# Transitioning through the Menopause

###  Guidance

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**1. Introduction**

1.1 Islington Council is committed to building an organisation where employees feel valued, inspired and empowered to perform their best. Islington recognise within our workforce strategy that we need to retain valuable talent by supporting staff through the menopause. With over half our workforce being female and half of them being over the age of 50, this document outlines the Council's guidance for staff and line managers in supporting someone who may be experiencing symptoms when transitioning through the menopause, sometimes referred to as ‘the change’.

1.2 The menopause is a natural stage of life experienced by most women and can temporarily impact upon a number of areas of an employee’s wellbeing and work performance. The potential negative impact of symptoms on the individual and the organisation, such as reduced job satisfaction and productivity and/ or higher sickness absence, often occur when employees ‘suffer in silence’.

1.3 We, as an employer have a legal duty to make suitable and sufficient assessment of any workplace risks to the health and safety of our employees, (see 6.2). Often making simple changes by having open and honest discussions, can be all that is needed to support employees during the menopause, recognising that everyone experiences it differently (see 4).

1.4 Employees transitioning through the menopause should feel confident and comfortable to discuss any related health problems and arrange any necessary support to be in place. This can happen with their line manager, HR Advice, the Employee Assistance Programme (EAP), and Occupational Health (OH). Employees must also be assured that any discussions will be treated confidentially.

2. Scope

2.1 This guidance applies to all Islington staff except Islington’s School staff.

2.2 This guidance applies to female and transgender employees.

2.3 This does not apply to staff experiencing the [‘male menopause’](https://www.nhs.uk/conditions/male-menopause/), (see section 10.)

3. Definitions and Stages

3.1 **Perimenopause** is the time leading up to menopause when someone may experience changes, such as irregular periods or other menopausal symptoms (see point 4). This stage can last for up to five years or longer.

3.2 **Menopause** is defined as a biological stage in a woman's life when she stops menstruating, and reaches the end of her natural reproductive life. This usually occurs when a woman has not had a period for twelve consecutive months. The average age for a woman to reach menopause is 51, however, it can be earlier or later than this due to surgery, illness or other reasons.

3.3 **Post menopause** is the time after menopause has occurred, starting when a woman has not had a period for twelve consecutive months. On average, most symptoms usually last between four to eight years from the last period.

3.4 **Early menopause** is menopause that occurs before the age of 45. An underlying medical condition can be the cause of this. See 3.6.

3.5 **Hormone Replacement Therapy (HRT)** is a form of treatment used to relieve some of the symptoms of the menopause by replacing the low levels of hormones.

3.6 **Treatment induced menopause** refers to menopause brought on by medical intervention (such as surgery involving the ovaries) or drug treatments (such as chemotherapy and radiotherapy to treat cancer). Unlike those reaching menopause naturally, this is a rather sudden process.

4. Symptoms

4.1 Symptoms can manifest both physically and psychologically. The symptoms can vary with each person going through the menopause, and may not be experienced on an ongoing basis. Symptoms can include;

* Hot flushes (brief and sudden surges of radiating heat usually felt in the face, neck and chest)
* Palpitations (heartbeats that become more noticeable)
* Headaches
* Weight gain
* Night sweats (hot flushes that happen during the night)
* Sleep disturbance (often as a result of night sweats) that can make people feel tired and irritable
* Fatigue
* Muscle and joint stiffness, aches and pains
* Skin changes (dryness, acne, general itchiness)
* Need to pass urine more often and recurrent urinary tract infections (UTI’s) including cystitis
* Heavy, irregular periods
* Psychological issues such as mood disturbance, poor concentration, anxiety and/or depression, panic attacks, loss of confidence and reduced concentration
* Reduced sex drive

4.3 It is important to note that not everyone will notice every symptom, or even need help or support. However, 75% of women do experience some symptoms and 25% could be classed as being severely impacted.

4.4 If a member of staff is unable to speak to their line manager, or if their line manager is not supporting them, they can speak to HR Advice (hradvice@islington.gov.uk), their Trade Union, or the Women’s Staff Forum Chair.

5. Roles and Responsibilities

5.1 **All staff** are responsible for:

* Taking personal responsibility to look after their health
* Being open and honest in conversations with managers, HR and Occupational Health
* Contributing to a respectful and productive working environment
* Being willing to help and support their colleagues
* Understanding any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.

5.2 **All Line Managers** **are responsible for:**

* Familiarising themselves with the Menopause Guidance
* Being ready and willing to have open discussions about menopause
* Treating the discussion sensitively and professionally, appreciating the personal nature of the conversation
* Recording mutually agreed adjustments and actions to be implemented, in writing (1:1 supervision template, email correspondence, workplace passport)
* Ensuring ongoing dialogue and review dates
* Ensuring that all agreed adjustments are adhered to

6. Adjustments in the Workplace

6.1 When exercising their judgement and making adjustments, managers are expected to take into account the specific needs and preferences of the individual in question **(see 9. Table of menopausal symptoms and practical adjustments)**

6.2 An [employee’s risk assessment](http://izzi/me/staff-essentials/buildings-workplace-support/health-safety/riskassessments/Pages/1GenericRiskAssessments.aspx), completed when starting any new role and reviewed yearly or sooner if circumstances change, should be updated to consider the employee’s specific needs when transitioning through menopause This is to ensure that their working environment will not make their symptoms worse. Contact the [Health & Safety team](http://izzi/me/staff-essentials/buildings-workplace-support/health-safety/Pages/default.aspx) to discuss this further.

7. Where adjustments are unsuccessful

7.1Where adjustments are unsuccessful or if symptoms are proving more problematic, the Line Manager may:

* Review recent advice from employee’s GP
* Discuss a referral to Occupational Health for further advice
* Refer the employee to Occupational Health
* Review Occupational Health advice, and implement any recommendations, where reasonably practical
* Update the action plan, and continue to review

8. Trans people and the menopause

8.1 How a trans person experiences symptoms may vary depending on the age at which they transitioned and when in time that was (as treatments have changed and developed over time).

8.2 Trans men (those who identify as male but were assigned female at birth) will experience a natural menopause if their ovaries remain in place and no hormone therapy is given or if their ovaries and uterus are surgically removed. This may happen at an earlier age than commonly happens with a natural menopause.

8.3 Trans women (those who identify as female but were assigned male at birth) undertaking hormone therapy will usually remain on this for life and should generally experience limited ‘pseudo’ menopausal (menopausal-like) symptoms - unless hormone therapy is interrupted, or hormone levels are unstable. Such treatment interruptions however can be a common experience for trans women (and trans men).

8.4 Some trans people may not wish to share their trans status and as a result, may be reluctant to discuss menopausal symptoms. Negative and discriminatory attitudes may also make it more difficult to share difficulties or ask for adjustments. Confidential support is available through the Employee Assistance Programme 0800 243 458, by contacting HR Advice on 020 7527 6070 or emailing the Trans Forum Chair at staffforums@islington.gov.uk

8.5. Many people report that stress can impact on menopausal symptoms. If they are experiencing transphobia at the same time as symptoms of menopause this can also increase stress which may exacerbate some symptoms.

9. Table of menopausal symptoms and adjustments

this list is not exhaustive.

| **Table of menopausal symptoms and practical adjustments to consider** |
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| **Menopausal symptoms** | **Practical adjustments** |
| GP and related appointments | * Discuss the need for time away to attend medical appointments and/or treatments related to the menopause. Trying where possible to arrange appointment at the beginning or end of the working day.
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| Sleep disruption and/or night sweats | * Consider a later start time to accommodate sleep disturbance or insomnia.
* Consider a change to shift patterns or the ability to swap shifts on a temporary basis.
* Discuss working from home on an ad-hoc basis if they had a tough night.
 |
| Hot flushes and/or daytime sweatsHot flushes and/or daytime sweats continued | * Review seating/desk arrangements and relocate to a better suited workstation
* Look at ways to cool the working environment, using a USB fan that simply plugs into the laptop, consider moving to sit near a window
* Provide easy access to cold drinking water and toilets
* Identify a quiet room to manage symptoms (hot flushes, extreme mood).
* Consider limiting the time wearing personal protective equipment (PPE) such as face masks
* Flexibility around uniforms, being able to remove a jacket or neck tie. Uniforms should where ever possible be made of natural materials.
* Extra locker space should be considered for storage of change of clothes or other necessities
 |
| Heavy or irregular periods | * Provide easy access to toilet facilities
* Allow for more frequent breaks to go to the toilet
* Allow someone to temporarily work from home if they have very heavy bleeding
* Make it easy to request extra uniforms if needed
* Be prepared that an employee may need to go home unexpectedly
 |
| Headaches and fatigue | * Consider a temporary adjustment to someone’s work duties
* Provide access to a quiet area
* Offer easy access to drinking water to take medication and allow regular breaks
 |
| Muscular aches, and bone and joint pain | * Make any necessary temporary adjustments through review of risk assessments and work schedules
* Allow to move around, or, stay mobile if that helps
* Regular breaks to move around or rest if role requires constant standing or prolonged sitting
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| Psychological issues (for example loss of confidence, poor concentration, anxiety etc.,) | * Encourage discussion at one to ones
* Discuss the services of Occupational Health and EAP
* Discuss possible adjustments to work tasks and duties which are proving to be challenging
* Identify a supportive colleague to be a ‘buddy’ to talk away from the work area when needed
* Have agreed ‘uninterrupted/protected’ time to concentrate on work
* Discuss external support and treatment available (GP etc.,) and be accommodating if time off for appointments is required
* Carry out a stress risk assessment and agree upon a mutually agreeable support plan which is regularly reviewed
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**10. Support and further information**

* Islington’s [Employee Assistance Programme](http://izzi/council/aboutcouncil/performance-policy/policy/Pages/hr-az.aspx?AdditionalPath=/Employee%20Assistance%20Programme) 0800 243 458
* ‘Male Menopause’ Advice <https://www.nhs.uk/conditions/male-menopause/>
* Menopause Support Network <https://henpicked.net/>
* NHS website www.nhs.uk/Livewell/menopause/Pages/
* [NHS Choices – menopause](http://www.nhs.uk/Conditions/Menopause/Pages/Introduction.aspx)
* <http://www.menopausematters.co.uk/>
* The Daisy Network – <https://www.daisynetwork.org.uk/about-us/what-we-do/>
* Healthtalk.org – <http://www.healthtalk.org/peoples-experiences/later-life/menopause/topics>
* Women’s Health Concerns – <https://www.womens-health-concern.org/help-and-advice/factsheets/focus-series/menopause/>
* The Menopause Exchange – <http://www.menopause-exchange.co.uk/>
* [Wellbeing of Women – the menopause](http://www.wellbeingofwomen.org.uk/the-menopause/)
* NICE Menopause: diagnosis and management – <https://www.nice.org.uk/guidance/ng23>
* [Supporting Working Women Through the Menopause – Guidance for Union Reps (TUC)](https://www.tuc.org.uk/sites/default/files/TUC_menopause_0.pdf)
* [Guidance on Menopause and the Workplace – Faculty of Occupational Medicine (Royal College of Physicians)](http://www.fom.ac.uk/wp-content/uploads/Guidance-on-menopause-and-the-workplace-v6.pdf)

For help with general HR enquires please contact HR Advice

Email: hradvice@islington.gov.uk Telephone: 020 7527 6070