



MENOPAUSE POLICY

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Reviewed by the SLT MAT Board

“The Trustees of the Southport Learning Trust are committed to safeguarding and promoting the welfare of children and young people at every opportunity and expect all staff and volunteers to share this commitment”

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1. Policy statement

Southport Learning Trust is committed to providing an inclusive and supportive working environment for all its workers and recognises that women may need additional consideration, support and adjustments before (perimenopause), during and after the menopause.

This policy sets out the guidelines for employees on providing the right support to manage menopausal symptoms at work.

It is estimated that between 75% and 80% of menopausal women are in work in the UK. It is therefore imperative that workplaces have a workable, informative and robust policy in place that is fully consistent with UK legislation.

The menopause is a natural part of every woman's life, and marks of the end of her reproductive cycle. For many reasons, it may not be an easy time in a woman's life and so it is imperative that workers who require additional support during this time are treated with understanding, dignity and respect.

The policy acknowledges that there is no 'one-size-fits-all' solution to the menopause and so it is intended as a support guide for all workers. All stakeholders agree to work proactively to make adjustments where necessary to support women experiencing the menopause and to ensure the workplace does not make their symptoms worse.

Exclusionary or discriminatory practices will not be tolerated.

2. Legislative compliance

This policy is fully compliant with the following legislation:

Health and Safety at Work Act, 1974;
The Workplace (Health, Safety and Welfare) Regulations 1992;
The Management of Health and Safety at Work Regulations 1999, GB Regulations 4;
Public Sector Equality Duty (PSED) introduced by the Equality Act 2010 (Eng, Scotland and Wales) and Equality Act 2010.

3. Aims

The aim of this policy is:

- to educate and inform managers about the potential symptoms of the menopause, and how they can support women at work;
- to understand the menopause and related issues, and how they can affect staff;
- to raise a wider awareness and understanding among the workforce;
- to outline support and reasonable adjustments that are available and
- to create an environment where women feel confident enough to raise issues about their symptoms and ask for reasonable adjustments and additional support at work.

4. Definitions

Perimenopause

The perimenopause is the period in a woman's life when she starts to experience hormonal fluctuations and changes to her periods. The average time for a woman to be perimenopausal is between four to five years. During this time, periods may become increasingly heavy and irregular, meaning it is vitally important for a woman experiencing symptoms to be close to toilets and shower facilities. For some women, the symptoms during this time can be worse than the actual menopause.

Menopause

A woman is described as being menopausal when they have gone 12 months without a period and when her ovaries are no longer responsive. The average age for a woman to reach the menopause in the UK is 51. American evidence suggests that this is different for Asian and black women. An Asian woman may start her menopause later and a black woman slightly earlier. To date, there is no UK evidence on this issue.

Post-menopausal

This is the time after menopause has occurred, starting when a woman has not had a period for 12 consecutive months. The average time for women experiencing symptoms of the menopause is five years, but many women experience symptoms for up to ten years and 3% of women will experience symptoms for the rest of their lives.

Post-menopausal women have an increased risk of heart disease, diabetes and osteoporosis and managers should be aware of this.

5. Symptoms of the menopause

Symptoms may include:

Vasomotor Symptoms

*Hot flushes and Night Sweats

Psychological effects of hormone changes

*Low mood/mood swings

*Poor memory and concentration

*Insomnia

*Loss of libido

*Anxiety/panic attacks

Physical Symptoms

*Headaches

*Fatigue

*Joint aches and pains

*Palpitations

*Formication (creeping skin)

*Insomnia

Sexual Symptoms

*Reduced sex drive

*Painful sex/*vaginal dryness

*Urinary tract infections

*Vaginal irritation

Consequences of oestrogen deficiency

*Obesity, diabetes

*Heart disease

*Osteoporosis/chronic arthritis

*Dementia and cognitive decline

*Cancer

N.B. This is not an exhaustive list.

6. Workplace support

This policy recognises that there are many workplace factors which can make working life more difficult for women experiencing the menopause and which may make symptoms worse. School leaders should take into consideration the concerns listed in Appendix 1.

Appendix 2 and 3 will help with the planning of specific adjustments during the meeting. The adjustments should be shared with the employee before the meeting.

Appendix 4 indicates where Menopause support can be gained through our Employee Assistance Programme.

7. Line Managers

It is recognised that the menopause is a very personal experience and different adjustments and levels of support may be needed for different individuals. Line managers should seek to provide appropriate support and adjustments when needed to help women deal with issues arising from the menopause. 'Management advice' is provided as an Appendix 1 to this policy.

8. Employees

It is recognised that employees have a responsibility for their health, safety and welfare but that workplace demands can complicate this. Employees can expect such things as:

- access to toilets;
- access to drinking water;
- access to natural light;
- risk assessments, carried out by a 'competent' person and
- regulated temperatures.

The above are 'standard' requirements.

9. Links to other policies

- Dignity at Work;
- Grievance;
- Work-Life Balance Policy and
- Performance Management.

10. Additional help and support

Menopause matters www.menopausematters.co.uk

The British Menopause Society
www.thebms.org.uk

NHS menopause pages
www.nhs.uk/conditions/menopause/symptoms

Appendix 1

Management guidance for informal discussions

Managers should familiarise themselves with the menopause before conducting a meeting with a member of staff to discuss their situation.

The menopause is a natural part of ageing which usually occurs between 45 and 55 years of age. It occurs as a direct result of a woman's oestrogen levels declining. In the UK, the average age for a woman to reach menopause is 51. A woman is officially described as post-menopausal when her ovaries are no longer working and when she has not had a period for 12 months.

The perimenopause is the period of hormonal change leading up to the menopause. This is the time when many women start to experience symptoms. The perimenopause can often last for four to five years, although for some women it may continue for many more years, or for others last just a few months. In general, periods usually start to become less frequent over this time. Sometimes menstrual cycles become shorter, periods may become heavier or lighter, or women may notice that the odd period is missed until eventually they stop altogether. Some women report that during the perimenopause, they experience worse symptoms than the menopause.

Some women experience sudden menopause after surgery, chemotherapy or radiotherapy.

It is estimated that around one in every 100 women will experience a premature menopause (before the age of 40).

The menopause affects every woman differently and so there is no 'one-size fits-all' solution to it.

Some women experience few symptoms while others experience such severe symptoms that it impacts negatively on both their home and working lives.

Signs and symptoms of the menopause

The following is merely a guide to some of the signs and symptoms women may experience as part of the menopause. Some women may suffer with conditions that are exacerbated by the menopause, such as osteoarthritis and migraine.

Signs and symptoms may include:

Vasomotor symptoms

- *Hot flushes
- *night sweats

Psychological effects of hormone changes

- *Low mood/mood swings
- *Poor memory and concentration
- *Insomnia
- *Loss of libido
- *Anxiety/panic attacks

Physical Symptoms

- *Headaches
- *Fatigue
- *Joint aches and pains
- *Palpitations
- *Formication (creeping skin)
- *Insomnia

Sexual Symptoms

- *Painful sex/*vaginal dryness
- *Urinary tract infections
- *Vaginal irritation

Consequences of oestrogen deficiency

- *Obesity, diabetes
- *Heart disease
- *Osteoporosis/chronic arthritis
- *Dementia and cognitive decline
- *Cancer

N.B. This is not an exhaustive list.

Many women may also find that their symptoms are connected. For example, sleep disturbance, which is really common during the menopause, may lead to other serious conditions.

The length of time that women experience symptoms of the menopause can vary between women. Again, there is no one answer for all.

Symptoms can begin months or years before a woman's periods stop.

The perimenopause is usually expected to last around four or five years, but it can be much shorter or longer. During this time, many women begin to experience painful, intermittent and heavy periods. As a teacher, it is therefore important to raise this issue with management if adjustments need to be put in place, such as having access to a toilet and shower facilities.

According to the NHS, on average, a woman continues to experience symptoms for around four years after their last period, but around 10% of women continue to experience symptoms for up to 12 years after their last period and 3% will suffer for the rest of their lives. With teachers remaining in the classroom well into their sixties, it is imperative that caseworkers are aware of this and are not afraid to raise it as an issue with women members seeking help and support for other, seemingly unrelated, concerns.

It is also important to recognise that beyond the menopause, postmenopausal women can be at increased risk of certain conditions due to a decrease in hormones. These include osteoporosis and heart disease.

The British Menopause Society (2016) estimated that 50% of women aged between 45-65 who had experienced the menopause in the previous ten years had NOT consulted a healthcare professional about their menopausal symptoms.

This was despite:

- 42% of women feeling that their symptoms were worse or much worse than they expected;
- 50% of women believed the menopause had impacted on their home life; and
- More than a third believed the menopause had impacted on their work life.

Many workplace factors can make working life more difficult for women experiencing the menopause, which may make symptoms worse. School and college leaders should take into consideration the concerns listed below.

These can include:

- lack of suitable gender sensitive risk assessments;
- lack of awareness of the menopause;
- lack of management training on women's health issues;
- poor ventilation and air quality;
- inadequate access to drinking water;
- inadequate or non-existent toilet/washing facilities;

- lack of control of temperature/ light;
- lack of appropriate uniforms or personal protective equipment (PPE in science department);
- inflexible working time rules/break times;
- inflexible policies which penalise women because of their symptoms;
- negative attitudes;
- excessive workloads;
- workplace stress;
- unsympathetic line management/colleagues and
- bullying and harassment.

Senior Leadership Team and Line managers

It is recognised that the menopause is a very personal experience and different adjustments and levels of support may be needed for different individuals. Line managers should seek to provide appropriate support and adjustments when needed to help women deal with issues arising from the menopause.

Should an employee request a meeting to discuss concerns of the menopause, it is recommended that line managers adhere to the following:

- Arrange a meeting at a convenient time for both parties;
- Allow the employee to be accompanied if they want it. This can be a trade union representative or a colleague;
- Choose a venue that provides privacy and is unlikely to be disturbed;
- Allow adequate time to talk;
- Encourage the employee to be open and honest. It is difficult to help when you haven't got the full picture;
- If the employee wishes to speak to another manager, this should be allowed;
- Keep a note of all discussions and agree outcomes and next steps (the '*Confidential Discussion Record – Menopause*' should be used to facilitate this) and
- Agree a follow-up meeting to review the situation.

Confidential Discussion Record – Menopause

Date:	Present:
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STAFF DETAILS		
NAME	Job Title	School/Trust

Summary of discussions:

Agreed action points/reasonable adjustments:

Agreed date of review meeting:

Signed (staff).....

Signed (manager).....

Appendix 3

Workplace issues/suggested adjustments

Symptom	Examples of workplace factors which could worsen or interact with symptoms	Suggested adjustments
Daytime sweats, hot flushes, palpitations	<p>Lack of access to rest breaks or suitable break areas.</p> <p>Hot flushes and facial redness may cause women to feel self-conscious, or the sensation may affect concentration or train of thought.</p>	<p>Be flexible about additional breaks. Allow time out and access to fresh air.</p> <p>Ensure a quiet area/room is available.</p> <p>Ensure cover is available so workers can leave their posts if needed.</p>
Nighttime sweats and hot flushes. Insomnia or sleep disturbance	Rigid start/finish times and lack of flexible working options may increase fatigue at work due to lack of sleep.	<p>Consider temporary adjustment of hours to accommodate any difficulties.</p> <p>Allow flexible working. Provide the option of alternative tasks/duties.</p> <p>Make allowance for potential additional need for sickness absence.</p> <p>Reassure workers that they will not be penalised or suffer detriment if they require adjustments to workload or performance management targets.</p>
Urinary problems; for example, increased frequency, urgency, and increased risk of urinary infections	<p>Lack of access to adequate toilet facilities may increase the risk of infection and cause distress, embarrassment and an increase in stress levels.</p> <p>Staff member may need to access toilet facilities more frequently, may need to drink more fluids and may feel unwell.</p>	<p>Ensure easy access to toilet and washroom facilities.</p> <p>Allow for more frequent breaks during work to go to the toilet.</p> <p>Ensure easy access to supply of cold drinking water.</p> <p>Take account of peripatetic workers schedules and allow them to access facilities during their working day. Make allowances for potential additional need for sickness absence.</p>
Irregular and/or heavy periods	<p>Lack of access to adequate toilet facilities may increase the risk of infection and cause distress, embarrassment and an increase in stress levels.</p> <p>Staff member may need to access toilet and washroom facilities more frequently.</p>	<p>Ensure easy access to well maintained toilet and washroom or shower facilities.</p> <p>Allow for more frequent breaks in work to go to the toilet/ washroom.</p> <p>Ensure sanitary products readily available. Take account of peripatetic workers schedules and allow them to access facilities during their working day.</p> <p>Ensure cover is available so staff can leave their posts if needed.</p>

<p>Skin irritation, dryness or itching</p>	<p>Unsuitable workplace temperatures and humidity may increase skin irritation, dryness and itching.</p> <p>There may be discomfort, an increased risk of infection and a reduction in the barrier function of skin.</p>	<p>Ensure comfortable working temperatures and humidity.</p> <p>Ensure easy access to well maintained toilet and washroom or shower facilities.</p>
<p>Muscular aches and bone and joint pains</p>	<p>Lifting and moving, as well as work involving repetitive movements or adopting static postures, may be more uncomfortable and there may be an increased risk of injury.</p>	<p>Make any necessary adjustments through review of risk assessments and work schedules / tasks and keep under review. Consider providing alternative lower-risk tasks.</p> <p>Follow Health and Safety Executive (HSE) guidance and advice on manual handling and preventing MSDs (musculoskeletal disorders).</p>
<p>Headaches</p>	<p>Headaches may be triggered or worsened by many workplace factors such as artificial lighting, poor air quality, exposure to chemicals, screen work, workplace stress, poor posture/unsuitable workstations, unsuitable uniforms or workplace temperatures.</p>	<p>Ensure comfortable working temperatures, humidity and good air quality.</p> <p>Ensure access to natural light and ability to adjust artificial light.</p> <p>Allow additional rest breaks.</p> <p>Ensure a quiet area/room is available.</p> <p>Carry out Display Screen Equipment (DSE) and stress risk assessments.</p>
<p>Dry eyes</p>	<p>Unsuitable workplace temperatures/humidity, poor air quality and excessive screen work may increase dryness in the eyes, discomfort, eye strain and increase the risk of infection.</p>	<p>Ensure comfortable working temperatures, humidity and good air quality. Allow additional breaks from screen based work. Carry out DSE risk assessments.</p>
<p>Psychological symptoms, for example:</p> <ul style="list-style-type: none"> • Depression • Anxiety • Panic Attacks • Mood changes • Loss of confidence 	<p>Excessive workloads, unsupportive management and colleagues, perceived stigma around the menopause, bullying and harassment and any form of work-related stress may exacerbate symptoms. Stress can have wide ranging negative effects on mental and physical health and wellbeing. Performance and workplace relationships may be affected</p>	<p>Carry out a stress risk assessment and address work-related stress through implementation of the HSE's management standards.</p> <p>Ensure that workers will not be penalised or suffer detriment if they require adjustments to workload, tasks or performance management targets. Ensure that managers understand the menopause and are prepared to discuss any concerns that staff may have in a supportive manner. Ensure managers have a positive attitude and understand that they should offer adjustments to workload and tasks if needed.</p>

		<p>Allow flexible/home working. Make allowance for potential additional need for sickness absence. Ensure that staff are trained in mental health awareness. Raise general awareness of issues around the menopause so colleagues are more likely to be supportive. Provide opportunities to network with colleagues experiencing similar issues (menopause action and support group). Ensure a quiet area/room is available. Provide access to counselling services</p>
<p>Psychological symptoms:</p> <ul style="list-style-type: none"> • Memory problems • Difficulty concentrating 	<p>Certain tasks may become more difficult to carry out temporarily; for example, learning new skills (may be compounded by lack of sleep and fatigue), performance may be affected and work related stress may exacerbate these symptoms. Loss of confidence may result.</p>	<p>Carry out a stress risk assessment and address work-related stress through implementation of the HSE's management standards. Reassure workers that they will not be penalised or suffer detriment if they require adjustments to workload or performance management targets. Ensure that managers understand the menopause and are prepared to discuss any concerns that staff may have in a supportive manner. Ensure managers have a positive attitude and understand that they should offer adjustments to workload and tasks if needed. Reduce demands if workload identified as an issue. Provide additional time to complete tasks if needed, or consider substituting with alternative tasks. Allow flexible/home working. Offer and facilitate alternative methods of communicating tasks and planning of work to assist memory. Ensure a quiet area/room is available. Provide access to counselling services.</p>



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