**Croydon Council**

**Menopause Policy**

***Agreed with CSC/EDI board: March 2023***

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**1. Introduction**

* 1. Menopause, or, sometimes referred to as ‘the change’ is rarely discussed in the workplace. This is despite women making up 52.7% of the workforce (as of 2022). Additionally, there are an estimated 4.5 million women between the ages of 50 and 64 currently in work. These numbers will rise as the state retirement age for women increases.
  2. Menopause typically occurs between 45 and 55 years of age, marked by changes in the hormones and the ending of menstruation. On average, most symptoms last around 4 years from your last period. However, around 1 in every 10 women experience them for up to 12 years. Some women will suffer no or variable symptoms.
  3. 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.

1.4 Croydon council is committed to adapting our approach to workplace wellbeing to be considerate of all cultural and demographic differences within our workforce and take the health and wellbeing of the people who work for us seriously.

1.5 This means that the Council wants all employees to understand menopause and not consider discussions on this subject as ‘taboo’. Menopausal employees should feel confident and comfortable to discuss any related health problems with their line manager, Human Resources, the Employee Assistance Programme (EAP) or Occupational Health (OH), and for necessary support to be in place. Employees must also be assured that any discussions will be treated confidentially.

1.6 Our menopause policy aims to show our commitment to creating an open and supportive culture. We want staff to feel comfortable speaking about how menopause-related symptoms may be affecting them at work and feel able to ask for the support that they need to help manage their symptoms.

1.7 This policy also aims to assist line managers in supporting individuals going through the menopause in the workplace. The policy should be read in conjunction with the Line Management Guidance; Menopause FAQ’s and accompanying menopause risk assessment template (appendix 2).

# **2. Scope and eligibility**

2.1 This policy applies to all council employees, except teachers, lecturers and school-based staff who have their own procedures.

2.2 The policy applies to all staff who are going through menopause. This includes:

* some people who are trans, non-binary or intersex and who are experiencing menopause symptoms, whether from going through menopause or experiencing symptoms as a side effect of hormone replacement therapy ([HRT)\*](#genderneutrallanguage)
* anybody experiencing menopausal symptoms as a result of medical treatment, for example for conditions such as endometriosis and [infertility.\*\*](#endometriosis)

2.3 The policy does not cover symptoms sometimes experienced by men in middle age, which are sometimes referred to as the ‘male menopause’ or ‘andropause’. More information on this is given on the [**NHS website.**](https://www.nice.org.uk/guidance/ng23/chapter/Recommendations) However, men can be indirectly affected by the menopause because of their partner’s symptoms (see FAQ’s)

2.4 In this policy, where we refer to the menopause, we also mean the perimenopause and post-menopause (see 5).

# **3. Legislative context**

3.1 Under the [**Equality Act 2010**](https://www.daisynetwork.org/), menopause is largely covered under three protected characteristics: age, sex, and disability. Although menopause is not listed separately as a protected characteristic, severe menopausal symptoms could amount to a disability under the EqualityAct, which would require an employer to make reasonable adjustments.

3.2 Health and safety legislation provides for safe working, which includes the working conditions of anybody experiencing menopausal symptoms. Legislation includes the [**Health and Safety at Work Act 1974**](https://www.acas.org.uk/menopause-at-work), the [**Workplace (Health, Safety and Welfare) Regulations 1992**](https://www.menopausematters.co.uk/) and the [**Management of Health and Safety at Work Regulations 1999**](https://www.nhs.uk/conditions/male-menopause/)**.**

# **4. Key aims**

Our key aims are to:

* create a culture where staff experiencing symptoms of the [perimenopause](https://intranet.london.gov.uk/chief-officer/aboutHRPeople/myhr-policies-and-procedures/menopause-policy-and-guidance#perimenopause) and menopause that affect them at work feel able to talk about this, and to ask for help if they need it
* develop an inclusive culture, and take action against discriminatory sexist and ageist behaviours in the workplace that prevent staff from speaking about menopause and asking for support
* provide information and support to all staff with regard to the menopause
* review work conditions to take account of the difficulties that some staff experience during the menopause
* consider workplace adjustments where necessary
* ensure that staff know where to go for advice and support
* tailor adjustments to an individual’s needs
* through the provision of support and adjustments, reduce sickness absence and the number of staff leaving employment as a result of the menopause.

**5. What is the menopause?**

5.1 Perimenopause usually begins during the mid-40’s although it can start earlier with some women experiencing symptoms before the age of 40 (which can be termed a premature menopause). Some women may experience a ‘surgical menopause’ much earlier if they have a hysterectomy, or treatment for some cancers.

5.2 This perimenopause can include the commencement of symptoms (see 6) such as irregular periods and hot flushes. The impact of these symptoms on self-confidence, mental health, and relationships with others, can have an impact not only on life outside work but also an individual’s working life. Additionally, as the symptoms are wide ranging, they can impact both physically and psychologically.

5.3 After the perimenopause, the menopause stage is defined as the time when women stop having periods. It usually occurs between the ages of 45 and 55 but for some it can be earlier or later. Family history, surgery and medical conditions can affect the age menopause occurs.

5.4 Usually, menopause is defined as having occurred when a woman has not had a period for 12 consecutive months (for women reaching the menopause naturally).

5.5 Menopause symptoms as stated previously can start during the perimenopause and continue for some time after periods stop. Without treatment, most menopause symptoms gradually stop naturally. This usually happens up to five years after the symptoms start, although some women experience symptoms for many more years.

5.6 It should also 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. For example, 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.

5.7 Some women seek medical advice and treatment for the symptoms of the perimenopause and menopause. A common form of treatment is known as hormone replacement therapy (HRT). Many women find these treatments helpful for alleviating symptoms, but HRT may not be suitable or appropriate for all women.

5.8 Some women using HRT may experience side effects which may also require adjustments in the workplace.

**5.9 Stages of Menopause**

* Premature menopause - Can happen naturally, or because of illness or surgery.
* Perimenopause - The time leading up to the end of an individuals’ periods when symptoms may start.
* Menopause - A biological stage in a woman's life when the individual has not had a period for 12 consecutive months.
* Post-menopause – the stage after menopause (or greater than 12 months after the last period). Postmenopausal symptoms can last on average four to five years (but may continue longer).

**6. What are the symptoms of the menopause?**

**Every woman’s experience of the menopause will be different** but some of the most common symptoms that women may experience are:

|  |  |
| --- | --- |
| **Physical Symptoms** | **Description/Impact in the workplace** |
| * Hot flushes | * Hot flushes are the most common symptom of menopause. About **75%** of all women have sudden, brief, periodic increases in their body temperature. * They can start in the face, neck, or chest, before spreading upwards and downwards. * Most flushes only last a few minutes, and the woman may sweat, and the face, neck and chest become flushed. * Severe flushes can cause sweat to soak through clothing and cause embarrassment in the workplace. |
| * Sleep disruption/insomnia * Night sweats | * Sleep loss can cause irritability or difficulties in concentration at work. * Night sweats can also increase sleep disruption and affect concentration at work. |
| * Tiredness * Headaches/migraines | * + Can be caused by sleep disruption leading to difficulty focussing on tasks and/or starting work on time. |
| * Difficulty Concentrating/’Brain Fog’/Memory issues | * Can be connected by sleep disruption but can also happen independently. * Can cause problems with memory and confidence. * Doing workplace presentations may become more difficult or other tasks such as note-taking. * May also cause problems meeting/task deadlines. |
| * Irregular/Heavy/Painful Periods | * Can cause embarrassment if women start periods unexpectedly or experience heavy bleeding. They can also include clots which may leave some women exhausted and occasionally anaemic. * This may be difficult for women who are part of lengthy work meetings, working shifts or in public facing roles. |
| * Urinary Problems/Incontinence | * It is common to have an urgent need to pass urine or a need to pass it more often than normal. * There may be issues of urinary incontinence and urinary tract infection such as cystitis. * This may be difficult for women who are part of lengthy work meetings, working shifts or in public facing roles. |
| **Psychological Symptoms** | |
| * Mood Swings/Emotional Disturbance * Anxiety/Panic Attacks * Depression * Lack of confidence * Irritability * Problems with memory | |

* Women may experience only some or all these symptoms (and others not on this list).
* 34 symptoms of the menopause have been identified including others such as joint stiffness, dizziness, skin changes (dryness, acne, itching), digestive issues, weight gain, heart palpitations, gum disease and hair loss.
* Most women (85%) will experience mild to moderate symptoms, but some women (15%) do not experience any noticeable symptoms.
* Up to 25% of women who experience menopause symptoms will be impacted severely.
* On average, women continue to experience symptoms for four years after their last period, but around 10% of women continue to experience symptoms for up to 12 years after their last period.

# **7. Requesting support**

7.1. Croydon council is committed to ensuring that all line managers are provided with adequate training so that they can support individuals experiencing adverse menopausal symptoms.

7.2 Staff most affected by menopause symptoms may be in the 40s and 50s age range, which may coincide with other significant change and challenges – for example, children leaving home, caring for parents or relationship changes. However, menopause symptoms can affect people of all ages.

7.3 The menopause can impact upon several areas of an employee’s wellbeing and performance. This could be manifested in terms of attendance and performance. It is important to understand the root cause of this before any management action is considered.

7.4 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.

7.5 ***Line managers guidance to support menopausal employees*** is available to assist managers in having open and honest conversations and signpost to available resources.

7.6 Staff who find it difficult to cope at work because of menopausal symptoms, are encouraged to speak to their line manager in the first instance. We urge staff to be as open as possible about any issues that they are experiencing or adjustments that they need to ensure that they are provided with the right level of support.

7.7 Any health-related information disclosed by staff during discussions with their line manager or the HR team will be treated sensitively and in confidence.

7.8 Although all line managers are expected to take a positive and supportive approach towards discussions about the menopause, the council understands that some individual staff members who are affected may feel uncomfortable talking directly to their line manager if they are experiencing problems, especially if the line manager is male and/or much younger.

The council understands this and women who do not wish to discuss the issue with their direct line manager may wish to have an initial discussion with:

* [A colleague they trust](https://www.gov.uk/guidance/equality-act-2010-guidance)
* [HR consultancy contact](https://www.queermenopause.com/resources)
* [Women’s Network/Menopause Support group contact](https://intranet.croydon.gov.uk/working-croydon/our-culture/staff-networks/womens-staff-network-0/womens-staff-network)
* A [Guardian](https://www.hse.gov.uk/managing/legal.htm) contact
* [Mental Health First Aid](https://intranet.croydon.gov.uk/working-croydon/health-and-wellbeing/mental-health-and-wellbeing/contact-mental-health-first-aider) contact
* [Trade Union representative](https://www.hse.gov.uk/legislation/hswa.htm)

**8. Key management actions and adjustments which can be considered to support staff with menopausal symptoms**

**8.1 Working flexibly on a temporary basis**

* For employees eligible to request flexible working, who are seeking a permanent change to working arrangements, the council has a policy on requesting **formal flexible working.**
* However, we recognise that for individuals affected by menopausal symptoms, the option to work flexibly on a temporary (rather than permanent) basis may be appropriate.
* For example, this could include working from home, changing start and finish times, changes to work allocation or taking more frequent breaks. This is not a definitive list.
* If an individual feels that they would benefit from a temporary change to their working arrangement on an ad hoc basis because of sleep deprivation or other symptoms that may be impacting on their performance, staff should discuss and agree these with their line manager. This may form part of an existing hybrid working informal arrangement and/or be recorded in a ‘wellbeing’ passport.
* The council will try to facilitate temporary flexible working arrangements wherever this is possible and will continue to review these to ensure that they meet individual needs.

**8.2 Working environment**

* If individuals feel that their working environment is exacerbating their menopausal symptoms, they should raise this with their line manager in the first instance. A [menopause checklist](#symptomscheck) is available for managers and staff to discuss adjustments.
* There are a range of practical adjustments that can be implemented to make working life easier, such as moving a workstation to a cooler area. If staff are required to wear a uniform flexibility will be allowed wherever reasonable.
* There is an air conditioning system in operation in the Bernard Weatherill House and chilled water is provided on each floor within this building and other council buildings.

**8.3 Quiet place to work**

If staff need time out to relax or a short break to manage any symptoms or take medication, or a quiet space to work, they should speak to their line manager who will try their best to accommodate this.

A quiet room to break away from the working environment is available in Bernard Weatherill House (the Quiet Space) which can be found by following signage directions from the reception desk (or asking for assistance at reception).

**8.4 Sanitary products**

The council will aim to supply sanitary products for purchase in toilet facilities in core council administered buildings wherever possible and subject to organisational budgets.

**8.5 Sickness**

* There is no expectation on staff to work if they are unwell because of menopausal symptoms.
* Staff are unable to work due to sickness must report this to their line manager in line with the Sickness Absence Management Policy and Procedure ([HR Handbook, module 12](mailto:humanresources@croydon.gov.uk)).

**8.6** **Occupational health**

In some cases, staff may be referred to [Occupational Health](https://intranet.croydon.gov.uk/working-croydon/health-and-wellbeing-staff/occupational-health-service) (as part of a sickness management process) so that they can advise on how menopause symptoms are impacting individuals at work and make recommendations on the types of adjustments that may be appropriate. Occupational health may also signpost staff to external sources of help and advice.

**8.7** **Employee assistance programme**

Help and support is also available through our [Employee Assistance Programme (Health Assured)](https://intranet.croydon.gov.uk/working-croydon/health-and-wellbeing/mental-health-and-wellbeing/mental-health-what-can-i-do-support). Staff can use EAP to speak to an independent adviser on a confidential basis about any issue. Health Assured have also issued a [short webinar](https://intranet.croydon.gov.uk/working-croydon/hr/contacting-hr?v=XO2pghloil8&feature=youtu.be) about the menopause which may also be helpful.

**8.8 Menopause resources in Croydon Learning**

Staff and line managers can seek information and guidance on the menopause via the [menopause resources page in Croydon Learning](https://www.hse.gov.uk/pubns/books/l24.htm?id=1074). Information includes webinars, podcasts and documents of interest.

# **9. Roles and responsibilities**

## 9.1 **All staff**are responsible for:

* having a general awareness of menopause issues in order to be able to support colleagues asking for help
* raising issues with their manager if they are experiencing problems associated with menopause symptoms (or any other health condition)
* asking for adjustments if required and explaining how these will help

## 9.2 **Line Managers** are responsible for:

* meeting regularly with team members on a one-to-one basis, so that staff have a chance to raise any issues or concerns, including health issues such as the menopause;
* initiating early intervention if there are signs of ill health or distress;
* seeking guidance from [Human Resources Consultancy](https://intranet.croydon.gov.uk/working-croydon/learning-and-organisational-development/guardians-programme-0/contact-guardian) if they have any concerns;
* listening to staff and discussing any concerns that they may have;
* considering any requests for changes or adjustments to work or working hours to enable staff to perform to their full potential;
* managing performance conversations supportively and positively; taking health issues fully into account where there is underperformance; identifying any support that the employee may benefit from; and setting reasonable timescales for improvements;
* recording any specific needs (and agreed adjustments) and reviewing these as necessary and at least annually;
* having regular discussions with the staff member to ensure that the support still meets their needs, as symptoms of the menopause can fluctuate over time;
* ensuring that they are familiar with the ***menopause policy*** and ***line management guidance to support staff during menopause*** and participating in any relevant training on menopause awareness;
* ensuring that staff in their teams are familiar with the menopause policy

## 9.3 **HR Consultancy** is responsible for:

* supporting and advising managers on implementation of the policy and best practice

# **10. Internal Resources**

10.1 Appropriate resource information is available to all staff including specific [intranet pages with support information](https://intranet.croydon.gov.uk/working-croydon/health-and-wellbeing/menopause-guidance-and-support) about the menopause. These pages also include links to webinars, staff feedback about their menopause experience and additional reading links.

10.2 A menopause support group is available within the Council (as part of the [Women’s Network](https://intranet.croydon.gov.uk/working-croydon/your-health-and-wellbeing/employee-assistance-programme)) to enable people impacted by the menopause to access peer support and share knowledge and information.

10.3 [Risk assessments](#_Appendix_2_–) can be carried out which take the specific needs of menopausal staff into consideration (including [stress risk assessments](https://www.youtube.com/watch)). Adjustments to working conditions will also be proactively put in place wherever possible.

10.4 Awareness raising sessions will also be available for all managers and staff via on the symptoms of the menopause and its impact (see Line Manager’s guidance for further information).

# **11. External sources of help**

There are various organisations that can provide help and support on the menopause, including:

* [Menopause matters](https://intranet.croydon.gov.uk/working-croydon/hr/hr-handbook), which provides information about the menopause, menopausal symptoms, and treatment options.
* [NHS menopause](https://intranet.croydon.gov.uk/working-croydon/our-culture/staff-networks/womens-staff-network-0/womens-staff-network) website
* the [Daisy Network](https://intranet.croydon.gov.uk/working-croydon/hr/trade-union-contact-details) charity, which provides support for people experiencing premature menopause or premature ovarian insufficiency; and
* the [Menopause Café](https://croydon.learningpool.com/course/view.php), which provides information about events where individuals gather to eat cake, drink tea, and discuss the menopause.
* My menopause Doctor [www.menopausedoctor.co.uk](https://intranet.croydon.gov.uk/working-croydon/hr/contacting-hr)
* Women’s Health Concern [www.womens-health-concerns.org](http://www.womens-health-concerns.org)
* [NICE guidelines on ‘menopause diagnosis and treatment](https://www.nhs.uk/conditions/menopause/#diagnosis-of-perimenopause-and-menopause)
* The [ACAS guidance ‘menopause at work’](https://intranet.croydon.gov.uk/working-croydon/health-and-wellbeing-staff/mental-health-and-wellbeing/mental-health-what-can-i-do)
* [Queer menopause](https://www.menopausecafe.net/) (for people who identify as LGBTQ+)

# **12. Disclosure and confidentiality**

The council will ensure that individuals’ personal data, including data relating to their health, is handled in accordance with the workforce **data protection policy.** Any breach of confidentiality will be treated very seriously and dealt with under the council’s disciplinary procedure.

# **13. Feedback and contact information**

If you need assistance regarding obtaining information in this policy in a different format like accessible PDF or large print, easy read, audio recording or braille please contact:

* [humanresources@croydon.gov.uk](http://www.menopausedoctor.co.uk)

We’ll consider your request and get back to you within five working days.

*\* We have generally used gender-neutral language in this policy document, to reflect the fact that menopause can affect trans, non-binary, or intersex people. The exceptions are when reflecting the language used by other organisations (titles, descriptions, and research), and in some references to female reproduction.*

*\*\* Endometriosis is estimated to affect around one in ten women of reproductive age and infertility to affect around one in seven couples.*

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**Appendix 1 – Menopause symptoms checklist**

**Menopausal Symptoms Checklist with Adjustments**

**Name: Team:**

**Line Manager name:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Symptom** | **Location of symptoms (tick both if relevant)** | | **Severity of Symptoms** | | | **How frequently do you experience symptoms?** | | | | | **Adjustments**  **(examples)** |
|  | **Home** | **Work** | **Mild** | **Moderate** | **Severe** | **Constantly** | **Daily** | **Weekly** | **Monthly** | **More than monthly** |  |
| Hot Flushes &  Day sweats |  |  |  |  |  |  |  |  |  |  | Encourage purchase of USB fans, amend uniforms, sit close to an openable window, access to showers |
| Night Sweats |  |  |  |  |  |  |  |  |  |  | Flexible start times and shift patterns |
| Sleep Disorders |  |  |  |  |  |  |  |  |  |  | Flexible working patterns |
| Irregular or problem periods |  |  |  |  |  |  |  |  |  |  | Flexibility and access to toilets with provision of sanitary items without undue attention |
| Fatigue  Tiredness |  |  |  |  |  |  |  |  |  |  | Flexible hours and shift patterns |
| Depression, feeling low incl. tearfulness |  |  |  |  |  |  |  |  |  |  | Flexible hours and refer to GP.  Sensitivity to feelings |
| Irritability, anger, anxiety |  |  |  |  |  |  |  |  |  |  | Refer to GP Sensitivity to feelings |
| General & Joint aches/pains |  |  |  |  |  |  |  |  |  |  | Workplace assessment & flexible working hours. |
| **Symptom** | **Location of symptoms (tick both if relevant)** | | **Severity of Symptoms** | | | **How frequently do you experience symptoms?** | | | | | **Adjustments (examples)** |
|  | **Home** | **Work** | **Mild** | **Moderate** | **Severe** | **Constantly** | **Daily** | **Weekly** | **Monthly** | **More than monthly** |  |
| Loss or difficulty concentrating  (brain fog) |  |  |  |  |  |  |  |  |  |  | Flexible breaks |
| Loss or lapses in memory |  |  |  |  |  |  |  |  |  |  | Aide memoirs, flexible breaks |
| Panic disorder or attacks |  |  |  |  |  |  |  |  |  |  | Sensitivity to feelings  Refer to GP |
| Headaches/migraine |  |  |  |  |  |  |  |  |  |  | Flexible hours, access to a quiet private room |
| Incontinence |  |  |  |  |  |  |  |  |  |  | Flexibility and access to toilets without undue attention |
| General skin itchiness /dry skin |  |  |  |  |  |  |  |  |  |  | Access to toilets to apply cream/lotions.  If severe refer to GP |
| **Comments:** | | | | | | | | | | | |
| **Action:** | | | | | | | | | | | |

**Appendix 2 – Menopause Risk Assessment Template**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Task/Job Category | |  | Assessment date |  |
| Location | |  | Review date |  |
| Assessor’s Name | |  | No of persons exposed to risk |  |
| Assessor’s Job Title | |  | Any other comments |  |
| Likelihood (L): 1= Unlikely Severity (S): 1 = No injuries/Minor injuries  2 = Possible 2 = Specified Injuries i.e. fractures  3 = Probable 3 = Disabling Injury/Disease Fatality/Fatalities   |  |  |  |  | | --- | --- | --- | --- | |  | Severity | | | | Likelihood | 1 | 2 | 3 | | 1 | Low | Low | Medium | | 2 | Low | Medium | High | | 3 | Medium | High | High | | | | | |
| Persons Exposed | E = Employees, MOP = Members of public, C = Contractors, Y = Young Persons, P = Pregnant staff, O = Others | | | |

| Hazard | Persons Exposed | L | S | Risk Rating | Control Measures  (please refer to menopause line manager guidance) | L | S | Residual Risk Rating | Further action required and by whom |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Information on menopause |  |  |  |  | Does the staff member have access to information on the menopause (e.g., policy/intranet page) and also relevant policies such as hybrid; formal flexible working and sickness absence management? |  |  |  |  |
| Stress |  |  |  |  | Are there appropriate mechanisms in place to deal with other related issues such as stress?  Does a stress risk assessment need to be completed? |  |  |  |  |
| Non- referral to Occupational Health |  |  |  |  | Has the staff member been made aware of the facility to make a OH referral (as part of sickness absence management)?  Is an OH referral needed? |  |  |  |  |
| No access to support groups |  |  |  |  | Is the staff member aware of support groups, and staff networks in the workplace? |  |  |  |  |
| Workstations |  |  |  |  | Are workstations/  locations easily accessible  for sanitary and rest  facilities? |  |  |  |  |
| Facilities |  |  |  |  | Are there private washing and changing facilities?  Is there access to sanitary products?  Do rotas, shifts and schedules ensure that. workers have easy access to mess rooms with sanitary and washing facilities? |  |  |  |  |
| Temperature |  |  |  |  | Is the employee/employer aware of the workplace  maximum and minimum temperature and is it  implemented?  Is ventilation available and is it regularly maintained?  Is additional ventilation. provided if necessary?  How is this implemented?  Do uniforms and PPE equipment reflect the needs of the individual?  Are the clothes provided made of natural fibres? |  |  |  |  |
| Environment/Duties |  |  |  |  | Have workstation risk assessment been reviewed to take menopause into account?  Are there opportunities to switch to lighter or different duties for a limited period?  Do manual handling. assessments take any issues around menopause into account?  Are there flexible arrangements in place in relation to breaks?  Can start and finish times be adjusted as part of a flexible working agreement?  Is the role suitable for agile including some home working – if not why not?  Is there access to natural light?  Have work processes been assessed to see if any reasonable adjustments are needed?  Is a USB desk fan available to assist with hot flushes?  Is it too noisy?  Is there fatigue from standing?  Is there insufficient workspace?  Remote working – is this part of the current role and what mechanisms are in place to manage this in terms of access to facilities? |  |  |  |  |
| Working Conditions |  |  |  |  | Shifts in general  Night shifts  Lone Working  Travelling for work |  |  |  |  |
| Other Hazards – please identify |  |  |  |  |  |  |  |  |  |
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| Action Plan | | | | |
| Hazard | Action required | Responsible Person | Target Date | Date Completed |
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