

Pregnancy & Baby Loss Policy

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Staff Engagement Group		July 2024

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IMPACT ASSESSMENTS – AVAILABLE ON REQUEST

	Stage	Complete	Comments
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1. What is a people policy

A people policy provides support, advice and guidance on what is expected from you, how you can expect to be treated, and how you can access help and guidance.

2. Terms used in this policy

This policy uses the term the People Professional to refer to people at every level across the NHS, including human resources (HR), organisational development (OD) and workforce departments including recruitment, temporary staffing, learning and development teams; who work alongside managers and trades unions who contribute to, and improve, our NHS people's working experiences.

3. What this policy covers

The aim of this policy is to provide the support people need during this difficult time in their life, and to help managers and colleagues know how to support people affected, with kindness and understanding.

This policy includes, but is not limited to:

- Miscarriage: loss of a pregnancy before 24 weeks
- Termination: a medical or surgical procedure to end pregnancy
- Ectopic pregnancy: where a fertilised egg implants and grows outside the uterus, meaning the pregnancy is not viable
- Molar Pregnancy: where a non-viable fertilised egg implants in the uterus, and the baby and placenta do not develop as they should

If someone's baby is stillborn after 24 weeks of pregnancy, or in the case of neonatal loss, they will be entitled to the same amount of maternity leave and pay as if the baby was alive. Please see the Maternity Leave Policy. If this applies to you, we are very sorry. Please contact your People Professionals or someone you feel comfortable talking to, so that we can provide you with the love and support you need.

4. Why we have this policy

If you are reading this policy because you have lost a pregnancy or baby, we are so sorry, and we will do all we can to provide you with the love and support that you need.

We want to break the taboos that exist around pregnancy or baby loss and encourage mothers and parents to talk about what has happened, if they want to. Sadly there still remains a silence in many parts of our society about this tragic and common issue.

5. How do we know this policy treats people fairly

Whenever we write a policy, we always do an 'Equality & Health Impact Assessment' (EHIA) to ensure it does not disadvantage anyone or discriminate against any protected group. We also review our policies regularly to see how we are doing, which includes listening to colleagues views and reviewing information about how the policy works in practice.

6. How this policy promotes a kind and caring culture

This policy supports those who have experienced pregnancy loss and parents who have lost a pregnancy or baby and encourages them to feel confident to talk to their manager, colleagues, and friends at work about what has happened if they would like to do so. It challenges attitudes that pregnancy or baby loss is a taboo subject and ensures that people do not have to suffer in silence.

Click here for more information about ['Our NHS People Promise'](#).

7. Responsibilities

Everyone is expected to treat someone who has lost a pregnancy or baby with kindness and understanding.

It is the manager's responsibility to support the employee with kindness, compassion and flexibility. Each person is different, and individuals may also need temporary work adjustments or other levels of support.

It is hoped that someone who has lost a pregnancy or baby feels able to reach out and talk to someone they trust if they feel they need additional support or signposting.

8. Talk to someone who can help

If you have lost a pregnancy or baby, it is important that you talk to your GP, Midwife or medical professional as soon as you possibly can. They will be able to provide you with the professional medical care that you need.

Please also tell someone at work so that you can access the support available to you. It is usually best to talk to your manager, but if you do not feel comfortable with this, find someone else you can talk to easily. This could be a People Professional, health and wellbeing lead, occupational health, trades union representative, a friend, or someone else.

You may also wish to consider contacting the 'Employee Assistance Programme' (EAP), which is a free telephone counselling service.

If you do not know how to access this, please contact your People Professionals.

9. Understanding pregnancy or baby loss

We understand that losing a pregnancy or baby is a bereavement and it can affect the whole family. It may affect partners, children, and many others.

We want to encourage mothers and parents to talk about their loss, and to support each other with love and gentleness. People often keep quiet and don't talk about the fact that they have lost their pregnancy or baby. This can increase feelings of loneliness and isolation and talking about what has happened can help process feelings of grief and loss.

The silence that surrounds pregnancy or baby loss can stop people from accessing the support that they need. That might be counselling, mental health support, or talking about it with friends and family. Mothers and parents may also find their GP a helpful source of support, as they will be able to refer them to 'talking therapies' or other support services and give them the time-off they need to process both the physical and emotional effects of losing a pregnancy or baby.

We hope that this policy will help reduce the silence of losing a pregnancy or baby and encourage people to talk about it, and seek support, at what can be a really difficult time in their lives.

10. What this policy offers

We would like to offer colleagues up to 10 days paid leave for the mother (or parent who was pregnant), and up to 5 days paid leave for the partner. Leave days are given on a pro-rata basis and pay is calculated on the basis of what the individual would have received had they been at work.

This includes, but is not limited to miscarriage, ectopic pregnancy, molar pregnancy, and termination of pregnancy.

This is not dependent upon gestation of pregnancy (how long someone has been pregnant for) or length of service within the organisation.

A 'Fitness for Work' statement from the GP is not required unless additional time off from work is needed. This paid time-off will not be used for 'sickness trigger' purposes.

In addition, colleagues are offered paid time-off for appointments linked to pregnancy or baby loss. This could be for medical examinations, scans and tests and mental health-related interventions, if this stretches beyond the time outlined above.

If someone's baby is stillborn, or in the case of neonatal loss, they will be entitled to the same amount of maternity leave and pay as if the baby was alive. Please see the Maternity Leave Policy.

We also promise that all requests to work flexibly following a loss will be treated with understanding and sensitivity. This may include home working for a period of time (where practical) or changing someone's hours of work or shift pattern.

11. The partner of someone who has lost a pregnancy or baby

If you are the partner of someone who has lost a pregnancy or baby, we are really sorry, and we will do all we can to provide you with the love and support you need.

We understand that this is a bereavement for you also, and that is why we are offering you 5 days paid leave, and paid time-off to support your partner who needs to attend appointments linked to pregnancy or baby loss.

We also want to encourage you to talk about your loss. It is usually best to talk to your manager, but if you do not feel comfortable about this, find someone else you can talk to easily. This could be a People Professional, health and wellbeing lead, occupational health, trades union representative, a friend, or someone else.

12. Don't suffer in silence

Please do remember we are here to support you, and we will do all we can to help you during this difficult time in your life. If there is anything further we can do to help you, please reach out, we are here for you.

13. Supporting someone who has lost a pregnancy or baby

If you are aware that someone has lost a pregnancy or baby, please remember to respect their privacy. Some people will want to talk openly about their loss, while others will not want to talk about it. Be sensitive to cultural differences as people may respond in a certain way to the loss of a pregnancy or baby.

Be sensitive to the needs of the individual and think about how a person might feel if there are to be pregnancy announcements at work. Let them know in advance by speaking to them privately so they can prepare themselves and their reaction.

If you feel someone needs support, please gently signpost them to someone who is able to help or raise the matter with your manager or People Professionals. However, please ensure you have their consent first.

Appendix 1:

Links which may help you

- **Miscarriage Association:**
www.miscarriageassociation.org.uk
- **National Bereavement Care Pathway:**
nbcpathway.org.uk
- **Tommy's:**
www.tommys.org/baby-loss-support
- **Saying Goodbye:**
www.sayinggoodbye.org
- **Petals:**
petalscharity.org
- **ARC (Antenatal Results and Choices):**
www.arc-uk.org
- **Sands:**
sands.org.uk
- **Bliss:**
www.bliss.org.uk
- **Cradle:**
cradlecharity.org
- **NHS Terms and Conditions of Service Handbook (Sections 15 and 23):**
www.nhsemployers.org/publications/tchandbook
- **Abortion Talk:**
www.abortiontalk.com

Appendix 2:

Additional guidance for managers

Pregnancy or baby loss may happen at work, and of course you may not be aware that a member of your team is pregnant. Remember that someone is not obliged to tell their manager of their pregnancy until 15 weeks before their estimated due date, or as soon as is reasonably practicable after then (approximately 6 months pregnant).

If someone suspects that they are starting to lose their pregnancy or baby, they may have bleeding, severe abdominal pain, and may feel faint or collapse. They will most likely be very distressed, panicky, embarrassed and frightened.

You can help by ensuring they have very quick access to privacy. You may also need to help them by calling their partner or friend to assist them in getting home, to hospital or to occupational health (if they are based on-site and you have their consent). In severe cases you may need to call an ambulance.

If someone at work suddenly learns that their partner, relative or close friend is starting to lose their pregnancy or baby, they may need to leave work at short notice to provide practical and emotional support. Please facilitate this and be as compassionate as you can be.

Once someone has gone home or to hospital, you will need to consider carefully how you will explain the sudden absence to other staff in order to respect their privacy, especially as they might not want others to know the details. You may choose to simply say “they are not at work”, and not engage in deeper conversation.

Absence should be recorded on ESR as ‘Special Leave’ not ‘Sickness Absence’. For periods of absence longer than 10 days (or 5 days for partners), the employee will need to obtain a ‘Fitness for Work’ statement from their GP. Don’t forget leave needs to be pro-rata for part-time colleagues. This paid time-off is not to be used for ‘sickness trigger’ purposes.

Whilst they are off, ensure you keep in contact with them, but use your discretion and be sensitive to how much contact they may want.

When the employee and/or partner is ready to return to work, you should meet with them on a one-to-one basis to see how best you can support them going forward. This may include doing a Risk Assessment and/or referring them to Occupational Health support.

Be sensitive on the anniversary of the pregnancy or baby loss, and you may wish to put a private note in your diary to remind you to ‘look out’ for them. It is probably best not to make a big deal of it, but you may wish to consider discreetly asking them if they are ok. You may also wish to pay attention to them on Mother’s Day or Father’s Day, as this could be a particularly difficult day for them.

This policy does not cover stillbirth or neonatal loss from 24 weeks of pregnancy, as this is covered in a separate maternity leave / bereavement leave policy. However, if someone has lost a baby or child, whether they are the parent or the primary carer, they are entitled to 2 weeks paid leave (regardless of the age of the child).

Please see Sections 15 and 23 of the [NHS Terms and Conditions of Service Handbook](#).

If you feel you need additional advice at any time, please do not hesitate to contact People Professionals. They will provide you with the support you need.

Policy developed in collaboration with the Miscarriage Association

Appendix 3:

Monitoring the effectiveness of this policy

We will monitor the effectiveness of this policy by collecting information to help us understand the impact it is having. We will do this by completing the table below:

What element of this policy is to be monitored	What is the method / information source e.g. audit/ feedback	Who will be leading the monitoring	When will the information be reviewed, by who/which group	What are the arrangements for responding to issues and tracking delivery of planned actions
How many individual access support through this policy	How many individuals complete a form	This could be People Professionals, Equality Diversity & Inclusion Lead, or Health & Wellbeing Lead	This could be annually / monthly / quarterly	Include details of who and how this will be reviewed and discussed
Is this policy accessed more successfully by different groups and is there any difference to agreed rates	From equality demographics, bands, staff groups	This could be People Professionals, Equality Diversity & Inclusion Lead, or Health & Wellbeing Lead	This could be annually / monthly / quarterly	Include details of who and how this will be reviewed and discussed
How supportive was the policy	Feedback from users / managers about how helpful the policy was	This could be People Professionals, Equality Diversity & Inclusion Lead, or Health & Wellbeing Lead	This could be annually / monthly / quarterly	Include details of who and how this will be reviewed and discussed