

1ST EDITION,  
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# MENOPAUSE POLICY

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RESPONSIBLE CARE

# CIA Signpost Guide: Developing and Implementing a Menopause Policy

## FOREWORD: A CALL FOR CHANGE

Equality in the workplace is a vital aspect of our organisational culture, and we all have a role to play in helping and supporting all employees from discrimination whatever their gender, disability, race or sexual orientation.

Great change is afoot on the expectations for new government policy, employment workplace practices/policies and in how we can better support those experiencing menopause. Due to increased awareness on the impact of menopause issues on the workplace, how this affects individuals is now being better understood.

In the past there has been stigma and shame around women's health in general, and menopause is being talked about more widely, including in Parliament with the development of a **Women's Health Strategy (Department of Health)** and the **UK Parliament House of Commons Survey – Menopause in the Workplace (Feb 2022), First Report (July 2022) and Concluding Report (October 2022)**.

The House of Commons Women and Equalities Committee – Menopause and the workplace – First Report (July 2022) explains that *'current law does not serve or protect menopausal women. There is poor employer awareness of both health and safety and equality law relating to menopause. More fundamentally, the law does not offer proper redress to those who suffer menopause related discrimination'*. And gives recommendation *'for employers to act in a way policies are designed so that fewer women need legal redress'*. For menopause in the workplace, they call on the Government to *'immediately commence section 14 of the Equality Act 2010'*

to allow dual discrimination claims based on more than one protected characteristic; and to *'urgently consult on making menopause a protected characteristic under the Equality Act 2010'*. Noting that Menopause has *'been ignored and hidden away for too long. There is nothing shameful about women's health, or about getting older. Supporting those experiencing menopause makes sense for individuals, for the economy and for society'*.

Many organisations are now putting menopause policies in place to support employees; and there is much more information, guidance, training & awareness, providers, and support available. We were asked by our members to develop a signpost guide relating to Developing and implementing Menopause Policies, and my thanks go to the CIA Team and the many members who contributed to the development of this Signpost Guide.

I would also like to acknowledge the input from Jacqui McBurnie from NHS England in helping us with the content (Jacqui is the Chair of NHS England- Improvement Menopause Network and a member of the Cross Government Menopause Network Executive Steering Committee).



**Steve Elliott**  
Chief Executive, Chemical  
Industries Association



### 'Menopause: Continuing the conversation' – World Menopause Day

The menopause has gone mainstream and after the deafening silence surrounding it for so long, that change is very welcome. The recent influx of information and misinformation can however be overwhelming and confusing and there is no 'one size fits all' solution.

<https://thebms.org.uk/publications/world-menopause-day-2022/> and information on previous years World Menopause Day can be found at <https://www.imsociety.org/education/world-menopause-day/>

## DO YOU HAVE A **MENOPAUSE POLICY**?




(This can be stand alone or part of an existing health policy)

**If you are considering developing one, or would like to review arrangements already in place, it may be worthwhile checking the considerations given to the aspects covered within this Signpost Guide or referring to the information resources, tools, and links.**

The aim of this Guide is to give you a high-level signpost to some of the information sources and assist you with review and development of a policy to support your employees who are experiencing menopause.

**You should develop your policy in a systematic way, ensuring high level leadership to implement recommended standards, to raise awareness, reduce stigma and provide support and information to all within your organisation. Health, safety, and well-being considerations are fundamental to the core of a Menopause Policy, and application of the policy should be based on these factors.**

### DID YOU KNOW?

-  **3/5 working \*women between the ages of 45 and 55 who are experiencing menopause symptoms say it has a negative impact on them at work.**
-  **1/4 report they do not receive enough support from their manager.**
-  **Nearly 1 million \*women have been forced out of the labour market due to menopausal symptoms.**

**Reference:** CIPD SURVEY INFOGRAPHIC <https://www.cipd.co.uk/about/media/press/menopause-at-work>

**The National Institute of Clinical Excellence [NICE, 2019] defines:**

**Menopause\*** as 'A biological stage in a woman's life when menstruation stops permanently due to the loss of ovarian follicular activity. It occurs with the final menstrual period and is usually diagnosed clinically after 12 months of not having'... (a period).

\* NHS recognise that this affects cisgender women, transgender, non-binary and intersex individuals.

**Perimenopause\***, also called the 'menopausal transition' or 'climacteric', is the period before the menopause when the endocrinological, biological, and clinical features of approaching menopause start. It is characterised by irregular cycles of ovulation and menstruation and ends 12 months after the last menstrual period.

**Post menopause\*** is the time after a woman has not had a menstrual period for 12 consecutive months.

In the UK, the mean age of natural menopause is 51 years, although this can vary between different ethnic groups



## COST TO THE EMPLOYER / IMPACT ON THE INDIVIDUAL

**Menopause** is often referred to as a certain stage of life in cisgender women; some transgender; non-binary and intersex people. The NHS states that menopause usually occurs at between 45 to 55 years of age but can also be earlier or later and symptoms last about four years or longer. This is a recognised health condition, which quite often is glossed over in the sense that it's an almost 'taboo' subject to discuss not only within the workplace, but also in society. The Chartered Institute for Professional Development (CIPD) states that "*symptoms can include sleeplessness, memory loss, headaches, depression and anxiety*". They also report that "*around half find it difficult to cope with work during the menopause*". It is therefore important that employers recognise its importance and handle this sensitively. ACAS gives good reasons for this since impacts on the workplace can be a loss of confidence in skills and abilities; absenteeism as individuals feel the need to take time off work; and an increase in mental health conditions such as stress, anxiety and depression; and also, in some cases even job resignation.

Referring to the Local Government Association's, [Menopause Fact file](#) it is reported that menopausal women are the fastest growing demographic in the workforce and that according to the Faculty of Medicine almost **8 out of 10 of menopausal women are in work**. In CIPD's 'Let's Talk Menopause' leaflet, **6 out of 10 menopausal women report negative impacts on their work and 1 in 4 report they do not receive enough support from their manager** (see our High-Level Signposted References in Appendix). Menopause can cause memory loss, difficulty in sleeping, anxiety, headaches and depression.

CIPD note that recent research by BUPA estimates **nearly 1 million women have been forced out of the labour market due to menopausal symptoms**, or perhaps more accurately due to the lack of workplace support for them as they try to manage their symptoms and cope with a natural but often difficult process, in addition to juggling carer responsibilities. This is a massive loss of organisational memory, as many are role models, coaches, mentors, valuable assets, and expensive to replace.

### References:

[CIPD People Manager Guidance](#)

[CIPD menopause infographic](#)

[Majority of working women experiencing the menopause say it has a negative impact on them at work | CIPD](#)

<https://committees.parliament.uk/writtenevidence/39244/html/>

**(See our High-Level Signposted References in Appendix).**



**IMPACT  
ON THE  
INDIVIDUAL  
AT WORK:**

- **65% said they were less able to concentrate.**
- **58% said they experienced more stress.**
- **52% said they felt less patient with clients and colleagues.**

**IMPACT ON THE  
ORGANISATION:**

- **As many as 30% said they had taken sick leave because of their symptoms.**
- **Only 25% felt able to tell their manager the real reason for their absence, with privacy the number one consideration for \*women choosing not to disclose embarrassment and an unsupportive manager also preventing them from saying why they had to take time off.**
- **48% of \*women say they feel better supported by their colleagues when going through the menopause than by their managers, highlighting the need for better support.**

\* NHS recognise that this affects cisgender women, some transgender, non- binary and intersex individuals.



## CURRENT LEGAL DUTIES

**Current Legal duties** relevant to Menopause that protect employees and others are placed on employers under the Health and Safety at Work etc. Act 1974, which includes a 'duty of care'. The Management of Health and Safety at Work Regulations 1999, requires employers to make a suitable and sufficient assessment of the workplace risks to the health and safety of their employees and the Workplace (Health, Safety and Welfare) Regulations 1992 stipulates general requirements on accommodation standards for most workplaces including requirements on temperature, ventilation, sanitary conveniences, washing facilities, and supply of water. This also requires an identification and assessment of those workers who might be particularly at risk. Further duties are required by the Equality Act 2010, Human Rights Act 1998, and Data Protection Act 1998 (for handling and process of personal information). Also of note, for transgender people who have a Gender Reassignment Certificate, it is illegal to disclose their trans status without consent.

The Advisory, Conciliation and Arbitration Service (ACAS; see 'signposting' section for web link) gives advice in terms of menopause and the law. Whilst **menopause** is not specifically mentioned under these legislative Acts, ACAS states that *'if an employee or worker is put at a disadvantage and treated less favourably because of their menopause symptoms, this could be discrimination under the Equality Act 2010 if related to a protected characteristic, for example: age, disability, gender reassignment or sex'*.

In addition to current legal duties, we are seeing increased case law examples, which will likely bring more legal redress for those suffering from menopause symptoms at work. Of recent note, are an increased number of Employment Tribunal Cases in the UK (as reported by Bloomberg/data analysis by Menopause Experts Group) and that those involving menopause had increased by 44% in 2021, with 23 cases referencing it compared to 16 the previous year. Also the word menopause was mentioned in other cases, not solely involving it, which has also increased by 75%.

**Example Case Law:** (Davies v Scottish Courts and Tribunals Service (2018)) – that has found that some \*women experiencing the menopause may well be disabled persons for the purposes of the Equality Act. In such cases the employer has a duty to provide reasonable adjustments. However, this is not widely known by employers or workers. Many \*women with menopausal symptoms which would amount to an impairment with substantial and long-term impact on their ability to carry out normal day to day activities (the definition of a disabled person under the Act) struggle to get the employer to accept the need for adjustments.

\* NHS recognise that this affects cisgender women, some transgender, non-binary and intersex individuals.

### Reference:

<https://www.tuc.org.uk/research-analysis/reports/menopause-and-workplace>

A call for change has also been made with the publication of the **UK Parliament, House of Commons Survey – Menopause in the Workplace (Feb 2022)** and its First and First and Concluding Reports (July 2022 and October 2022 respectively), and its associated recommendations that include (amongst others) **making menopause a protected characteristic under the Equality Act 2010**.

Please see [page 5](#) under 'aspects for consideration in your policy' for a summary of these.



## DEVELOPING YOUR POLICY

A positive leadership culture and managing all aspects of its activities to provide a high level of protection is an integral part of our commitment to the chemical industry's Responsible Care® principles. The emphasis of your Policy needs to be on helping and supporting individuals through health leadership from the top down, allowing confidential self-referral as needed. It should be designed to ensure problems are dealt with effectively, consistently, and early on in the process. One of the main difficulties highlighted on many websites and in guidance is the need for organisations to overcome the 'taboo', in a similar way that many are now addressing the challenge of mental health and strive to create an environment where employees can talk with managers and Human Resources.

**Your Menopause Policy content should consider relevant legislation i.e. the Equality Act 2010, and we would encourage you to carry out a review of available guidance. In terms of its framing, we suggest that you:**

- **Do what's right for your business** – whilst each business environment is different it is still important to implement a policy or plan (this can be something specific or a more integrated approach) and this should be adequate and appropriate for your circumstances.
- Take time in planning and implementing the policy **making sure to involve employees and trade union safety representatives.**
- **Managers should receive training on working with the policy** – to include practical help on how to manage having sensitive conversations with staff, what to say or do when someone discloses a menopause issue.
- Make sure you include an **education programme for both line managers and individuals** that covers awareness, this **will help foster an open culture, which is stigma free and signpost information and support.**
- There can be some bias and lack of understanding surrounding menopause, particularly those who may be affected. Promote a culture and environment that values diversity, and be aware that cisgender women, some transgender, non-binary and intersex individuals are also included. This can affect people across a large age range.

Remember raising awareness and providing education for health topics is never a substitute for appropriate competent medical professionals. You should ensure clear role boundaries are in place with respect to any designated individuals, so that they will deal with issues sensitively and confidentially, and they refer to the appropriate person or medical professional. Useful checklists, tools,

links, resources, and items to consider when drawing up a policy on menopause are provided in our [Signpost links](#) in Appendix.

### **How do I go about developing a policy or checking on what my company/organisation does?**

The visual schematic provided in these high-level guidelines, which uses the Health and Safety Executive's (HSE) 'Plan Do Check Act' model in HSG 65 as its basis, provides tips for consideration when developing/improving your Policy. We include this as a checklist in the appendix for you to use with your teams. High level signposting to key information sources is also provided. Remember that these suggestions are pointers for you to evaluate and do not constitute a definitive list, you should include anything additional as appropriate from your assessments or organisational needs.

### **ASPECTS for consideration in your policy:**

There is no set prescriptive method for companies to follow as each company will address how they approach Menopause Support according to their business ethos. Tackling menopause within organisations as part of health and well-being leadership initiatives is challenging, yet CIA believes this challenge can be managed. High-level aspects to consider in a policy are elaborated below.

High-level aspects to consider in a policy are elaborated replace this with 'in the document from the **UK Parliament, House of Commons Survey – Menopause in the Workplace (Feb 2022)** and its **First Report (July 2022) and Concluding Report (October 2022)** and consideration should be given of these future changes in addition to the other aspects.

### **House of Commons Women and Equalities Committee Menopause and the workplace**

#### **Survey Results (Feb 2022) – What did people ask for during the survey?**

**Adjustments** – Listen to what the individual needs and adjust accordingly.

**Policy** – have a policy outlining what employers will do, and when women are struggling at work, where they can seek advice and support (both internally and externally).

**Awareness** – have a greater understanding of the menopause, and its impact, in the workplace. Managers need to receive training on this aspect.

**Cultural changes** – Support should be available without stigma, encourage open discussions; to know you will not be penalised for symptoms.

*continued over leaf*



## DEVELOPING YOUR POLICY (cont)

**Support network** – individuals need to feel supported in the workplace and know how to access that support. There should be a safe place for women to discuss or seek support or advice for what they are going through; if possible be able to speak to female colleagues; with managers and external professionals who understand menopause.

**Trust** – to manage work flexibly alongside menopause, without the fear of being disciplined or facing other negative consequences for being open about menopause or having to take time off.

**Ethnicity** – Evidence to the inquiry, and wider research, suggests there were different challenges for certain groups of women and people experiencing menopause, in particular, some ethnic minority groups, younger women and LGBT+ people. This diversity should be understood.

### All-Party Parliamentary Group on Menopause Inquiry to assess the impacts of menopause and the case for policy reform – Concluding report (October 2022)

The report gives 13 recommendations for Government, NHS and other bodies, including to:

- scrap prescription costs for HRT in England, as is the case in all the devolved nations;
- implement a health check for all women at 45, to help diagnose menopause at an earlier stage.
- fund new research into the real benefits of HRT and the link between menopause and serious health conditions;
- co-ordinate an employer-led campaign and improve guidance to drive up support for menopause in the workplace;
- create a National Formulary for HRT and include menopause in the GP Quality and Outcomes Framework to improve menopause diagnosis and treatment;
- provide updated menopause training for GPs and other healthcare professionals who did not receive it in the past, in addition to the forthcoming medical assessment for incoming doctors.

### House of Commons Women and Equalities Committee ‘Menopause and the workplace’

#### First Report of Session 2022–23 (July 2022) – Recommendations to Government

##### A number of recommendations were made which included:

- a public health campaign around menopause; its symptoms, impact and how to seek treatment and other help, including support at work;
- a call for mandatory training of GP’s and Menopause Specialists in each area;
- improvements to prescribing and availability of HRT treatment, and
- to appointment of a Menopause Ambassador to work with stakeholders from business (including small to medium enterprises), unions, and advisory groups to encourage and disseminate awareness, good practice and guidance to employers.

However, specific recommendations affecting employment policies and the workplace include:

- in consultation with the Menopause Ambassador, produce model menopause policies to assist employers;
- which shall cover, as a minimum: how to request reasonable adjustments and other support; advice on flexible working; sick leave for menopause symptoms; and provisions for education, training and building a supportive culture;
- the development and pilot of a specific ‘menopause leave’ policy and provide an evaluation of the scheme and proposals for further roll out;
- bring forward legislation to make the right to request flexible working a day-one right for all employees (with guidance for employers encouraging them to grant any reasonable requests for flexible working);
- for the HSE and EHRC to publish guidance on the legal considerations when supporting employees experiencing menopause, and
- to immediately commence section 14 of the Equality Act 2010 and launch a consultation on how to amend the Equality Act to introduce a new protected characteristic of menopause, including a duty to provide reasonable adjustments for menopausal employees.





## FRAMING YOUR POLICY

### Definitions – What is Menopause?

The NHS defines Menopause when ‘your periods stop due to lower hormone levels. This usually happens between the ages of 45 and 55. It can sometimes happen earlier naturally. Or for reasons such as surgery to remove the ovaries (oophorectomy) or the uterus (hysterectomy), cancer treatments like chemotherapy, or a genetic reason. Sometimes the reason is unknown’.

ACAS remind us that: **ACAS Menopause** ‘The menopause is a natural stage of life which affects most \*women and other people who have a menstrual cycle, which can include trans people – ‘trans’ is an umbrella term used to describe people whose gender is not the same as the sex they were assigned at birth (known as cisgender), and people with ‘variations of sex development’ (VSD) – some people might prefer to identify as intersex or use the term ‘differences in sex development’ (DSD). It’s important for employers to be aware of all the people who might go through the menopause and menopause symptoms and to support them all equally. For many people symptoms last about 4 years, but in some cases, symptoms can last a lot longer’.

The NHS follow on that there are different stages to Menopause, and a range of symptoms that can be thought of in the following terms:

- Symptoms usually start months or years before your periods stop. This time is called the **Perimenopause**.
- You reach **Menopause** when you have not had a period for 12 months.
- **Post Menopause** is the time when a woman has not had a period for 12 months.

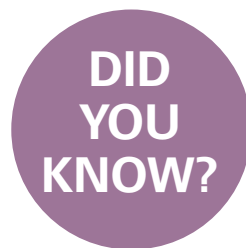
**Menopause** and **Perimenopause** can cause symptoms like anxiety, mood swings, brain fog, hot flushes and irregular periods. These symptoms can start years before your periods stop and carry on afterwards, and can have a big impact on your life, including relationships and work. There are things you can do to help with symptoms, with medicines that can replace the missing hormones and help relieve your symptoms (NHS).

**Mental Health – symptoms of Menopause and Perimenopause** found on NHS website commonly include:

- changes to your mood, like low mood, anxiety, mood swings and low self-esteem
- problems with memory or concentration (brain fog)

**Physical – symptoms of Menopause and Perimenopause** found on NHS website commonly include:

- hot flushes, when you have sudden feelings of hot or cold in your face, neck and chest which can make you dizzy
- difficulty sleeping, which may be a result of night sweats and make you feel tired and irritable during the day
- palpitations, when your heartbeats suddenly become more noticeable
- headaches and migraines that are worse than usual
- muscle aches and joint pains
- changed body shape and weight gain
- skin changes including dry and itchy skin
- reduced sex drive, vaginal dryness and pain, itching or discomfort during sex
- recurrent urinary tract infections (UTIs).



There may be some bias around those who suffer from menopause and lack of understanding related to symptoms.

- Cisgender women; some transgender, non binary and intersex individuals are all affected by menopause, within a range of ages.
  - There can be racial and cultural differences that may affect experiencing menopause differently e.g. black women experience menopause earlier, longer with more intense hot flushes; and minority groups may be less likely to seek support.
- you can’t leave your symptoms at home, as they will continue to affect you at work .
- symptoms are not all about ‘hot flushes’ ( also known as ‘hot flashes’).

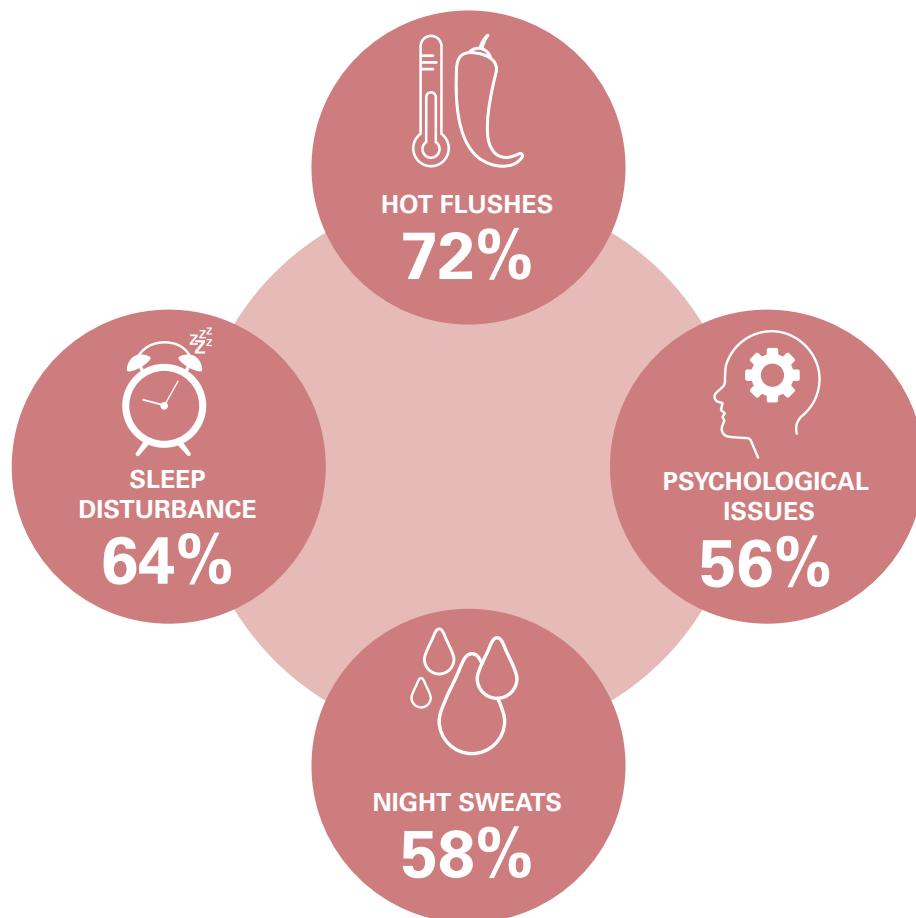
Developing awareness and understanding within your workforce will need to address these biases.

## FRAMING YOUR POLICY (CONT)

The Policy must be driven by health, safety and well-being and a company's duty of care to protect others. It should set out what it is trying to achieve, and outline how it will be part of (and inform) the wider well-being/menopause strategy. The emphasis needs to be on helping and supporting individuals through health leadership, fostering an open culture that is stigma free, raising awareness, giving people strategies and tools to cope, and communicating what resources are available to help (allowing self-referral as needed). Your policy should consider legislation and a review of available guidance and tools together with proactively explaining the link to workplace support, signposting for informal aspects,

and providing details of support organisations e.g. formal networks or local 'menopause cafes'. Most importantly **do what's right for your business and take time in planning and implementing the policy** making sure to involve employees and trade union safety representatives. As an employer you are ideally placed in the workplace to play a vital role by offering support, tools, information, and resources to help individuals. Confidentiality is important, so it is imperative to keep in mind that you may be asking for (and holding on record) sensitive information from individuals.

- The most common symptoms reported by \*women in the CIPD's (2019) survey were: **hot flushes (72%), sleep disturbances (64%) and night sweats (58%). Psychological issues (56%),** such as mood swings, anxiety and memory loss, were also widely reported.



**Reference:** CIPD SURVEY INFOGRAPHIC <https://www.cipd.co.uk/about/media/press/menopause-at-work>

\* NHS recognise that this affects cisgender women, transgender, non-binary and intersex individuals.



## BUT WHAT ABOUT THE MALE MENOPAUSE?

**Andropause** (male-menopause) is according to NHS England a misleading term often cited by the media to explain male “*depression, loss of sex drive, erectile dysfunction, and other physical and emotional symptoms (often similar to the female menopause), when they reach their late 40s to early 50s*”. Stated in the NHS ‘conditions’ webpages can be as a result of lifestyle factors, psychological problems, and physical causes (see our High-Level Signposted References). In men, although testosterone levels fall with age, **the decline is steady at less than 2% a year** starting from around the age of 30 to 40. A testosterone deficiency that develops later in life, also known as late-onset hypogonadism, can sometimes be responsible for these symptoms, but in many cases the symptoms are nothing to do with hormones.

NHS does not consider these symptoms to be the same as the female menopause for two reasons that the male hormone testosterone does not suddenly decrease in middle age and in many cases the symptoms are not linked to hormones.

**Advice is to consult your GP if you experience any symptoms that are of concern to you.**

## COMPARISON OF SYMPTOMS

MENOPAUSE	AND	‘ANDROPAUSE?’
FORGETFULNESS →	← MOOD SWINGS →	← DECREASED MOTIVATION
HOT FLUSHES →	← DEPRESSION →	← LACK OF FOCUS
NAUSEA →	← HEADACHES →	← LOW ENERGY
HEART PALPITATIONS →	← NIGHT SWEATS →	← MUSCLE LOSS
IRREGULAR PERIODS →	← INSOMNIA →	← MILD TO MODERATE ERECTILE DYSFUNCTION
VAGINAL DRYNESS →	← WEIGHT GAIN →	
JOINT ACHES AND PAIN →	← BONE LOSS →	



## OTHER ISSUES TO CONSIDER WHEN DEVELOPING YOUR POLICY

### ***Raising awareness***

This is of vital importance. As an example, many companies put together training and awareness sessions to educate their organisation, and in doing so may use competent persons from the medical, occupational health, SHE, and HR functions. Our member companies have said how awareness was further raised by employees who were willing to share their own personal experiences, which was positively received by all. It's also important that employers stress among staff that they will handle menopause in the workplace sensitively, and with dignity and respect.

Developing an understanding that everyone's menopause journey is different; and there are racial and cultural aspects that affect the severity of symptoms and the ability to speak out and seek support. e.g.. black women may report symptoms earlier, that last longer; and an LGBT network ally may support a better culture of openness.

### ***All employees***

It is important that all employees understand that they should seek help (line manager / senior manager / HR) to discuss any issues they are having or needing support to manage their symptoms. In conjunction with appropriate persons, they should consider any changes in working hours, pattern, additional flexibility with home working, or travel that may help them. All employees should also act responsibly, in a respectful manner, to others in the workplace who may be experiencing menopause symptoms and need additional flexibility.

### ***Leadership, Supervisors', and Line Managers' role***

Senior Managers driving health leadership, setting objectives, expectations, and monitoring performance play an important role in fostering a positive culture within the organisation. All Supervisors and Line Managers should be supported and trained to manage their people effectively, developing an open culture that encourages communication on this difficult topic. All leaders are best placed to know their people well, pick up the signs that something is wrong, assess the organisational culture or issues that are affecting them and build confidence and capability in their teams. Remember to define roles clearly and set boundaries, so that individuals are fully

aware of when to refer to more specialist support. Senior managers should also strive to ensure the organisation is not contributing to poor health (through stress, lack of support or reasonable adjustments) by its work practices. Ensure leaders are supported with practical training for confidently having the right conversations with individuals and are familiar with the practices and processes within the policy to support their staff and refer to professional support when needed.

Leaders will need to be prepared to discuss issues members of staff bring to them; hold supportive conversations with respect and confidentiality; and understand that menopause symptoms may be long term with no defined end date. They need to be prepared for flexibility requests, allowing a quiet space for time and discussion. Ultimately they should promote a culture and environment that values diversity; showing dignity, respect, fairness and equality to individuals affected.

### ***Menopause or Well-being Champions, Advisors etc***

ACAS suggest that having a menopause or wellbeing champion at work could help people affected by the menopause. The champion could be a point of contact if staff need advice, or someone to initially talk to if they are not comfortable talking to their managers. With support from the champion, employers, HR and managers could:

- run workshops in the organisation to raise awareness among staff
- let all staff know, for example through posters or newsletters, that the employer will try to support those having difficulties because of symptoms
- check that individual and/or generic health and safety risk assessments cover the different aspects and stages of the menopause, as appropriate
- set up a support network for staff affected by the menopause
- tell staff where they can find more information.

As with the above notes for other staff, remember to define roles clearly and set boundaries, so that individuals are fully aware of when to refer to more specialist support.



### **Occupational Health's (OH's) role**

OH's role is advising the managers on the fitness of an employee to work as well as providing general advice to the company. There are important protocols for OH to adhere to when disclosing medical information to an employer including Access to Medical Reports Act (1988). Typically, this allows the employee to withhold or give consent for the employer to receive information from OH. Medical information is Sensitive Data under the Data Protection Act (2018) so there are important principles around confidentiality and accuracy to be adhered to. Occupational Health may make recommendations to the company around proposed working adjustments and restrictions for due consideration by the company. Medical physicians are governed by the General Medical Council (GMC); OH Nurses are governed by Faculty of Occupational Medicine (FOM). In general, all OH services should be SEQOHS registered (Safe, Effective, Quality, Occupational Health Service). An organisation may need to contract in aspects of their competent OH provision, this can also often include other resources such as physiotherapy, counselling and an Employee Assistance Programme.

### **Human Resources (HR) role**

HR's role is to ensure the company menopause policy and procedures are understood by all employees and to advise managers and employees on appropriate support when issues arise. HR are often a contact point for employees who are suffering health issues and by managers/colleagues concerned about the health of other individuals. Such cases need sensitive handling. Increasingly health and wellbeing are key enablers for and can be barriers to effective employee engagement. Both at the collective and individual level, the health and wellbeing of workers is now high on the HR agenda. Therefore, workplace health and wellbeing initiatives, including support provisions where necessary, have become increasingly important elements of employment policy.

### **Communication between OH and HR**

Responsibilities for the communication of sensitive information by OH and HR should be defined. This should include aspects appropriate to disclose, when, and to whom etc.

### **Health conditions and medication**

As with physical health conditions, organisations should be ready to make necessary adjustments to help people with menopause health issues and have effective policies and procedures in place that promote and support the attainment and maintenance of positive work e.g. flexible working, work adjustments, work life balance. COVID-19 is not likely to have a direct increased risk for those experiencing menopause, however due to other co-morbidities such as the increased risk of heart disease and type 2 disabilities due to hormonal changes, any increased vulnerability may need to be assessed on an individual basis.

Established support mechanisms and procedures for managing return to work should be used, with well supported management procedures for recurring medical conditions where some absence from work may be expected.

### **Regular review ('reality check')**

The policy should be regularly reviewed to remain current and be in line with legal requirements, advice and relevant best practice. It is also useful here to continue dialogue with any working groups that have been set up to implement the menopause policy, such as employee and union representatives, and obtain feedback from individuals as to their experience of the policy process. To see a full picture, it is not sufficient to only review the paperwork. If a regular review is carried out, the menopause policy and process can be updated and enhanced to be maintained as fit for purpose. Make sure the process doesn't end here, you should start again with a revised plan as part of your improvement programme.

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## **APPENDIX:**

EXAMPLE POLICY TEMPLATES &  
RELEVANT GOOD PRACTICE

PDCA CHECKLIST TOOL

HIGH LEVEL SIGNPOSTING

OTHER TOOLS & GUIDES

DEVELOPING AWARENESS

UNDERSTANDING AND

COMPETENCE;

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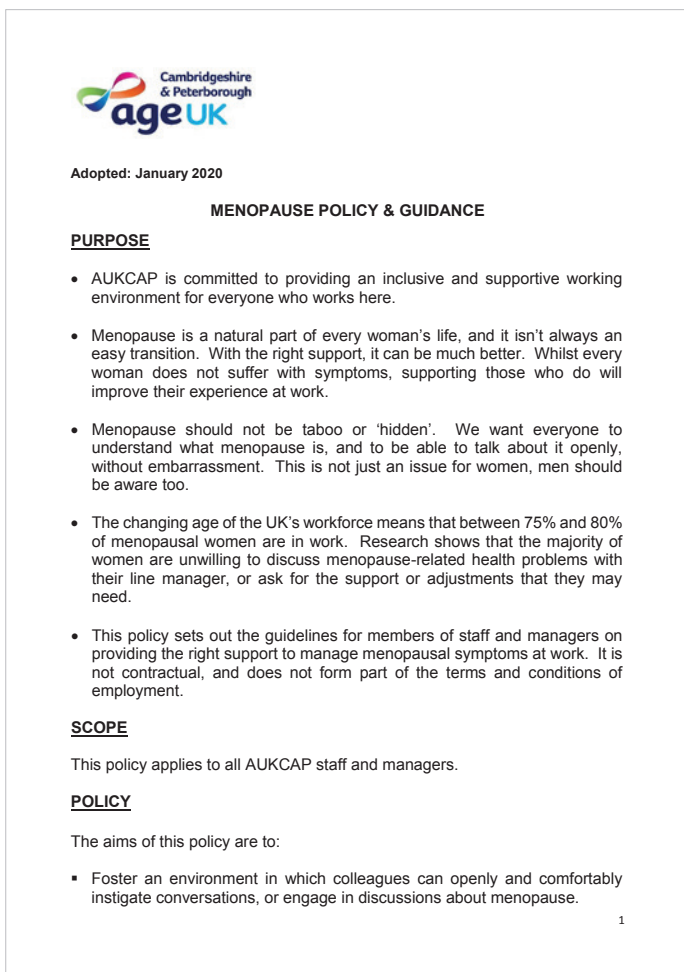
RESPONSIBLE CARE

# EXAMPLE MENOPAUSE POLICY TEMPLATE AND GOOD PRACTICE EXAMPLES

Various charities have case studies available for review, some of these can be found in our high-level signposted references.

## Policy Example:

**Age UK Menopause Policy** <https://www.ageuk.org.uk/bp-assets/globalassets/cambridgeshire--peterborough-/original-blocks/about-us/policies--procedures-090920/staff-specific/menopause-policy.pdf>, **ACAS Developing a Menopause Policy** <https://www.acas.org.uk/menopause-at-work/supporting-staff-through-the-menopause> and example videos: **British Menopause Society** <https://thebms.org.uk/publications/bms-tv/>



Example of first page from ageUK's Menopause Policy

## Good Practice Examples:

**UK Parliament House of Commons Survey – Menopause in the Workplace (First Report July 2022)**

**Sign the Menopause Workplace Pledge** – Wellbeing of Women website: Sign the Menopause Workplace Pledge – Wellbeing of Women <https://www.wellbeingofwomen.org.uk/campaigns/menopausepledge/sign/>

**Menopause Friendly Accreditation** – Henpicked: Menopause in the Workplace have worked with an independent panel of experts to launch a Menopause Friendly Accreditation, which recognises employers who have prioritised menopause awareness, education, and support. Over 100 organisations have signed up to work towards becoming 'Menopause Friendly' employers, <https://menopausefriendly.co.uk/>

## Case Studies:

**West Midlands Police** featured in the CIPD's 2019 guidance 'The menopause at work: a guide for people professionals'. Noting:

- a) Clear leadership;
- b) Setting up support groups and having menopause champions. There would be regular meetings to plan events and share best practice;
- c) Surveying the workforce to get a better picture of employee needs;
- d) Better communication between those dealing with HR, equality and diversity, health and wellbeing;
- e) Practical tools e.g. a template GP letter;
- f) Awareness raising, for example through workshops, the website, conferences and media;
- g) Supervisor training;
- h) Improved systems for recording menopause-specific absenteeism;
- i) Encouraging use of "reasonable adjustments passports" – this is a record of adjustments agreed between a worker who has a disability or health condition (including menopause) and their manager. The passport acts as a 'live' document about agreed changes in the workplace;
- j) Building occupational health expertise, and
- k) In-house doctor

# PLAN | DO | CHECK | ACT CYCLE – CHECKLIST TOOL

## PLAN (Policy, plan)

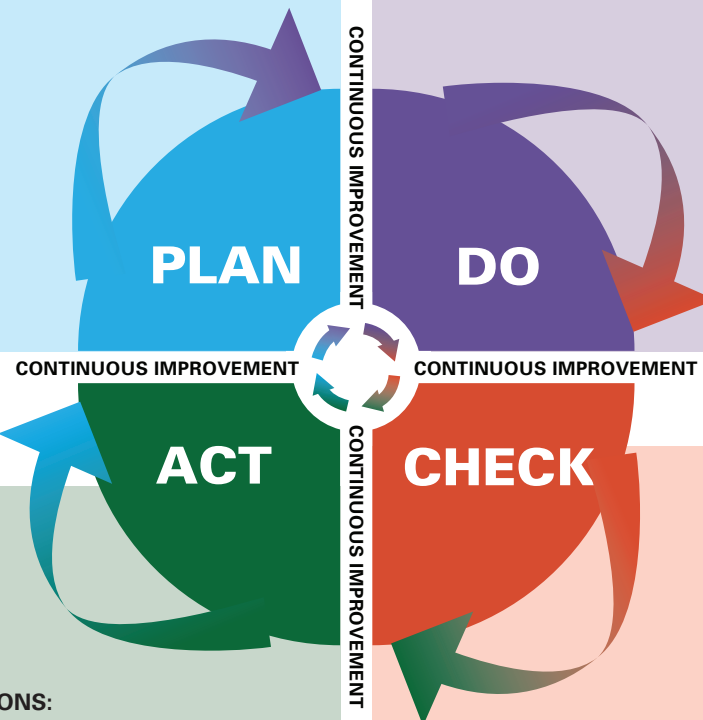
- What should your policy cover? What is its objective? Who should write it? Which groups should it impact?
- What legal requirements, codes of practice and guidelines need to be considered?
- Consider other related policies that may need to be updated or changed or incorporated to reflect the aims of this policy e.g. mental health and well-being; flexible working; attendance management.
- Who are you going to involve and consult with regarding the policy? Consider consulting with trade union reps and employees throughout the process and setting up a working group (union reps, senior management, OH, HR and employee reps, Menopause Champion) to plan and implement the policy.
- Develop a plan of implementation with a core framework that looks at how you coordinate, deliver and measure performance against your identified need. What interventions should you have in place. Do you need a budget?
- Have you considered the challenges and impact, your policy should also consider this plus any KPI's needed to be regularly monitored for measuring performance.
- Put together a project team and look at what resources you need to support the programme.
- Conduct an analysis or survey for your organisation to create a 'snapshot' to help you build your plan.
- Make a commitment and get involved as part of a demonstration to all that management and leadership support the change e.g. Menopause Awareness Day 18 October; Sign the Menopause Workplace Pledge – Wellbeing of Women.

### KEY ACTIONS:

- Ensure leadership responsibility for developing a plan and ensuring a systematic process cycle is followed and integrated into the site's management review procedures.
- Continue to encourage and promote continuous improvement.
- Consider gathering and internal reporting of health performance metrics, that may include leading and lagging indicators.

### KEY ACTIONS:

- Take ownership and be accountable for the health leadership agenda with respect to Menopause
- Ensure a site management team member participates in the assessment process.
- Engage with entire workforce, including union safety representatives during assessment.



## ACT (Lessons learned, review performance)

- Review learnings from the CHECK process on a regular basis and after any organisational change, a change in statistics, new survey results, new standards, or new best practices have been introduced.
- Discuss with teams any potential changes or enhancements to the process and conduct a further reality check before implementing.
- Update policies and procedures and start the process cycle again, e.g. consider policies on flexible working, or attendance management procedures so that they consider phased return or flexible working after an absence.
- Conduct an annual review of any signposts to national/local services or relevant information you have provided. It is important that managers and staff can rely on it working and being up to date
- Has your organisation restarted the process cycle again after updating its policies, procedures, and guidance?

### KEY ACTIONS:

- Ensure any reports on implementation and findings of the rollout receive adequate discussion on site leadership agenda.
- Commit to continuous improvement by agreeing on concrete actions.
- Be open with your workforce on improvement plans and consider inviting their comments throughout the process
- Regularly review the policy and any findings from surveys, or success of measures to implement the policy

### KEY ACTIONS:

- Ensure indicators to monitor health (safety and mental health) performance are in place.
- Be open and transparent on the findings with your workforce.
- Make sure process does not end here.



## DO (Risk profile, organise, implement plan)

- Undertake a general risk assessment with respect to your organisation; identify the hazards and individual job roles to determine the most appropriate policy and if any other individual risk assessments are needed.
- Promote effective people management, with good working conditions, opportunities for development and a healthy work life balance.
- Continue communication; encourage staff members to join and identify external providers to assist you in the working group, consulting all stakeholders during the process including as appropriate, employees and their representatives to create a positive culture that promotes behaviours that supports and values all employees. This may also include groups such as contractors and visitors.
- Conduct training and awareness sessions that detail the implementation of the policy, responsibilities, and statement of intent for the policy (e.g. for health, safety, and wellbeing considerations). You may wish to produce staff awareness information to circulate.
- Think about regular health promotion, access to information and support of key aspects of the policy.
- Use appropriate professional services and qualified staff (especially when considering available support resources). Think about in house resources and identify any external providers to assist you e.g. HR; Occupational Health; Employee Assistance Programme & Medical provisions.
- Know your people and foster a team environment that encourages supporting people as individuals. Think about workplace factors that would assist in promoting a better working environment that may help e.g. such as flexible working, temperature control.
- Make sure that a procedure is drawn up for handling management of different scenarios (employee discloses problem, employee unable to attend work).

### Implement the plan

- Decide on preventative & protective measures needed to implement the policy, and document these in specific site procedures and protocols that support the policy.
- Implement any improvements you have decided on into your annual site plan
- Make sure that the policy signposts support available e.g. Menopause toolkits; menopause specialists; the company EAP provider ; local menopause networks; relevant Mental Health First Aiders or site Menopause Advisors/Champions
- Train and instruct all persons involved to ensure competence and provision of supervision that arrangements are in place as intended and followed.
- Launch the menopause policy, or programme in a way that creates interest and engagement.
- Conduct interactive sessions for health promotion and link with national awareness days
- Continue communicating throughout the process.

## CHECK (Measuring performance)

- Review the information received from the policy's implementation and its impact. Conduct a reality check. What feedback are you getting from implementation of the policy? It is important not just to look at the paperwork but to consider feedback from all individuals concerned with the process and their experiences. This may include dealing sensitively with output from any confidential discussions with employees on their experience of the operation of the policy. e.g. how menopause may be actually impacting the organisation with respect to absenteeism figures, or any presenteeism issues. Check that all individuals are aware of the policy and know their responsibilities, and how to get support if needed.
- Make sure you have systems, information and support in place that are available e.g. often it is the most affected individuals who don't want to speak out, so consider those who wish to remain anonymous.
- Are you getting any results, experiences or scenarios that need to be further enhanced and investigated? Look at KPIs for health and those that specifically include menopause & wellbeing; and those that measure the impact of the policy implementation e.g.. sickness reporting and areas of focus. Ensure KPIs are communicated, and an open culture is developed.
- Continue communication with the working group, consulting with all stakeholders including as appropriate employees, their representatives, and any other persons you have identified by your assessment.
- Ask yourself if anything has changed with respect to good practices, legal requirements or guidelines and knowledge that need to be acted on and incorporated, e.g. make sure signposting to local or national services is up to date annually, as it is important managers and staff can rely on it.
- Use employee surveys to track progress with initiatives and improvements; identify statistics that are relevant to your organisation.
- Look at how your programme is most effectively communicated and changed to suit your organisations dynamics.
- Although culture is a factor, know your employees. Have arrangements in place for support, understanding and flexibility. Review survey results and conduct additional surveys, feeding back to employees on a regular basis progress against goals and actions.
- Regularly evaluate your approach and share good practices with your peers in other organisations

## HIGH-LEVEL SIGNPOSTED REFERENCES



- **National Institute of Clinical Excellence (NICE)** guideline covers the diagnosis and management of menopause <https://www.nice.org.uk/guidance/ng23>
- **NHS England Health A-Z** <https://www.nhs.uk/conditions/menopause/>; <https://www.nhs.uk/conditions/male-menopause/>
- **NHS Inform, Scotland's national health information service** The Women's Health Platform sets out information on women's health at key stages of life <https://www.nhsinform.scot/healthy-living/womens-health/after-years-around-50-years-and-over/menopause-and-post-menopause-health/menopause/>
- **Local Government Association's Menopause Factfile** Important things for employers to know about the menopause and how it affects women in the workplace <https://www.local.gov.uk/our-support/workforce-and-hr-support/wellbeing/menopause/menopause-factfile>
- **AXA Health** 'ultimate guide to the menopause' – symptoms, self-help and treatment <https://www.axahealth.co.uk/health-information/womens-health/menopause-symptoms-self-help-treatment/>
- **Advisory, Conciliation and Arbitration Service (ACAS)** Managing the effects of the menopause <https://www.acas.org.uk/menopause-at-work>; <https://www.acas.org.uk/menopause-at-work/menopause-and-the-law>
- **British Menopause Society (BMS)** is the specialist authority for menopause and post reproductive health in the UK which educates, informs and guides healthcare professionals, working in both primary and secondary care, on menopause and all aspects of post reproductive health <https://thebms.org.uk/>
- **Chartered Institute of Personnel Development (CIPD)** <https://www.cipd.co.uk/knowledge/culture/well-being/menopause> Menopause at Work – A guide for professional people [menopause-guide-web\\_tcm18-55426.pdf](https://www.cipd.co.uk/images/menopause-leaflet-aug22_tcm18-55426.pdf) (cipd.co.uk); Let's Talk Menopause Leaflet [https://www.cipd.co.uk/images/menopause-leaflet-aug22\\_tcm18-55569.pdf](https://www.cipd.co.uk/images/menopause-leaflet-aug22_tcm18-55569.pdf)
- **What are the challenges women face in the workplace? Menopause and the workplace – UK Parliament House of Lords**, published 1 November 2021 <https://lordslibrary.parliament.uk/menopause-and-the-workplace/>
- **Department of Health and Social Care** Report published summarising written responses to the women's health call for evidence from 436 organisations and experts in women's health <https://www.gov.uk/government/news/health-experts-share-priorities-for-womens-health-strategy>
- **House of Commons – Women and Equalities Committee** calls on the Government to act, amending the Equality Act to introduce menopause as a protected characteristic, and to include a duty for employers to provide reasonable adjustments for menopausal employees <https://committees.parliament.uk/work/1416/menopause-and-the-workplace/>
- **HSE HSG 65 – Managing for Health and Safety** [www.hse.gov.uk/pubns/books/hsg65.htm](http://www.hse.gov.uk/pubns/books/hsg65.htm)
- **Responsible Care Guiding Principles** [www.cia.org.uk/Responsible-care/Guiding-Principles](http://www.cia.org.uk/Responsible-care/Guiding-Principles) (CIA Members)
- **TUC Trade Union** <https://www.tuc.org.uk/research-analysis/reports/menopause-and-workplace> and additional information for transgender colleagues <https://nipsa.org.uk/publications/GMW-1.pdf>
- **The Menopause Charity** works to help everyone understand perimenopause and menopause so no one needlessly suffers <https://www.themenopausecharity.org/>
- **European Menopause and Andropause Society – World Menopause at Workday – 7 September 2022** – With an active worldwide membership and over 40 affiliated societies, EMAS is the key international society promoting health in women and men at midlife and beyond. EMAS encourages and stimulates excellence in health professionals and researchers through its publications, congresses, educational resources with accredited online courses and other society initiatives <https://emas-online.org/emas-and-menopause-in-the-workplace-2021/>
- **Wellbeing of Women Charity** – Menopause workplace pledge [Sign the Menopause Workplace Pledge – Wellbeing of Women](#)

## TOOLS & GUIDES AVAILABLE



- **CIPD Resources:**

**The menopause at work: top priorities for people professionals** – a five-page speed read to help you get started with some simple steps you can take to increase support for menopausal women in your workplace  
<https://www.cipd.co.uk/knowledge/culture/well-being/menopause/people-professionals-guidance>

**The menopause at work: a guide for people professionals** – a comprehensive guide to help HR and occupational health teams develop a supportive framework for employees experiencing the menopause  
<https://www.cipd.co.uk/knowledge/culture/well-being/menopause/people-manager-guidance>

**Manifesto for menopause at work** – a short leaflet outlining the CIPD's calls to Government to support the development of menopause-friendly workplaces  
[https://www.cipd.co.uk/Images/menopause-manifesto-roll-fold\\_tcm18-99975.pdf](https://www.cipd.co.uk/Images/menopause-manifesto-roll-fold_tcm18-99975.pdf)

**The menopause at work: guidance for line managers** [The menopause at work: guidance for line managers | CIPD guides](#)

- **Faculty of Occupational Medicine Guidance on Menopause and the workplace** – [Guidance-on-menopause-and-the-workplace-v6.pdf \(fom.ac.uk\)](#)
- **Royal College of Nursing** – Menopause in the workplace, presentations, guides and pocket cards <https://www.rcn.org.uk/clinical-topics/womens-health/menopause>
- **Public Health England** – **Health matters: Prevention – a life course** not specifically about the menopause but how to approach health promotion/prevention of ill health over a lifetime
- **British Menopause Society** Menopause in the Workplace <https://www.womens-health-concern.org/help-and-advice/menopause-in-the-workplace/> for health professionals <https://thebms.org.uk/wp-content/uploads/2022/06/Menopause-practice-standards-14.6.2022.pdf>
- **European Menopause and Andropause Society** – **Self-assessment tool** is a resource for employers and managers to move towards a more menopause-friendly workplace [Menopause in the Workplace Self-assessment Tool – European Menopause and Andropause Society \(emas-online.org\)](#)

## DEVELOPING AWARENESS, UNDERSTANDING AND COMPETENCE



### **Leaders, Managers and Supervisors – Training managers**

ACAS give guidance on training of managers, supervisors and others relating to supporting individuals through the Menopause (**ACAS training**). They note to assist with more confidence in having open conversations about the effects of the menopause at work, employers should train all managers, supervisors and team leaders to make sure they understand:

- Their role when it comes to offering support to staff.
- How to talk and listen sensitively, finding ways to give support and encouraging staff to raise any menopause concerns
- to have knowledge of the menopause, and how the different stages can affect staff
- know that the menopause can affect everyone differently and that the support needed can vary from person to person
- to understand any organisational policies related to the menopause and know what support and guidance the organisation can offer, with any workplace changes available to staff
- know how the menopause relates to the law and discrimination
- how to deal with menopause issues sensitively and fairly
- how gender identity links to the menopause and why it's important
- how to have conversations with all staff about menopause

Managers should also be encouraged to talk about the menopause with all staff alongside other equality and diversity and health and wellbeing topics to normalise the topic.

**Menopause Training for healthcare professionals** – Confidence in the Menopause, to expand knowledge of menopause and HRT. The Menopause Charity has worked with the Newson Health Menopause Society and FourteenFish to deliver the 'Confidence in the Menopause'. This online course is available for free to every healthcare professional in the world <https://www.themenopausecharity.org/training/>

NHS Training Package and some examples of organisations familiar to CIA member companies and those listed on the British Menopause Society Website:

**NHS England Menopause Network and Improvement** (chaired by Jacqui McBurnie, Senior Programme Manager, NHS England) – Why is the menopause relevant to our organisation and to me and my team? Awareness and training pack <https://www.england.nhs.uk/midlands/wp-content/uploads/sites/46/2022/01/NHSEI-Menopause-Awareness-Training-Pack-v4-.pdf>

**Women of a Certain Stage** – Normalising menopause at work to increase attraction and retention of top talent, support gender equality and improve attendance, performance and productivity. Coaching & Training is designed with the latest research, tools and techniques to successfully manage menopause <https://www.womenofacertainstage.com/>

**Healthy Whole Me** – Empowered Menopause is a clear, structured program that takes the confusion out of menopause care for you, where I will become your "thinking partner" on your journey helping you to solve your problems. Connecting a community of women who need help with managing their perimenopause and menopause with a curated network of menopause expert <https://www.healthywholeme.com/menopause/>

### **BMS Menopause Trainers**

All BMS menopause specialists are encouraged to apply to become **BMS Menopause Trainers**.

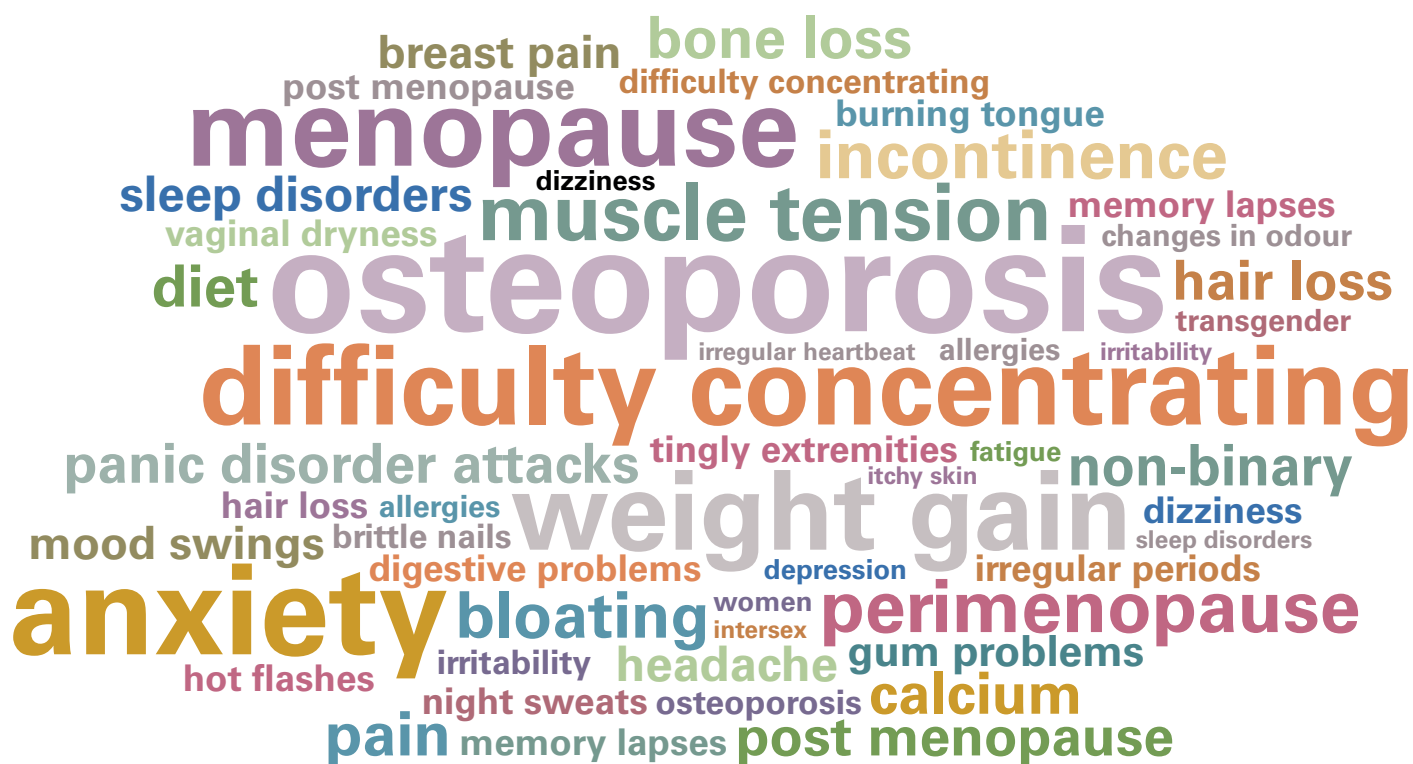
The BMS Principles and Practice of Menopause Care (PPMC) training programme has been developed to address the increased demand for menopause.

### **General Training – information, and leaflets: Webinars and podcasts**

- **The menopause explained – 'The Menopause Explained' Webinar – YouTube**
- **Menopause- all you need to know – Menopause – All you need to know – YouTube**
- **Understanding-Menopause-for-Partners-resource.pdf (menopausesupport.co.uk)**
- **The-Menopause-what-to-expect-when-you-are-expecting-the-menopause.pdf (bridgewater.nhs.uk)**
- **15-WHC-FACTSHEET-The-Menopause-DEC2020.pdf (womens-health-concern.org)**
- **Treatment for Symptoms of the Menopause patient information leaflet (rcog.org.uk)**

- **Menopause Matters, menopausal symptoms, remedies, advice**
- **menopausesupport.co.uk – Supporting You Through Change**
- **Menopause and Me | Official Website**
- **Balance – Free Balance App**
- **Make Menopause Matter Campaign**
- **The Fawcett Society – Menopause and the Workplace (<https://www.balance-menopause.com/>)**

**NOTE: CIA DOES NOT ENDORSE ANY PARTICULAR COURSE PROVIDER OR ORGANISATION.** There are many organisations that provide support, awareness and training appropriate to your needs.





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