

# **National Menopause Policy**

## Version Control History

<b>Version Number</b>	<b>Date of Change</b>	<b>Summary of Revisions Made</b>
1.0	September 2022	Nationally bargained policy contextualised to UHI Perth policy template/branding.
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Guidance,  
**Empowering, Principles,**  
Trade Unions  
National Bargaining,  
Scope,  
**Employee Relations**  
Resilient,  
Flexible, Staff Development  
**Values, Fairness**  
Communication, Purpose,  
**Policies, Trust, Review,**

## 1. Introduction

UHI Perth is committed to ensuring that everyone is treated with dignity and respect in a fair manner in their working environment.

UHI Perth is also committed to improving the well-being of its employees and recognises that women affected by the menopause may need additional consideration, support and adjustments during the time of hormonal change before, during and after the menopause.

UHI Perth will aim to provide appropriate support to those who are experiencing menopausal symptoms. It is important the college understands the difficulties and anxieties of employees currently going through this hormonal change and that we manage this issue by raising awareness, challenging discrimination, promoting a culture of openness and providing training and development for all line management and colleagues.

UHI Perth notes that people from the non-binary, transgender and intersex communities may also experience menopausal symptoms. Menopause can also impact trans and non-binary people who may not identify as female. Due to a variety of factors, the experience of the menopause may be different for those among these communities.

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, women's experiences of the menopause may differ greatly.

(Although the policy refers to women, please consider that this policy refers to anyone suffering the symptoms of menopause).

This policy will usually be reviewed every 3 years by the National Joint Negotiating Committee.

## 2. Aims

The aim of the policy is to:

- a) Pro-actively promote the **Managers Guidance (Appendix 1)** which provides direction and clarity on dealing with menopausal symptoms for those affected both directly and indirectly, eg partners, managers, and colleagues.
- b) Ensure that managers are aware of menopause related symptoms and how they can assist their employees. Managers take cognisance of the **Managers Guide (Appendix 1)** which provides clarity for those affected by the menopause.
- c) Create an environment where those affected feel comfortable enough discuss the issues around their symptoms.

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- d) Ensure those experiencing menopausal symptoms suffer no detriment.
- e) Create a workplace that respects and values all employees and their differences, that promotes dignity and combats prejudice, discrimination and harassment.
- f) Benefit the welfare of women members of staff, retain valued employees; improve morale and performance and promote the college as an employer of choice.

### 3. Scope

This policy applies to all employees of the college.

### 4. Definitions

- a. The menopause is a natural transition stage. It is marked by changes in the hormones and when periods stop.
- b. The menopause may result in a wide range of physical and psychological symptoms and those with symptoms may encounter difficulties at work as a result.
- c. Each woman will be affected in different ways and to different degrees over different periods of time. Menopausal symptoms can often indirectly affect their partners, families, and colleagues as well.
- d. Some women experience early menopause due to surgery, illness, cancer treatment (radiotherapy, chemotherapy etc) or other reasons. As a result of these hormonal changes, many women will experience both physical and emotional symptoms.
- e. Perimenopause – a period of time before the menopause, in the years leading up to the menopause where there can be significant changes for women, including irregular and heavy menstrual bleeding and many of the classic symptoms associated with menopause.
- f. Post-menopause – a term used when a woman's periods have stopped for 12 consecutive months. However, other menopausal symptoms may not have ended so soon. Problematic symptoms may continue for years.

### 5. Symptoms of Menopause

- a. Those affected will experience only some or all of these symptoms (and others not on the list). Some people experience no noticeable symptoms, however 75% of women experience symptoms with 25% of those classed as severe. Symptoms tend to be experienced for around four years after the last period,

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however, this can last up to twelve years in some cases. Symptoms may include:

- i. Hot flushes – a very common symptom that can start in the face, neck or chest, before spreading upwards and downward, may include sweating, the skin becoming red and patchy, and a quicker or stronger heart rate.
- ii. Heavy and painful periods and clots, leaving those affected exhausted, as well as practically needing to change sanitary wear more frequently. Some affected may become anaemic.
- iii. Night sweats, restless leg syndrome and sleep disturbance.
- iv. Low mood, irritability, increased anxiety, panic attacks, fatigue, poor concentration, loss of confidence and memory problems.
- v. Urinary problems – more frequent urinary incontinence and urinary tract infections such as cystitis. It is common to have an urgent need to pass urine or a need to pass it more often than normal.
- vi. Irritated skin – including dry and itchy skin or formication, and dry eyes. Also, vaginal symptoms of dryness, itching and discomfort.
- vii. Joint and muscle aches and stiffness.
- viii. Weight gain.
- ix. Headaches and migraines.
- x. Menopausal hair loss.
- xi. Osteoporosis – the strength and density of bones are affected by the loss of oestrogen, increasing the risk of the bone-thinning disease osteoporosis.
- xii. Side effects from hormone replacement therapy (HRT), a form of treatment for menopausal symptoms for some people (although not suitable or appropriate for all).
- xiii. Menopausal symptoms may also exacerbate existing impairments and conditions that those affected may already be struggling to cope with.

## 6. Roles and Responsibilities

a. **Line Managers** – all managers should:

- i. Familiarise themselves with the **National Menopause Policy, Managers Guide (Appendix 1)** and available resources

- ii. Be open to having discussions around the menopause whilst being sensitive to the personal nature of the discussion and maintaining confidentiality and professionalism.
- iii. Make use of the available guidance, agreeing arrangements with the affected woman with support plans and reasonable adjustments. Record the agreements to be implemented and ensure these are adhered to.
- iv. Line managers with appropriate support will undertake a gender sensitive risk assessment to consider the specific needs of employees experiencing the menopause and to ensure that the working environment will not make their symptoms worse. The risk assessment will assist with the identification of any potential adjustments that may be required.
- v. Liaise with HR and Occupational Health providers where appropriate.
- vi. Set review dates and engage in ongoing conversations.

**b. Employees – all employees are:**

- i. Responsible for their health and wellbeing.
- ii. Encouraged to inform their manager (or the alternative contact, should they not feel comfortable speaking to their manager) if they are struggling with menopausal symptoms and need any support.
- iii. Responsible in contributing to a respectful and productive working environment, being willing to help and support their colleagues, and understand any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.
- iv. Responsible for making contact with either HR, a wellbeing officer where available or a trade union representative, regarding any instances of harassment, victimisation or discrimination experienced because of issues related to the menopause.

If an employee feels unable to speak to their line manager they can contact HR, a wellbeing officer where available or a trade union representative.

## **7. Links to Other Policies/Documents**

- a. Equality, Diversity, Inclusion, and Belonging Policy
- b. Sickness Absence Procedure

## **8. Further Sources of Information**

- a. All employees can access counselling if needed, details are available from HR or on Perth Hub.

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b. Further information can be found here:

- i. <https://www.nhs.uk/conditions/menopause>
- ii. <http://menopausematters.co.uk>
- iii. <https://www.womens-health-concern.org/help-and-advice/factsheets/menopause>
- iv. <https://thebms.org.uk>
- v. <https://www.daisynetwork.org>
- vi. <https://menopausesupport.co.uk>
- vii. <https://www.menopausedoctor.co.uk/>
- viii. [www.menopause-exchange.co.uk](http://www.menopause-exchange.co.uk)

## 9. Further Reading

- i. <https://www.menopausematters.co.uk/menopause.php>
- ii. <https://www.menopausematters.co.uk/symptoms.php>
- iii. <https://www.menopausematters.co.uk/physical.php>
- iv. <https://www.menopausematters.co.uk/heavyperiods.php>
- v. <https://www.menopausematters.co.uk/diet.php>
- vi. <https://www.menopausematters.co.uk/weightgain.php>
- vii. <https://www.menopausematters.co.uk/oestrogens.php>
- viii. <https://www.menopausematters.co.uk/cvd.php>
- ix. [www.thebms.org.uk](http://www.thebms.org.uk)
- x. [www.nhs.uk/conditions/menopause](http://www.nhs.uk/conditions/menopause)
- xi. [www.nhs.uk/conditions/early-menopause](http://www.nhs.uk/conditions/early-menopause)
- xii. [www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information](http://www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information)



## Managers Guidance

Everyone who is affected is different and, as such, it is difficult to set out specific guidelines. When conversations occur with those who are affected either directly or indirectly, ensure that you:

- allow time and space for the conversation – find an appropriate place where confidentiality can be maintained
- be open to the discussion and encourage the staff member to honestly share their issues
- suggest reasonable adjustments (see below)
- agree any actions and record in a suitable confidential manner
- discuss whether other team members should be informed and who should undertake this
- arrange a follow up meeting at a suitable time and place.

## Reasonable Adjustments

The following list of reasonable adjustments have been suggested by the CIPD in their '[A guide to managing menopause at work: guidance for line managers](#)' (2021):

### Sleep disruption and/or night sweats

- Recognise someone may take more short-term absence if they've had a difficult night.
- Consider a change to shift patterns or the ability to swap shifts on a temporary basis.
- Carrying out risk assessments and making appropriate adjustments.
- Offer a flexible working arrangement, for example a later start and finish time.
- Where a role permits and the manager can support it the member of staff could work from home for a short period if symptoms have been significant, for example disrupted sleep pattern.

### Hot flushes and/or daytime sweats

- Look at ways to cool the working environment, for example provide a fan, move a desk close to a window or adjust the air conditioning.
- Provide easy access to cold drinking water and washrooms.
- Adapt uniforms to improve comfort.
- Limit the time wearing personal protective equipment (PPE) such as face masks (subject to any COVID-secure measures required).
- In customer-focused or public-facing roles, it may help to have access to a quiet room for a short break so as to manage a severe hot flush.

### Heavy or irregular periods

- Provide easy access to washroom and toilet facilities.

- Allow for more frequent breaks to go to the toilet.
- Be understanding about someone working from home if they have very heavy bleeding.
- Make sanitary products available in washrooms.
- Make it easy to request extra uniforms if needed.

### **Headaches and fatigue**

- Consider a temporary adjustment to someone's work duties.
- Provide a quiet area to work.
- Provide access to a rest room.
- Offer easy access to drinking water.
- Allow regular breaks and opportunities to take medication.

### **Muscular aches, and bone and joint pain**

- Make any necessary temporary adjustments through review of risk assessments and work schedules.
- Allow someone to move around or stay mobile, if that helps.

### **Psychological issues (for example loss of confidence, poor concentration, anxiety, and so on)**

- Encourage employees to discuss concerns at one-to-one meetings with you and/or occupational health.
- Discuss possible adjustments to tasks and duties that are proving a challenge.
- Address work-related stress by carrying out a stress risk assessment recommended by the HSE.
- Signpost to an Employee Assistance Programme or counselling services if available.
- Identify a supportive colleague to talk to away from the office or work area, such as a wellbeing champion.
- Allow time when needed, to have some quiet time or undertake relaxation or mindfulness activities.
- Provide access to a quiet space to work or the opportunity to work from home.
- Have agreed protected time to catch up with work.
- Discuss whether it would be helpful for the employee to visit their GP, if they haven't already.

### **Other examples of adjustments include:**

- Provide private areas for those affected to rest, recover or make a telephone call to access personal or professional support.
- Ensure working time arrangements are flexible enough to meet the needs of menopausal women. For example, they may also need more breaks during the day or may need to leave work suddenly if their symptoms become severe.