

London Borough of Lewisham

Menopause Policy

The purpose of the policy

- To foster an environment in which colleagues can openly and comfortably initiate conversations, or engage in discussions about menopause
- To encourage women to feel confident enough to raise issues about their symptoms and to ask for support so they can continue to carry out their work.
- To educate and inform managers about the potential symptoms of menopause, and how they can support women at work.
- To reduce absenteeism due to menopausal symptoms.

Lewisham Managers are expected to

- Be supportive to staff who are experiencing difficulties in connection with the menopause
- Follow the guidance within this policy
- Encourage staff to seek support
- Issue staff with a copy of the Menopause Policy and appended guidance
- Provide practical support where feasible (e.g. more flexibility in work arrangements)

The policy will help all employees

- Understand the impact of menopause on themselves and colleagues
- Have more confidence in discussing the menopause and seek/offer support

You can get further support

- From your HR Adviser
- From specialist external organisations (see <u>Appendix 3</u> for further details)

Version Control

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Menopause Policy

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1. Policy Statement

- 1.1 This policy recognises that women may need additional consideration, support and adjustments before, during and after the menopause.
- 1.2 The Council is committed to ensuring that all individuals are treated fairly and with dignity and respect in their working environment. We are also committed to ensuring the health, safety and wellbeing of the overall workforce.
- 1.3 The Council has a positive attitude to the menopause and will work proactively to support staff experiencing the menopause, including helping to ensure the workplace does not make symptoms worse.
- 1.4 The Council aims to take a proactive stance, will promote a greater understanding of the menopause and seek to eradicate any exclusionary or discriminatory practices.

2. Scope

- 2.1. The policy excludes employees in locally managed schools where the procedure that applies is as determined by the governing body of the school. In many cases this will be the model procedure that has been recommended for adoption by the Council.
- 2.2 Agency workers are not employees of the Council. However, they are encouraged to discuss support and adjustments to work arrangements with their Council line manager, who should then liaise with the agency concerned.

3. Sources of guidance

- 3.1 This policy draws on guidance from:
 - The Faculty of Occupational Medicine (FOM)
 - The National Institute for Health and Care Excellence (NICE) guidelines.
 The NICE guidelines set out the recommendations for medical professionals when treating menopausal women, and for patients as to the treatment and guidance that should be offered
 - Guidance from the TUC
- 3.2 Self-management, with support from the Council, managers and colleagues, will help the experience of symptoms. <u>Appendix 1</u> provides guidance for managers on support and adjustments which could be offered to employees.
- 3.3 In accordance with FOM and NICE guidelines, women should be advised to seek medical advice from their GP in the first instance. <u>Appendix 2</u> offers a helpful guide for women on how to have constructive conversations about menopause with their doctor. <u>Appendix 3</u> provides guidance on self-help.

4. Legislative compliance

- 4.1 Under the Health and Safety at Work Act (1974), employers are required to carry out risk assessments under the Management Regulations which should include specific risk assessments for menopausal women if they are employed.
- 4.2 Under the Equality Act 2010, the Council, as an employer, should not discriminate against employees on the basis of 'protected characteristics' (i.e. age, disability, gender re-assignment, marriage and civil partnership, race, religion or belief, sex or sexual orientation). It is also important to note that some conditions linked to the menopause may meet the definition of an 'impairment' and a 'disabled person' under the Equality Act and such a person may require reasonable adjustments.

5. Definitions

- 5.1 The menopause is part of the natural ageing process for women. Commonly known as 'the change' it refers to the point in time when menstruation has ceased for twelve consecutive months and a woman has reached the end of her reproductive life. After a woman has not had a period for a year, she can be described as 'post-menopausal'.
- 5.2 Peri-menopause is the time leading up to menopause when a woman may experience changes, such as irregular periods or other menopausal symptoms. This 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.
- 5.3 During the time of the peri-menopause women may begin to experience symptoms due to changes in their hormone levels. These vary in degree between different women from mild to highly significant. Because they may still be having regular periods at the onset of symptoms, many women do not understand what is causing their symptoms. This can be a barrier to accessing support.

6. Who is affected?

- 6.1 The Council recognises that a large and increasing proportion of our employees will be working through and well beyond the menopause. In the UK it is estimated that around 1 in 3 women are either currently going through or have reached the menopause. The menopause affects all women and it can often indirectly affect their partners, families and colleagues as well.
- 6.2 The menopause usually occurs between the ages of 45 and 55. However, many women experience the menopause before 45 (early menopause) and a significant number of women before the age of 40 (premature menopause). Some women experience a medical/surgical menopause which can occur suddenly when the ovaries are damaged or removed by special treatments

- such as chemotherapy, radiotherapy or surgery. Menopausal symptoms may also be brought on by hormonal treatment (e.g. for breast cancer).
- 6.3 It should be noted that people from the non-binary, trans and intersex communities may also experience menopausal symptoms, although for various reasons their experience may be different.
- 6.4 Experiences and perceptions of the menopause may also differ in relation to disability, age, race, religion, sexual orientation or marital/civil partnership status. It is important to recognise that for many reasons, individual experiences of the menopause may differ greatly.

7. Symptoms of Menopause

- 7.1 Physical symptoms associated with the onset of the peri-menopause can include:
 - Hot flushes
 - Palpitations
 - Night sweats
 - Insomnia and sleep disturbances
 - Fatique
 - Headaches
 - Joint aches
 - Dry skin and skin irritation
 - Increased perspiration during the day
 - Dry eyes
 - Hair loss
 - Urinary problems
 - Vaginal dryness, itching and discomfort
 - Irregular and/or heavy, painful periods, clots and flooding
- 7.3 There may also be associated psychological symptoms including:
 - Depression
 - Anxiety
 - Panic attacks
 - Poor concentration
 - Changes to mood
 - Problems with memory
 - Loss of confidence
- 7.4 Most women will experience some symptoms, whereas some women do not experience any. On average, women continue to experience symptoms for four years after their last period, but around 10 per cent of women continue to experience symptoms for up to 12 years after their last period.
- 7.5 Beyond the menopause, due to lower levels of certain hormones, postmenopausal women can be at risk of certain conditions such as osteoporosis

('brittle bones') and heart disease. These risks increase for women who have an early or premature menopause.

8. Workplace support

8.1 It is recognised that the menopause is a very personal experience and different levels of support may be needed for different individuals. The Council is committed to ensuring that managers are sympathetic and provide appropriate support when needed to help employees deal with issues arising from the menopause.

Alternative points of contact/support

- 8.2 All managers are expected to take a positive and supportive approach to discussions about the menopause. However, some employees may feel uncomfortable talking directly to their line manager if they are experiencing problems especially if the manager is male or much younger. Employees may therefore, in the first instance, approach:
 - HR
 - Another manager
 - Their Trade Union Representative
- 8.3 In any event, the line manager is responsible for undertaking risk assessments and agreeing any workplace adjustments to support the employee.
- 8.4 If an employee is experiencing menopausal symptoms and is unable to attend work, they should follow the Council's Sickness Absence Management Policy and Procedure. However, if they feel uncomfortable discussing their symptoms they may report, initially to an alternative manager. This manager must notify the line manager and the sickness absence notification procedure (including self-certification, provision of fit-notes) will apply.

Risk assessments

- 8.5 Managers should ensure risk assessments consider the specific requirements of menopausal staff and help ensure that the working environment is suitable and as far as practicable, should not aggravate symptoms. The risk assessment will help to identify any potential control measures which may be required.
- 8.6 Common issues that may need consideration are workplace temperature and ventilation, access to adequate toilet and washing facilities and sources of workplace stress.

Flexible working arrangements

8.7 Flexible working arrangements, for a period of time, can help to alleviate some of the problems associated with menopause symptoms, support

wellbeing and enable employees to be more productive. A few examples of this are:

- Flexible break times to accommodate unpredictable physical symptoms
- Adjusted start and finish times e.g. where there has been disturbed sleep or to avoid rush-hour travel
- Working remotely/from home where travel may exacerbate symptoms
- Flexibility over time off for medical appointments associated with the menopause
- 8.8 Flexible working arrangements should be discussed and agreed with the employee and must be reviewed on a regular basis to ensure they are both assisting the employee and able to be accommodated without compromising service delivery.
- 8.9 Where appropriate, other team members may need to be informed. However, the reasons and any details of the employee's health etc. must only be disclosed with their express consent.
- 8.10 Managers should refer to the Council's Flexible Working Arrangements Policy for more guidance.

9. Roles and Responsibilities

9.1 All employees

All staff are responsible for:

- Taking a personal responsibility to look after their health this includes discussion with their GP (see <u>Appendix 2</u>)
- Being open and honest in conversations with managers/HR and Occupational Health
- Co-operating with their line manager in respect of flexible working arrangements or other support
- Contributing to a respectful and productive working environment
- Being willing to help and support their colleagues
- Understanding any necessary support their colleagues are receiving as a result of their menopausal symptoms, if disclosed

9.2 Line managers

All line managers should:

- Familiarise themselves with the Menopause Policy and guidance
- Be ready and willing to have open 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
- Record support agreed, actions to be implemented, and keep under review
- If, even with support, the employee is still experiencing difficulties working or if symptoms become more challenging, the Line Manager should:
 - Discuss with the employee and consider what other alternative support is possible
 - Refer the employee to Occupational Health
 - Review Occupational Health advice, and implement any recommendations, where reasonably practical;
 - Continue to review support

Appendix 1 - Managers' guidance for supporting employees

Menopause is a very personal experience and can affect people at work in various ways. This means that different levels of support and assistance may be needed at what can be a very difficult time.

The most important and valuable thing you can do as a manager is listen and respond sympathetically, providing practical support wherever possible (e.g. flexible working arrangements). This support can make a major difference to how they deal with the menopause, enabling them to continue working well and productively.

Research has shown that people may feel uncomfortable or embarrassed approaching their manager to discuss any difficulties in managing their menopausal symptoms, particularly if their manager is younger than them or male. This can also be difficult for trans or non-binary staff who are not 'out' to their colleagues or manager.

It is therefore important that as a manager, you are aware of the symptoms associated with the menopause and understand the issues affecting people going through it. You will need to be sensitive to any feelings of discomfort, listen to concerns and complaints and consider what can be done to reduce and limit the impact symptoms may be having on the employee's performance within the workplace.

The main symptoms of menopause are described in Section 7 of the Menopause policy. There are a number of websites and publications which provide additional information to help you feel confident and comfortable in talking to staff going through the menopause (see <u>Appendix 3</u>)

Remember to:

- Maintain confidentiality regarding health information about the menopause.
- Identify and record specific needs and any agreed actions and review-these regularly.
- Consider the potential impact of menopause on performance and be aware that if there is a sudden dip in performance, this may be due, in part, to the impact of menopausal symptoms
- Take medical information into account in capability situations where ill health has been raised by the employee
- Seek advice from the Council's occupational health practitioner (who may liaise with the employee's GP, with the employee's consent).
- Manage any absences in line with the Council's Sickness Absence Policy.

Meeting to discuss

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), remember to:

- Allow adequate time to have the conversation
- Find an appropriate private room to preserve confidentiality

- Encourage them to speak openly and honestly
- Suggest ways in which they can be supported (as per the suggestions below); also how they can seek support from their GP and self-manage symptoms
- Agree actions, and how to implement them, keeping a written record
- Ensure that this record is treated as confidential, and is stored securely
- Agree if other members of the team should be informed, by whom and how
- Ensure that designated time is allowed for any follow up meetings as necessary

Risk Assessments

You should carry out a risk assessment to consider the specific needs of employees going through the menopause and help identify control measures to make at work to minimise the impact of symptoms. 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 4 Risk Assessment Template.

Practical support

It has been recognised that certain aspects of work and the working environment can aggravate menopausal symptoms. Any practical support should be identified through discussion with the employee and, where appropriate, with additional advice from Occupational Health.

The following are examples of practical support to help with various menopause symptoms but most important of all is the need to listen to the employee and to respond sympathetically.

General support

These may include:

- Flexibility to attend clinics, hospital or appointments for employees who are experiencing the menopause or seeking advice relating to the menopause. This should be done in line with the Sickness Absence Policy.
- Flexibility to take breaks when needed rather than at pre-determined times employees may experience bouts of feeling unwell at work so a flexible and sympathetic approach to breaks is needed.
- The facility to take medication in a private space, to walk around and ease any pain.
- There may also be a need to leave work suddenly to return home, if too unwell to continue. In this case the employee must report this to their line manager, or to another designated manager if they are not available.
- Phased return after sickness leave in line with the Sickness Absence Policy for women suffering with particularly severe symptoms.
- Flexibility to allow an employee to rest temporarily, talk with a colleague or to phone for personal or professional support.
- Adjust workplace environments if possible especially regarding heating, ventilation and noise

Make sure the employee has a copy of the Seeking Help and Self Help guide – Appendix 2 – and encourage self-help where appropriate.

You should also encourage the employee to make use of free telephone counselling support offered by the Council's employee assistance counselling provider (see further details in <u>Appendix 3</u>).

Practical suggestions to support symptoms

Symptoms can manifest both physically and psychologically. Support could include the following:

Suggestion:	This can help with:
 Desk fans (usb connected or free standing), moving nearer to a window Adaptation to uniform Additional 'spare' uniform Access to cool, fresh drinking water Ad hoc short breaks or 'time out' 	Hot flushes
Adaptation to uniformAdditional 'spare' uniform	Heavy periods
Access to a rest room or other private space, if available	 Hot flushes Headaches Pain or discomfort from prolonged standing or sitting Low mood, anxiety and stress
 Flexible start and finish times, for a period of time Ad hoc short breaks or 'time out' Remote working 	 Low mood, anxiety and stress Lack of sleep/fatigue Poor concentration
 Agree to certain 'protected time' free from interruptions Noise reducing headphones Remote working 	Poor concentration
 Encouragement to use the Council's telephone counselling service Encouragement to undertake relaxation techniques e.g. mindfulness, breathing exercises 	 Low mood, anxiety and stress Lack of confidence General wellbeing

Suggestion:	This can help with:		
 Regular one-to-ones with manager Agreed time for catching up , if work problems Rescheduling of work 	Loss of confidenceFluctuations in performanceDifficulty dealing with workload		

Appendix 2 -Seeking Help and Self-Help

Don't Suffer in Silence

Whilst some women go through this natural stage without any requirement for intervention, others experience more difficult symptoms. If you are struggling to cope, consider:

- Discussing symptoms and seeking support from a trusted manager. If you don't feel able to talk to your line manager, at least initially, you can talk to another manager in your department, an HR Adviser or your trade union representative
- Consulting a GP on managing the menopause and to ensure the symptoms are not the result of anything else (see tips on speaking to your GP, below)
- Speaking with Occupational Health about symptoms in order to obtain advice and support.

Talking to your GP

Talking about symptoms can be hard, especially if you feel rushed or unprepared. The following tips will 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 is 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. See the link in Appendix 3 for more details.

Prepare for your appointment. It's easier for your doctor to understand what's going on if you provide them with all the information. The blood tests which may show 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 - menstrual cycle, hot flushes, how you're feeling, and any changes you've noticed. Write them down, and take them to your appointment. This will help you and your doctor find the right solution faster. 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 as 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 could be 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, 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.

All staff can currently access telephone counselling by contacting PAM ASSIST – see contact details link to their website in Appendix 3.

Healthier lifestyle

Current health promotion advice highlights the importance of lifestyle choices before, during and after the menopause. Lack of sleep, stress, unhealthy eating and unhealthy lifestyles can increase the symptoms of menopause.

In addition to helping with certain symptoms, the following may also help reduce the risks of osteoporosis (brittle bones), diabetes and heart disease in later life:

- Eating healthily and regularly research has shown that a balanced diet can help in alleviating some symptoms, in keeping bones healthy and in not gaining weight.
- Drinking plenty of water some women find chilled water helpful
- Exercising regularly to reduce hot flushes, improve sleep, boost mood and maintain aerobic fitness levels.
- Not smoking to help reduce hot flushes and the risk of developing serious conditions such as cancer, heart disease and stroke.
- Ensuring alcohol intake is within recommended levels and cutting down on caffeine and spicy food all of which can trigger hot flushes.
- Having access to natural light.
- Staying cool at night wearing loose clothes in a cool and well-ventilated room to help with hot flushes and night sweats.
- Ensuring adequate rest and relaxation to reduce stress levels and improve mood (through, for example, activities such as mindfulness, yoga and tai chi).

Appendix 3 – Links to further support and related Council policy/guidance

Provider/organisation	Details and links
All employees may currently use PAM Assist - the Council's independent telephone employee assistance counselling provider, free of charge	Eink to PAM Assist website. Go to 'Member login' at top right-hand corner and enter Username: LewishamEAP, Password: Lewisham1
National Institute for Health and Care Excellence (NICE) guidelines. These explain how your GP will determine what types of treatments and interventions they can offer you	Link to NICE guidelines
The National Health Service provides an overview of menopause	Link to NHS website
The Royal College of Obstetricians and Gynaecologists offer further information in a dedicated area of their website	Link to website
Henpicked. This site provides information on managing menopause, and an insight into women's stories	Link to website

Employees may also wish to seek guidance from their Trade Union.

Council Policy/Guidance:
Sickness absence management policy
Stress management guidelines
Flexible working arrangements policy
Smarter working guidance (including agile working)

Appendix 4– Sample Risk Assessment for Menopause

Assessment Subject:		
Directorate/Division:	Assessor:	
Date of Assessment:	Date to Review:	

Issues Identified (anything which may cause harm)	Considerations	Existing Control Measures (current action to deal with issues)	Risk Rating = Severity X Likelihood High/Med/ Low	Additional Control Measures (eliminate or further limit risk)	Remaining Risk High/Med/ Low	Action by Who	Action by when
Sickness reporting	Can employee report sick initially to alternative manager (e.g. female) if they have menopausal symptoms?						
Stress	Is there an opportunity to switch to alternative duties on a temporary basis? What arrangements and support is available to help the employee manage their workload?						
Work stations	Are work stations / locations easily accessible to toilet and rest facilities?						

Issues Identified (anything which may cause harm)	Considerations	Existing Control Measures (current action to deal with issues)	Risk Rating = Severity X Likelihood High/Med/ Low	Additional Control Measures (eliminate or further limit risk)	Remaining Risk High/Med/ Low	Action by Who	Action by when
Temperature	Is ventilation available and is it regularly maintained? Is additional ventilation provided if necessary? E.g. Desk Fan, ability to open windows? Is air conditioning / humidifiers functioning normally 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?						
Physical nature of duties	Does the role impact on fatigue (mental and physical)? Does the role result in fatigue from standing? Is employee able to move freely / adjust posture etc.? Have workstation risk assessments been reviewed to take menopause into account?						

Issues Identified (anything which may cause harm)	Considerations	Existing Control Measures (current action to deal with issues)	Risk Rating = Severity X Likelihood High/Med/ Low	Additional Control Measures (eliminate or further limit risk)	Remaining Risk High/Med/ Low	Action by Who	Action by when
	Are there opportunities to switch temporarily to lighter or different duties?						
Flexible work arrangements	Are there flexible arrangements in place in relation to breaks? Can start and finish times be adjusted as part of a flexible working agreement? Can aspects of the job be done remotely/from home?						
Other?							