



COVID-19 Occupational health guidance for pregnant women who work in a public-facing role

Q. Where do I stand as far as my right to a safe work environment?	1
Q. Can I still go to work? What if I work in a public-facing role?	2
Q. What is the advice if I am a healthcare worker and I am currently pregnant?.....	2
Q. I am pregnant and have pre-existing health issues – what are my options?.....	2
Q. I am pregnant (less than 28 weeks), what are my work options?	2
Q. I am more than 28 weeks what are my options for work?	2
Q. I am more than 28 weeks pregnant and I want to keep working, can I?	3
Q. I am pregnant and caring for aged or unwell family members – what are my options?.....	3

Q. Where do I stand as far as my right to a safe work environment?

For essential workers such as midwives, travelling to and participating in work remains important during this national emergency. The following advice may assist you to determine the most appropriate choices to make about your work options.

In Australia, there already exist significant [protections in law for pregnant workers](#). These must be followed in relation to COVID-19. Employers should do everything possible to maintain the health of their pregnant employees. The central aspect of this protection is based on risk assessment of each individual pregnant worker’s working environment and the role they play.

“Under work health and safety laws, businesses must do what is reasonably practicable to ensure the health and safety of all their workers - including those who are pregnant.”

In light of the limited evidence, pregnant women of any gestation should be offered the choice of whether or not to work in direct client-facing roles during the COVID-19 pandemic. This choice should be respected and supported by their employers. Suitable alternative duties might include remote triage, telephone consultations, governance or administrative roles.

Q. Can I still go to work? What if I work in a public-facing role?

We understand that it must be an anxious time if you are pregnant and you work in a public-facing role.

Pregnant women who can work from home should do so. If you work in a public-facing role and are unable to work from home, your work activities should be modified appropriately to minimise your exposure to COVID-19. This should be considered and discussed with your occupational health team or employer.

If you are in your first or second trimester (less than 28 weeks pregnant), with no underlying health conditions, you can choose to continue working in a public-facing role, provided the necessary precautions are taken - these include social-distancing, the use of personal protective equipment (PPE) and risk assessment.

If you are in your third trimester (more than 28 weeks pregnant), or have an underlying health condition – such as heart or lung disease - you should work from home where possible to significantly reduce unnecessary social contact and avoid contact with anyone with symptoms of coronavirus.

Read the government guidance on [social distancing](#).

Q. What is the advice if I am a healthcare worker and I am currently pregnant?

Ideally pregnant women of any gestation should be offered the choice of whether or not to work in direct client-facing roles during the coronavirus pandemic. Any decision you make should be respected and supported by your employers, and work colleagues.

Q. I am pregnant and have pre-existing health issues – what are my options?

If you have a pre-existing or underlying health condition – such as heart or lung disease – you are best to avoid any client-facing work that will increase your risk of exposure to COVID-19. Contracting COVID-19 will increase your risk of developing a severe complication.

Q. I am pregnant (less than 28 weeks), what are my work options?

It is best to talk with your employer about the options to undertake non-client contact activities where possible so that you can maintain the social distancing requirements.

If you choose to be client-facing, remember that not all women or their partners, or indeed our fellow colleagues will present with symptoms when they are contagious and as such, it may not be possible for you to avoid all contact with COVID-19 infected individuals. Therefore, in cases where you are client-facing, make sure you follow all social distancing and hand washing measures and wear personal protective equipment where it is required.

Q. I am more than 28 weeks what are my options for work?

The safest option is to coordinate working from home alternatives to reduce your risk of exposure to COVID-19. Talk with your employer to see whether there are any flexible working arrangements or options where you can undertake non-client facing work. There may be options such as phone

triage of women, or telehealth based antenatal or postnatal appointments. Clinical hands on requirements can then be undertaken by another midwife.

Q. I am more than 28 weeks pregnant and I want to keep working, can I?

Have a talk with your employer about your options and where your skills can best be utilised. It would be best if you were in a non-client contact role as mentioned above. Other options may include staff education, administrative duties or simulation.

Q. I am pregnant and caring for aged or unwell family members – what are my options?

It is important that you talk with your employer or colleagues so that they are aware of your circumstances. If you are worried about your health or the risks to the people you are caring for, your employer is obliged under [law and human rights requirements](#) to find suitable alternative work options for you.