**London’s Air Ambulance Maternity Checklist for New and Expectant Mothers**

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| --- | --- |
| Name |  |
| Contact number |  |
| Job role, Department |  |
| Clinical Lead completing assessment |  |
| Expected week of Childbirth [EWC] |  |
| Ordinary Maternity Leave dates |  |
| Additional Maternity Leave dates |  |
| Expected Return to Work date |  |
| Any health/ well being concerns |  |

**Notification**

|  |  |  |
| --- | --- | --- |
| Action | Date | Line Manager/Clinical Lead |
| Inform Clinical Lead of Pregnancy |  |  |
| Risk assessment carried out |  |  |
| Discuss action plan following Risk Assessment |  |  |
| Obtain MAT1B with confirmation of pregnancy and EWC |  |  |
| Follow up meeting with PHEM Trainee re Risk Assessment and any other actions required |  |  |
| Discuss Maternity Leave commencement dates |  |  |
| Calculate Ordinary Maternity Leave (OML) and Additional Maternity Leave (ADL) dates |  |  |
| Discuss and record intended Return to Work dates |  |  |
| Record any absence |  |  |
| Notify Line Manager/Clinical Lead of need to attend ante- natal care dates. |  |  |
| Commence Maternity Leave |  |  |

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| **While on maternity Leave** |  |  |
| Inform Line Manager/Clinical Lead of baby’s date of birth |  |  |
| Confirm any change of plans regarding Maternity leave. |  |  |
| Ensure 8 weeks notice given if different from the 52 weeks Maternity Leave |  |  |
| **Return to Work** |  |  |
| Return to Work date |  |  |
| Meeting with Line Manager/Clinical Lead |  |  |
| Return to work Risk Assessment carried out |  |  |
| Discuss action plan following Return to Work Risk assessment |  |  |
| Follow up meeting with Line Manager/Clinical Lead |  |  |