporting Fathers, Co-Parents & Partners* provided by Sergeant Thomas Worsell.



Overview & Legislation

This chapter aims to provide guidance for forces and individuals relating to pregnancy and maternity. It seeks to assist forces in ensuring consideration for the different periods from preparing for pregnancy, during pregnancy, preparing for and during leave and preparing for and during return to work.

Police officers are not employees but office holders. However, they are afforded full protection against discrimination under Sections 42 to 43 of the Equality Act 2010. Police officers' rights relating to maternity, adoption, paternity and related leave are largely governed by the Police Regulations 2003 (as amended). These are statutory entitlements and are not discretionary. Force policies supplement, but do not replace these statutory rights.

Women now make up 35.4% of police officers in England and Wales, with 52,331 female officers in the workforce, and 62.7% of police staff roles are held by women (ONS, 2024). This demonstrates a significant female presence in policing, highlighting the need for robust and inclusive national guidance to support maternity, family planning, and caregiving responsibilities.

Societal trends are evolving, with more individuals and couples pursuing family creation through diverse pathways such as IVF, adoption, and surrogacy. Many women are also choosing to start families later in life, and there is an increasing number of same-sex families navigating assisted fertility options. The Equality Act 2010 prohibits discrimination against individuals on the grounds of protected characteristics such as sexual orientation and gender reassignment. Police forces, as public authorities, are bound by the Public Sector Equality Duty (PSED). This duty requires due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations for people with relevant protected characteristics ([TEA 2010](#)). Therefore, policing must adapt to these societal changes by ensuring its policies are inclusive, supportive, and reflective of the diverse needs of its workforce, upholding its Public Sector Equality Duty obligations ([PSED](#)).

Recommendation sixteen within The Angiolini Report Part One (2024) recommends better provision for female officers and staff, recognising the challenges women disproportionately face.

In the context of employment, maternity often includes maternity leave, and this guidance is provided to support forces in ensuring their policies and practices ensure equality, safety and wellbeing for officers and staff regardless of gender or family status.

Under section 18 of the Equality Act 2010 pregnancy and maternity is a protected characteristic and states:

- A person (A) discriminates against a woman if, in [or after] the protected period in relation to a pregnancy of hers, A treats her unfavourably –

a. because of the pregnancy, or

b. because of illness suffered by her in that protected period as a result of the pregnancy.

- A person (A) discriminates against a woman if A treats her unfavourably because she is on compulsory maternity leave or on equivalent compulsory maternity leave.

- A person (A) discriminates against a woman if A treats her unfavourably because she is exercising or seeking to exercise, or has exercised or sought to exercise, the right to ordinary or additional maternity leave or a right to equivalent maternity leave.

The protection is particularly strong as no comparator is required as there is no requirement to show less favourable treatment. The test under Section 18 is whether the woman has been treated unfavourably.

Currently, police forces offer the lowest paternity leave entitlements among the core blue light services. Nationally, the UK ranks among the worst in Europe for paternity leave rights. In England and Wales, 75% of police forces provide only one week of paid paternity leave to fathers and co-parents. Within those forces, 60% of individuals who take paternity leave return to work after just one week.

In June 2025, the UK Parliament's Women and Equalities Committee (WEC) published the *Equality to Work* report, advocating for statutory reform. The report recommends introducing six weeks of paternity leave, paid at 90% of the individual's salary.

The current approach within policing reinforces outdated gender roles around childcare and offers limited support to mothers. Both the Policing Minister and MPs leading the Parental Leave and Pay Review have expressed a particular interest in improving paternity leave provisions within the police service.

Our police workforce must not suffer any detriment due to pregnancy, maternity leave or related circumstances. A detriment includes any disadvantage including loss of promotion opportunities, removal from desirable duties, exclusion from training or development, lack of access to communication or opportunities.

Key Principles

To provide the best experience for employees, organisations and supervisors must work in tandem to provide knowledge, understanding, compassion, and practical support. Supervisors act as the frontline of employee well-being, while organisational systems should ensure equitable application of policies.

Within the document the term 'staff' is used to refer to both officers and police staff unless specifically stated where differences in entitlements exist.

Forces should consider an assessment of their policies, practices and employees experiences to identify good practice, gaps and areas for improvement.

The following principles draw on evidence-based practices and recommendations from key academic literature and reports, including the previous NPCC Police Family Support Guidance (2021), Duddin et al (2023), Lennie et al (2023), College of Policing Guidance (2024), and Wilkinson et al (2024a and 2024b).

- Individual needs - Ensure that each member of staff is treated according to their individual parenting journey and their needs.
- Training and support - Ensure line managers are trained and provided guidance to support their staff (Specific guidance for line managers is identified as best practice)
- Access to information - Ensure dedicated intranet spaces and guidance is available.
- Entitlements - Ensure force policies and guidance are easy to read and readily accessible.
- Access to support - Ensure measures are in place to provide additional support and signposting. (Parenting champions, mentors, buddies are all identified best practice).
- Contact with staff when away from workplace - Ensure processes are in place for staff to be kept in touch with and supported. ("Contact contracts" have been identified as best practice).
- Being kept informed when away from workplace - Ensure staff are aware of vacancies and development opportunities (lateral/promotion) and training. (KIT and SPLIT events have been identified as best practice).

- Support to return to work – Ensure a bespoke return to work plan is in place (Phased returns have been identified as best practice, where reasonable and appropriate to an individual’s circumstances).
- Breastfeeding support – Ensure staff are supported to make choices regarding breastfeeding.
- Flexible and Agile working – Ensure staff are fully aware of options available.
- Bespoke Policies – Forces should consider bespoke policies, or guidance for some areas if appropriate.
- Support for fathers, co-parents and partners - Ensure support is inclusive of adoptive parents, same-sex parents, intended parents through surrogacy and other diverse family structures

The following sections outline a framework for providing tailored support to staff throughout their parenting journey, highlighting the importance of addressing individual needs, fostering open communication, and promoting inclusive organisational practices.

Key topics include **conception and early pregnancy**, **risk assessments**, **preparing for leave** and **return to work**, ensuring employees feel supported, safe, and valued at every stage.

Conception and Early Pregnancy

The journey of pregnancy can differ, as can the journey to becoming pregnant. This can include fertility treatments, fostering, adoption and surrogacy.

No one pregnancy is the same, which means it is important to offer individualised support to staff based on their own circumstances and needs. It is not a “one size fits all” and as such a good relationship and communication is needed to ensure the member of staff is supported.

The timing of sharing a pregnancy with an employer is always a personal decision. Once an employer knows of an employee’s pregnancy there is a duty to minimise risk to their employee, this is normally done by a discussion and risk assessment with the individual. The Force is under a legal obligation to undertake a suitable and sufficient risk assessment, take reasonable steps to remove or reduce risks and ensure that the officer does not suffer any detriment. Failure to comply with duty may amount to unlawful discrimination and/or breach of health and safety obligations.

Common early pregnancy symptoms include fatigue, nausea, and sickness. Sickness and nausea can occur at any time of the day, although a common misconception is that it mostly occurs in the morning. Hyperemesis gravidarum is a rare disorder characterised by severe and persistent nausea and vomiting that may necessitate hospitalisation. Fatigue (tiredness) is also common both in early pregnancy and again in the third trimester.

It is important that consideration is given to these symptoms to make the member of staff as comfortable as possible. Adjustments can be made which accommodate individual needs around early pregnancy symptoms. There is further information on Risk Assessments on page 8 and an example of what a risk assessment may look like in the appendix.



Premature Birth

A premature birth is where a baby is born before 37 weeks gestation. Some babies are born before 24 weeks and although this is rare it can happen. Legally a foetus is referred to as “legally viable” from 24 weeks gestation. Some babies born before 24 weeks can survive, according to Tommy’s research 14% of babies born before 24 weeks survive. This is suggested to be down to the medical care and successful interventions within the UK. ([Tommy’s National Centre for Preterm Birth Research | Tommy’s](#)).

Staff who have a premature baby will need an individualised plan in terms of care and communication from their force. There is often a taboo around talking about extremely premature babies, but the mother especially will need good support from her workplace. Appropriate conversations with the mother are good practice and this will shape any conversations for her wider team.

There should be consideration for the mother potentially having a traumatic birth experience. A lot of mothers will not have been expecting to give birth so early, and this, psychologically, can take some time to fully digest.

A baby that is born prematurely, depending at what gestation they are born, may need interventions and specialised care from a Neonatal Unit. Depending on

geographical location this may be some distance from where the mother normally resides.

Flexibility around leave, contact and support should be considered. In circumstances of early threatened labour especially in the first few days and weeks – this could have a huge impact on a mother's experiences.

A baby might require neonatal care if they:

- are born early
- are ill or injured when they are born
- have a low birth weight
- the delivery was difficult

Neonatal care leave allows parents to have additional time off to be with a baby who is receiving neonatal care. The law is the Neonatal Care (Leave and Pay) Act 2023, which came into effect on 6 April 2025.

The right to take neonatal care leave applies from the first day of work. Eligible parents can take neonatal care leave once their child has been in neonatal care for at least seven consecutive days.

The entitlement is one week's leave for every seven full and continuous days the baby is in neonatal care, for up to 12 weeks.

Neonatal care leave is in addition to other parental leave entitlement.



Risk Assessments

Pregnancy should not be equated with ill health. It should be regarded as part of everyday life, and its health and safety implications can be adequately addressed by pregnancy-specific risk management procedures. However, some hazards in the workplace may affect the health and safety of people in the prenatal and postnatal period and that of their baby. It should also be acknowledged that some

pregnancies can be deemed higher risk, and this should be taken into consideration during the risk assessment.

Staff who have a disability may experience extra challenges when having children and evidence suggests that black women, in particular, face maternity discrimination and are more likely to die in pregnancy and childbirth ([MBRRACE-UK Maternal Report 2025](#)). Each risk assessment should be individual and there is no “one size fits all.”

There is an obligation on managers under the Management of Health and Safety at Work Regulations 1999 to include risks to female staff of childbearing age in their general workplace risk assessment. This is to ascertain any risk, which might be posed to the health and safety of a pregnant woman or mother returning to work from maternity leave. A “new or expectant mother” refers to a member of staff who is pregnant, who has given birth within the previous six months or who is breastfeeding.

A risk assessment is not solely a tick box exercise and should be an opportunity to discuss working conditions so that action can be taken to reduce, remove or control any potential risk to both the member of staff and their baby. During early pregnancy there is a unique opportunity to talk to the staff member and understand any issues or concerns they have.

Risk assessments must be regularly reviewed, and appropriate adjustments made. They must be conducted as the pregnancy progresses, or if there are any changes in the workplace or their activity.

There may for example be reasons to review after an appointment with the midwife of healthcare provider, but again this should be fluid and on an individual basis. However, as a minimum, it is suggested to be at least every two months.

Routine antenatal appointments according to National Institute for Health and Care Excellence (NICE):

- First contact
- Booking appointment (normally 8-10 weeks)
- Dating scan (normally around 12 weeks)
- 16 weeks
- Anomaly scan
- 25 weeks
- 28 weeks
- 31 weeks
- 34 weeks
- 38 weeks
- 40 weeks.

Maternity leave then commences at or before 40 weeks, or as per Police Regulations for police officers, therefore further risk assessments within the workplace would not be necessary until a return to work occurs.

If court attendance in this time is requested a risk assessment can be done and supplied to the court with a rationale for consideration for requesting non-attendance.

A risk assessment should also be conducted for a member of staff returning to work following maternity leave, which incorporates physical, mental and emotional wellbeing. This risk assessment should also consider adjustments in case the woman is breastfeeding or expressing breastmilk. We have published further guidance on Breastfeeding which supports this.

Any staff members who are to take the job-related fitness test in preparation for personal safety training, must be offered an alternative fitness test in line with national guidance. Most forces offer the Chester Treadmill Test as an alternative as this is less impactful on joints. Members of staff who have recently given birth and those who are breastfeeding, have higher amounts of progesterone and relaxin (both hormones) which can soften joints and relax ligaments around joints, making them more susceptible to injuries. Therefore, extra precautions should be taken.

Recent research (Wilkinson et al., 2024) into the intersection of perinatal mental illness and police life has identified several challenges that new and expectant parents face in the police service. As a result, they made several recommendations for changes to the maternity risk assessment and provide a toolkit for police supervisors to support new and expectant parents (included in references).

The updated risk assessment now incorporates questions related to mental health and wellbeing, drawing on evidence-based approaches outlined in NICE guidelines. These changes reflect a shift towards a more person-centred and holistic assessment, focusing on individual needs and psychological safety rather than predictive risk scoring, including:

- *Have you been bothered by feeling down, depressed, or hopeless?*
- *Have you often been bothered by little interest or pleasure in doing things?*
- *Have you been bothered by feeling nervous, anxious or on edge?*
- *Have you been bothered by not being able to stop or control worrying?*

These are designed to start conversations about parents' mental health and are complemented by a link to the 'New and Expectant Parents Supervisors Toolkit' which also includes a maternity and paternity flow chart to guide supervisors through the process of supporting employees when they are new and expectant parents.

Whilst much of the evidence relating to perinatal mental health focuses on mothers, forces should recognise that fathers, co-parents and partners may also experience mental health challenges associated with becoming a parent and should be supported accordingly.

An example of a pregnancy risk assessment template can be found in the **Appendix**, however each assessment should be individualised.

Training and Support

Experiences of members of staff can differ dependent on the knowledge and understanding of the line manager. It is vital that the line manager (s) are aware of their role and what support is available. Clear guidance that is easily accessed will ensure line managers provide accurate and up to date information to the member of staff.

Policies, systems and training will ensure the line manager is equipped to deal appropriately.

Forces should consider:

- Events to promote force policies, any change in process, to highlight good practice and promote the support available.
 - Dedicated accessible guidance for line managers. This can identify what they need to do and ensure that force policy is followed. This mitigates against error and misinformation.
 - Training of line managers in understanding and supporting new parents going beyond the theoretical framework provided by policy and guidance. By training line managers, they can be equipped with the practical skills, confidence and empathy to apply policies effectively, provide tailored support and address individual needs.
 - Forces should ensure their HR staff are equipped to give advice or have Single Points of Contact (SPOCS) with enhanced knowledge of policy and procedure.
 - Other SPOC roles such as buddies or parenting champions can ensure signposting to best practice and guidance.
 - Providing additional training to any parenting champions/ mentors to enhance their understanding.
 - Where line managers are changed, a thorough handover and new contact should be made with the person on leave, to ensure continued inclusion and consistency of care. Wellbeing / maternity passports are considered best practice.
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Supporting Fathers, Co-Parents & Partners

The transition to parenthood can have a significant impact on fathers, co-parents and partners, regardless of family structure. Forces should recognise that whilst they may not be experiencing the physical effects of pregnancy, they may nevertheless play a key caregiving role, attend medical appointments, support a partner through pregnancy and childbirth, and experience the emotional, financial and practical challenges associated with becoming a parent.

Line managers should ensure that fathers, co-parents and partners are provided with clear information regarding their leave entitlements, flexible working options and available support. Consideration should be given to individual circumstances, including adoption, surrogacy, same-sex parenthood, neonatal care and caring responsibilities for both parent and child.

Becoming a parent can have a significant impact on an individual's wellbeing. Forces should be mindful that fathers and co-parents may also experience anxiety, stress and other mental health challenges associated with pregnancy, childbirth, baby loss, neonatal care or the transition to parenthood. Managers should foster an environment where staff feel able to seek support and access wellbeing services where required.

Forces should consider:

- Ensuring fathers, co-parents and partners have access to clear information regarding paternity leave, shared parental leave, neonatal care leave and flexible working arrangements.
- Supporting attendance at antenatal, adoption or other parental appointments in accordance with local policy and statutory entitlements.
- Considering the impact of neonatal hospitalisation, caring responsibilities and disrupted sleep patterns when discussing wellbeing and return-to-work arrangements.

Ensuring support is inclusive of adoptive parents, same-sex parents, intended parents through surrogacy and other diverse family structures.

Access to information

For individuals and line managers, easy access to information is essential for supporting staff effectively. The information should be accessible in one place with clear links to relevant force policies, support, and guidance. It is important that the information is relevant, up to date and accessible to all.

Police forces are enhancing support through dedicated intranet spaces, offering resources such as 'Parenting Portals,' 'Parenting Pit Stops,' and wellbeing apps. These tools are designed to ensure that information and support are easily accessible to staff, both internally and externally.

Individuals may wish to access this before commencing their parenting journey, throughout and when on leave. Some forces have external portals, whilst others provide packs for new parents containing handbooks and guidance.

Forces should consider:

- Having a dedicated intranet page to host all information relating to parents with links to policies, entitlements, and available support. Ensuring this platform is user-friendly, with categorised sections and a search function to enhance navigation.
- Developing tailored toolkits for 'New Parents' and 'Line Managers', offering key information, practical guidance, and considerations specific to managing maternity and parental leave.
- Make resources available to staff even when they are away from the workplace, such as through mobile-compatible apps, external portals, or downloadable content. Where necessary, provide alternative formats or translations to accommodate diverse needs, including those with disabilities or language barriers.
- Ensure force information is sent to those on maternity leave, this includes promotional information, vacancies, training and development opportunities, Force orders, job vacancies and local information. Failure to supply this information may constitute a detriment and may amount to unlawful discrimination.
- Hold awareness-raising events to highlight changes in practice, available support, and best practices. Consider communication campaigns or workshops to ensure staff know where and how to access these resources.
- Regularly update resources to reflect new policies or changes and actively seek feedback from staff to identify gaps or areas for improvement.
- Conduct regular reviews of tools, portals, and resources to ensure they are accessible, relevant, and user-friendly.
- Gather feedback from staff and line managers to identify improvements and adapt practices accordingly



Preparing for Leave

A member of staff going into a period of parenting leave will require support and guidance. Whilst pregnant, the role they are in may no longer be a role they can perform due to the risk assessment or nature of the work.

If it is necessary to provide alternative work for a member of staff, their line manager/organisation should engage with them early in the process to ensure that they benefit from such work.

The individual may have specific ideas as to the area of work they would like to undertake to further their personal development and ensure that they are contributing positively to the workplace. It is therefore vital that the wishes of the member of staff are taken into account when considering alternative work.

Where the requirement for the provision of alternative work has been identified, no individual's role or department should be routinely changed without consultation with them, and a risk assessment completed. Alternative duties must be suitable to the officer's skills and experience, not reduce status or pay, not adversely affect future promotion or development.

Staff may wish to remain with their shift for continuity however if this is not possible this should be a discussion between the member of staff and their line manager. This helps to promote their value and engagement with the organisation. This links in with research around the wider support and retention of female officers and staff (Charman and Bennett, 2022; Duddin et al., 2023; Lennie et al., 2023; Wilkinson et al, 2023)

Forces should ensure that line managers make arrangements with their staff to meet regularly during the time leading up to their leave to ensure that they are fully sighted on the support the member of staff may need. This may simply be incorporated as part of the monthly one to one with the member of staff alongside the risk assessments completed.

Contact Agreements

Forces have introduced Contact Contracts (or equivalent) to ensure that any contact is in accordance with the individual's needs and wishes. It is recommended that the line manager arranges a meeting with the member of staff at least four weeks prior to them commencing their period of leave to discuss an agreed plan of contact during their leave. This agreement needs to be recorded in an appropriate format (*example in appendix*).

The 'Contact Contract' is intended to ensure that support, guidance, and an agreed level of contact is in place prior to the member of staff commencing leave. It is up to the member of staff how much, or how little contact they would like to have with the organisation during their leave. This is also an opportunity to promote a conversation about any needs and concerns the individual may have.

Line managers must ensure that a copy of the 'Contact Contract' is made available for the member of staff, and that the same is brought to the attention of any new line managers which may be assigned to them during the life of the contract. It is vital that the line manager adheres to their side of the 'Contact Contract' throughout the period of leave. This will ensure that the member of staff feels valued throughout their leave, and that they feel supported in returning to work.

Best practice is to ensure these contracts are in electronic format and can prompt relevant contact points.

Even if the member of staff has indicated that they would like to receive minimal contact from the organisation during their period of leave, it is still important for the line manager to check in respectfully and offer support, ensuring the individual feels included and valued, in line with their preferences for contact (Duddin et al., 2023). Officers must not suffer any detriment for requesting limited contact, declining contact or not participating in optimal communication. Contact arrangements must reflect the officer's preferences.

There are several entitlements, which the member of staff should be aware of, which apply to their period of leave. All such entitlements will be found in relevant force policies.



During Maternity, Paternity or Shared Parental Leave

When a member of staff is away from the workplace it is important to ensure that they remain supported. Any agreed level of contact must be maintained.

A congratulatory message from the line manager or organisation is a simple and supportive gesture. Some forces/ Federations/unions provide gifts to staff as a welcome to their new arrival.

The period a member of staff is away from the workplace can be daunting and lead to a feeling of isolation. As new parents adjust to the role, knowing what support is available can ensure they can easily access it when needed.

It is vital that the member of staff can access opportunities and information regarding career development, job opportunities, courses, training and secondments. This is normally arranged via Workforce Development or a central co-ordination unit – this ensures consistency and a robust process in the event of line managers moving during a woman's maternity leave so she can be kept up to date with organisational changes.

Keeping in touch events / family support days have been identified as an effective way to maintain the support and contact with the force. These are bespoke events which staff can use as a KIT Day. These can ensure staff have access to peer support and obtain guidance and information. The event can have participants from HR, Pensions, staff support networks, perinatal mental health services, Chief Officers, staff associations, trade unions and soon to be or new parents. This opens a network of support and can also keep individuals updated with any changes in force. This leads to an enhanced level of engagement.

Due to many police forces offering only one week of paid paternity leave and an additional week at the statutory rate, officers and staff often choose to use their

annual leave to extend their time off and better support the mother during the early stages of parenthood.

Managers should look to support and engage with colleagues who have combined Paternity Leave with annual leave whilst they are away.

Forces should consider:

- Processes to ensure that communication is maintained in accordance with any agreement.
- That staff have access to information when away from the workplace.
- How they can ensure any career opportunities, jobs, training, and secondments are communicated to staff away on parenting leave.
- Use of externally accessed intranet portals or apps.
- Holding force 'keeping in touch' events for support and engagement.
- Processes to check and test contact with persons away from the workplace.
- Parenting champions and buddy schemes to provide support when the staff member is away from the workplace.

What are KIT or SPLIT days?

KIT days, also known as Keeping in Touch days, are an opportunity for a member of staff to keep up to date with changes in the workplace or integrate back into the workplace before the end of their leave. Staff are entitled to take up to 10 Keeping in Touch (KIT) days during maternity or adoption leave. These days allow them to engage in work-related activities without affecting their entitlement to leave or pay, and without ending the leave period. Line managers need to ensure that individuals are aware of the payment of KIT days as per their force policy.

SPLIT days, also known as Shared Parental Leave in Touch days, can be taken if a member of staff is on Shared Parental Leave. They are entitled to take up to 20 SPLIT days whilst on leave without losing their entitlement to leave and pay.

Forces should have processes in place for managing these days including agreement of how many days can be taken and it is important that staff and line managers are aware of these entitlements.

Both KIT and SPLIT days are voluntary and must be mutually agreed. Officers cannot be required to work and must not suffer detriment for refusing to undertake such days.



Preparing to Return to Work

Returning to work after a period of extended leave can be a daunting and anxious time for any new parent. Line managers play a vital part in ensuring that their journey back into work is as smooth as possible.

It is important to discuss the return to work with the member of staff, to understand their concerns, needs and entitlements.

The member of staff may be considering options in respect of their return, such as flexible working. Open communication ensures timely planning and support.

There may be physical or mental health considerations, and the member of staff may be breastfeeding their child. There will also be training requirements for consideration.

Return to work plans

Return to work plans are an effective way of identifying the individual's needs and concerns.

At the mid-point of maternity leave, line managers should arrange to meet with the member of staff on leave to arrange their 'Return to Work Plan'. The member of staff may not wish to meet until a later date, however if they wish to apply for flexible working, it is advisable they meet as soon as possible to make sure that an application can be processed in time for their return. Officers have a statutory right to request flexible working. Any refusal must be objectively justified. A refusal that disproportionately impacts women may amount to indirect sex discrimination unless justified.

This plan can ensure that they identify any adjustments or support needed to return to work. It is an ideal opportunity to discuss any concerns or needs of the

individual, to remind them of their entitlements and provide reassurance and support.

The plans should be recorded and stored according to force processes.

Example return to work plans at **appendix**.

Phased return

A phased return is an opportunity to enable the member of staff to return to work on initial reduced hours. Some forces have introduced this provision, and it is considered best practice.

Additional support may be provided through a phased return. Forces may implement a phased return to support a member of staff in their return to work following maternity, adoption or extended shared parental leave. A phased return is designed to help the member of staff adapt and prepare for a return to full duties and/or contractual hours. All phased returns will be considered on a case-by-case basis.

Phased returns where reasonably necessary should be on the individual's normal full pay. The number of hours worked should be incrementally increased over the phased return period.

An example of a 28-day phased return. The suggested pattern would be:

Week	Working Hours	Notes
Week 1	50%	Initial phase of return
Week 2	75%	Gradual increase
Week 3	87.5%	Near full-time hours
Week 4	100%	Full return to work

This schedule is adaptable and should be discussed with the line manager to suit individual circumstances. Forces should consider ensuring their policy reflects this.

Forces should consider:

- Return to work plans to identify individual needs and concerns
- Some forces now offer a physical assessment of the woman by having a dedicated physio trained in women's health (an example is Mummy MOT ®).
- Phased returns
- Flexible working arrangements: Following maternity or adoption leave, or shared parental leave, a member of staff may wish to return to work on different working hours or an amended working pattern.

- Career Breaks: there may be occasions where staff wish to take a break from employment – this includes instances where they may wish to take a break to care for a child or children.
- Parental Leave: This allows parents to take unpaid time off work to look after a child or make arrangements for the child's welfare. This right applies to all eligible parents with legal parental responsibility for a child, irrespective of their gender, sexual orientation, or gender reassignment ([TEA 2010](#)). To be eligible, they must have one year's continuous service. This entitlement is for 18 weeks unpaid leave for each child to be taken before their 18th birthday. In the case of police staff, parental leave is normally taken in weeks, rather than days, with a limit of four weeks per year, unless otherwise agreed with individual forces. Police officers can take parental leave as a single day or part weeks, and there is no four-week limit. A police officer can take as many days or weeks in a year as they like.
- Time off for dependants: All staff are entitled to 'reasonable' paid time off to deal with unexpected or sudden problems relating to dependants.
- Some forces also have other special leave entitlements that may be appropriate, for example leave for hospitalisation of dependents, compassionate leave.
- Agile Working: This is the term used to describe how staff can work flexibly from different locations.
- Mentoring on return: Offering mentoring when the member of staff returns to work may assist as they may have missed out on a range of different changes in the workplace and lost confidence to undertake their role. The provision of a mentor in the initial weeks of their return will ensure that the member of staff has someone to approach for support and advice if needed.
- Considerations for staff returning who are breastfeeding (see section for Breastfeeding)

Return to Work

On return to work, a risk assessment should be conducted – this will be particularly important where the member of staff is breastfeeding. (see section on risk assessments).

The member of staff should be met by a line manager on their first day back, or as soon as possible thereafter, to assess the arrangements which have been put in place and ensure any concerns the member of staff may have are addressed. A mentor or peer support should be readily available.

The line manager should establish weekly meetings with the member of staff in the first month of their return to ensure that they have the necessary support. The

first few weeks can be the most difficult time for a new parent, and this support can be vital.

During these weekly meetings, the line manager should review the 'Return to Work Plan' to ensure that it continues to meet the needs of the member of staff. If there are any changes, these should be documented and dated in the plan. Officers are entitled to return to the same role or where not reasonably practicable to a suitable alternative role on terms no less favourable than the previous role held before leave.

Forces should consider:

- Processes to ensure Risk Assessments are completed.
- Return to work plans are recorded and adhered to
- Mentoring and peer support opportunities
- Ensuring facilities for those breastfeeding

Line Managers

Line managers should be encouraged to recognise that no two experiences are the same and that support needs to be adapted to the individual's needs. Line managers should ensure that they have the relevant knowledge and guidance available to support the member of staff.

Line managers should be particularly mindful that the experiences and needs of LGBT+ staff and families may differ from those of heterosexual, cisgender staff. Support must be individualised and culturally competent, ensuring all staff feel valued and supported without discrimination.

Line managers should ensure that a record of each meeting with the member of staff is made via the appropriate force systems.

Things for line managers to consider when meeting with those who are pregnant and taking maternity, adoption leave or shared parental leave (SPL) should include:

- Is there anything the member of staff is concerned about?
- Updating the risk assessment: Is there anything, which has happened since the last meeting which means the risk assessment needs to be reviewed?
- Identifying any reasonable adjustments needed: This could include any changes to location of work, work hours, working environment such as a new desk or chair etc. Forces should empower supervisors and leaders to make these decisions considering all information possible, it may be that an adjustment is needed for a short period to help the staff member. Occupational Health (or equivalent) will be able to assist if a local agreement can't be made or if further advice or guidance is required.
- Where there is a high level of risk identified with the individual's current role, for example front-line duties or significant contact with detainees, they may be offered

the opportunity to undertake an alternative role on a temporary basis. They do however have the right to remain in their current role if they choose to do so, and all reasonable workplace adjustments should be made to facilitate this subject to adequate risk control

- In circumstances where an alternative role is considered for the individual, they should be included in discussions with their line manager and an HR professional to ensure they are assigned to a role that is suitable and appropriate to their skills and experience.
- Every effort should be made to identify a suitable role in the above circumstances, however if this is not possible, as the final option it may be necessary to grant leave on full pay until the individual starts maternity leave.
- Reduced Hours: Should a member of staff need to reduce their hours as a reasonable workplace adjustment identified in a risk assessment to support them during their pregnancy, this does not affect their wage. This should be completed and documented as part of a risk assessment and sent to the appropriate HR department according to your local Force process.
- Agile Working: This is the term used to describe how staff can work flexibly from different locations. Forces may consider how their Agile Working Policy may assist in setting out the arrangements that can be made with your member of staff to support working away from their normal place of work.
- Line managers should start planning for cover during leave – Where appropriate managers should consider a handover period prior to the individual's leave. It is advisable that towards the start of the period of leave, workloads are monitored and manageable.
- Entitlements available: Make sure that the member of staff is fully sighted on their entitlements. This includes reasonable paid time off to attend antenatal appointments; changes to uniform; and time off for pre-adoption appointments.
- Highlight additional support available: Whilst line managers should remain the first point of contact for their member of staff whilst they are in work, there may be additional support, which they require. They should be made aware of the various support available to them. This may include:
 - HR – If a member of staff does not feel comfortable discussing matters with their line manager, then they can contact the relevant HR team. Forces may wish to consider appointing SPOCS or peer support/ champions to assist the member of staff.
 - Staff Support Networks, Associations and Peer Support Groups – Most Forces have several Staff Support Networks and Associations, which are free to join for all serving members of staff. Although networks and associations differ from each other in their constitution, terms of reference, and activities, in general each network provides workplace support to its members and seeks to help the organisation to provide for the diverse needs of its employees. There are also national networks available for staff.
 - GP/Midwife – If a member of staff is unwell at any stage or have any questions about their pregnancy then it is vital that they make an appointment with their GP or midwife as soon as possible.
 - Occupational Health – Force Occupational Health (OH) departments may be able to provide advice and guidance.
 - Counselling

- Employee Assistance Programmes.
- Federation/UNISON/Superintendents Association – If the member of staff is a member of Federation or UNISON and they have any issues relating to becoming a new parent, for example, accessing entitlements, then they should contact the Force rep to seek support.
- The Benevolent Fund – Your local force Benevolent Fund may be able to offer support, for example with physio referrals and other services.
- Police Chaplain.

Peer support from Parental Champions/Maternity SPOC's (Single Point of Contact) – Many forces have parenting champions (or similar) who staff may contact at any time throughout their journey to becoming a new parent, or on return to work. They have an enhanced understanding of the processes and can signpost staff to services or information, which may assist them. They may also offer a buddy system to enhance confidence before and upon any return to work.



Summary

Employers who adopt flexible and family-friendly working practices, inclusive of all family structures and protected characteristics, see tangible benefits in productivity, retention, diversity, and overall workforce wellbeing.

This guidance makes recommendations and draws upon best practice to do so. It is imperative that the implementation of this guidance has senior oversight within forces, to ensure recommendations are considered and embedded in force policy, practice and culture, consistently upholding the Public Sector Equality Duty for all staff, and their families.

Force Considerations:

- A clear understanding of their forces provision for parents in the workplace
- Be clear that support for new parents is inclusive of fathers, co-parents and partners
- Identifying a force lead to take forward any required changes.

- Ensuring clear processes are in place for the management of staff who are to become parents.
- Developing guidance and ensuring it is accessible.
- Bespoke intranet spaces for advice and guidance.
- Having processes in place to capture meetings between line managers and staff members.
- Developing a Contact Contract or plan to record contact with individuals when off.
- Being clear as to the workplace adjustments that can be provided to staff and ensure this information is made available.
- Promote the options of KIT and SPLIT days and other entitlements with line managers and individuals.
- Developing return to work plans so the individual's needs are accounted for.
- Developing a mentor scheme for those returning.
- Ensuring staff can make use of a phased return, where appropriate and reasonable.
- Ensuring that risk assessments are in place throughout (including return to work).
- Ensuring staff are aware of additional support and options available to them. (Including internal and external)
- Giving returners time for requalification/ certification of mandatory training and familiarisation with policies/procedures that have changed.
- Ensure links to the NPCC group to assist in developing and sharing best practice
- Promoting support / initiatives available as a means to demonstrate the force as an inclusive employer.

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- Public Sector Equality Duty: Guidance For Public Authorities, <https://www.gov.uk/government/publications/public-sector-equality-duty-guidance-for-public-authorities/public-sector-equality-duty-guidance-for-public-authorities>
- Tommys (2026) - [Tommy's National Centre for Preterm Birth Research | Tommy's](#)
- New Parents Perinatal Mental Health Toolkit - [New Parents Perinatal Mental Health Toolkit.pdf](#)
- [MBRRACE-UK Maternal Report 2025](#)

Appendix

The following are example documents that forces may wish to adopt or develop:

Maternity Passport

Name:		Pay Ref.:	
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Passport Confidentiality

The information you provide in the Maternity Passport regarding your pregnancy will be confidential between you, your line management and Human Resources. A copy will need to be forwarded onto Human Resources who will ensure a copy is retained on your personal file.

Other parties may need to be provided details of adjustments agreed within your passport in order for the relevant support and adjustments to be made. You may choose to share with others if you feel it would benefit your support (for example a parenting champion or buddy).

Review

Your Maternity passport is a living document and should be reviewed several times throughout your pregnancy, maternity and return to work. All reviews and subsequent revisions must be agreed by both the employee and their line management.

To ensure continued support, you are encouraged to update line management should there be a change in your circumstances.

Purpose

The passport is a means by which you can work with your line management to identify the most effective way of managing your pregnancy, maternity leave and return to work.

This passport provides a documented record of your needs, which would allow you to function to your maximum capacity in a supportive environment, without prejudice or discrimination.

WHY COMPLETE A PASSPORT?

This is a positive document for both employee and employer and aims to:

- Provide employees and their line managers with the basis for discussions about reasonable adjustments that may be needed
- Ensure that both parties, the employee and the employer, have an accurate record of what has been agreed
- Minimise the need to re-negotiate reasonable adjustments every time the employee changes jobs, is re-located, or assigned a new manager.
- Support the employee when on Maternity leave and on the return to work.

As the employee, the Passport will allow you to:

- Explain the impact of your pregnancy on you at work.

- Suggest adjustments that you consider will make it easier to do your job
- Offer more information from your GP, specialist or other expert as appropriate
- Request an assessment by Occupational Health
- Review the effectiveness of adjustment/s provided
- Explain any change to your circumstances
- Know how and when your manager will keep in touch when you are on Maternity leave.
- Support your return to work.

As the line manager, the Passport allows you to:

- Understand how your employees' pregnancy might impact them at work
- To explain the needs of the business
- Discuss how and when to stay in touch when your employee is on Maternity leave.
- Consider if your employee needs to be referred to Occupational Health or another adviser to help both parties understand what adjustments may be required.
- Review the effectiveness and on-going relevance of the adjustment provided on a regular basis, including the impact on the employee and the service.
- Ensure that risk assessments are completed when circumstances change.
- Enable you to plan with the employee their return to work ensuring that they are supported.

The Passport is a living document and should be reviewed regularly by both the employee and manager and amended as appropriate.

Assistance

We have tried to include as much guidance as we can in this document to assist all parties to complete it effectively. However, if you require any assistance, then you can contact any of the following for advice:

- Human Resources
- Unison or the Police Federation
- Parenting Champions

SECTION A

Employee Information

(to be completed by the employee)

Employee name	
Pay reference	
Station / Department	
Line Manager	
HR Officer	
Other info	

Key dates

These are intended to assist with planning relevant support, some of these dates may change as the pregnancy progresses.

Date pregnancy disclosed	
Expected week of childbirth (EWC)	
MAT1B received (date)	
Planned start of Maternity leave	
Anticipated return to work date	
Annual Leave to be taken before leave (if applicable):	
Annual Leave to be taken after leave (if applicable)	
Other relevant dates	

If you are happy to do so, please use this space to give a brief description of your pregnancy and any matters you wish your line manager to be aware of. This may include any advice you may have received from your Midwife or GP, previous pregnancy and impacts.

--

Is further specialist advice required/outstanding? *(Tick as appropriate)*

Yes

☐

No

☐

SECTION B

Redeployment considerations

(to be completed by the line manager and employee)

During pregnancy a risk assessment must be completed and reviewed when circumstances change throughout the pregnancy, the suitability of the current role must be considered against the risk assessment. It may be necessary to temporarily redeploy the employee during this period due to the restrictions.

Please use this space to record the considerations and decisions in respect of redeployment. (Section C will then cover any reasonable adjustments that are required if remaining in role or redeployed.)

Current role	
Is employee able to remain in role with adjustments?	
New role if redeployment agreed	
New line manager	

SECTION C

Implementation of reasonable adjustments

(to be completed by Line Management in conjunction with the employee)

Please use this space to record any reasonable adjustments that have been discussed, by indicating if the adjustment has been supported and details of the support agreed. Your manager must consider the impact of introducing any reasonable adjustments has on other members of your team and those who work locally to you. If an adjustment has not been agreed, your manager should provide information on the reason for it being declined.

(Only select adjustments if they are appropriate)

Summary of the Reasonable Adjustments	Date Requested	Details of the Reasonable Adjustment (inc. details re duration if known)	Reasons if not agreed	Review *
Medical or physical adjustments				
•				
•				
•				
Workplace adjustments				
•				
•				
•				

Summary of the Reasonable Adjustments	Date Requested	Details of the Reasonable Adjustment	Reasons if not agreed	Review *
•				
•				
•				
•				
•				
•				
•				

** Please note: A review of any reasonable adjustments made must be undertaken by the line manager after each risk assessment, to establish whether the adjustments have been of assistance and still meet your needs. Are they still effective? Would alternative support be more suitable?*

The following will be implemented (please tick all appropriate)					
Referral to Occupational Health	☐	Referral to Counselling Services	☐	Referral to HMAB (Health Management Advisory Board) for further advice if applicable	☐
Complete Risk Assessment	☐	Referral to Parenting champion/Maternity SPOC	☐	Complete H&S Risk Assessment	☐
	☐		☐		☐
Other (please provide details):					

SECTION D

Contact Contract

1. When will your maternity leave commence?

Date of Commencement of leave:	
Return date (if known). Please note that you can change your return-to-work date if you give 8 weeks' notice.	

2. When would you like to take annual leave or re-rostered bank holidays on your return?

How many days annual leave do you have left for this period?	
When do you intend taking leave on your return? (if known)	
How many re-restored bank holidays are you entitled to?	
When do you intend taking your re-rostered bank holidays on your return? (if known)	

Note: leave requests must still be submitted as per Force policy

3. How would you like to be contacted during your period of leave?

Who would you like to receive contact from?	
How often would you like to receive contact?	
What time of the day should contact be made?	
Are there any specific matters you wish to be contacted about (for example promotion or	

development opportunities, force events/ conferences)					
How will contact be made?					
Email		Telephone		Text message	
Other (please specify) :					

4. Details of any pre-arranged KIT or SPLIT days

Would you like to take KIT or SPLIT days during your leave?	
What dates would you like to take these KIT or SPLIT days (if known)	
What activities do you want to undertake during these KIT or SPLIT days?	

Note: You may arrange further KIT or SPLIT days during your leave, and with prior arrangement with your line manager.

5. What courses/training need to be undertaken prior to re-commencement of duties?

It is the line manager's responsibility to make enquiries as to what courses staff and officers will need to undertake prior to commencement of duties, and when these courses are available. These should be identified as mandatory or requested. KIT or SPLIT days may be utilised if completing the relevant courses during leave. For example, consider PNC or police system access.

Course Required	Date of Course

6. Do you have any concerns in relation to your upcoming period of leave or return to work which you would like to discuss? Do you feel you would benefit from any additional support?

7. Any further considerations relating to contact during your period of leave

8. Actions to be undertaken

By you	By your line manager

Employee's
Signature

Date

Manager's
Signature

Date

When completed please provide a scanned of this form to the **force specific detail**

9. Please record any amendments to this plan which are agreed following the initial implementation in the below box. Please provide a scanned copy of the amended form to the **insert force option**

Employee's
Signature

Date

Manager's
Signature

Date

Below are some useful contacts/ support which may be of benefit.

Support	Contact details
Parenting buddies	xxx
Breast buddies	
Blue Families Facebook	

SECTION E

Return To Work Plan

Purpose

The Return-to-work plan is an opportunity to discuss with your staff member their time on leave, any issues they faced or concerns that they may have in respect of their return to work. This should be completed in a relaxed and confidential environment to ensure the staff member is able to fully discuss any matters with you.

Return to work after a period off can be daunting, there may be changes in staffing and policy procedures. This can add to the concerns the staff member may have. It is important that they are supported and signposted as appropriate.

It is the line manager's responsibility to complete this plan, during a face-to-face meeting with the employee as per the 'Contact Contract'. If you are unsure of anything contained in this form you should seek advice from HR prior to meeting the member of staff.

There is an expectation that both employee and line manager undertake any actions which result from this plan. Please note that this plan may be subject to review at any time, in order to meet the changing needs of the member of staff. In any case, the contract should be reviewed at an agreed time on the member of staff's return to work.

1. Do you have any concerns regarding your return to work?

--

2. When will you be returning from leave

Return date (if known)	
------------------------	--

3. When would you like to take annual leave or re-rostered bank holidays on your return? (if different to that stated in the 'Contact Contract')

How many days annual leave do you have left for this period?	
--	--

When do you intend taking leave on your return? (if known)	
How many re-restored bank holidays are you entitled to?	
When do you intend taking your re-rostered bank holidays on your return? (if known)	

Note: leave requests must still be submitted as per Force policy.

4. What courses need to be undertaken prior to re-commencement of duties? (if different to what's recorded on 'Contact Contract')

It is the line manager's responsibility to make enquiries with RMU as to what courses staff and officers will need to undertake prior to commencement of duties, and when these courses are available. KIT or SPLIT days may be utilised if completing the relevant courses during leave.

Course Required	Date of Course

5. What working pattern would you like to work on your return to work?

The Force is committed to ensuring that you are supported in your return to work and as such, offer a number of different initiatives to help ensure that your working pattern works for you.

Would you like to implement a phased return on your Return to Work? i.e. reduced hours. If yes, what would you like such phased return to look like?	
Do you wish to return to work on different hours or an amended working pattern ? i.e. a flexible working request. If yes, a formal flexible working request will need to be submitted via the intranet.	
Are you intending on taking a career break?	
The Force would like to assign you a Mentor on return to work should you wish. A Mentor will simply be a trusted person which you can seek support from if needed. Is there a particular person which you would like to be Mentored by?	
Are there any specific changes to your working practices which you'd like the Force to consider making prior to your return. For example, a change in working location. If yes, please specify.	

6. Do you require any additional support or adjustments on your return to work?

The Force will accommodate you to breastfeed/pump on your return to work? Please specify any support or arrangements you need, if any.	
Do you feel able to undertake your full duties on return to work? If not, please specify what adjustments you will require in order to support you in undertaking your role	
Is there any further support or adjustments which you may need and have not already been covered within this plan?	

7. Any further considerations relating to your return to work:

--

8. Actions to be undertaken

By you	By your line manager

Employee's
Signature

Date

Manager's
Signature

Date

*When completed please provide a scanned copy of this form to the *insert force specific info**

- 9. Please record any amendments to this plan which are agreed following the initial implementation in the below box. Please provide a scanned copy of the amended form to the *insert force information**

--

Employee's
Signature

Date

Manager's
Signature

Date

Risk Assessment

Risk Assessment Title:	Individual Pregnancy Risk Assessment
Description:	An assessment of the foreseeable risks present to pregnant workers/new mothers while undertaking work duties. This template is based upon HSE guidance for protecting pregnant workers and new mothers.
Reference and Version:	
Associated Risk Assessments:	

Pregnant Worker/New Mother's Details			
Name:		Line Manager/Supervisor Name:	
Job Title:		Main Work Location:	
Department:		Expected Delivery Date:	
Pay Ref:		Expected Return to Work Date:	

First Trimester	Date	Signature	Second Trimester	Date	Signature
------------------------	-------------	------------------	-------------------------	-------------	------------------

Pregnant Worker/ New Mother:		
Line Manager:		

Pregnant Worker/ New Mother:		
Line Manager:		

Third Trimester	Date	Signature
Pregnant Worker/ New Mother:		
Line Manager:		

Return To Work	Date	Signature
Pregnant Worker/ New Mother:		
Line Manager:		

Relevant Workplace Safety Law

The Management Regulations

The [Management of Health and Safety at Work Regulations 1999 \(MHSWR\)](#) implement the health and safety requirements of the [Pregnant Workers Directive \(92/85/EEC\)](#) into UK law.

The specific health and safety requirements relating to pregnant workers and new mothers are mainly contained in regulations 16 to 18.

- *Regulation 16* requires employers to manage the risks to women of a childbearing age, pregnant workers and new mothers.
- *Regulation 17* covers advice from a doctor or midwife if night work will affect the health of pregnant workers and new mothers.
- *Regulation 18* explains employers' duties once notified a worker is pregnant, has given birth in the last 6 months or is breastfeeding.

The Employment Rights Act

Section 67 of the [Employment Rights Act 1996](#) states that suitable alternative work should be offered, if available, on the same terms and conditions, before suspension from work is considered.

Workplace (Health Safety and Welfare) Regulations

Regulation 25 of the [Workplace \(Health, Safety and Welfare\) Regulations 1992](#) states that employers must provide a suitable place for pregnant and breastfeeding workers to rest.

Equality Act

The [Equality Act 2010](#) makes it unlawful to dismiss or discriminate against a worker because they are pregnant, a new mother or are breastfeeding. Breaches of health and safety law may also be discrimination under the Act, depending on the circumstances.

The Act requires no length of service qualification and gives protective rights to a broad range of workers, including contract, agency and apprentice workers. A breach of the Act could lead to civil liability.

Key L = Likelihood C = Consequence RR = Risk Rating	Risk Analysis Matrix						
	Probability Frequency		Severity Rating				
	1	Extremely Unlikely	1	Insignificant (No injury)			
	2	Unlikely	2	Minor (First Aid)			
	3	Fairly Likely	3	Moderate (Up to 3 days absence)			
	4	Likely	4	Major (More than 7 days absence)			
	5	Very Likely	5	Catastrophic (Fatality)			

Likelihood	5	5	10	15	20	25	High
	4	4	8	12	16	20	
	3	3	6	9	12	15	
	2	2	4	6	8	10	Medium
	1	1	2	3	4	5	Low
		1	2	3	4	5	
	Consequence						

This Risk Assessment MUST be read and applied in conjunction with all other applicable risk assessments and standard operating procedures.

Part 1: Common Risks

This section should include the common risks associated with carrying out duties in the workplace. **Add content to the control measures and residual risk rating score as appropriate for the individual. If the section is not relevant to the individual, you can leave the additional control measures section blank or state no change.**

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
1	Posture and position.	Pregnant workers and new mothers could be more prone to injury, which may not become apparent until after birth. Postural problems can occur at different stages of pregnancy, and on returning to work, depending on the individual and their working conditions. Postural problems can arise from;	Pregnant worker/new mother.	4	3	12	All workers undertake Display Screen Equipment training and Workstation Assessments every two years to help reduce potential risks such as musculoskeletal disorders from poor posture or position at workstations. It is recommended that pregnant workers re-take the Workstation Assessment in the first trimester, and on additional occasions throughout the pregnancy if it is deemed to be required. Links to undertake new Workstation Assessments can be provided by the H&S Department upon request. Any manual handling tasks undertaken as part of the pregnant worker/new mother's role must be	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
		sitting or standing for long periods, lifting or carrying heavy loads, or using a workstation that causes posture issues.					assessed. Tasks that include lifting or carrying heavy loads must be avoided to reduce risk. Tasks that require sitting or standing for long periods of time must also be assessed. Please list any changes or implemented control measures for the individual: •				
2	Working conditions.	Long hours, shift and night work can have a significant effect on the health of pregnant workers, new mothers and their children. They may also be	Pregnant worker/new mother.	4	4	16	Where there is significant risk to the pregnant worker/new mother from their working conditions or working pattern, the first action should be to adjust the working conditions or hours to avoid risk. If that is not possible,	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
		particularly vulnerable to work-related stress, temperature and noise, and become easily nauseated from different smells. Not all workers will be affected in the same way, but mental and physical fatigue generally increase during pregnancy and following birth, and this can carry serious risks such as a miscarriage or premature birth.					then suitable and safer alternative work should be offered. Hours and volumes of work must not be excessive, and longer and more frequent rest breaks should be taken. This should be continually monitored by the pregnant worker/new mother's line manager. Pregnant workers/new mothers can work nights provided the work involved presents no risk to the health and safety of them or their child. Please list any changes or implemented control measures for the individual: •				

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
3	Risk of physical injury.	Some work carries the risk of physical injury, and the consequences for pregnant workers and new mothers can be more serious. Extra control measures may be needed for tasks that include; working at height, working alone, exposure to vibration, or where there is a risk of work-related violence.	Pregnant worker/new mother.	4	4	16	Any tasks that may present a significant risk of physical injury to the pregnant worker/new mother must be assessed. These tasks can include working at height, working alone, exposure to vibration, or a risk of work-related violence. The first action should be to avoid the task altogether, or to implement additional control measures to allow the tasks to be undertaken in a safe manner with reduced risk. If that is not possible, then suitable and safer alternative work should be offered. <i>Please list any changes or implemented control measures for the individual:</i> •	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
4	Exposure to harmful substances.	Many chemical and biological agents can cause harm to pregnant workers or new mothers. They can also be passed on to their child during pregnancy or breastfeeding. These could include lead, radioactive material, toxic chemicals, infectious diseases, and antimitotic drugs.	Pregnant worker/new mother.	4	4	16	Any tasks or activities that may potentially result in the pregnant worker/new mother being exposed to harmful substances as part of their role must be assessed. The hazards from each potentially harmful substance need to be considered, so that a decision can be made whether to completely avoid the substance or to implement additional control measures to allow the tasks to be undertaken in a safe manner with reduced risk. Certain substances have an increased risk of harm to pregnant workers/new mothers, such as lead, radioactive material, toxic chemicals, infectious diseases, and antimitotic drugs. Undertaking tasks with potential exposure to these substances must be avoided. HSE guidance, internal COSHH assessments and manufacturer's safety	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
							data sheets can be used for assessing the risks of each harmful substance. <i>Please list any changes or implemented control measures for the individual:</i> •				
5	Personal protective equipment.	Personal protective equipment (PPE) is often not designed for pregnant workers. Use of PPE may be unsafe or uncomfortable for pregnant workers, especially as their	Pregnant worker/new mother.	4	3	12	Any PPE that is used by the pregnant worker/new mother as part of their role must be reviewed. The PPE must be safe and comfortable to use, especially as the pregnancy progresses. If the PPE is no longer suitable then control measures must be considered, such as changing their work activity.	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
		pregnancy progresses.					<i>Please list any changes or implemented control measures for the individual:</i>				
6	Travel in vehicles to, from, and during work.	Sitting in a vehicle for long periods of time can affect circulation and lead to fatigue.	Pregnant worker/new mother.	4	4	16	If the pregnant worker/new mother is required to travel long distances to and from work, and/or during work duties, then extra time should be allowed to ensure that sufficient breaks can be taken. Regular travel time and distances should be reviewed to consider if any changes need to be implemented, such as working at a closer station to home, or to avoid travelling during work duties. <i>Please list any changes or implemented control measures for the individual:</i>	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
7	Welfare provisions.	Lack of welfare facilities such as toilets, quiet spaces, eating facilities, as well as facilities to accommodate breastfeeding.	Pregnant worker/new mother.	4	2	6	Toilets and canteens/eating facilities are present in all DPP premises. Reflection/quiet rooms are present in HQ and most larger stations which can be used as required. These rooms include somewhere to lie down, are hygienic and private so that new mothers can express milk if they choose to, and they include fridges to store their milk. Line managers must manage these measures as appropriate for the individual, particularly with regard to the need for rest, meal and refreshment breaks, and to maintain appropriate hygiene standards. If the individual is not located near any of these facilities, then consideration must be given for appropriate relocation.	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
							<i>Please list any changes or implemented control measures for the individual:</i> •				
	Stress and postnatal depression.										
	Lone working.										
	Fire safety.										
	Smoking.										

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
	Operational officer duties.	Operational officer duties can carry additional risks to pregnant workers and new mothers. Duties with additional risks can include general patrol, public order, method of entry, custody, dog section, advanced driving, firearms etc. The main risk from these duties is confrontation or violence, though there are many other risks present.	Pregnant worker/new mother.	4	4	16	An individual assessment of the risks involved in the pregnant worker/new mother's work activities must be undertaken. Total removal from certain operational activities are required, including: - Any activity where it is reasonably foreseeable to include confrontational situations. - Working within custody suites. - Mounted units / horse riding. - Working within Dog Section. - Diving activities. - Public Order, self-defence or MOE training.	Pregnant worker/new mother. Line Manager.			

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
							<i>Please list any changes or implemented control measures for the individual:</i>				

Part 2: Specific Risks

This section should include any specific risks to the individual that are not listed above; typically risks that are not present in a standard workplace. If all of the expected risks are covered in Part 1 then nothing further needs to be added. **Add content as appropriate for the individual.**

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures - Existing and Additional <i>If additional, by what deadline?</i>	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
1											
2											
3											

Ref No.	Activity / Process Details	Hazard	Who might be harmed?	Initial Risk Rating Score			Control Measures - Existing and Additional <i>If additional, by what deadline?</i>	Person Responsible	Residual Risk Rating Score		
				L	C	RR			L	C	RR
4											
5											
6											
7											
8											
9											