**Roselyn House School and The RHISE Service**

**Menopause policy**

This policy has been taken from a model policy provided by NASUWT with additional advice from NEU and NAHT. It has been adapted for the purpose of use at Roselyn House School and The RHISE Service. The employer is KS Education Limited of which the Headteacher, Miss S. Damerall and Deputy Headteacher, Miss K Willacy are the Directors.

This policy is written as a guide for staff in consultation with the staff group and has been agreed. It will be reviewed annually taking into consideration Union and DfE guidance.

It should be noted that people from the non-binary, transgender and intersex
communities may also experience menopausal symptoms. Due to a variety of
factors, the experience of the menopause may be different for those among
these communities. Although the policy refers to women, please consider that
‘people who menstruate’ also require consideration.

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, people’s individual
experiences of the menopause may differ greatly.

The menopause can also affect partners and families too.

**Policy statement**

KS Education Limited 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.**

**Legislative compliance**

This policy is fully compliant with the following legislation

England, Scotland and Wales

* 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);
* Equality Act 2010.

**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;
* 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.

**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.

**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.

**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 and college leaders should take into
consideration the concerns listed in Appendix 1.

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

**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 Appendix 1 to this policy.

**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.

Additional help and support

NASUWT
[www.nasuwt.org.uk](http://www.nasuwt.org.uk)

TUC
[www.tuc.org.uk](http://www.tuc.org.uk)

Menopause matters

[www.menopausematters.co.uk](http://www.menopausematters.co.uk)

The British Menopause Society

[www.thebms.org.uk](http://www.thebms.org.uk)

NHS menopause pages

[www.nhs.uk/conditions/menopause/symptoms](http://www.nhs.uk/conditions/menopause/symptoms)

**S.Damerall**

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**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 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.

Many women may also find that their symptoms are connected. For example,
sleep disturbance, which is really common during the menopause, may lead
to a whole plethora of 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, post-menopausal 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.

**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);
* Agree a follow-up meeting to review the situation.

**Confidential Discussion Record – Menopause**

|  |  |
| --- | --- |
| Date: | Present: |

|  |
| --- |
| Staff Details |

|  |  |  |
| --- | --- | --- |
| Name | Job Title | Location |
|  |  |  |

Summary of discussions:

Agreed action points/reasonable adjustments:

Agreed date of review meeting:

Signed (staff)..................................

Signed (manager)............................

**Appendix 2- workplace issues/ suggested adjustments**

|  |  |  |
| --- | --- | --- |
| **Symptom** | **Examples of workplace factors which could worsen or interact with symptoms** | **Suggested adjustments**  |
| **Daytimesweats, hotflushes,palpitations** | Lack of access to rest breaksor suitable break areas. Hotflushes and facial rednessmay cause women to feelself-conscious, or thesensation may affectconcentration or train ofthought. | Be flexible aboutadditional breaks. Allowtime out and access tofresh air.Ensure a quiet area/roomis available.Ensure cover is availablesoworkers can leave theirposts if needed. |
| **Night timesweats and hotflushes.Insomnia orsleepdisturbance** | Rigid start/finish times andlack of flexible workingoptionsmay increase fatigue at workdue to lack of sleep. | Consider temporaryadjustment of hours toaccommodate anydifficulties.Allow flexible working.Provide the option ofalternative tasks/duties.Make allowance forpotentialadditional need forsicknessabsence.Reassure workers thattheywill not be penalised orsufferdetriment if they requireadjustments to workloadorperformancemanagementtargets. |
| **Urinaryproblems; forexample,increasedfrequency,urgency,and increasedrisk of urinaryinfections** | Lack of access to adequatetoilet facilities may increasethe risk of infection andcausedistress, embarrassment and an increase in stress levels.Staff member may need toaccess toilet facilities morefrequently, may need to drink more fluids and may feel unwell. | Ensure easy access totoilet and washroomfacilities.Allow for more frequentbreaksduring work to go to thetoilet.Ensure easy access tosupply of cold drinkingwater.Take account ofperipateticworkers schedules andallowthem to access facilitiesduringtheir working day.Make allowances forpotentialadditional need forsickness absence. |
| **Irregular and/orheavy periods** | Lack of access to adequatetoilet facilities may increasethe risk of infection andcausedistress, embarrassment andan increase in stress levels.Staffmember may need to accesstoilet and washroom facilitiesmore frequently. | Ensure easy access towell maintained toilet andwashroom or showerfacilities.Allow for more frequentbreaksin work to go to the toilet/washroom.Ensure sanitary productsreadily available.Take account ofperipateticworkers schedules andallowthem to access facilitiesduringtheir working day.Ensure cover is availableso staff can leave theirposts if needed. |
| **Skin irritation,dryness oritching** | Unsuitable workplacetemperaturesand humidity may increaseskinirritation, dryness anditching.There may be discomfort, anincreased risk of infectionand areduction in the barrierfunction of skin. | Ensure comfortableworkingtemperatures andhumidity.Ensure easy access towell maintained toilet andwashroom or showerfacilities. |
| **Muscularaches andbone and joint pain** | Lifting and moving, as wellas work involving repetitivemovementsMake any necessaryadjustments throughreviewjoint pains or adopting static postures,maybe more uncomfortable andthere may be an increasedriskof injury. | Make any necessary adjustments through review of risk assessments andworkschedules/tasks andkeep under review.Consider providingalternativelower-risk tasks.Follow Health and SafetyExecutive (HSE)guidance andadvice on manualhandling and preventingMSDs (musculoskeletaldisorders). |
| **Headaches** | Headaches may be triggeredorworsened by manyworkplacefactors such as artificiallighting,poor air quality, exposureto chemicals, screen work,workplace stress, poorposture/unsuitable workstations,unsuitable uniforms orworkplace temperatures. | Ensure comfortableworkingtemperatures, humidityandgood air quality.Ensure access to naturallightand ability to adjustartificiallight.Allow additional restbreaks.Ensure a quiet area/roomisavailable.Carry out Display ScreenEquipment (DSE) andstress risk assessments. |
| **Dry Eyes** | Unsuitable workplacetemperatures/humidity, poorair quality and excessivescreenwork may increase drynessin the eyes, discomfort, eyestrain and increase the riskof infection. | Ensure comfortableworkingtemperatures, humidityandgood air quality.Allow additional breaksfromscreen based work.Carry out DSE riskassessments. |
| **Psychologicalsymptoms, forexample:*** **Depression**
* **Anxiety**
* **Panic Attacks**
 | Excessive workloads,unsupportive managementand colleagues, perceivedstigma 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. | Ensure that workers willnot bepenalised or sufferdetrimentif they requireadjustments toworkload, tasks orperformancemanagement targets.Ensure that managersunderstand themenopauseand are prepared todiscuss any concernsthat staff may have in asupportive manner.Ensure managers have apositive attitude andunderstand that theyshould offer adjustmentsto workload and tasks ifneeded.Allow flexible/home working.Make allowance for potential additional need for sickness absence.Ensure that staff aretrained in mental health awareness.Raise general awarenessof issues around themenopause so colleagues are more likely to be supportive.Provide opportunities tonetwork with colleaguesexperiencing similar issues (menopause action and support group).Ensure a quiet area/roomis available.Provide access tocounsellingservices. |
| **Psychologicalsymptoms:*** **Memoryproblems**
* **Difficultyconcentrating**
 | Certain tasks may becomemore difficult to carry outtemporarily; for example, learning new skills(may be compounded bylack of sleep and fatigue),performance may be affected and work-relatedstress may exacerbate these symptoms. Loss ofconfidence may result. | Carry out a stress riskassessment and addresswork-related stressthroughimplementation of theHSE’s management standards.Reassure workers thatthey will not be penalised or suffer detriment if they require adjustments to workload or performancemanagement targets.Ensure that managersunderstand the menopauseand are prepared todiscuss any concernsthat staff may have in asupportive manner.Ensure managers have apositive attitude andunderstand that theyshould offer adjustmentsto workload and tasks ifneeded.Reduce demands if workload identified as an issue.Provide additional time tocomplete tasks if needed, or consider substituting with alternative tasks.Allow flexible/homeworking.Offer and facilitatealternative methods ofcommunicatingtasks and planning ofwork to assist memory.Ensure a quiet area/roomis available.Provide access tocounselling services. |