

APPENDIX 1: PREGNANCY, MATERNITY & PATERNITY POLICY SUPPORT FORM FOR STUDENTS

This form aims to guide discussions with students during pregnancy and maternity. It should be completed and agreed with the student. It is not intended that the form should be completed at a first meeting as initially a student will be unable – and should not be expected – to respond to all the issues raised.

The form should be reviewed at key stages (e.g. 16 weeks pregnant, 24 weeks pregnant, and prior to return to study); or at key points of the academic year (e.g. prior to examinations and attending outreach clinics). If the student's circumstances change, the plan will also need to be reviewed.

Contact details	
1	Student's details
	Name
	Address
	Telephone
	Email address
2	Emergency contact's details
	Relationship to student
	Telephone
3	Course details
	Course title
	Course Leader
	Year of course
4	Details of the student's first point of contact within the HEI
	Name
	Title
	Location

	Telephone	
	Email	

Key dates (to be reviewed and added to over the course of pregnancy and maternity)

5	What is the student's expected due date?	
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Communication with the student

7	What is the student's preferred method of communication?
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	during pregnancy	
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	during maternity-related absence	
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	on return to study	
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Health and safety assessment (attach copy to this form)

8	Has an assessment been conducted that covers (where relevant)?
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	the student's course.	
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	course placements (outreach clinics)?	
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	examinations or other assessments?	
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	return from maternity-related absence?	
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10	Where changes are required to alleviate or minimise risks, who is responsible for ensuring they are implemented?
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Pregnancy-related absence		
13	Have you discussed any pregnancy-related illness that has affected the student's ability to undertake their course?	
14	If yes to either of the above questions, what arrangements have been made to enable the student to catch up?	
Assessments		
15	Is the student unable to complete any assessments due to her pregnancy or maternity?	
16	If so, provide details:	
17	What alternative arrangements have been made for any outstanding or incomplete assessments?	
Maternity-related absence (students should provide information in writing at least 15 weeks before their due date)		
18	How much maternity-related absence does the student intend to take?	
19	When does the student intend to start maternity-related absence?	
20	When does the student intend to return from maternity related absence?	
21	Will the dates of maternity-related absence affect the student's ability to complete any course units requirements?	
22	If so, what arrangements have been made to enable the student to complete the units?	
23	What information will the student require during maternity-related absence to keep up to date on course developments?	
24	Who will be responsible for providing the information to the student?	

Financial support		
25	Has the student been notified to make suitable financial arrangements?	
Baby feeding		
28	Does the student intend to feed their baby on UCO facilities on their return to study?	
30	Has the student been informed about the facilities available?	
International students/those on placement abroad		
33	Have international students or students on placement abroad been informed about:	
	Visa implications of returning home or extending their stay due to pregnancy and maternity?	
Students on placement		
34	Has the outreach clinic been notified of the student's pregnancy?	
35	Has the outreach clinic conducted a health and safety assessment?	
36	Is the outreach clinic aware of the UCOs policy on supporting students during pregnancy and maternity?	
Extenuating circumstances		
40	Have students been informed about the UCOs extenuating circumstances policy in the event that their pregnancy or maternity affects examinations and assessments?	
Return to study		
44	What support will be provided to the student on their return to study? (eg meetings with key staff, put in contact with other student parents, etc)	

Further information	
45	Any other information or comments
Signatures	
Plan to be reviewed on	
Agreed by staff member	
Name	
Title	
Signature	
Date	
Agreed by student	
Name	
Signature	
Date	

This form was adapted from one published by the Equality Challenge Unit. www.ecu.ac.uk