Fetal Risk Management Plan

Jacksonville State University

Effective Date: 3 October 2019

The University recognizes that decisions about the welfare of future children must be left to the parents who conceive, bear, support and raise them rather than to the employers who hire those parents or institutions who educate them. Since the fetus is most vulnerable early in its development, it is essential for the student or employee to notify their advisor or supervisor of a pregnancy (or the anticipation of a pregnancy) so that a review of the individual's planned activities for the term of the pregnancy can be conducted to determine if any potentially hazardous exposures are likely. This notification commences a formal Hazard Assessment.

University Safety will assist Departments/Divisions/Units at Jacksonville State University (JSU) in conducting a work/study Hazard Assessment and in providing hazard information on physical, chemical and biological hazards that could adversely affect the health and safety of individuals at JSU. All planned activities and related hazard information will be provided in writing to the individual for review by her own personal physician.

The University recognizes that the decision whether to consult a physician is left to the individual. However, the University strongly recommends that a physician be consulted throughout the pregnancy.

After reviewing the potential exposure information and the hazards associated with these exposures, the physician may wish to contact the individual's supervisor or advisor, or University Safety for additional information. Based upon the information provided, the physician is expected to provide guidance and make recommendations for participating in the anticipated activities with the patient. If there is a consensus between the doctor and the pregnant individual, that no harm to the fetus is likely to result from these activities, the individual can elect to continue in the activity.

The University shall make every reasonable accommodation to meet the needs of the individual within the permissions stipulated by their physician.

Should the individual, after consulting with her physician, decide against such participation then the options are as follows:

• In the case of a student, she has the option of sitting out of a particular course for the term of the pregnancy or selecting other activities within her curriculum which are acceptable to her, her advisor and her physician. No loss of status (within the control of the University) will result from this absence from school. This decision may impact financial aid. Therefore, the Office of Financial Aid should be consulted to determine what, if any, impact this may have on financial aid and/or scholarships.

• For an employee (faculty and staff), the supervisor will provide reasonable accommodation for the term of the pregnancy which minimizes hazards to the fetus and is acceptable to the employee, her supervisor and her physician. No loss of status or reduction of pay or benefits will be associated with this accommodation. Upon returning to work following maternity leave the individual will be reassigned to her former position (unless unusual medical conditions, supported by her physician, exist which might preclude such an assignment). Unusual circumstances will be handled similar to any other work restricting conditions.

If an individual who is pregnant feels that she is not being given the reasonable consideration described above, then the matter should be brought to the attention of:

- In the case of students, the Title IX Coordinator;
- In the case of staff employees, Human Resources; or
- In the case of faculty, the appropriate Department Head or Dean.

Because there is still so much to be learned about effective fetal protection, the University assumes the very conservative position that it is in everyone's best interest to not take chances with human life under these circumstances. The well-being of students, employees and their offspring is the primary motivation which drives this Program. It is hoped that all individuals involved will understand and accept the position the University has taken, fully support the Program, and act and respond accordingly.

All individuals, whether they continue to participate in the original activity or choose an alternative activity will be asked to acknowledge that Jacksonville State University (JSU) has provided the hazard counseling and that they are exercising their responsibility as parents in deciding what is the best course of action for the family and the fetus. If they refuse to sign such an acknowledgement, the person conducting the counseling will note the fact on the acknowledgement form and have a witness also sign the form acknowledging that the parents were counseled.

NO POTENTIAL RISK EXISTS, INDIVIDUAL CONTINUES ORIGINAL ACTIVITY

ACKNOWLEDGMENT OF FETAL PROTECTION COUNSELING

I,	(MOTHER) acknowledge that
the fetus presented by the haza present course of study/employ	e State University (JSU) has counseled me on the possible risks to ards associated with the continuation of the MOTHER in her yment. As a parent (potential parent) I, the MOTHER, recognize good for the family and the well-being of the fetus is my SU's.
_	he possible risks, I have determined that any risk that exists is y decided to pursue the present course of study/employment and ciated with that activity.
MOTHER/DATE	
JSU/DATE	WITNESS/DATE

JSU/DATE

POTENTIAL RISK EXISTS, INDIVIDUAL ACCEPTS ALTERNATIVE ACTIVITY

ACKNOWLEDGMENT OF FETAL PROTECTION COUNSELING I, _____ (MOTHER) acknowledge that _____ a representative of Jacksonville State University (JSU) has counseled us on the possible risks to the fetus presented by the hazards associated with the continuation of the MOTHER in her present course of study/employment. As a parent (potential parent), I, the MOTHER, recognize that the decision as to what is good for the family and the well-being of the fetus is my responsibility and not that of JSU's. I recognize that JSU has offered an alternative for the MOTHER other than her continuation in her present (or anticipated) activities and that this alternative would result in no loss of status (for students) or pay and benefits (for employees), and includes immediate reassignment back to the former status after the return of the MOTHER from maternity leave. I/we both have determined that the risk associated with the present course of study/employment is unacceptable and have voluntarily decided to pursue the alternative activity and therefore assume the risk associated with the alternative activity. MOTHER/DATE

WITNESS/DATE

JSU/DATE

POTENTIAL RISK EXISTS, INDIVIDUAL REFUSES TO ACCEPT ALTERNATIVES

ACKNOWLEDGMENT OF FETAL PROTECTION COUNSELING

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I/we recognize that JSU has offered an alternative for me, the MOTHER, other than her continuation in my present (or anticipated) activities and that this alternative would result loss of status (for students) or pay and benefits (for employees), and includes immediate reassignment back to the former status after the return of me, the MOTHER, from maternileave. However, I have voluntarily chosen to not accept the alternative temporary assignment assume the risk associated with continuation in the present course of study/employments.	ity nent
MOTHER /DATE	
I/we recognize that JSU has offered an alternative for me, the MOTHER, other than her continuation in my present (or anticipated) activities and that this alternative would result loss of status (for students) or pay and benefits (for employees), and includes immediate reassignment back to the former status after the return of me, the MOTHER, from maternileave. However, I have voluntarily chosen to not accept the alternative temporary assignment	in no ity nent

WITNESS/DATE