

MENOPAUSE POLICY

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CONTENTS

1.	Introduction/Purpose	3
1.1	Overview	3
1.2	Symptoms of the Menopause	4
2.	General Principles	5
3.	Responsibilities (Ownership and Accountability)	6
3.1	Members of staff	6
3.2	Line Managers	6
3.3	Occupational Health	7
3.4	Human Resources (HR)	7
3.5	Employee Assistance (EAP)	7
4.	References	8
Appendix 1	Managers' Guidance for colleague discussions	9
Appendix 2	Menopause Advice Sheet – How to talk to your GP about menopause	11

1. Introduction / Purpose

This policy for Tendring District Council applies to all staff and sets out how all staff experiencing menopausal symptoms are supported and helps colleagues and line managers understand how they can support employees experiencing such symptoms. It is part of a suite of health and wellbeing policies and activities designed to support our staff through their lives.

Anyone can be affected by hormonal changes during their lives for several reasons, including pregnancy, fertility treatment, gender transitioning, conditions needing hormone treatment, and menopause. These can bring about symptoms which could affect a colleague at work. This policy focuses on the menopause (with reference to andropause)

Therefore, it is stated that the policy applies to anyone experiencing the menopause, regardless of their gender expression or identity.

This policy aims to ensure that we provide an inclusive and supportive working environment in the workplace and whilst working from home for individuals experiencing the menopause or who are supporting family members.

Tendring District Council has used guidance from the National Institute for Health and Care Excellence (NICE) and ACAS (Advisory, Conciliation and Arbitration Service) guidance. The NICE guidelines set out the recommendations for medical professionals when treating menopausal individuals and for patients as to the treatment and guidance they should be offered.

In line with the Council's commitment to Equality and Diversity, this policy has been developed to be truly representative of all sections of society, and all staff feel respected and able to give their best.

All staff will be helped and encouraged to develop their full potential, and the talents and resources of the workforce will be fully used to maximise the efficiency of the Council.

1.1 Overview

1.1 **Menopause** is defined as a biological stage that occurs in an individual's life.

It occurs when an individual stops menstruating and reaches the end of their natural reproductive life. Usually, it is defined as having occurred when an individual has not had a period for twelve consecutive months. The average age for an individual to reach menopause is 51. However, it can be earlier or later due to surgery, illness, or other reasons.

1.2. **Perimenopause** is the time leading up to menopause when an individual may experience changes, such as irregular periods or other menopausal symptoms. This can be years before menopause.

1.3. **Post-menopause** is the time after menopause has occurred, starting when an individual has not had a period for twelve consecutive months.

1.4. **Andropause** is used to describe aging-related hormone changes in an individual. Other terms include testosterone deficiency syndrome, androgen deficiency of the ageing individual and late-onset hypogonadism. Testosterone levels vary among individuals. In general, testosterone levels gradually decline throughout adulthood – about 1 percent a year after age 30 on average.

1.2 Symptoms of Menopause

1.2.1. It is important to note that not every individual will notice every symptom, or even need help or support. However, 75% of individuals do experience some symptoms, and 25% could be classed as severe.

1.2.2. Symptoms can manifest both physically and psychologically, including, but not exclusively; low energy, hot flushes, poor concentration, headaches, panic attacks, heavy/light periods, anxiety, decrease in motivation or loss of confidence. Some individuals also have trouble sleeping. In addition, there may be physical changes, including increased body fat, reduced muscle bulk and strength, and decreased bone density. Swollen or tender breasts (gynecomastia) and loss of body hair are possible.

1.2.3 Tendring District Council is committed to providing an inclusive and supportive working environment for everyone who works here.

1.2.4. Menopause is part of every individual's life, and it isn't always an easy transition. With the right support, it can be much better. While every individual does not suffer with symptoms, supporting those who do will improve their experience at work.

1.2.5. Menopause should not be taboo or 'hidden'. We want everyone to understand what menopause is, and to be able to talk about it openly, without embarrassment.

1.2.6. The changing age of the UK's workforce means that between 75% and 80% of menopausal individuals are in work. Research shows that many individuals are unwilling to discuss menopause-related health problems with their line manager, nor ask for the support or adjustments that they may need. Staff members may also be supporting the needs of others outside of the work environment.

1.2.7. This policy sets out the guidelines for members of staff and managers on providing the right support to manage menopausal symptoms at work.

2 General Principles

The aims of this policy are to –

2.1 Foster an environment in which everyone can openly and comfortably instigate conversations or engage in discussions about menopause and feel supported by everyone through this stage.

2.2. Ensure everyone understands what menopause is, can confidently have good and supportive conversations, and are clear on Tendring District Council's policy and practices, supported by Human Resources and, if applicable, Occupational Health.

2.3 Educate, support and inform managers about the potential symptoms of menopause, and how they can support staff at work.

2.4 Ensure that staff suffering with menopausal symptoms feel confident to discuss it, ask for support and make requests for reasonable adjustments so they can continue to be successful in their roles or studies.

2.5 Reduce absenteeism due to menopausal symptoms.

2.6 Assure staff that, as a responsible employer, we are committed to supporting their changing needs during this stage.

2.7 Promote the support available to all staff who have menopausal symptoms or to prepare staff for this stage by being open, positive, and supportive.

3 Responsibilities (Ownership and Accountability)

3.1 Members of staff:

All staff are responsible for:

- Taking a 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 their line manager is not supporting them, they can speak to a member of HR or a representative of their Union;
- Contributing to a respectful, supportive, 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.

3.2 Line Managers

See Appendix 1 for Managers' Guidance.

All line managers should:

- Familiarise themselves with the Menopause Policy and Guidance;
- Be ready and willing to have open and supportive discussions about menopause, appreciating the personal nature of the conversation and treating the discussion sensitively and professionally;
- Use the guidance in Appendices 1 and 2, signposting and reviewing together, before agreeing with the individual how best they can be supported, and any adjustments required;
- Record adjustments agreed, and actions to be implemented;
- Ensure ongoing dialogue and review dates;
- Ensure that all agreed adjustments are adhered to.

Where adjustments are unsuccessful, or if symptoms are proving more problematic, the Line Manager may:

- Seek further support from a member of the HR Team
- Discuss a referral to Occupational Health with HR for further advice;
- Refer the employee to Occupational Health;
- Review Occupational Health advice, and implement any recommendations, where reasonably practical;

3.3 Occupational Health

The role of Occupational Health is to:

- Carry out a holistic assessment of individuals as to whether 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 (refer to Appendix 2 for more information);
- Provide support and advice to HR and Line Managers in identifying reasonable adjustments, if required;
- Provide support services (see Appendix 2 below).

3.4 Human Resources (HR)

HR will:

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

3.5 Employee Assistance (EAP)

The Employee Assistance service will:

- Provide access to 24/7 telephone counselling for all members of staff.
- Provide on-line (downloadable) advice sheets (see further links in Appendix 2).

4 References and Associated Documents

4.1 Tendring District Council has used guidance from ACAS (Advisory, Conciliation and Arbitration Service) guidance.

4.2 Self-management, with support from Tendring District Council managers and colleagues, will help to manage symptoms. Appendix 1 details some recommendations to support symptomatic individuals who may need advice and support.

Daisy Network, n.d. Information and support on very early menopause. [Online]
Available at: [Support on early menopause](#)

FOM, n.d. Advice on the menopause. [Online] Available at: [Advice on Menopause](#)

Wisdom [Online] Available at: [Employee Assistance Programme](#)

NHS, 2018. Menopause - Symptoms. [Online] Available at: [NHS Menopause Symptoms](#)

Royal College of Obstetricians and Gynaecologists, n.d. Menopause in later life.
[Online] Available at: [Menopause in later life](#)

ACAS (Advisory, Conciliation and Arbitration Service) [ACAS guidance on Menopause](#)

Appendix 1: Managers' Guidance for colleague discussions

Managers' Guidance for colleague discussions

We recognise that every member of staff 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 the Faculty of Occupational Medicine (FOM) recommendations and best practice.

If an employee wishes to speak about their symptoms, or just to talk about how they are feeling (they may not recognise that they are symptomatic), or if an 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 2);
- Contact Employee Assistance Programme for additional information and advice
- Agree actions, and how to implement them, so that all parties agree what has been discussed, and the next steps, before the meeting ends.
- Agree if other members of the team should be informed, when 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.

Symptoms Support.

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

Hot Flashes.

- Request temperature control for their work area, such as a fan on their desk 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 / irregular / unpredictable Periods.

- Have permanent access to washroom facilities;
- Request an extra uniform (if applicable)

Headaches.

- Have ease of access to fresh drinking water;
- Offer a quiet space to work where practicable and possible

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Difficulty Sleeping.

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

Low Mood.

- Identify a 'buddy' for the colleague to talk to – outside of the work area;
- Contact the Tendring District Council's Employee Assistance programme

Loss of Confidence.

- Ensure there are regular Personal Development Discussions;
- Have regular protected time with their manager to discuss any issues;

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;
- Suggest coping mechanisms such as books for lists, action boards, or other memory-assisting equipment;
- Work together to agree solutions which are compatible to aid concentration / memory
- Offer quiet space to work where practicable and possible
- Reduce interruptions;

Anxiety.

- Promote counselling services provided by the Tendring District Council's Employee Assistance provider.
- Identify a 'buddy' for the colleague to talk to – outside of work their area;
- Signpost staff towards mindfulness activities such as breathing exercises or going for a walk during their break.

Panic Attacks.

- Identify a 'buddy' outside of work area;
- Signpost staff towards undertake mindfulness activities such as breathing exercises or going for a walk during their break

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 2: Menopause Advice Sheet – How to talk to your GP about menopause

If you are suffering from menopausal symptoms to the point where they're getting in the way of you enjoying life, it's time to talk to your doctor. 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 most from your appointment.

Don't wait. It is all too common for individuals 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 conversation 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 to support you.

Appendix 2: Menopause Advice Sheet – How to talk to your GP about menopause

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 do not 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.

All staff can access counselling by contacting the Employee Assistance helpline on:
0800 028 0199

The EAP website can be accessed as follows:

Online: [Employee Assistance Programme](#)

Available to download on: Google Play or App Store on personal devices

Log In Details:

Enter the unique code – **MHA257943**

Enter your email address and create a password

Follow the steps as listed