

Topic: Re-introduction of Parent Education Classes

Parent education classes are an important part of antenatal midwifery care in the UK and are recommended to be offered to all women to support information sharing during pregnancy (NICE 2008).

Potential impact of COVID-19 in this topic area

During the COVID-19 pandemic parent education classes became virtual. As the pandemic restrictions relax, services can review their provision of classes and consider re-introducing in person sessions. Some parents may still prefer to attend virtual classes, and these should be maintained as per local demand and provisions made available for those who are extremely vulnerable and self-isolating.

Regular guidance is being released from government advising on the removal of pandemic restrictions which previously prevented in person classes taking place. Antenatal classes should adhere to the most recent guidance from government as to whether the classes can safely go ahead.

A risk assessment must demonstrate that the infection prevention and control (IPC) conditions for carrying out group classes in person can be met. These include a well-ventilated room, together with a 2-metre space between each household/support bubble as well as the staff running the class for physical distancing, and all attendees should undertake lateral flow covid testing on the day of their class prior to attendance. Face coverings should be worn by all staff and attendees, unless exempt throughout the class. Appropriate hand sanitising should be adhered to and all equipment used should also be sanitised between use. The size of classes may need to be reduced to facilitate social distancing throughout the class.

Current guidance restricts all indoor groups to a maximum of 6 persons, including any staff facilitating the activity.

Employers hold the statutory duty, laid out in the Health and Safety at Work Act (1974), and managers have responsibility for carrying out risk assessments, under the Management of Health and Safety at Work Regulations (1999). Trade union health and safety and workplace representatives should be involved in the process. The assessment should reflect what actually happens in the workplace and is not a box-ticking exercise.

Current key guidance for this topic

Where antenatal classes are taking place in multi-purpose community facilities, specific guidance should be followed. The managers of community facilities will have discretion and responsibility over how they make their premises COVID-19 secure following the advice in the relevant guidance.

Any reopening plans should be consistent with:

- core public health guidance regarding health, hygiene, and social distancing
- <u>safe workplace guidelines</u>, to ensure employees are safe to return to work.

Where hospital facilities are being used for antenatal classes, a risk assessment by the hospital ensuring safe systems of work (SSoW) should take into consideration all elements of a workplace. The process should include:

- a systematic and thorough examination of tasks/activities for the workplace to identify potential hazards for harm
- an estimation of the likelihood that someone could be harmed by hazards identified, together with an indication of the impact the harm could have

- a new risk assessment every time changes are made that affect the workplace, new scientific evidence or new government guidance becomes available
- health and safety risks should be clearly recorded and filed, according to local protocol
- results of the risk assessment should be analysed and appropriate action taken to mitigate
- SSoW should be monitored and reviewed to ensure the risk assessment remains current.

Summary

- **Consider** the size of the venue and access to fresh air, through open windows/doors. Assess the extent to which air is flowing or re-circulating. Where available lateral flow tests will be required to be taken on the day of attendance.
- **Measure** 2 metres, allowing this distance to be kept between each household/support bubble, as well as the facilitator. Maximum of 6 persons at each session including the class facilitator.
- Decide whether these conditions can be met or whether virtual antenatal classes should remain as the only option.
- **Record** findings according to local protocol.
- **Report** findings to the Head of Midwifery.

References and links to online and virtual support and guidance

Gov.uk (17/05/2021) COVID-19: Guidance for the safe use of multi-purpose community facilities

Health and Safety Executive [HSE]. (2020) <u>Ventilation and air conditioning during the coronavirus (COVID-19) pandemic -</u> <u>HSE news</u>

HSE. (2020) RIDDOR Reporting of COVID-19 <u>RIDDOR reporting of COVID-19 - HSE news</u>

HSE. (2020) Making your workplace COVID-secure during the coronavirus pandemic <u>Making your workplace COVID-secure</u> during the coronavirus pandemic (hse.gov.uk)

Health and Safety at Work etc. Act 1974 [Access at] https://www.legislation.gov.uk/ukpga/1974/37/contents

NHSE (15/04/2021) Supporting Pregnant women using maternity services – actions for providers

NICE (2008) Antenatal care for uncomplicated pregnancies

NHS Trade Unions (2020) <u>https://www.rcm.org.uk/media/4108/nhs-trade-union-principles-on-health-and-safety-risk-</u> assessment-and-vulnerable-workers.pdf

SAGE-EMG (2020) Role of Ventilation in Controlling SARS-CoV-2 Transmission S0789 EMG Role of Ventilation in Controlling SARS-CoV-2 Transmission.pdf (publishing.service.gov.uk)

The Management of Health and Safety at Work Regulations 1999 (legislation.gov.uk)

Trade Union Congress (2008) Risk Assessment: A Guide for Safety Representatives A4_STI (tuc.org.uk)