Procedural Guidance



Baby Loss (Miscarriage / Stillbirth / Neonatal Death)

URN: J-Pr-188

Version: 1.3

Effective Date: 07/07/2023 **Version Date:** 07/04/2025 **Review Date:** 07/04/2027

Host Force: Dorset Police

Host Policy Unit: Dorset Police Legitimacy Team

Policy Owner: Alliance Head of Employee Relations

Policy Author: Strategy & Policy Lead (ER)

Associated

Policy: J-P-034 – Family Leave

Applicable to:

Devon & Cornwall Police ⊠

Dorset Police ⊠

OPCC Devon & Cornwall □

OPCC Dorset ⊠

Officers \boxtimes Staff \boxtimes

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1.0 Introduction

Baby loss is a more sensitive term used to describe miscarriage, stillbirth, and neonatal death. The Force recognises the sensitivity and distress that baby loss can cause. This guidance document, for use by individuals and line managers, seeks to ensure those affected by baby loss, including partners, are supported in the workplace, and signposted accordingly.

Please note: Devon & Cornwall Police and Dorset Police operate as a Strategic Alliance, overseen by their respective Office of the Police and Crime Commissioner (OPCC). Each body operates as a separate employer, although will be referred to as 'the Force'. Where the OPCC adopt this procedure, some tasks may be undertaken by alternative roles.

This guidance contains topics / issues that some individuals may find difficult or upsetting. The line manager must ensure that support, as appropriate, is provided through Occupational Health (OH) and / or the Employee Assistance Programme (EAP). The individual may also wish to contact the Family Support Group (D&C) / Support Networks (Dorset), as required.

2.0 Baby Loss (Miscarriage)

Where an individual loses a baby less than 24 weeks into the pregnancy, this is known as miscarriage. An estimated one in four pregnancies end in baby loss via miscarriage or ectopic pregnancy (where a fertilised egg implants itself outside of the womb), with some women experiencing recurrent miscarriages.

3.0 Baby Loss (Stillbirth)

Where an individual loses a baby at 24 weeks or later during the pregnancy, either before or during birth, this is known as a stillbirth. In the UK, approximately one in every 250 births ends in a stillbirth, affecting nearly 3000 families every year.

4.0 Baby Loss (Neonatal Death)

When a baby passes away within the first 28 days after they are born, this is known as a neonatal death. Most neonatal deaths are linked to premature birth, because when a baby is born too soon, or is too small, it is at more risk of infection or other serious health problems. There are, however, other reasons why a baby may not survive, including birth complications or genetic disorders.

5.0 Supporting Individuals During and Immediately After Baby Loss

It is acknowledged that baby loss affects individuals in different ways, both physically and emotionally. It is important that an individual going through baby loss shares this with their line manager, so the line manager can provide the relevant support, dependent on the individual's wishes, as appropriate.

The line manager should acknowledge loss of the baby with the individual and ask them what they need in terms of support and whether time away from work is required, recognising that, in the early stages, the individual may not know what time off they

need, and so some flexibility may be required. The line manager should discuss with the individual what, if anything, they wish to share with colleagues in the team, ensuring the individual's right to privacy and confidentiality is respected.

The line manager must ensure that the individual is signposted to the appropriate support, which may include OH, the EAP, Trade Unions / Staff Associations (where a member) and the Family Support Group (D&C) / Support Networks (Dorset), as required.

6.0 Time Off for Baby Loss

To support those affected by baby loss, the Force offer a range of different leave provisions. **Please note:** Individuals and line managers should be aware that, to access statutory pay provisions, they may be required to provide the relevant certification (MATB1, birth certificate, certificate of stillbirth etc.) to the Force, in line with HMRC regulations.

Baby Loss Prior to 24 Weeks

In the event of baby loss prior to 24 weeks (miscarriage), the line manager should refer to J-Pr-272 Compassionate Leave procedure and / or J-Pr-018 Attendance Support procedure, available via Section 10.0 'Other Associated Documents and Links'. The line manager is responsible for ensuring that, where time off is taken for sickness absence, this is recorded as 'pregnancy related' on the absence recording system, in accordance with J-Pr-020 Absence Recording procedure, available via Section 10.0 'Other Associated Documents and Links'. The individual may also wish to utilise any other leave entitlement, such as annual leave, flexitime or TOIL. The line manager must ensure that the individual is signposted to the appropriate networks of support, as detailed within Section 8.0 'Support Available'.

Baby Loss From 24 Weeks Onwards

In the event of baby loss from 24 weeks onwards (stillbirth) or a neonatal death, the individual may be entitled to maternity leave and pay, subject to the eligibility criteria, as well as compassionate leave, parental bereavement leave and pay (delivered through J-Pr-272 Compassionate Leave Procedure) and / or neonatal care leave and pay. Please refer to the relevant procedures, available via Section 10.0 'Other Associated Documents and Links'. The line manager must make telephone contact with the individual, from a welfare perspective, ensuring that the individual is signposted to the appropriate networks of support, as detailed within Section 8.0 'Support Available'.

Baby Loss During Adoption

In the event of baby loss during adoption (where an adoption placement has been made, i.e. a matching certificate provided) or during a surrogacy arrangement (where a parental order is applied for), the primary adopter (the individual taking adoption leave) or the intended parent (surrogacy arrangement), may be entitled to continue their adoption leave and pay, subject to the eligibility criteria. The individual may also be eligible to take compassionate leave, parental bereavement leave and pay (delivered through J-Pr-272 Compassionate Leave Procedure,) and / or neonatal care

leave and pay. Please refer to the relevant procedures, available via Section 10.0 'Other Associated Documents and Links'. The line manager must make telephone contact with the individual, from a welfare perspective, ensuring that the individual is signposted to the appropriate networks of support, as detailed within Section 8.0 'Support Available'.

Partners Affected by Baby Loss

Partners of those affected by baby loss may be eligible to take paternity (maternity / adoption support) leave (in the instance of a stillbirth or neonatal death), compassionate leave, parental bereavement leave and pay (delivered through J-Pr-272 Compassionate Leave Procedure) and / or neonatal care leave and pay. Please refer to the relevant procedures, available via Section 10.0 'Other Associated Documents and Links'. The line manager must make telephone contact with the individual, from a welfare perspective, ensuring that the individual is signposted to the appropriate networks of support, as detailed within Section 8.0 'Support Available'.

Maintaining Contact

Where an individual affected by baby loss takes time away from work, the line manager must maintain contact, as appropriate, agreeing the method and frequency of keeping in touch with the individual.

The line manager may wish to consider discussing with the individual whether they are content for colleagues to know what has happened, and the level of information that should be shared with the team.

The line manager must ensure that, where an individual is away from work, they are kept informed of any significant workplace changes or promotion / training opportunities relating to their role.

7.0 Returning to Work

When the individual is ready to return to work, they may feel overwhelmed, anxious about what colleagues might say, or uncertain about returning to 'normal' life. The individual has a right to keep their baby loss private if they choose and may not wish for their colleagues to know what has happened. The individual and line manager should discuss and agree what, if anything, they wish to share with their colleagues in advance of the individual's return to work. The line manager must ensure that all reasonable support, as requested by the individual, is accommodated, where practical to do so. A risk assessment, where appropriate, should be undertaken and regularly reviewed by the line manager, and can be accessed by referring to the People Portfolio Health & Safety pages of the intranet.

Following a referral to OH, as appropriate, the line manager may consider discussing a recuperative duties plan with the individual, to enable a phased return to the individual's full role, responsibilities, and hours within a reasonable timeframe. The line manager will meet regularly with the individual to review progress. Please refer to J-Pr-018 Attendance Support Procedure, available via Section 10.0 'Other Associated Documents and Links'.

Where an individual wishes to alter their working hours / pattern, they must submit a flexible working request, ensuring they allow at least three months for the commencement and completion of the flexible working process, where possible. The line manager must ensure that the completed, approved flexible working request is submitted to the HR Operations – Admin team at least 28 days prior to the commencement of the new flexible working pattern. Please refer to J-Pr-318 Flexible Working procedure, available via Section 10.0 'Other Associated Documents and Links'.

8.0 Support Available

A range of practical and emotional support can be accessed via the Health & Wellbeing intranet pages, including access to OH referrals and / or the EAP and via external organisations and charities. The individual may also wish to contact the Family Support Group (D&C) / Support Networks (Dorset), as required.

The Employee Assistance Programme provides independent, confidential advice and counselling 24 hours a day, seven days a week. To access support, please refer to the People Portfolio Health & Wellbeing pages of the intranet.

The Trade Unions and Staff Associations are committed to providing appropriate support to their members and can be contacted for any further advice or support, as appropriate.

Supporting Links and Guidance:

Family Support Group (D&C)

Support Networks (Dorset)

https://www.miscarriageassociation.org.uk/

www.tommys.org/baby-loss-support/stillbirth-information-and-support

http://www.sands.org.uk/

How to Support Someone Through Miscarriage and Baby Loss

Returning to Work Checklist

Managers should contact <u>HR Operations (D&C) - Admin</u> or <u>.HR Ops Dorset – Admin</u> if the situation they are managing does not appear to be straightforward.

9.0 Monitoring and Review

Review and amendments will be coordinated by the Policy Unit.

The Alliance Head of Employee Relations is responsible for overseeing this procedure to ensure a consistent Force approach is maintained. Monitoring will be primarily carried out subject to Force processes of continuing review and in line with Force governance requirements.

This policy will be reviewed every two years subject to legislation / process changes.

Please note: Where legislation / guidance changes have occurred / scheduled to occur or operational needs demand it, ahead of the revised review date, Alliance People policies and associated procedures / step by steps will be applied in line with prevailing legislation / guidance.

We welcome any comments or suggestions you wish to share about the content or implementation of this procedure. If you would like to make contact to discuss further, please email: .Policies@dorset.PNN.police.uk

10.0 Other Associated Documents and Links

A range of policies, procedural guidance and step by steps are also available in support of this policy available via the following links:

Policy and Procedure

- J-Pr-046 Adoption Leave Step by Step
- J-Pr-018 Attendance Support Step by Step
- J-Pr-020 Absence Recording Step by Step
- J-Pr-272 Compassionate Leave Step by Step
- J-P-034 Family Leave Policy
- J-Pr-318 Flexible Working Step by Step
- J-Pr-330 Neonatal Care Leave Step by Step
- J-Pr-082 Paternity Leave (Maternity Adoption Support) Step by Step
- J-Pr-080 Pregnancy and Maternity Leave procedure

SharePoint

- Code of Ethics (DCP)
- Code of Ethics (DP)
- Equality Act (2010) including the Public Sector Equality Duty
- Freedom of Information Act 2000 (FOIA)
- Human Rights Act (1998)
- Records Management (DCP)
- Records Management (DP)
- The Health and Safety at Work Act (1974)
- UK General Data Protection Regulation / Data Protection Act (2018)
- Our Purpose (DCP)
- Vision, Purpose & Priorities (DP)
- Standards of Professional Behaviour
- HR Privacy Notice

College of Policing

- National Decision Model
- Authorised Professional Practice (APP)

Other

Equality Impact Assessment

11.0 Version History

Version: 1.0

Date: 07/07/2023

Reason for

Amendments: Initial Document

Amended by: Strategy & Policy Lead (HR) **Approved by:** Head of Employee Relations

Date Approved: 28/06/2023

Quality Assured: Legitimacy Team (7101)

Version: 1.1

Date: 01/05/2024

Reason for

Amendments: Amended to include two additional links to supportive material

within the 'Supporting Links and Guidance' section. Updated

template.

Amended by: Employee Relations / Legitimacy Team

Approved by: n/a **Date Approved:** n/a

Quality Assured: Legitimacy Team

Version: 1.2

Date: 12/06/2024

Reason for

Amendments: Fit for purpose review completed, minor amendments to wording.

Updated links incorporated.

Amended by: Employee Relations / Legitimacy Team

Approved by: HoD

Date Approved: 10/06/2024 **Quality Assured:** Legitimacy Team

Version: 1.3

Date: 07/04/2025

Reason for

Amendments: Fit for purpose review completed.

Amended by: Strategy & Policy Lead – Employee Relations

Approved by: HoD

Date Approved: 26/03/2025

Quality Assured: Legitimacy Team

12.0 Governance

Present Portfolio Holder: Head of HR Operations

Present Document Owner: Alliance Employee Relations Team

Present Owning Department: Alliance People Portfolio

Name of Board: Strategic People Board

Chief Officer Approving: ACO (D&C) and ACO People and Support Services

(Dorset)

Date Approved: 28/06/2023

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