

# Menopause Policy for Schools

**Barking &  
Dagenham**



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School/Academy Name:	
Date of Adoption:	
Chair of Governors Signature	
Signature of Head Teacher:	

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### 1. Introduction

These arrangements are recommended to Governing Bodies for adoption and as reasonable arrangements for any School/Academy.

Please note that the Schools/Academy Governing Bodies/Trusts have the option to consider exercising the discretion to provide additional entitlements. Any review or changes to existing School policies and/or practice need to be the subject of consultation with staff and the recognised Trade Unions with the aim of seeking agreement.

The School/Academy Trust can play a vital role in supporting the health, wellbeing and engagement of staff and, as a good employer, it is intent on supporting staff through every stage of the menopause, where possible. As an employer we want to be open, fair, unbiassed and consistent; this policy will be applied in relation to existing policies to ensure consistency.

By taking the menopause seriously and treating it as an occupational health and people management issue, the School/Academy can help to mitigate the potential negative impact of symptoms on staff and the School. Having early and regular follow-up conversations with staff to understand their needs can help make sure support and procedures are in place so they can continue to do their job effectively.

The School/Academy should consider how the person's job role and responsibilities could make their menopause symptoms harder to deal with, for example if:

- they work long periods without breaks
- they cannot take regular toilet breaks
- their job requires restrictive clothing
- their job does not have much flexibility
- their work environment has a negative impact (i.e., too hot)

There are several steps the School/Academy can take to make sure they have early conversations with staff and find solutions before problems arise. Work towards creating a culture within the school where staff can talk openly about the menopause. Recommended actions may include:

- Providing information on the menopause in the staff room, e.g., posters and leaflets
- Remembering World Menopause Day (October)
- Creating a support group (which may include staff from other Schools) so that those who want to can seek support from each other and shared experiences
- Providing training for staff and managers to achieve consistent practice
- Referring to the menopause in the School's Staff Wellbeing Policy
- Utilising Occupational Health for referrals and the Employee Assistance Programme (EAP) for support and advice

This policy applies to employees, temporary and agency workers, interns, volunteers, apprentices and job applicants. All staff are responsible for ensuring that there is no discrimination in the workplace, and for ensuring that this policy is applied on a day-to-day basis. They are also expected to apply the principles of equal opportunities and non-discrimination in their interactions with the school community, suppliers, business partners and visitors. In certain circumstances, an employee can be personally liable for discrimination against a fellow employee or a job applicant.

### 2. The Aim

The aim of this Policy is to:

- raise awareness of the menopause as an issue and allow open discussions on this topic
- minimise menopause-related stigma in your School/Academy
- identify how menopause may impact staff
- ensure staff affected can feel comfortable at work, both when experiencing symptoms and when asking for support
- outline the support and reasonable adjustments available to staff affected by menopause
- provide resources to help staff through difficulties the menopause may cause them and particularly outline the line manager's role in supporting staff
- explain what training is provided to Schools Leaders and Managers and Team Leaders
- provide information on gender identity and gender reassignment discrimination and how talking with staff about this is important

### 3. Legislation and Guidance

Under 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 assess the risks to the health and safety of their employees. This requires undertaking general risk assessments, which should include specific risks to the health of staff affected by the menopause.

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.

[Section 6](#) of the Equality Act 2010 states that a person has a disability if:

- They have a physical or mental impairment, **and**
- The impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities

Relating specifically to menopause symptoms:

- Many of the symptoms would be likely to be classified as a physical and/or mental impairment
- 'Substantial' means more than minor or trivial
- 'Long-term' means an impairment if it has lasted for at least 12 months, is likely to last for at least 12 months, or is likely to last for the rest of the life of the person affected
- 'Day to day activities' are those carried out by most people on a regular basis, and includes but is not limited to: walking, driving, carrying or moving things, being able to concentrate, writing, reading, typing, speaking

Ongoing symptoms linked to the menopause may meet the definition of a disability and where they do, employers will be required to consider whether any reasonable adjustments are required to alleviate any disadvantage. As good employer's we will support employees and apply reasonable adjustments, where possible, even where the employee does not fall under the Equalities Act.

Any such reasonable adjustments will be made on a case-by-case basis and, where appropriate, staff affected by the menopause will be offered a variety of approaches to support them.

### 4. Definitions

Most information about the menopause describes the experiences of cisgender, heterosexual women. However, the menopause can affect anyone who is born with ovaries. A person who transitions to male but who retains their ovaries may experience menopause when their ovaries stop producing eggs.

The menopause is a stage of life when a woman\* stops having a menstrual cycle. It typically affects those aged between 45 and 55, when estrogen (female sex hormones) 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 this, when a woman may experience symptoms.
- Post-menopause is the time beyond menopause.
- Early menopause is when a woman's menstrual cycle stops before the age of 45. It can happen naturally, or as a side effect of some treatments.

For the purpose of this policy, any reference to the menopause shall include perimenopause and early menopause.

For many women, this natural process is a time of anxiety and distress due to the various symptoms that can accompany it. Some menopausal changes can also be brought about by treatments for cancer, including chemotherapy, ovarian ablation and hormone therapy.

The menopause is influenced by hormones – or more correctly, by a change in hormone levels. During a woman's fertile years, her ability to produce an egg each month is associated with the release of three reproductive hormones (oestradiol,

oestrone and oestriol), that are referred to collectively as oestrogen. Oestrogen is mainly produced by the ovaries, though small amounts are also made by the adrenal glands and by the placenta of a pregnant woman.

It is oestrogen which stimulates female characteristics at puberty and controls a woman's reproductive cycle: the development and release of an egg each month (ovulation) for implantation in the uterus (womb), and the way in which the lining of the womb thickens to accept a fertilised egg. The monthly menstrual cycle happens because no implantation has taken place – there is no pregnancy – and the lining of the womb is shed.

As women get older, their store of eggs in the ovary decreases and their ability to conceive diminishes. At this time, less oestrogen is produced, causing the body to behave differently. However, the body does not stop producing estrogen overnight, and the process can even take several years, during which symptoms arise gradually. This gradual change is called the 'peri-menopause'.

\*We acknowledge that while most people affected by the menopause will be women, those who are trans or non-binary may also experience the menopause or menopause-type symptoms. The support outlined in this Policy is designed to meet the above aims for all affected colleagues.

## 5. Roles and Responsibilities

The School/Academy as a good employer would like to support staff affected by menopause and therefore, the Governing Body a made the decision to adopt this, Policy.

### 5.1 Role of Senior Staff

The School/Academy has appointed a Senior Leader to be their lead for wellbeing, see below to identify that staff member.

The lead for wellbeing will make reasonable adjustments to the workplace in a confidential manner to support staff experiencing the menopause, and to make sure the workplace does not make their symptoms worse. Recommended actions may include:

- Carrying out individual risk assessments to assess working conditions in line with the specific needs of staff affected by the menopause, when requested.
- Monitoring the wellbeing of staff through regular surveys and structured conversations
- Providing information and resources, where possible training opportunities to make sure that all line managers are aware of the menopause, its potential impact on work, and what reasonable adjustments may be necessary
- Promoting information about and access to external support services
- Ensuring good ventilation and air quality throughout the school, leaving doors open where appropriate and ensuring windows can be safely opened
- Ensuring regular access to cold drinking water for all staff

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- Regulating and monitoring the temperature of the school and collecting feedback from staff, as well as ensuring the temperature can be regulated per room by turning down radiators for example
- Ensuring toilet, washing and sanitary facilities are accessible for staff and establishing where possible, a system that allows for cover for staff to access these facilities where necessary while they are undertaking their duties.
- Providing small desk fans to help staff cool down
- Fitting blinds to windows
- Designating a member of staff such as a wellbeing champion that staff affected by the menopause can speak to about their symptoms in confidence, if they do not feel comfortable doing so with their line manager

### 5.2 Role of Senior and Middle Leaders

Leaders who work with staff who may be affected by the menopause will

- Provide a non-judgmental, empathetic and confidential support system to staff
- Appreciate the personal nature of any conversations about the menopause and treat them confidentially and sensitively
- Monitor sickness absence, and have support meetings with staff if any patterns emerge
- Have regular, informal conversations with staff that they line manage who are affected by the menopause to discuss what support they need, and record any reasonable adjustments that are agreed
- Consider flexible working requests to accommodate acute symptoms
- Allow staff affected by the menopause to take reasonable breaks from their work if necessary to help manage symptoms
- Give swift permission for absence to attend medical appointments, consistent with the School's Leave of Absence Policy
- Promote information about and access to external support services
- Record menopause-related absences in the normal way in accordance with the School's Sickness Absence Policy. Sickness triggers will be adhered to in relation to menopause.
- The Sickness Absence Policy is intended to support staff and enable Head Teachers to manage sickness absence in a way that is fair, consistent and complies with employment, health and safety and education legislation.
- Be sensitive to health issues such as the menopause during the performance management/appraisal process, where there is medical evidence of an issue.
- If necessary, seek advice from HR or occupational health colleagues, or discuss a referral with the staff member to occupational health for further support

### 5.3 Role of Staff Members Affected by the Menopause

We encourage staff who are experiencing menopausal symptoms that are impacting their health and wellbeing at work to:

- Share their practical needs to reduce the difficulties the menopause can cause and their preferred coping strategies with their line manager or the wellbeing lead.

- Report honestly about their wellbeing and let their Line Manager or another trusted member of staff or the wellbeing lead, know if the menopause is having an impact on this
- Make time in their schedule to visit their GP and other support services
- Access our employee assistance programme (EAP) for further support or asked to be referred to Occupational Health for advice on reasonable adjustments

### 5.4 Role of All Staff

All staff are expected to:

- Promote health and wellbeing for themselves and others at all times
- Treat each other with respect, dignity and empathy
- Support other members of staff, such as by providing practical assistance or emotional reassurance
- Accept and support reasonable adjustments that staff affected by the menopause may be receiving because of their symptoms
- Report honestly about their wellbeing to their line manager or the wellbeing lead.

## 6. Further resources

- Posters
- World Menopause Day
- [Menopause](#) (NHS)
- Menopause – [NICE](#) (National Institute for Health & Care Excellence)
- [Menopause Matters](#)
- [Meno Martha International Menopause](#) Directory's 00+ Health Topics and Blogs showcase evidence-based information by menopause societies, international, national and state health sources.
- [Menopause: Diagnosis and Management](#) (National Institute for Health and Care Excellence)
- The [Daisy Network](#) Charity
- [Menopause in the Workplace](#)
- [Menopause resources](#) from the CIPD, particularly for:
  - [Line managers](#)
  - [HR staff](#)

## 7. Monitoring arrangements

This Policy requires adoption by the full Governing Body and will be reviewed every 18 months by the Schools' HR Advisory Team.

## 8. Links to other policies

This policy is linked to the School's:

- Staff Wellbeing Policy
- Health and Safety Policy
- Sickness Absence Policy

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- Leave of Absence
- Performance Appraisal Policy
- Flexible Working Policy
- Equality Policy

For clarity, sickness triggers will be adhered to in relation to menopause, the Sickness Absence Policy is intended to support staff and enable Head Teachers to Manage sickness absence in a way that is fair, consistent and complies with employment, health and safety and education legislation. The Council and Locally Managed Schools are committed to the care, welfare and equitable treatment of staff Members. It is recognised that most absence is genuine and, by creating a fair and transparent policy, it is hoped to avoid creating anxiety about the consequences of staying off work when ill. The procedure balances the need to maintain service delivery and the interests of employees by ensuring that employees are fit and healthy for work.

This policy is dependent on the openness and mutual trust and respect between Employees and employers. This policy provides Schools with a consistent and structured framework that will enable them to properly manage the difficult and sensitive area of staff sickness absence levels. The aim is to help people to return to work and to remain at work, where possible.

In relation to Health appointments please refer to the School's Leave of Absence Policy.

## Appendix A – Menopause Symptoms

Individuals suffering from 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. Menopausal symptoms might include:

- Hot Flashes
- Night Sweats, Difficulty Sleeping, Insomnia
- Palpitations
- Fatigue
- Low Mood, Mood Swings, Irritability Anxiety and Depression
- Headaches and joint and muscle pain
- Weakened bladder function and urinary tract infections
- Vaginal dryness, Vaginal/vulvar itching and reduced sex drive
- Problems with Memory, Confidence, Concentration and Cognitive changes (Difficulty remembering names, directions, losing focus/train of thought)
- Possibly, not limited to the above

For some individuals, being at work may make their symptoms worse. For example, if the temperature is too high, this may cause symptoms such as hot flushes, dizziness, discomfort, sweating and heart palpitations.

Symptoms affecting sleep can make it difficult for staff experiencing them to concentrate and stay focused, while low confidence, low mood and anxiety may impact on decision-making and relationships with colleagues.

We acknowledge that the menopause will affect everybody differently – some individuals may experience no symptoms at all, and some may experience a variety. We will adapt our response to staff affected by the menopause on a case-by-case basis.

Even just talking about menopause could make a world of difference to the that member of staff's ability to achieve full potential, whilst going through this period of their life.

### DOs

1. Do your homework, make sure you know the facts
2. Do talk about menopause – it can help to reduce symptoms
3. Do review the tips on how to approach a sensitive conversation/topic
4. Do ask the School for a Risk Assessment
5. Do make reasonable adjustments to the work environment
6. Do keep an open mind and be flexible

### DON'T

1. Don't make assumptions
2. Don't share personal information, without consent
3. Don't shy away from talking about the menopause
4. Don't focus on the problems, focus on solutions
5. Don't address poor performance, without addressing health issues
6. Don't offer medical advice, but do suggest where support can be found