

# Menstruation & Menopause Policy

Date: May 2023

Last reviewed on: May 2023

Next review due by: May 2026 (3 yearly)

Owner: Director of Operations

Source: Trust

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# 1. Aims

Our Trust aims to:

- > Provide and maintain a gender inclusive workplace
- > Enhance staff engagement
- > Reduce menstruation, perimenopause and menopause related sickness absence
- > Improve retention
- ➤ Ensure that the Trust can support staff affected by menstruation difficulties, perimenopause and/or the menopause and help them to feel comfortable at work
- > Set out how the Trust will make reasonable adjustments to minimise the risk of the working environment making menstruation, perimenopause or menopausal symptoms worse
- ➤ Minimise menstruation, perimenopause and menopause related stigma in the Trust by educating staff
- > Provide further resources to help staff to support others through the difficulties menstruation, perimenopause and/or the menopause may cause

# 2. **Definitions**

A period is the part of the menstrual cycle when bleeding occurs. This usually happens once monthly from puberty until menopause. Changes in body hormone levels before and during a monthly period can cause physical and emotional changes.

Heavy periods can be very distressing. For many people, heavy periods have no cause. For others, it's due to a health condition such as <u>fibroids</u>, <u>adenomyosis</u> or <u>endometriosis</u>. Symptoms of heavy periods can include:

- Bleeding through clothes
- Passing large clots
- Having to change period products more frequently
- Having to use 2 different products at the same time
- Having heavy periods every month that stop everyday activities

Painful periods are common and pain can be a normal part of the menstrual cycle. Pain is usually felt as muscle cramps in the tummy which can spread to the back and thighs. The pain sometimes comes in intense spasms, while at other times it may be dull but more constant. Less commonly, period pain can be caused by an underlying medical condition.

The menopause is a stage of life when periods stop. It typically affects those aged between 45 and 55, when oestrogen levels begin to fall. In the UK the average age to reach the menopause is 51.

Perimenopause is the time of hormonal change leading up to the menopause. Post-menopause is the time beyond menopause.

Early menopause is when periods stop before the age of 45. It can happen naturally or as a side effect of some treatments.

# 3. Symptoms

Individuals suffering from difficult menstruation, perimenopause or the menopause may experience symptoms that cause changes to their emotions and other aspects of their health, some of which may impact them at work.

- Period related symptoms- Pre Menstrual Syndrome (PMS) is the name given to symptoms experienced in the weeks before a period. Symptoms may include:
  - Cramping
  - o Pain
  - Bloating and soreness
  - Food cravings
  - o Mood swings and irritability
  - Headache and fatigue
- Perimenopause related symptoms may include:
  - Irregular periods
  - Hot flashes and sleep problems
  - Mood changes
  - Vaginal and bladder problems
  - Decreasing fertility
  - Loss of bone density
  - Changing cholesterol level
  - Anxiety and depression
- Menopause related symptoms may include:
  - Hot flushes, night sweats and palpitations
  - o Difficulty sleeping, insomnia and fatigue
  - Low mood, anxiety and depression
  - Headaches and joint and muscle pain
  - Weakened bladder function and urinary tract infections
  - o Problems with memory, confidence and concentration
  - Anxiety and depression
- Menopause symptoms in other circumstances-
  - Whilst menopause is usually a process involving a gradual change, it can sometimes be sudden and acute following illness, medication or surgery.
     People experiencing sudden menopause tend to experience more severe symptoms and may require treatment and or post-operative care to manage further problems.
  - People undergoing treatment for conditions such as endometriosis, fibroids, polycystic ovarian syndrome, infertility and diabetes may experience menopausal symptoms whilst receiving treatment.
  - Surgical and medical treatments as part of an individual's gender transition can result in menopause symptoms.

We acknowledge that periods, perimenopause and the menopause will affect everybody differently. We will adapt our response to staff affected by on a case-by-case basis.

# 4. 'Male Menopause'

The "<u>male menopause</u>" is an unhelpful term sometimes used in the media. This label is misleading because it suggests the symptoms are the result of a sudden drop in testosterone in middle age, which is untrue. Some men develop depression, loss of sex drive, erectile dysfunction, and other physical and emotional symptoms when they reach their late 40s to early 50s. Other symptoms common in men this age are:

- Mood swings and irritability
- Loss of muscle mass and reduced ability to exercise
- Fat redistribution, such as developing a large belly or "man boobs" (gynaecomastia)
- A general lack of enthusiasm or energy
- Insomnia or difficulty sleeping
- Poor concentration and short-term memory

Lifestyle factors or psychological problems can also be responsible for many of these symptoms. A testosterone deficiency that develops later in life, also known as <u>late-onset hypogonadism</u>, can sometimes be responsible for these symptoms, but in many cases the symptoms are nothing to do with hormones.

# 5. Legislation

The three key areas of law which are relevant are:

- The Equality Act 2010 prohibits discrimination against an individual based on the protected characteristics, which include age, sex and disability. Employers are under a statutory duty to consider whether any reasonable adjustments are required to alleviate any disadvantages staff encounter based on these characteristics.
- The Health and Safety at Work Act 1974 employers have a legal duty to ensure the health, safety and welfare of all staff, so far as is reasonably practicable.
- The Management of Health and Safety at Work Regulations 1999 require that employers make an assessment of the risks to the health and safety of their employees. This required undertaking general risk assessments, which should include specific risk to the health and safety of staff affected by problematic periods and the menopause.

### 6. Role of Leadership Teams

The Leadership Teams will make reasonable adjustments in the workplace to support staff experiencing problematic periods or the menopause and ensure the workplace does not make their symptoms worse by:

- Carrying out individual risk assessments as required
- Considering flexible working requests\* in order to accommodate acute symptoms

- \*We recognise that for individuals affected the option to work flexibly on a temporary (rather than permanent) basis may be most appropriate.
- Allowing staff affected by difficult menstruation, perimenopause or the menopause to take regular breaks from their work if necessary to help manage symptoms
- Giving permission for absence to attend medical appointments
- Ensuring HR record difficult menstruation, perimenopause or menopause related absences as an 'ongoing health issue' rather than an individual short-term absence
- Treating difficult menstruation, perimenopause and the menopause as organisationwide equality issues
- Monitoring the wellbeing of staff through regular and open communication and structured conversations
- Providing resources and training opportunities to ensure that all line managers and HR staff are aware of difficult menstruation, perimenopause and the menopause, their potential impact on work and what adjustments may be necessary
- Promoting access to external support services
- Ensuring good ventilation and air quality throughout the setting, ensuring windows can be safely opened
- Ensuring regular access to cold drinking water for all staff
- Regulating and monitoring the temperature of the setting and collecting feedback from staff
- Ensuring toilet, washing and sanitary facilities are accessible for staff, and establishing a system that allows for cover for staff to access these facilities where necessary while they are teaching
- Providing small desk fans if required, to help staff cool down
- Designating a member of staff such as a wellbeing champion that staff affected by difficult menstruation perimenopause or the menopause can speak to about their symptoms in confidence, if they do not feel comfortable doing so with their line manager.

The Leadership Team will work to create a culture where staff can talk openly about difficult menstruation, perimenopause and the menopause by:

- Providing information on menstruation, perimenopause and the menopause in the staff room i.e. posters and leaflets
- Creating a support group so that those who want to can seek support from each other
- Providing training for staff and managers to achieve consistent practice
- Signposting staff to Occupational Health as required.

# 7. Role of Line Managers

Line managers who work with staff who may be affected by difficult menstruation, perimenopause or the menopause will:

- Provide a non-judgemental, empathetic and confidential support systems to staff
- Respect the personal nature of any conversations and treat them confidentially and sensitively
- In liaison with HR, monitor sickness absence and have support meetings with staff if any patterns emerge

- In liaison with HR, have regular, informal conversations with staff that they line manage who are affected by difficult menstruation, perimenopause or the menopause to discuss what support they need, and record any reasonable adjustments that are agreed
- Be sensitive to health issues during the appraisal process
- Seek advice from HR as required.

# 8. Role of staff members affected by problematic periods or the menopause

We encourage staff who are experiencing problematic periods or the menopause to:

- Take personal responsibility for their health and wellbeing by raising any concerns they have, including sharing their practical needs and their preferred coping strategies
- Seek advice from their GP should symptoms begin to affect their ability to carry out the full remit of their role
- Be open and honest when having conversations
- Access the employee assistance programme for further support.

### 9. Role of all staff

All staff are encouraged to work together to support those affected by difficult menstruation, perimenopause and/or the menopause.

All staff are expected to:

- Promote health and wellbeing for themselves and others at all times
- Model our Trust values and treat each other with empathy and respect
- Support other members of staff
- Accept and support any adjustments that staff affected by difficult menstruation, perimenopause or the menopause may be receiving as a result of their symptoms

# 10. Further Resources

- > Menopause (NHS)
- https://www.nhs.uk/conditions/periods/
- > Menopause Matters
- ➤ Menopause: diagnosis and management (National Institute for Health and Care Excellence)
- The <u>Daisy Network</u> charity
- Menopause in the Workplace
- Menopause resources from the CIPD, particularly for:
  - Line managers
  - o HR staff
- > Schools Advisory Service

# 11. Appendices

Appendix 1: Risk Assessment Form

# **APPENDIX 1 - RISK ASSESSMENT FORM**

Please send this completed form to Anita Russell.

Adjustment plan/risk assessment for menopausal symptoms			
Employee's name:			
Job title:			
Department:			
Line manager's name:			
This plan records the adjustments agreed between you and your line manager to support you at work when you are experiencing menopausal symptoms.			
The purpose of this plan is to:			

The purpose of this plan is to:

- Ensure that both you and your manager have a record of what we have agreed so that you feel supported;
- Act as a starting point for discussion if you change job or your line manager changes;
- Provide you and your manager with a structure to use when regularly reviewing and updating adjustments.

This plan is a live record and you and your manager can agree when it needs to be reviewed and updated. This may be:

- At any regular one-to-one meeting;
- At a return-to-work meeting following a period of sickness absence;
- At six-monthly and/or annual appraisals;
- Before a change of job, responsibilities or work location, or a change to working practices; or

<ul> <li>practices; or</li> <li>Before or after any change in circumstances for either you or the organisation.</li> </ul>				
Employee				
How my menopausal symptoms impact my working life				
Symptoms:	The affect these symptoms have on my working life:			

Adjustments that help me manage my menopausal symptoms at work				
Suggested adjustments:	How these will help me at work:			
Line manager				
Support and adjustments agreed				
We have agreed to put in place the following a effective or suitable (for example, your sympto discuss alternatives:	djustments. If the adjustments are no longer ms change), you will let me know so that we can			
Other support and advice				
We have discussed other sources of support, information and advice that may help you during your menopause transition. These are:  • Menstruation and Menopause Policy • Details of other relevant policies and programmes provided by the organisation, for example employee assistance programme • External sources of help, e.g., NHS, Menopause matters				
An up-to-date copy of this form will be retained by you, your manager and HR.				
Employee's signature				
Date				
Line manager's signature				
Date				