

Guidance on Menopause and the Workplace

INTRODUCTION

University Hospitals of North Midlands is committed to providing an open safe and healthy working environment for all staff, regardless of the stage of life they are at.

The Trust recognises that at any one-time significant numbers of staff will either be experiencing symptoms of the Menopause or living with someone that is. The Trust will take a proactive approach to the Menopause, creating a greater understanding across the workforce so that people can be facilitated to give their best regardless of menopausal symptoms and impact.

PURPOSE

UHNM recognises that the menopause can bring issues for individuals which can impact upon their work. It is to the benefit of us all that we, as an employer and system leader for the NHS, work with staff to support them in these circumstances to find mutually beneficial arrangements; maximising staff retention and wellbeing. In recognition of this, and in line with organisational values, this guidance outlines the range and potential impact of 'distressing' symptoms of the menopause and to promote understanding of what our colleagues are going through. It underlines the need for recognition of the psychological impacts of peri/menopause as well as the physical impacts, addressing any potential for occupational health provision and line manager support falling short of need and identifies where advice and support can be found. This guidance also outlines the actions for managers that are expected to be extended to staff in order to maximise wellbeing. The actions below clarify what the Employers expect of their managers.

Menopause is predominantly experienced by women and most existing research is based upon cisgender women, thus this document focuses on that experience. However, it is important to acknowledge that transgender, non-binary and intersex workers may also experience the menopause. Some of the information in the main guidance may apply to these individuals but since they will also have specific needs and experiences, a separate section on trans, non-binary and intersex workers and the menopause has been included.

Menopause experiences differ (in part due to possible medication/surgeries). There is an extended discussion of the impact of menopause on colleagues with protected characteristics and trans colleagues.

DEFINITIONS

The menopause transition is a natural phase of life when women and some trans and non-binary people stop having periods as a result of hormonal changes; a decrease in oestrogen levels. It usually occurs between the ages of 45 and 55 and typically lasts between four and eight years, although it can last longer. Premature menopause can happen naturally for 1 in 100 individuals (or because of illness or surgery). This may also be more common in trans, non-binary or intersex workers where hormonal treatments or surgeries may affect the age at which menopause starts.

- **Menopause;** a biological stage that refers to the time in life when periods stop and the natural reproductive cycle ends. Usually it is defined as having occurred when there has not been a period for 12 consecutive months (for those reaching menopause naturally). The changes associated with menopause occur when the ovaries stop maturing eggs and secreting oestrogen and progesterone.
- **Perimenopause;** The time leading up to menopause when ovulation cycles and periods can be irregular, continuing until 12 months after the final period. The perimenopause is also known as the menopausal transition or climacteric.
- **Postmenopause;** The time after menopause has occurred, starting when there has not been a period for 12 consecutive months.

As a result of the greater numbers of women in the workforce, many women are working more years in peri and post menopause than in their fertile years. The need to manage both work and family and/or caring responsibilities as mentioned above can present significant challenges at this time of life, when we may feel we need to work longer to generate sufficient pension support.

Evidence suggests that many staff still feel uncomfortable discussing menopause at work. Recent studies indicate that women may hide and/or self-manage their symptoms, developing a degree of paranoia about how their performance might be affected, or work harder to compensate.

SYMPTOMS OF THE MENOPAUSE

The body can be affected by menopause in numerous ways, causing a myriad of symptoms, some of which will affect performance at work more specifically and as a result will potentially require consideration more than others. The 6 most common symptoms are;

- Hot flushes/night sweats
- Fatigue
- Concentration problems

- Anxiety
- Insomnia
- Recall/memory problems

During menopause mental health symptoms can present: low mood, anxiety, sleep problems, which then lead to tiredness, fatigue, a cycle that is exacerbated as the symptoms continue. Brain fog leading to reduced concentration, poor information retention and a reduced ability to learn can significantly affect confidence adding to low mood. Existing or pre-existing conditions may be exacerbated, for example, depression.

These symptoms can impact on an individual's performance in terms of coping strategies, pressure of dealing with deadlines and especially where there are changing priorities. They may also experience a lack of confidence, anxiety or panic disorder.

SCOPE

The organisation recognises and values our diversity and trans inclusive culture, we recognise that people of diverse gender expressions and identities experience menopause. This is therefore not just an issue for female colleagues - although the physical and psychological symptoms of menopause do mainly affect women, menopause can also directly and indirectly affect others both within the workplace and at home. This can include male and female colleagues, non-binary and intersex colleagues, family members, and same sex partnerships. This policy applies to all staff members, including those on fixed term appointments. It does not apply to agency staff or contractors although a supportive approach should be taken if they do raise issues.

CONFIDENTIALTY

Our aim is to handle related matters with due regard for the privacy of all individuals involved. This guidance is for implementation alongside additional Occupational Health services which offer self-referral to menopause specialist nurses via a clinical assessment.

PROTECTED CHARACTERISTICS

Menopause at work is covered by equality legislation related to age and gender and to the duty to provide a safe workplace under Health and Safety legislation.

TRANS NON – BINARY AND INTERSEX EMPLOYEES AND THE MENOPAUSE

Transgender, non-binary and intersex workers may experience the menopause, either due to age related hormonal changes or hormone treatments and

surgeries. Some trans, non-binary and intersex workers may not wish to disclose their menopausal symptoms as this may mean disclosing their trans or intersex status. It can therefore be particularly difficult for these employees to access support and/or ask for adjustments. Within each of these groups people's needs will be different and so it is important to listen to people on an individual level and allow them to take the lead on their required adjustments.

IMPLEMENTATION

Managers and colleagues who want to support colleagues going through the menopause may be uncertain how to raise the subject and offer support. Increased media coverage and availability of online support and guidance make conversations in the workplace more normalised and less taboo. Menopause transition does not necessarily lead to reduced performance at work and may be managed with consideration, understanding and in some circumstances, with workplace flexibility.

DUTIES WITHIN THE ORGANISATION

Trust Board

The Trust Board has overall accountability for ensuring that the two main strands of law that relate to peri-menopause and menopause are upheld within the organisation; The Health and Safety at work Act (1974) and Equality Act (2010) protects workers against discrimination. Menopause is not a protected characteristic under the Equality Act, but unfavourable treatment could be viewed as discrimination related to sex, disability, age, or gender reassignment. The Board will delegate day to day responsibility to the Trust Medical Director, Chief People Officer and Chief Nurse.

Occupational Health

The Occupational Health Service (TP Health) is responsible for providing support, advice and guidance as appropriate to safeguard the health and mental wellbeing of employees falling under the scope of this guidance, including referral to the Staff Counselling Service or onward referral to specialist external support.

Staff Support and Counselling

The Staff Counselling Service is responsible for providing emotional support to employees falling under the scope of this guidance. Whilst happy to discuss a potential referral with line managers or Occupational Health staff, the Staff Counselling Service accepts self-referrals, Occupational Health referrals and referrals from the Staff Psychological and Wellbeing Hub only, although the client may be supported by someone else in making this self-referral.

The People Directorate

The People Directorate and OD Culture and Inclusion Consultant for Wellbeing and Engagement are available to provide advice on any issues related to information included within this guidance. We are responsible for heading up the Women's Health Network, organising of quarterly coffee mornings, engaging and supporting menopause champions and for signing up to Menopause Workplace Place;

In signing the Menopause Workplace Pledge, we commit to;

- Recognising that the menopause can be an issue in the workplace and women need support
- Talking openly, positively and respectfully about the menopause
- Actively supporting and informing your employees affected by the menopause

Women's Health Executive Chair

Will hold us to account for all actions stipulated within this guidance and help us to gain momentum throughout the Organisation.

Expectations of Staff

Menopause symptoms are highly individual; they can be sensitive and cause embarrassment for some for varied lengths of time, so it is entirely understandable for staff to feel unable to share and explore sensitive and personal symptoms with their managers. There are options to help you do this;

- Seek support, advice or information from any of the above mentioned resources, speak to Menopause Champions who can offer 1:1 supportive signposting or attend quarterly Menopause Coffee mornings with UHNM.
- Approach someone in the workplace with whom you do feel comfortable discussing your issues e.g. a colleague, other manager or trade union representative.
- Differences like gender and culture may be a barrier to raising this issue so it might be that there is a more senior manager you can discuss it with first. The intention would not be to avoid your line manager but to explore what might be possible and explore support or discuss what might be addressed with your immediate line manager.

If individuals do feel able to discuss symptoms, some of the suggestions below may be helpful

- Sharing your experience and/or symptoms with colleagues to promote understanding if you feel comfortable.
- Recording and monitoring your symptoms and/or their severity may be helpful to understand how your wellbeing may be affected and how you can seek support.
- Considering a change in working hours or pattern or remote working if/when you are office based.
- Discuss reasonable adjustments, increased breaks, rooms with increased ventilation or provide fans
- Provide easy access to cold drinking water and washrooms.
- Adapt uniforms to improve comfort. Make sanitary products available in washrooms.
- Make it easy to request extra uniforms if needed.
- Whether you could work from home more frequently or at short notice when your symptoms are bad.
- Consider a reduction in travel or increased comfort breaks, dialling into some meetings.

If a member of your team does change working pattern or flexibilities in order to support wellbeing and/or symptoms management, we expect all staff to behave in a professional, responsible and sensitive manner and be supportive and respectful.

Expectations of Managers

If an employee chooses to approach you to discuss issues with their menopause it may be as a line manager or as a manager they feel able to discuss their situation with – for instance due to a shared culture - you must appreciate that the symptoms experienced are very personal, no one individual can be compared with another and as a result of the highly personal nature of symptoms the member of staff may not wish to discuss with their line manager. When an employee shares issues about the menopause, you should gain an understanding of what the employee is likely to need from you. You can use the information provided in this policy to help you start a conversation about the menopause and just as we advise that staff can access resources via the Menopause Network, you may also find the specialist resources and experience helpful, especially for signposting advice to staff. If you are not the line manager for the individual you can help APPENDIX them explore options for raising work related issues.

You should:

- Ensure that all information shared by the employee is treated in the strictest confidence and is not shared further without the employee's consent.
- Listen to and gain an understanding of any concerns your employee has about their issues or symptoms, avoiding assumptions.
- Discuss timescales and leave requirements if this has been raised as part of the discussion. It is worth underlining that peri-menopause and menopause symptoms do not have an indicative timeline for resolution.
- Take account of individual and business needs but be supportive when dealing with requests for work flexibility or leave, being mindful of the importance of being supportive of attendance at appointments and the unpredictability of symptoms.
- If more support is needed you will find it helpful to agree a support plan to identify the adjustments made to the working arrangements of that staff member.

You must:

- Be prepared to discuss the points that the member of staff brings to them promote supportive conversations about the menopause and its effects and be aware of the personal nature of these conversations: this can be a subject that requires sensitivity and must be kept under review as there is no defined end date.
- Be open to a request to have someone to support them in the conversation because of the personal nature of the discussion.
- Recognise that every experience of the menopause will be individual. Do not use your own personal experience, or that of any friends, relatives or other staff members to measure whether you believe that the staff member's symptoms are reasonable.
- Consider any changes impacting performance, attendance or behaviour and whether the impact of menopause and its distressing symptoms may be an issue – do not launch capability or conduct processes before these elements have been reasonably considered.
- Provide dedicated time and quiet space for 1:1s; promote avenues of support, signposting and links to organisational resources such as associated guidance, flexible working, special leave and any changes to the working environment such as quiet spaces that you can facilitate.
- Set and demonstrate expected standards of behaviour.
- Where additional support is required, provide information on specific health and wellbeing services.

- Promote a culture and environment that values diversity, shows dignity, respect, fairness and equality.
- Do not tolerate or express what you consider to be 'workplace banter'.
- Be aware all cisgender women (and some trans, non-binary and intersex colleagues) will experience a menopause; specific information is available via the Menopause Network
- Be aware there is a subjective range of symptoms from vasomotor (hot flushes) to mental ill-health, dryness of the eyes, excessive bleeding, brain fog and aphasia (losing words mid-sentence); all of which could present colleagues in a less favourable way.
- Discuss and agree any reasonable flexible working arrangements request - consider night sweats and/or insomnia which may require working from home or flexible working hours. Any issues that have been raised in terms of home working space, flexibility, caring responsibilities and anxiety for example as a result of working more distanced may need longer term support.
- Short notice leave of absence may be required to manage exacerbation of symptoms, lengthy periods of back to back meetings may need built in comfort breaks if heavy bleeding is experienced.
- Reasonable adjustments may be part of our formal organisational offer in relation to disability – and should be considered in instances where required for menopause.
- Work with the employee to consider physical working areas that minimise the distress they may suffer – considering, for instance, access to ventilation and private space when needed.

MENOPAUSE AND THE LAW

There are two main strands of law that may relate to the perimenopause and menopause are

- The Health and Safety at Work Act 1974 says an employer must, where reasonably practical, ensure health, safety and welfare at work
- The Equality Act 2010 protects workers against discrimination. Menopause is not a protected characteristic under the Equality Act, but unfavourable treatment could be viewed as discrimination related to sex, disability, age or gender reassignment.

APPENDIX

Mapping the symptoms of menopause for yourself or to support a conversation about wellbeing at work

Symptoms of menopause are very individual and can be embarrassing. Sensitive conversations are needed to explore what support may be helpful to maximise wellbeing. Included below is a template (guide) to assist with understanding how to support staff experiencing issues through the menopause. This list demonstrates how and when symptoms may impact on the individual.

Symptom	Location you have the symptom (if both tick both)		Severity of the symptom				How frequently do you experience the symptom					Adjustments you feel may assist (Examples included)	
	Home	Work	Mild	Moderate	Intense	Severe	Less than monthly	Monthly	Weekly	Daily	Hourly		Constant
Hot flushes													Fan/ extra uniform/ close to a window/ access to showers if applicable
Night Sweats													Flexible shift times
Irregular Periods													Procedures allowing for flexibility without drawing attention
Loss of Libido													
Vaginal Dryness													
Mood Swings													Inform the team/colleagues to be mindful. Quiet/ Private breakout room.
Fatigue													Flexible shift times.
Hair Loss													Flexibility and sensitivity
Sleep Disorders													
Difficulty Concentrating													Flexibility in breaks.
Memory Lapses													Aide memoirs
Dizziness													Access to fresh drinking water and quiet areas
Weight Gain													Access to food preparation facilities to allow healthy eating options
Incontinence													Procedures allowing for flexibility without drawing attention (Panel meetings etc.) Access to showers/extra uniform if applicable
Bloating													
Allergies													
Brittle Nails													
Changes in Odour													Access to showers/lockers to

Symptom	Location you have the symptom (if both tick both)		Severity of the symptom				How frequently do you experience the symptom						Adjustments you feel may assist. (Examples included)
	Home	Work	Mild	Moderate	Intense	Severe	Less than monthly	Monthly	weekly	Daily	Hourly	Constant	
Irregular Heartbeat													
Depression													
Anxiety													
Irritability													
Panic Disorder / Attacks													
Breast Pain													
Headache													Access to a private room
Joint Pain													
Burning Tongue													
Electric Shocks													
Digestive Problems													
Gum Problems													
Muscle Tension													
Itchy Skin													
Tingling Extremities													
Osteoporosis													

Further resources

[Sign the Menopause Workplace Pledge \(wellbeingofwomen.org.uk\)](https://www.wellbeingofwomen.org.uk)

[Guidance on menopause at work | NHS Employers](#)

[NHS England » Supporting our NHS people through menopause: guidance for line managers and colleagues](#)

[Menopause support in the workplace \(bma.org.uk\)](https://www.bma.org.uk)

[07-BMS-TfC-Menopause-and-the-workplace-03B.pdf \(thebms.org.uk\)](#)