

Livewell Southwest

Menopause at Work Policy

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Notice to staff using a paper copy of this guidance.

The policies and procedures page of LSW intranet holds the most recent version of this document and staff must ensure that they are using the most recent guidance.

Author: HR in partnership with JTUF and Devon STP

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Document review history

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1	New Policy	September 2019	HR in partnership with JTUF and Devon STP	New Policy
1.1	Extended	September 2022	HR in partnership with JTUF and Devon STP	Extended

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Menopause at Work Policy

1 Introduction

- 1.1. Livewell Southwest is committed to providing an inclusive and supportive working environment for everyone who works here.
- 1.2. Menopause is a natural part of every woman's life, although for some individuals the transition can be difficult particularly in the context of the workplace. With the right support, it can be much better. Whilst every woman does not suffer with symptoms, supporting those who do will improve their experience at work and may improve organisational outcomes.
- 1.3. Menopause should not be taboo or stigmatised. We want everyone to understand what menopause is, and to be able to talk about it openly, without embarrassment. This is not just an issue for women, men should be aware too.
- 1.4. The changing age of the UK's labour market means that between 75% and 80% of menopausal women are in work. Livewell Southwest acknowledges that it is heavily reliant on the 41-60 year old female bracket of its workforce. Research shows that the majority of women are unwilling to discuss menopause-related health problems with their line manager, nor ask for the support or adjustments that they may need.
- 1.5. This policy sets out the guidelines for members of staff and managers on providing the right support to manage menopausal symptoms at work.

2 Purpose

The aims of this policy are to:

- 2.1. Foster an environment in which colleagues can openly and comfortably instigate conversations, or engage in discussions about menopause.
- 2.2. Educate and inform managers about the potential symptoms of menopause, and how they can support women at work.
- 2.3. Ensure that women suffering with menopause symptoms feel confident to discuss it, and ask for support and any reasonable adjustments so they can continue to be successful in their roles.
- 2.4. Reduce any absenteeism, presentism, performance issues and turnover that may arise due to menopausal symptoms.

3 Definitions

- 3.1 **Menopause** is defined as a biological stage in a woman's life that occurs when she stops menstruating, and reaches the end of her natural reproductive life. Usually, it is defined as having occurred when a woman has not had a period for twelve consecutive months (for women reaching menopause naturally). The average age for a woman to reach menopause is 51, however, it can be earlier or later than this due to surgery, illness or other reasons. Around 1 in 100 women experience the menopause before 40 years of age. This is known as premature menopause or premature ovarian insufficiency.
- 3.2. **Perimenopause** is the time leading up to menopause when a woman may experience changes, such as irregular periods or other menopausal symptoms. This can be years before menopause.
- 3.3. **Postmenopause** is the time after menopause has occurred, starting when a woman has not had a period for twelve consecutive months.

4 Duties & Responsibilities

- 4.1 The **Chief Executive** is ultimately responsible for the content of all policies, implementation and review.
- 4.2 Line Managers should:
- Familiarise themselves with the Menopause at work policy
 - Attend menopause training events to gain a better understanding of the transition
 - Be ready and willing to have open discussions about menopause, appreciating the personal nature of the conversation, and treating the discussion sensitively and professionally
 - Provide employees with support and guidance and sign post them to the information provided at Appendices A and D.
 - Document conversations and record any actions/adjustments required using the form provided at Appendix 2
 - Undertake a work-based risk assessment utilising the checklist provided at Appendix C, documenting any actions/adjustments to be implemented
 - Ensure ongoing dialogue and review date
 - Ensure that all agreed adjustments are adhered to
 - Where adjustments are unsuccessful, or if symptoms are proving more problematic, the Line Manager may:
 - Discuss a referral to Occupational Health (OH) for further advice;
 - Review Occupational Health advice, and implement any recommendations, where reasonably practical;
 - Update the action plan, and continue to review.

4.3 All staff are responsible for:

- Taking personal responsibility to look after their health
- Being open and honest in conversations with managers/HR and Occupational Health
- If a member of staff is unable to speak to their line manager, or if they perceive their line manager is not supporting them, they can speak to HR, OH or their Union
- Contributing to a respectful and productive working environment
- Being willing to help and support their colleagues
- Understanding any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.

4.4 Occupational Health should (where applicable)

- Carry out a holistic assessment of individuals as to whether or not menopause may be contributing to symptoms/wellbeing, providing advice and guidance in line with up-to-date research
- Signpost to appropriate sources of help and advice
- Provide support and advice to HR and Line Managers in identifying reasonable adjustments, if required

4.5 Human Resources (HR)

- Offer guidance to managers on the interpretation of this Policy and Guidance
- Attend training sessions, and develop briefing sessions, for staff
- Monitor and evaluate the effectiveness of this policy in respect of related absence levels and performance.

5 **Symptoms**

- 5.1 Many women will experience menopausal symptoms. Some of these can be quite severe and have a significant impact on their everyday activities including work life.

Common symptoms include:

- hot flushes
- palpitations
- headaches
- night sweats
- joint problems/osteoporosis
- insomnia
- difficulty sleeping

- skin irritation
- vaginal dryness
- low mood or anxiety
- depression
- problems with memory and concentration

Menopausal symptoms can begin months or even years before a woman's periods stop and last around four years after the last period, although some women experience them for much longer.

6 Managing menopause in the context of the workplace

- 6.1 The effects on a woman's physical and emotional health can significantly impact on how she undertakes her work and her relationships with colleagues. Furthermore some working conditions and environments may aggravate symptoms.
- 6.2 Livewell Southwest recognises its responsibility to take into account any difficulties women may experience during the menopause and to provide support and advice in this regard.
- 6.3 Furthermore it recognises that menopausal transition is a very individual experience and that people can be affected in different ways and to different degrees, and therefore different levels and types of support and adjustments may be needed.
- 6.4 Consequently Livewell Southwest will take a proactive stance and will promote a greater understanding of the menopause and seek to eradicate any exclusionary or discriminatory practices.
- 6.5 Livewell Southwest will work proactively to make adjustments where necessary to support individuals experiencing the menopause and to ensure the workplace does not make their symptoms worse.
- 6.6 Livewell Southwest will carry out risk assessments which take the specific needs of individuals into consideration (including stress risk assessments) and to ensure that the working environment will not make their symptoms worse. The risk assessment will assist in identifying any potential adjustments which may be required. Particular issues to consider include temperature, ventilation and the materials used in any uniform which is provided. Welfare issues (including toilet facilities and access to cold water) should also be considered (see Appendix C).

7 Training Implications

- 7.1 All staff to be made aware of this policy. Requirement for line managers and

staff to attend menopause training events run by Livewell Southwest or external organisations to ensure a better understanding of the transition.

All policies are required to be electronically signed by the Lead Director. Proof of the electronic signature is stored in the policies database.

The Lead Director approves this document and any attached appendices. For operational policies this will be the Head of Service.

The Executive signature is subject to the understanding that the policy owner has followed the organisation process for policy Ratification.

Signed: Director of People and Professionalism

Date: 10 September 2019

Appendix A Managers' Guidance for colleague discussions

We recognise that every woman is different, and it is, therefore, not feasible to set out a structured set of specific guidelines.

All advice is given and written in accordance with best practice.

If an employee wishes to speak about their symptoms, or just to talk about how they are feeling (they may not recognise themselves that they are symptomatic), or if a male employee wishes to speak about a family member, please ensure that you:

- Allow adequate time to have the conversation
- Find an appropriate room to preserve confidentiality
- Encourage them to speak openly and honestly
- Suggest ways in which they can be supported (see symptoms below) – hand out the Menopause Advice Sheet (Appendix D)
- Agree actions, and how to implement them (you should use the template at Appendix B to record the meeting, so that all parties agree what has been discussed, and the next steps, before the meeting ends). Ensure that this record is treated as confidential, and is stored securely
- Agree if other members of the team should be informed, and by whom
- Ensure that designated time is allowed for a follow up meeting. Do not rely on quick queries during chance encounters in the corridor or break room

Symptoms Support

Symptoms can manifest both physically and psychologically, including, but not exhaustively or exclusively; support for women should be considered as detailed below:

Hot Flushes

- Request temperature control for their work area, such as a fan on their desk (where possible a USB connected desk fan to ensure environmentally friendly) or moving near a window, or away from a heat source
- Easy access to drinking water
- Be allowed to adapt prescribed uniform, such as by removing a jacket
- Have access to a rest room for breaks if their work involves long periods of standing or sitting, or a quiet area if they need to manage a severe hot flush.

Heavy/light Periods

- Have permanent access to washroom facilities
- Request an extra uniform

- Ensure sanitary products are available in washrooms in order to obtain personal protection
- Ensure storage space is available for a change of clothing.

Headaches

- Have ease of access to fresh drinking water
- Offer a quiet space to work
- Offer noise-reducing headphones to wear in open offices
- Have time out to take medication if needed.

Difficulty Sleeping

- Ask to be considered for flexible working, particularly suffering from a lack of sleep.

Low Mood

- Agree time out from others, when required, without needing to ask for permission
- Identify a 'buddy' for the colleague to talk to – outside of the work area
- Identify a 'time out space' to be able to go to 'clear their head'

Loss of Confidence

- Ensure there are regular Personal Development Discussions
- Have regular protected time with their manager to discuss any issues
- Have agreed protected time to catch up with work.

Poor Concentration

- Discuss if there are times of the day when concentration is better or worse, and adjust working pattern/practice accordingly
- Review task allocation and workload
- Provide books for lists, action boards, or other memory-assisting equipment
- Offer quiet space to work
- Offer noise-reducing headphones to wear in open offices
- Reduce interruptions
- Have agreements in place in an open office that an individual is having 'protected time', so that they are not disturbed
- Have agreed protected time to catch up with work.

Anxiety

- Promote counselling services provided by Livewell Southwest's provider, eg Occupational Health.
- Identify a 'buddy' for the colleague to talk to – outside of work their area
- Be able to have time away from their work to undertake relaxation techniques
- Undertake mindfulness activities such as breathing exercises, or going for a walk.

Panic Attacks

- Agree time out from others, when required, without needing to ask for permission
- Identify a 'buddy' outside of work area
- Be able to have time away from their work to undertake relaxation techniques
- Undertake mindfulness activities such as breathing exercises, or going for a walk.

Discuss whether the member of staff has visited their GP. Depending on the discussion, this may be the next step suggested, particularly if the areas of difficulty are sleeping, panic attacks or anxiety.

If they have visited their GP, and are being supported by them, it may be helpful at this point to make an Occupational Health referral to give specific advice regarding the workplace.

Appendix B Confidential Colleague Discussion Template (also consider use of Appendix C Risk assessment)

Member of staff' details:			
Name		Job Title	
Department/Division		Location (building/room number)	

Present at meeting (line manager name and position)	
Date of discussion	

Summary of Discussion:

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Agreed Actions/Adjustments:

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Date of next review meeting: _____

Signed (Member of staff):_____

Signed (Manager):_____

Appendix C Risk assessment

This document should be retained on the individual's file and reviewed by the individual and manager on a regular basis.

Agreed adjustments must be put in place to lower any risks to an acceptable level. (It may also be necessary to seek further guidance from HR and/or Occupational Health).

What are the hazards	Considerations	Who might be harmed and how including level of risk	What is already being done	What further action is necessary	Action by whom	Action by when	Date achieved
Information on menopause	Does the employee have access to information on menopause, relevant policies on attendance management, Occupational Health etc?						
Sickness reporting	Is there the facility for those who are not able to attend work due to menopausal symptoms to report these to a female manager or other point of contact?						

Stress	Are there the appropriate mechanisms in place to deal with other related issues such as stress management? e.g. Counselling services, HSE Stress Management Standards						
Occupational health arrangements	Has the employee been made aware of what facilities are in place for OH referral and support to remain in the workplace? Do they need a referral?						
Unions support /discussion groups	The employee has been made aware of other support mechanisms in the workplace which may be able to help? E.g. Occupational Health.						

Physical

Work stations	Are work stations / Locations easily accessible to toilet, and rest facilities?						
Facilities	Are there private washing and changing facilities available?						
	Is there access to sanitary products?						
	Do rotas, shifts and schedules ensure that workers have easy access to sanitary and washing facilities?						
Temperature	Are the employee/ employer aware of the workplace maximum and minimum temperature and is it implemented?						
	Is ventilation available and is it regularly maintained?						
	Is additional ventilation provided if necessary? E.g. Desk Fan, ability to open /						

	sit by a window. How is this implemented?						
	Do uniforms and PPE equipment reflect the needs of the individual?						
	Is the employee aware of what additional uniform can be provided and how to get this?						
	Are the clothes provided made of natural fibres?						
Environment / duties	Have workstation risk assessments been reviewed to take menopause into account?						
	Are there opportunities to switch to lighter or different duties?						
	Do manual handling assessments take any issues around menopause into account?						
	Are there flexible arrangements in place in relation to breaks?						
	Can start and finish times be						

	adjusted as part of a flexible working agreement?						
	Is the role suitable for agile working? If not why not?						
	Is there access to natural light?						
	Have work processes been assessed to see if any adjustments are needed?						
	Are air conditioning / Humidifiers functioning efficiently?						
	Is the environment too noisy?						
	Does the role impact on fatigue (mental and physical)? Are you able to assess, monitor and respond to frequent changes in patient acuity / job demands? Are you able to concentrate to undertake and record complex medicine calculations / complex pieces of work? Do you have the ability to						

	deal with emotionally challenging clinical / staff / customer situations? Etc.						
	Does the role result in fatigue from standing?						
	Do you have sufficient workspace?						
	Are you able to move freely / adjust posture etc.?						
	Do you undertake remote working?						
	Could remote working support you to perform effectively in your role?						
Working conditions	Do you work night shifts?						
	Do you work shifts in general?						
	Are you a lone worker?						
	Do you work ad hoc / regular overtime / on call?						
	How do you travel to work? Do you drive for business purposes?						

Other risk / issues
Please identify

What are the hazards	Considerations	Who might be harmed and how including level of risk	What is already being done	What further action is necessary	Action by whom	Action by when	Date achieved

PLEASE NOTE: The list above is not exhaustive. There may be other issues that are highlighted which should be considered when agreeing reasonable adjustments

CONFIRMATION OF COMPLETION OF REASONABLE ADJUSTMENTS IDENTIFIED

Details of adjustments agreed:
Details of adjustments not approved (including reasons for the decision)
Date of annual review meeting
(N.B. this review can be cancelled if the employee decides the meeting is not required)
I confirm that the meeting was undertaken for
Signed: _____ (Line Manager) Signed:
(Employee) Print name: _____ (Line Manager) Print name:
_____ (Employee)

Appendix D Menopause Advice Sheet

If you are suffering from menopausal symptoms to the point they're getting in the way of you enjoying life, it's time to talk to your doctor. But, sometimes, that's easier said than done.

We all know how difficult it can often be just to get an appointment, and then it's often only ten minutes. And talking about symptoms can be hard, let alone if you feel rushed or unprepared. So, what can you do? We've put together some helpful, straightforward tips to help you get the best from your appointment.

Don't wait. It is all too common for women to feel they must simply 'put up' with menopausal symptoms as a part of life, but if they are affecting you, there are things you can do, and support available. There is no need to wait until symptoms feel unbearable.

Read the NICE guidelines. This stands for National Institute for Health and Care Excellence and these guidelines are what your doctor will use to determine the type of conversations to have with you and treatments to offer. There are guidelines for patients, which are really useful to read before you see your GP, so you know what to expect.

Prepare for your appointment. It's easier for your doctor to understand what's going on if you provide them with all the information. That may sound obvious, but blood tests to say where you are on the menopause transition aren't always available or accurate – your hormones can fluctuate daily during this time. So, your doctor will be thinking about what to recommend for you, based on your symptoms.

Keep a list of your symptoms, your menstrual cycle, hot flushes, how you're feeling, and any changes you've noticed. Write them down, and take them to your appointment. Your doctor will thank you for it, and it's more likely that together, you'll find the right solution faster. And, if you have any preferences about how you manage your symptoms, tell them that too – for example, if you'd like to try hormone replacement therapy (HRT), or not.

Ask the receptionist which doctor is best to talk to about menopause. They are often the font of all knowledge at a surgery, and can help you find the best person to speak to – it might not be your usual GP, it could be someone who has had special training in the subject.

Ask for a longer appointment. If you don't think your standard appointment will be long enough, try to book a double appointment, as some surgeries do offer this.

Don't be afraid to ask for a second opinion. If you don't feel you've received the help you need, ask to speak to someone else. Don't be put off, you know how you're

feeling, and how it's affecting you.

Ask if there is a menopause clinic in your area. Occasionally, there are regional clinics, specifically devoted to menopause. If there is one in your area, and you think this would be helpful, ask for a referral.

Take your partner or a friend with you. The chances are, you spend your life supporting others and, during menopause, it's your turn to ask them for support. Your partner, or a friend, will know how the symptoms are affecting you. They could support you at the appointment, and also find out how they can continue supporting you.

What to expect from your doctor

There are certain things a GP should – and should not – do during your appointment.

They should:

- Talk to you about your lifestyle, and how to manage both your symptoms, and your longer-term health
- Offer advice on hormone replacement therapy and other non-medical options
- Talk to you about the safety and effectiveness of any treatment.

They should not:

- Tell you that it's just that time of your life. Yes, menopause is a natural stage, but please don't feel that means you should have to put up with every symptom without help
- Tell you they don't prescribe HRT. It's up to you what you want to try, and for them to say whether it could be right for you, depending on your medical history
- Impose unnecessary time restrictions, such as they will only prescribe this once, or for a year or two. This is an ongoing conversation, and if your symptoms persist, you will still need help to manage them.

Remember, your GP is there to help and support you, and you should feel comfortable and confident in talking to them about your symptoms, and any help you need. Don't think you have to struggle through menopause when there is help and support available.