

# **Pregnancy Loss Policy and Procedures**

## **Introduction**

Our School understands that pregnancy or baby loss can be a devastating experience for anyone, whether it is the woman expecting the baby, their partner, or the intended parents in a surrogacy arrangement. Pregnancy loss is sadly more common than many people think, with an estimated one in four pregnancies ending in miscarriage and one in every 200 births being classified as stillborn.

The School recognises that a pregnancy or baby (neonatal) loss can be a bereavement, that the experience of loss varies considerably from person to person, and that it can be a painful and stressful event with lasting emotional and/or physical impacts for those experiencing it, irrespective of the nature or timing of the loss. The School is therefore committed to supporting colleagues, wherever possible, and providing information to both raise awareness and increase knowledge of this sensitive subject.

## **Policy Aim and Statement**

This policy has been developed for individuals who have suffered a loss, line managers, and colleagues who may wish to support fellow employees. The aims of this Policy and associated procedures are as follows:

- To define what types of pregnancy and baby loss are covered by this and other policies
- To provide information about what leave staff can take if they are affected by pregnancy or baby loss
- To outline what help is available from George Watson's College
- To signpost external sources of help and support

## **Scope**

This Policy and associated procedures apply to all colleagues directly employed by the School.

## **General Principles**

In managing any pregnancy or baby loss, the School is committed to ensuring that:

- colleagues are supported as well as possible during and after their loss
- no assumptions are made about how an employee experiencing loss feels or wants to be treated
- we uphold the principles of our Equality, Diversity and Inclusion Policies, Guidance and Procedures at all times
- our health and wellbeing resources and practices include provisions to support employees experiencing pregnancy loss (e.g. Employee Assistance Programme)
- staff are never treated unfavourably, or dismissed, because they are reasonably taking, or wish to take, maternity or paternity leave

## Relevant Legislation

The following legislation is relevant in relation to the School's Baby and Pregnancy Loss Policy:

### Equality Act 2010

### Parental Bereavement (Leave and Pay) Act 2018

### Maternity and Parental Leave etc Regulations 1999 (the Regulations)

### Employment Rights Act 1996 (the Act): time off for dependants

### Shared Parental Leave Regulations 2014

### Paternity and Adoption Leave Regulations 2002

### Data Protection Act 2018: General Data Protection Regulation 2016 (GDPR)

## Other Relevant Policies

- Maternity Policy
- Paternity Policy
- Shared Parental Leave Policy
- Adoption, Surrogacy and Fostering Policy
- Sickness Absence Management Policy
- Special Leave Policy

## Effective Date

The Pregnancy and Baby Loss Policy and associated procedures are effective from **June 2023**.

## Approval and Review

The owner of this policy is the Head of Human Resources.

The Pregnancy Loss Policy has been approved by the Staff Committee of the Governing Council, following endorsement by the Principal's Leadership Team and ICE Committee.

In line with the agreed schedule, the School will review the Pregnancy Loss Policy at least every two years, or as soon as practicable after any change of relevant legislation, to ensure that the policy and associated procedures continue to comply with current employment legislation and to meet the School's operational needs.

***Date of next review: Summer 2025***

## Appendices

### Appendix 1

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# Appendix 1

## Pregnancy and Baby Loss Definitions

### Introduction

We know that it can sometimes be hard to find the right language to use when describing a pregnancy loss. We have chosen to use the most widely-used and accepted terms, and so the following definitions will apply wherever they are mentioned throughout this policy and other appendices. However, the HR team will regularly review these definitions, and also welcomes feedback from colleagues.

To provide more detailed information, we have also included links to relevant NHS or charity websites for each term used.

Pregnancy and baby loss includes, but is not limited to:

**Miscarriage:** the spontaneous loss of a pregnancy during the first 24 weeks of pregnancy. Miscarriage affects around 1 in 4 pregnancies.

**Stillbirth:** when a baby dies after the 24th week of pregnancy or during birth. In the UK, around 1 in 200 births is a stillbirth.

**Neonatal loss/death:** the loss of a live-born baby up to 28 days after the birth, often caused by genetic disorders or premature birth.

**Ectopic pregnancy:** when a fertilised egg implants and develops outside the womb.

**Molar Pregnancy:** a rare form of pregnancy in which a non-viable fertilised egg implants in the uterus which will fail to reach full term.

**Abortion/termination of pregnancy:** a medical or surgical procedure to end a pregnancy.

**Embryo transfer loss:** when an embryo transfer during IVF/fertility treatment doesn't result in a pregnancy.

## Appendix 2

# Pregnancy and Baby Loss: guidance and support

### Introduction

Our School recognises that most workplaces will employ people who have been or will be affected by pregnancy or baby loss, and understands that it can be a difficult, upsetting and traumatic experience, with emotional and physical impacts which can potentially last for a long time. Since each person experiences loss differently, everyone's needs will be different in these circumstances, so it is important that no-one makes any assumptions about how others feel or how they want to be treated. Some people might want to continue working as normal; others may need more support or time off.

We also understand that the guidance covers topics that some employees may find difficult or upsetting to either read or deal with from a personal perspective, and that there can be particular sensitivities to consider. For example, you may be a line manager with your own experience of loss or an expectant parent managing or working with someone that has experienced a loss. If this is the case, you can speak to your own line manager or HR at any time for additional advice, guidance and support.

Although we have highlighted sections of this Appendix as being more relevant for individuals experiencing loss, line managers or colleagues, we would recommend that everyone reads all of the guidance in this and the other appendices to fully understand the potential impact of loss, employees' rights in these circumstances, available sources of information, and the range of the practical support which is available both internally and externally.

We would also recognise that much of the content of this Appendix has been guided by a policy template supplied by the Miscarriage Association.

### Creating a supportive environment

The School is committed to providing a supportive environment for our colleagues in all kinds of situations, including when they have experienced a bereavement. Offering compassionate support in difficult times can have a significant impact, helping someone to balance work demands with recovery and the grief of loss. If people feel supported and can access flexibility or adjustments at work, they are more likely to carry on working to the best of their ability. Conversely, individuals who have to appeal for time off or don't feel supported often end up taking more time off or even leaving their organisation.

The School recognises that support may come in many forms, but we will make sure that the necessary frameworks are generally in place to support all our colleagues, including HR and Health and Safety policies, access to specialist support (such as counselling or occupational health), procedures to manage sickness absences or maternity/paternity pay, return to work, and reasonable adjustments. Further details are provided throughout this document.

### Employee Assistance Programme (EAP) and counselling

As part of our commitment to providing supportive staff benefits, employees of George Watson's College can access professional support, counselling and advice via the Employee Assistance Programme (EAP), and this may be a particularly useful resource for further support at a time of pregnancy or baby loss or any point afterwards.

The Employee Assistance Programme is provided by Care First, and their expert advisors, trained by Citizens Advice, can provide comprehensive answers on a range of issues, **confidentially and free of charge**. The

confidential counselling service is available 24/7 and all counsellors are professionally qualified and accredited by the British Association for Counselling and Psychotherapy. Their freephone number is **0800 168 2143** or refer to “lifestyle support” on the [mybenefits@GWC](mailto:mybenefits@GWC) website for further details and to access the EAP website.

### **Line managers’ guidance and support**

Line managers have an important role to play in supporting the wellbeing and work needs of either an employee who has experienced pregnancy or baby loss or their partner. This is because a line manager is often an employee’s first point of contact, responsible for their work programme or tasks, and key to supporting work adjustments, flexibility, and potentially preventing additional stress. They can best manage and offer support to affected employees by knowing the relevant policies and procedures (e.g. Sickness Absence Management, Special Leave etc), supporting the individual and the wider team, enabling a supportive return to work, and managing conversations and situations in a sensitive way whilst maintaining appropriate boundaries.

Supporting someone who is experiencing a difficult situation like loss can be challenging. Further help and support to do this effectively is available in various other sections this document, from the HR Team, via the Employee Assistance Programme (i.e. from the managers information guides or the helpline), or in this CIPD Managers’ guide: [Workplace Support for Employees Experiencing Pregnancy or Baby Loss \(A guide for managers\)](#)

If a line manager or Head of Department feels unable to support an employee who has experienced pregnancy or baby loss, they should talk to HR or their own manager about the situation to see if someone else can provide the employee with support; the School is committed to supporting our line managers’ wellbeing too.

### **If the loss occurs at work**

A pregnancy loss may happen at work. Line managers or Human Resources may not be aware that an employee is pregnant; she is not obliged to disclose her pregnancy until 15 weeks before her estimated due date or as soon as reasonably practicable after then.

If an employee suspects that she is experiencing a pregnancy loss, she may have severe abdominal pain, bleeding, and may faint or collapse. She may also be very distressed, panicked, embarrassed and frightened. Line managers or work colleagues offering support can help by ensuring that she has very quick access to a toilet and/or the medical bay. Depending on the situation, and the employee’s wishes, her line manager or other designated person may also be required to call her partner/preferred contact to assist her in getting home or to the hospital. In severe cases, the School may need to call an ambulance.

If a partner is told of the loss of their baby while they are at work in School, they may need to leave at short notice to provide practical or emotional support. Their line manager should help facilitate this, including sourcing immediate classroom cover, if required.

### **Confidentiality**

If the employee is working at the time they experience the pregnancy loss (whether it happens at work or at home but prior to maternity leave starting), line managers will need to consider how to explain the sudden absence of the employee in order to best respect their privacy, especially as they might not want others to know the details.

Line managers and HR will keep the information about the loss confidential and will not share this information unless the employee confirms that it is OK to do so, or there are serious concerns about the employee’s health, safety or wellbeing, or that of others.

It is always up to an employee whether they choose to tell colleagues and other people in the workplace about what has happened. Some people find the support of colleagues really helpful, while others prefer not to share and to keep the information private; their choice will always be respected.

### **Talking about pregnancy and baby loss**

It's important to acknowledge the loss rather than to ignore it, unless the employee requests otherwise. As an employer, we do understand that however supportive managers or colleagues wish to be, these can be difficult conversations for everyone and that people may not know what to say, including the employee who has experienced the loss.

An employee may be very confused and upset, and the shock of losing a pregnancy or baby may make it difficult for them to contact their manager or HR to tell them what has happened, and/or to discuss what happens next with regards to work. At an appropriate point, someone should speak to the employee about what they would like colleagues to know about their loss. This could be their line manager, HR or another trusted colleague. If they do not wish to share this information, their wishes should be respected, and the employee should not feel pressured either way. This type of contact can help colleagues to understand what has happened, what the effects on the person might be, and how to be supportive. It will also make it easier for the individual to speak to their colleagues when they return to work.

Sensitive and supportive communication, respectful of the individual employee's wishes, should be maintained throughout the employee's absence and return to work. The [CIPD management guide](#) (noted above) and charities such as Tommy's and The Miscarriage Association all have very useful information on talking about pregnancy and baby loss in the workplace, with guides for managers and colleagues covering listening and responding, asking questions, what not to say, and the importance of confidentiality of information. We would recommend the available guidance in the links to everyone who works here.

### **Protected Characteristic**

"Pregnancy and maternity" is a protected characteristic under the Equality Act 2010. If a miscarriage happens in the first 24 weeks of pregnancy, any sickness absence the birth mother needs to take is likely to be considered a "pregnancy-related illness". Under the terms of the Equality Act 2010, if an employee is put at a disadvantage and treated less favourably because of a pregnancy-related illness or related time off, this could be discrimination. An employee's GP or other health professionals can certify their sick leave as pregnancy or miscarriage related for as long as necessary, and if this is stated in the Fit Note, the entire period could be classed as a "pregnancy-related illness". The Equality Act 2010 has a "protected period" for people who do not have a right to statutory maternity leave, which is the two weeks after the pregnancy ends.

Further information about this protected characteristic is available from the HR Team or the [ACAS website](#).

### **Recording leave and absence**

Although we are keen to support colleagues to have the time off work they need, it is important that any time off or absence associated with pregnancy or baby loss is correctly recorded.

As noted above, there are certain protections associated with pregnancy-related leave; any such period of sick leave will not count towards sickness absence triggers points. For periods of absence longer than seven days, employees will need to provide a Fit Note from their GP or other healthcare professional.

Any compassionate special leave, unpaid leave and annual leave taken by employees will need to be approved and recorded following the usual School or departmental processes.

## **Time off and rights to leave**

We recognise that entitlements to leave, time off and pay may not be their immediate focus when an employee is experiencing a loss; however, the time when the pregnancy or baby loss happens will inform what the employee may be entitled to in terms of the type of leave and pay that may be due to them.

If the pregnancy loss occurs before 24 weeks, any sickness absence the birth mother needs to take is likely to be considered a “pregnancy-related illness” and this will be covered by the School’s Sickness Absence Management Policy. In relation to pregnancy loss happening after 24 weeks (a stillbirth) or a neonatal loss, the birth mother will be entitled to their full maternity leave and pay. Further information is provided in the Maternity Leave Policy. Employees may also be entitled to Parental Bereavement Leave and Pay, details of which can be found in the Special Leave Policy and the section below.

HR will be able to guide employees and line managers in terms of each employee’s eligibility to leave and pay as appropriate to the individual circumstances of their loss.

## **Parental Bereavement Leave and Pay**

The School understands that while dealing with any bereavement will be difficult, the death of a child is amongst the most distressing events an employee might ever face, and will obviously support colleagues in these circumstances.

Under the statutory requirements of the Parental Bereavement (Leave & Pay) Act 2018, and the supplementary Regulations published in 2020, parents and adults with parental responsibility who suffer the loss of a child after 24 weeks of pregnancy and before 18 years of age are entitled to two weeks [Parental Bereavement Leave](#), regardless of their length of service.

To be eligible for leave, the employee must be the child’s:

- Birth parent
- Partner of the child’s parent, if they live with the child and child’s parent in an enduring family relationship
- Adoptive parent, if the child was living with them
- Person who lived with the child and had responsibility for them, for at least 4 weeks before they died
- “Intended parent” - i.e. due to become the legal parent through surrogacy
- Natural parent (i.e. the person who gave birth to the child who has since been adopted, but who has a court order to continue having access to the child)

For each child or baby that has died, an eligible bereaved parent can take one or two weeks parental bereavement leave, within 56 weeks of the death occurring. This leave must be taken in blocks of one week and is not available as individual days. Parents may take leave in a single block of two weeks or in two separate blocks of one week each. The weeks need not be consecutive.

Employees with more than 26 weeks service at the relevant date (i.e. the week immediately before the relevant death or stillbirth) may also be eligible for two weeks of Statutory Bereavement Pay.

Depending on the circumstances of the bereavement, as well as parental bereavement leave, the employee may also be entitled to take another period of leave (e.g. maternity, paternity, adoption, Shared Parental Leave) for the child who has died, or another child.

Full details of the current rates of pay, notice requirements, and eligibility criteria can be found on the GOV.uk website: <https://www.gov.uk/parental-bereavement-pay-leave>

## **Partners**

Although there is no legal entitlement to time off for a pregnancy loss before 24 weeks, the School recognises the impact that loss or grief can have on an employee who is the partner of someone who has experienced the physical loss of a pregnancy, and sympathetic consideration will always be given to the employee taking some compassionate leave and/or other time off work (e.g. sickness absence, unpaid leave, annual leave or short-term flexible working arrangements). There is a section in the School's Special Leave Policy providing information about time off for domestic and personal reasons (e.g. time off for dependants, care arrangements, illness of others and bereavement) and additional guidance is always available from the HR Team.

If an employee has experienced a baby loss (i.e. a stillbirth after 24 weeks of pregnancy or a neonatal loss/death) and they were eligible for Paternity Leave, they will still be entitled to take this. They will also be eligible for Parental Bereavement Leave and Pay. Further details about this statutory right, the eligibility criteria, and the GWC procedures are available in the section above and the Special Leave Policy.

## **Returning to work**

We will not assume how any employee affected by pregnancy or baby loss may feel about coming back to work, but understand that for some people, it can be incredibly challenging. We also appreciate that each person can be affected very differently by their loss, both emotionally and physically. When an employee is ready to return to work their manager should offer them a meeting where any individual needs can be discussed.

In some circumstances, there might be some reasonable adjustments that the School can put in place to help an employee cope if they are finding the return to work difficult, or aimed at enabling them to remain at work rather than taking sick leave. Employees are encouraged to have an ongoing discussion with their line manager or HR about any necessary adjustments; it would be anticipated that these are temporary changes. Examples of possible adjustments that might help could include:

- Phased return to work or working from home (if suitable to the employee's role) - also particularly helpful if an employee has ongoing hospital appointments to attend
- Providing more breaks
- Allowing them to switch to different tasks on days they are finding difficult
- Changing an employee's start time if they are experiencing disturbed sleep
- Making sure the employee has easy access to toilet facilities
- Turning off their camera on video calls/meetings

Depending on individual circumstances, a risk assessment may also be helpful to understand how your experience may affect the employee at work, and the Health and Safety Manager would be able to support the line manager and employee with this, if required.

It might also be very difficult for someone who has suffered a miscarriage to work closely with or near a colleague who is pregnant or has recently given birth. If this is the case, it may also be worth exploring whether working in a different location within the School could be possible and helpful.

The Miscarriage Association has [more information on ways you can support your team member's return to work](#) and [offer further support in the future](#); although written in relation to miscarriage, the general information is applicable to other pregnancy and baby loss experiences too.



## **Ongoing support**

A pregnancy or baby loss will affect everyone differently, but the person may be:

- Having difficulty sleeping
- Finding it difficult to concentrate or feel motivated
- Struggling with social interaction
- Experiencing mood swings
- Feeling more tearful or irritable than normal
- Finding it difficult to manage their mental health

All of these may affect an employee's productivity or ability to manage at work, and the School recognises the importance of providing ongoing support to our colleagues who have experienced pregnancy or baby loss. As well as the impacts and symptoms noted above, they may be affected by depression or another mental health condition, or have extra caring responsibilities (e.g. for their partner). Their return to work is not a one-off event, and line managers should continue to have regular conversations with the individual about how they are coping and what support they might need, discuss how any support or adjustments are helping the employee, and take health and wellbeing into account when considering performance, etc. They should also consider any impact on other members of the team or department associated with a phased return or changes in duties.

Additional support and guidance, for employees, line managers and colleagues, is always available from the HR Team.

## **Future leave**

Women who have had a pregnancy or baby loss, and perhaps their partners, may need time off in the future to attend appointments related to their loss, including medical appointments or counselling. In any future pregnancies, additional scans and monitoring may be required. Colleagues have a right to take reasonable time off for antenatal care anyway, and the partners of pregnant women have a statutory right to time off to attend two antenatal appointments; however, the School will be as accommodating as possible in supporting additional appointments outwith statutory entitlements.

# Appendix 3

## External Sources of Support

### Introduction

There are lots of charities and other specialist support groups who offer information and provide support around pregnancy and baby loss. The School does not specifically endorse any of the organisations noted below as sources of support, but we thought it would be useful to identify them. Whether you have been directly affected by pregnancy loss, or you are a line manager or work colleague supporting someone who has been, we hope you find the following information helpful.

We are always looking to build and maintain our list of useful resources for colleagues, so if you know of a useful organisation not listed here or experience any issues with the links, please let the HR Team know.

[The Miscarriage Association](#) is a charity providing expert resource, information and support for anyone affected by miscarriage, ectopic or molar pregnancies. They provide a wide variety of resources covering all aspects of pregnancy and baby loss, including leaflets, FAQs, and podcasts. They operate a helpline **01924 200799** as well as offering online and live chat support.

[Tommy's](#) is the largest UK charity researching the causes and prevention of pregnancy complications, miscarriage, stillbirth, premature birth and neonatal death. They are also dedicated to providing trusted advice for all parents-to-be and baby loss information and support.

[SANDS](#) is the UK's stillbirth and neonatal death charity, offering support to those affected by the death of a baby. The services they offer include a helpline **0800 164 3332**, a bereavement support app, a UK-wide network of support groups, and a wide range of online and print bereavement support resources.

[Petals](#) is a charity providing specialist baby loss counselling.

[ARC](#) is a national charity offering parents non-directive information and support before, during and antenatal screening and its consequences, including bereavement after TFMR (termination for medical reasons).

[Abortion Talk](#) is a new charity offering people the chance to talk about abortion in a non-judgemental and supportive environment.

[Ectopic Pregnancy Trust](#) is a charity supporting people with ectopic and early pregnancy complications.

[Maternity Action](#) is a charity focussed on providing advice about maternity rights, benefits, and associated information. They also run a national advice line **0808 802 0029** Mon-Fri 10.00am - 1.00pm.

Mental health charities [MIND](#) and [SAMH](#) both offer advice in relation to perinatal and postnatal mental health, including postnatal depression, birth trauma and PTSD.

[Cruse](#) is a national charity supporting people through bereavement, including the loss of a baby. They operate a telephone helpline **0808 808 1677** and people can speak online with their expert grief counsellors via CruseChat.

[BLISS](#) is a charity offering support and advice to parents whose baby is born premature or sick, including coping with a neonatal death.

[The Lullaby Trust](#) raises awareness of sudden infant death syndrome (SIDS), provides safer sleep advice for babies, and offers emotional support for bereaved families.

**[The Compassionate Friends](#)** offer a range of services supporting bereaved parents and their families, including specific support and information around [pregnancy and baby loss](#). They operate a national helpline **0345 123 2304** from 10.00am-4.00pm and 7.00pm-10.00pm daily, staffed by volunteer bereaved parents.