

Pregnancy in the practice

By practice management consultant **Natalie Elias**

When an employee announces she is pregnant there are certain protocols to follow and obligations required of both parties. By the end of the fifteenth week before the baby is due, a pregnant employee is required to tell her employer that she is pregnant, the expected week of childbirth, and the date she plans to begin her maternity leave. The employer should ask her to confirm everything in writing.

The employee is not required to tell her employer that she is pregnant before this date but it is in her interests to do so earlier so she can benefit from the protections available.

If the pregnant employee wants to change her

maternity leave start date, she must give at least 28 days' notice before her original date or 28 days' notice before the new date if that is earlier. She can give her employer a shorter notice period if she has a good reason for doing so. Common sense should be used and notice periods should not be strictly enforced if the practice can easily accommodate the employee's request.

To claim statutory maternity pay, the employee must give her employer a copy of her MAT B1 Certificate, a certificate from a doctor or midwife confirming the expected week of childbirth. The employer should ask for this before the employee begins her maternity leave.

Once the employer knows the employee's maternity leave start date, the employer has 28 days in which to calculate when this will end. Unless the employee informs her employer otherwise, this will be 52 weeks from the start date she has given. The employer should confirm the return date and say that, if the employee wants to change it, she needs to give eight weeks' notice of the date she intends to return. The employer cannot later insist on eight weeks' notice if the employee wishes to return earlier if the employer does not confirm her return date in writing.

All pregnant employees have the right to reasonable time off with pay at their normal rate during working hours for antenatal care. This right applies to all pregnant employees regardless of hours worked or length of service. An employer can ask an employee to arrange appointments outside normal working hours but this is likely to be difficult if the employee works full time.

Antenatal care includes appointments with her general medical practitioner and midwife and hospital visits for scans. However, it is not restricted to medical examinations. It can include relaxation classes and parent-craft classes if these have been recommended by a registered medical practitioner, registered midwife or registered health visitor. As a very rough guide, a woman will attend seven antenatal-care appointments during her pregnancy, although this may be ten if it is her first child. Some women will need more antenatal care if there are health problems.

The employee should tell her employer

the dates and times of appointments and give reasonable notice. This requirement should be included in your practice's written maternity policy. If the employee gives very short notice for an appointment her employer could refuse the request for time off, particularly if the appointment is not urgent. But the employer should be careful: seek external legal advice in such circumstances. The employer is entitled to ask for evidence of antenatal appointments, with the exception of the first appointment.

'Reasonable' time off generally includes the time taken to travel to and from the appointment. If an employer unreasonably refuses a request for time off for antenatal care, or refuses to pay for the time off, the employee can bring an employment tribunal claim. If the employer loses, they will be ordered to pay the employee compensation, which will be the pay to which the employee would have been entitled. An unreasonable refusal to grant time off for antenatal care may also amount to pregnancy and maternity discrimination, for which compensation is unlimited.

Employers have a duty to protect the health and safety of their employees and special obligations apply to pregnant staff. Usually working procedures can continue as normal because much of what goes on in a dental surgery is already risk managed: this includes taking radiographs and working with dental amalgam and mercury. So, while there is no need to conduct a new specific assessment for a pregnancy it is a legal requirement to *review* the existing risk assessment to see if additional control measures are needed.

Nitrous oxide can pose an additional risk so extra precautions may be needed if you use inhalation sedation. Employers should limit exposure to nitrous oxide to a maximum of two clinical sessions a week (one session would be one morning), ensure active scavenging is used, that equipment is properly maintained, and that there is good ventilation.

Perhaps most importantly, the practice owner should welcome the woman's questions and be seen to give her the chance to discuss concerns and the controls put in place by the employer. This can help allay any unfounded anxiety and provide the chance to explain why most routine duties can continue. The employer should meet with the employee regularly to discuss arrangements.

