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**Menopause in the Workplace Guidance**

**Introduction**

Research suggests 14 million workdays are lost each year due to menopause symptoms, and menopause has been dubbed ‘the silent career killer’ because it forces so many women to leave the workforce early.

As of 2023, women make up 77% of Suffolk County Council’s school-based workforce. Around 59% of women are between the ages of 35 and 55, which is the typical age range for menopausal symptoms (although they can start as early as teenage years and continue into a person’s 60s). Menopause will affect all of the 77% of our staff who are female at some point, and usually during their working lives. Therefore, it is important for managers to be aware of common menopausal symptoms and ways of supporting staff. Historically there has been stigma surrounding the menopause, and people have been reluctant to talk about it.

Since the menopause is a normal life event for women, rather than an illness, the symptoms are often under-recognised, under-valued and not taken seriously. This is changing, as employers gradually acknowledge the potential impact of the menopause on women and become aware of the simple steps they can take to be supportive.

**What is the menopause and how does it affect women?**

The menopause is a natural part of ageing that occurs as a woman’s oestrogen levels decline. In the UK, the average age for a woman to reach the menopause is 51. However, women can be in the first stage, perimenopause, for years before menstruation stops, and can continue to have post-menopausal symptoms for years afterwards. Perimenopause typically begins during the early to mid-40s and often lasts between 3 and 5 years. A woman is considered to be in the menopause stage when she has gone 12 months without menstruating.

Symptoms of the menopause usually last for between 4 and 8 years, but many women have symptoms for longer than ten years. Around 25% of women suffer from severe symptoms. Severe menopausal symptoms and their consequences may combine to have a substantial adverse effect on normal day to day activities, potentially meeting the legal definition of a disability under the Equality Act. Around half of women have reported working difficult due to their symptoms.

The menopause can be a significant event in a woman's life. It can bring in a number of physiological changes that permanently affect women.

Symptoms caused by reduced or fluctuating hormones may affect a woman at work including:

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| * Hot flushes
* Fatigue
* Difficulty sleeping/insomnia
* Problems with recall, memory and concentration
* Fluctuating emotions and mood swings – which can include low mood, anxiety, and irritability
* Worse premenstrual or menstrual symptoms, including cramps and heavy and/or painful periods
* Headaches and migraines
* Joint pain
* Urinary problems
* Palpitations
* The socio-psychological associations of the menopause can also cause women to suffer from a loss of self-confidence, low self-esteem, embarrassment, anxiety and depressive symptoms.

This list is not exhaustive, and menopause affects women in different ways. |  |

**What should managers do to support employees?**

* Regular, informal conversations between manager and employee can enable discussion of changes in health, including issues relating to the menopause. It is valuable simply to acknowledge this is a normal stage of life and that adjustments can easily be made. Such conversations can identify support at work that can help women remain fully productive.
* If necessary, conduct a work station assessment to help identify any physical adjustments that will be helpful. In particular, review control of workplace temperature and ventilation and see how they might be adapted to meet the needs of individuals. This might include having a desktop fan in an office, or locating a workstation near an opening window, or away from a heat source.
* Consider flexible working hours or shift changes. If sleep is disturbed, later start times or home working might be helpful. Enabling short breaks during working time may also be useful.
* Wherever possible, ensure access to washroom facilities and toilets, including when travelling or working in temporary locations.
* Where uniforms are compulsory, flexibility is helpful. This might include the use of thermally comfortable fabrics, optional layers, being allowed to remove neckties or jackets, limiting the time wearing personal protective equipment like face masks, and the provision of changing facilities.
* Referral to Occupational Health to identify any further support that may be needed/ appropriate. Some women may be reluctant to have discussions about their experience of the menopause with their manager, and this is also where Occupational Health can be helpful.
* Encourage the employee to discuss any relevant health concerns with their GP. There are various options with regards to treatment, including hormone treatments, non-hormone treatments, supplements, and cognitive behavioural therapy to manage anxiety around symptoms.
* Employees are entitled to expect respectful behaviours at work, including those that relate to their gender and age, and managers should take seriously any concerns employees raise in this regard.
* The provision of information may be helpful in these discussions and for more general awareness-raising (see links at the end of this document).
* Well-being conversations and the impact of health and lifestyle on menopausal symptoms. This could be a regular one-to-one conversation which is held in a supportive way which focuses on the employee’s health and wellbeing. Managers should actively listen to their employee, be compassionate and signpost to further support if needed.
* Managers should be mindful of the interaction of the menopause with existing conditions and some disabilities (such as epilepsy, rheumatoid arthritis, thyroid disease and Turner syndrome) can cause earlier menopause, and others may have symptoms exacerbated by the menopause. If in doubt, seek advice from Occupational Health.
* Although this document refers to women throughout, managers should be aware that the menopause does not only affect cisgendered women. It may also affect transmen, and people who are intersex or non-binary.
* Managers should also be aware of potential religious or cultural differences that may affect a staff member’s experience and attitude towards the menopause. This could include:

- how willing staff are to talk about their experiences;
- their attitudes towards ageing and declining fertility;
- even their physical experience, linked to biological, lifestyle and dietary
 differences.
* Managers should be mindful of the need for confidentiality. The CIPD guidance linked at the end of this document has a section on how to have sensitive conversations.

**What can women do to help manage their own symptoms?**

* Find out more about the menopause (see useful links at the end of this document).
* See your GP for advice on available treatment options.
* Discuss your needs with your line manager, or any manager you feel comfortable with, or HR.
* Ask for a referral to Occupational Health to discuss support and possible work adjustments. You can also self-refer to the employee assistance programme, including free counselling.
* Use technology where this is helpful, e.g. for reminders or taking notes.
* If those you work with are supportive, this can make a big difference. So it can help to talk to your colleagues, particularly those who are also experiencing symptoms, for more understanding and to share coping strategies.
* Avoid hot flush triggers (such as hot food and drinks), especially before presentations or meetings.
* Consider relaxation techniques such as mindfulness and other potentially helpful techniques such as cognitive behavioural therapy, as these can help reduce the impact of symptoms.
* Consider lifestyle changes such as weight reduction, stopping smoking and exercise.

**How to have the conversation**

* *For managers:* [this guidance](https://www.cipd.org/uk/knowledge/guides/menopause-people-manager-guidance/) from the CIPD has more information about approaching the conversation.
* *For employees:* [this guidance](https://henpicked.net/menopause-how-to-have-confident-conversations-with-your-manager/) from Henpicked has more information about approaching the conversation.

Managers can seek further advice from their HR Consultant or call 0300 123 1420 option 7 or email hrcaseworkteam@schoolschoice.org.

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| **Useful links for managers:*** [Healthy Conversations portal](https://view.pagetiger.com/Absence-Portal/absence-portal-home-page)
* [CIPD menopause guidance for managers](https://www.cipd.co.uk/knowledge/culture/well-being/menopause/people-manager-guidance)
* [Wellbeing, stress, and mental health HR Consultancy toolkit](https://view.pagetiger.com/Stress-Wb/2019)
* [Absence management HR Consultancy toolkit](https://view.pagetiger.com/Absence-Management-Toolbox/Absence-Management-Toolkit)
* [Occupational Health HR Consultancy toolkit](https://schoolschoice.pagetiger.com/occupationalhealth/1)
* [Education Support](https://www.educationsupport.org.uk/resources/for-individuals/articles/managing-the-menopause-at-school-your-stories/?gclid=EAIaIQobChMIytnssL6UhAMVjkZBAh3aNgzBEAAYASAAEgLuwvD_BwE)
 | **Useful links for employees:*** [The British Menopause Society](https://thebms.org.uk/)
* [Menopause Matters](http://www.menopausematters.co.uk)
* [Women’s Health Concerns](https://www.womens-health-concern.org/help-and-advice/menopause-wellness-hub/)
* [Henpicked](https://henpicked.net/womens-menopause-stories/)
* [NICE Menopause: diagnosis and management](https://www.nice.org.uk/guidance/ng23)
* [Talk by Dr Bella Smith (“The Digital GP”) for SCC women’s network, March 2019](https://www.youtube.com/watch?v=3cXh9ZrFjbE)
* [Menopause Support](https://menopausesupport.co.uk/)
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**Summary of changes**

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| **Document control** |
| **Date** | **Section(s)** | **Update(s)** |
| Aug-24 | Introduction | Updated statistics to 2024 |
| Aug-24 | Pages 4/5 | Update contact info and updated links |
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