TOWER HAMLETS

Menopause Policy

Model Policy for Schools

September 2025

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1. INTRODUCTION

1.1 The menopause can have a significant effect on a woman's personal and work life. Despite its potentially serious impact on everyday life, the menopause is still not spoken about as freely as some other physical or mental health issues and can be treated as an embarrassing, ridiculed or taboo subject. The school is committed to creating an environment in which the menopause becomes a normal part of the health and wellbeing conversation, and those going through the menopause are supported in coping with its effects and are able to continue to do their work successfully.

1.2 This Policy helps everyone, staff experiencing the menopause and their headteachers and managers, to understand what the menopause is, its symptoms and how it might affect women at work and how it can be supported. It encourages open, comfortable and supportive conversations to support staff experiencing difficulties with this transitional period, explores adjustments that may be helpful, and signposts services which can offer further support.

1.3 The menopause can affect transgender and non-binary people, who are also covered by this Policy.

1.4 This Policy should be read alongside our policies on Flexible Working, Equal Opportunities, Absence Management, Data Protection and advice on Wellbeing.

2. WHAT IS MENOPAUSE

2.1 The term Menopause refers to the time when menstruation has ceased for 12 consecutive months. The menopause is part of the natural ageing process for women, marked by a change in hormones which stop women's periods, or the menopause can occur as the result of medical treatment or disease (such as cancer or hysterectomy). Typically, during the time before the menopause (known as perimenopause), hormonal changes lead to menstrual irregularities. This can be years before menopause. This is followed by cessation of menstruation and continued hormonal change (post-menopause). These are associated with a decrease in the body's production of oestrogen.

2.2 This most often occurs between the ages of 45 and 55, however some women experience early menopause in their 30s or younger, possibly while still hoping to conceive children, and some may not experience it until later.

3. SYMPTOMS OF THE MENOPAUSE

3.1 Menopause/Perimenopause symptoms vary widely between women, on average women can experience symptoms for a period of four to eight years. In the post-menopause phase some women's problematic symptoms may continue for years. Symptoms of the menopause can be both physical and emotional and can affect many aspects of life, including working life. Every woman is different, and not all will be affected in the same way or to the same extent. Common physical and emotional symptoms are as follows:

Physical symptoms

- hot flushes including sweating (3 in 4 women with menopause symptoms experience this);
- difficulty sleeping and night sweats;
- feeling tired and lacking energy;
- feeling anxious and panic attacks;
- struggling to remember things, concentrate and focus;
- taking longer to recover from illness;
- aggravated pre-existing conditions;
- irregular periods which can become heavier and painful;
- aches and pains including muscle and joint stiffness
- urinary problems
- osteoporosis
- memory loss
- headaches including migraines
- weight gain
- noticeable heartbeats
- hair loss
- skin irritation
- dry eyes
- possible side effects from hormone replacement therapy

Emotional symptoms

- anxiety
- panic attacks
- depression
- low mood or mood swings
- poor concentration
- irritability
- decrease in confidence

4 WHY THE MENOPAUSE IS A WORK ISSUE

4.1 Menopause and its effects are recognised as a potential occupational health and work problem. Statistics show that around 8 in every 10 women will experience noticeable symptoms and of these 45% will find their symptoms hard to deal with. A sizeable proportion of staff can therefore be affected by the menopause.

4.2 A 2017 survey conducted by the British Menopause Society (BMS) found that almost half (45%) of women whose menopause had a strong impact on their lives, felt their menopause symptoms have had a negative impact on their work. However, many women feel uncomfortable talking about their menopause at work and are encouraged not to.

4.3 Employment tribunal decisions have recognised that significant and sustained menopause symptoms can be accepted as a disability. There are also risks of sex discrimination, and/or age discrimination arising if a member of staff is mismanaged due to their menopause or perimenopause symptoms. Consequently, it is advisable, as well as being good practice, for managers to be aware of and consider making changes for those experiencing perimenopausal or menopausal symptoms.

4.4 Risks associated with the menopause can be compounded by it being regarded as a 'taboo' subject in the workplace. More awareness, openness and some simple changes can make an individual's working life during this potentially challenging time of life much easier and greatly improve their ability to do their job.

4.5 In some cases, symptoms can even be exacerbated by the work environment, for example, if the office temperature is too high this can worsen or increase the frequency of hot flushes.

4.6 Here are a just some of the other ways menopause might affect the individual at work:

- insomnia could reduce the ability to concentrate and stay focused;
- decreased confidence, stress, anxiety, and depression could affect the ability to carrying out work responsibilities;
- brain fog causing memory block and reduced ability to process and deal with recalling of information may affect performance;
- changes in mood and irritability could impact on relationships with others at work;
- symptoms could lead to increased sickness absence;

- staff may leave their job, possibly more so if unsupported.

5. PRACTICAL STEPS HEADTEACHERS AND MANAGERS CAN TAKE

5.1 Staff may find disclosure embarrassing or fear that managers may be embarrassed, unsympathetic or dismissive of the subject, or ineffectual. Where menopause is not perceived to be an awkward, misunderstood, or a taboo topic, and is treated seriously and with empathy, respect and confidentiality, women are more likely to disclose a need for support. As part of the day-to-day management of staff, headteachers and managers should ensure they acknowledge any issues affecting staff, including health issues, and provide suitable support. The following strategies can assist staff experiencing the menopause (this is not an exhaustive list – see also section 6).

5.2 **Have regular, informal and private meetings** with staff to create the environment within which staff can discuss changes in health and wellbeing, including issues relating to the menopause. Menopause can be a very personal matter, so headteachers and managers are recommended to not ask a member of staff directly if they are going through the menopause even if they are displaying symptoms. Ask how they are in general terms and describe any concerns for their wellbeing without labelling this as the menopause. With this empathetic line of enquiry the member of staff may then decide to talk to about the menopause, or not. If disclosed, a headteacher or manager can cover the following in their private discussion (adjusted according to the personal circumstances of the individual):

- **acknowledge** this is a normal stage of life that can be challenging and that adjustments can be put into place and support is available;
- **signpost information** to include this Policy, information available on the Bridge about wellbeing, and other services including Counselling;
- **consider adjustments** where feasible by assessing the symptoms of the individual and the work environment. Adjustments can be considered for office based and non-office-based work. Consider such adjustments as temporary adjustments to breaks to deal with uncomfortable symptoms such as hot flushes; providing seating near opening windows; suggesting a desk fan; allowing a break for the person to go outside; temporarily adjusting work times to deal with severe symptoms (see 5.5 below); ensuring access to adequate toilet and washing facilities; suggesting a handy supply of drinking water; allowing time off to attend appointments (more information on allowing time off during the working day to attend medical appointments can be found

in the Special Leave Policy);

- **consider a referral to occupational health** when health and wellbeing is greatly affected and further medical advice on adjustments is needed;
- **make use of available risk assessments** where appropriate, for example using the stress risk assessment;
- **be attuned to any bullying and harassment claims** raised which are or may be linked to the menopause (see 5.8 below);
- **set a review** to check in regularly to make sure that the adjustments are working and whether any modifications are needed, or if anything new needs to be put in place.

5.3 **Consider the menopause in the application of the Absence Management Policy:** Those experiencing adverse symptoms because of the menopause may be absent from work yet may be disinclined to share the real reason for the absence. Headteachers/Managers should hold private return to work meetings after sickness absence as these provide the opportunity to raise issues related to the menopause. Headteachers/Managers should ask how they are and if there is any support they need. These should be handled empathetically because the member of staff may be reluctant to share this information, worried about their symptoms and the impact on their day to day lives and work. Headteachers/Managers should also take into account that the menopause can be long-term and involve fluctuating health changes and be prepared to consider changes to help the member of staff continue to work, and minimise, reduce or remove any barriers to attendance or performance because of symptoms. If a member of staff declares that they are off sick because of the menopause or perimenopause, the manager should record the reasons for absence as such. Headteachers/Managers should also be aware that it could be potentially unfair or discriminatory to treat sickness absence in the same way as any other sickness absence without making reasonable adjustments for a condition that may be a deemed a disability or recognising that individual absences may be attributed to an ongoing menopausal condition issue like other long term health conditions and adjustments should be explored. It may be helpful to seek advice from Occupational Health on adjustments and your HR provider.

5.4 **Consider the menopause in the application of Performance Management or Disciplinary Procedures**. Inflexible performance management that does not take account of the impact of menopausal symptoms may lead to the unfair implementation of the performance management/capability and disciplinary procedures. It is therefore important that headteachers and managers ensure that those suffering from menopause symptoms are not disadvantaged.

5.5 **Consider flexible working.** Headteachers/Managers should accommodate flexible working requests that will help individuals manage any menopause related health issues where feasible. For example, this may include more or lengthier comfort breaks or providing leave at short notice. More on flexible working can be found in the school's Flexible Working Policy and you can take advice from your HR provider.

5.6 **Discuss the menopause and this Policy at team meetings**. Headteachers/Managers should share information about this Policy, events linked to women's health, and signpost staff to information published on the Intranet about the menopause and wellbeing. Such discussions demonstrate that the school acknowledges the subject and is open to positively supporting those experiencing it.

5.7 **Use and advocate an Employee Assistance Programme**. Headteachers/ Managers can access their Employee Assistance Programme (EAP), to seek further advice and also recommend it to staff (more information is provided in Section 7).

5.8 **Act on unwanted comments or jokes related to the menopause**. Headteachers/Managers are expected to role model good behaviours and are key in creating an environment that is respectful and free from unwanted comments or jokes. Headteachers/Managers should act when such behaviour comes to their attention. Such behaviour may be subject to disciplinary action in accordance with the Disciplinary Policy.

6 PRACTICAL STEPS STAFF EXPERIENCING MENOPAUSE CAN TAKE

6.1 Some staff can manage the symptoms of the menopause without any intervention. Others may find it difficult to deal with the symptoms. The following strategies can assist staff experiencing the menopause (this is not an exhaustive list):

6.1.1 **Raise the issue at work**. Staff are encouraged to speak to their headteacher or manager or another work colleague to raise awareness about how they are feeling and seek support rather than suffer in silence. Headteachers /Managers can look to implement adjustments that can be both practical and support mental wellbeing.

6.1.2 Seek adaptations to the work environment. This can be made easier if staff

discuss and agree adaptations with their line manager or headteacher. The following adaptations may alleviate some of the key symptoms:

- **Hot flushes:** A hot flush is a sudden onset of feverish heat all over the body; these can cause dizziness, discomfort, and sweating and heart palpitations, and are one of the most common symptoms of the menopause. These may be helped by controlling the temperature of the work area, such as using a desktop fan; moving near an opening window (if possible); moving away from a heat source; going to a private place or outside to manage a severe hot flush; ensuring there is drinking water to hand; and modifying clothing (it may help to wear layers of clothes, which can be removed when feeling too warm).
- **Headaches:** Have drinking water to hand; look for a quiet space to work; wear noise-reducing headphones in an open office; seek agreement to adjust work patterns.
- **Heavy Periods:** Consider easy access to toilets; access to sanitary products in toilets; and storage space for a change of clothing.
- **Low mood:** Agree with the manager time out from others when required as this may help manage difficult psychological experiences. Having access to a quiet area or working from home, if possible, may also help during such times.
- **Loss of confidence or anxiety**: Speak privately to the manager or headteacher about any such issues or seek help from the GP, Occupational Health, or another source, such as the school's EAP (see Section 7).
- **Poor concentration:** Speak privately to the line manager or headteacher about any such issues. This could include reviewing task allocation and workload, and where and when work can be undertaken with the minimum disruption if this contributes to or exacerbates the problem.

The above is not an exhaustive list. If there are other changes that could be made these should be discussed with the manager, who can assist with adjustments.

6.1.3 Self Help. There are a range of other measures which can help deal with your symptoms for home and work life:

- **Talking to family, friends or colleagues.** Sharing concerns with another trusted and understanding person can help.
- Take practical steps to deal with hot flushes by keeping cool and avoiding possible triggers, such as spicy foods, caffeine, alcohol, smoking or stress and adapt dress to cool down. It may also help to dress in layers, so that

clothes can be removed when feeling too warm

- **Regular exercise** may help improve some symptoms of the menopause. It may help sleep and lift a person's mood. 30 minutes of moderate exercise, at least five days a week is recommended. Exercises that put some pressure on the bones, such as running and walking, can help strengthen them and reduce risk of osteoporosis. Being physically active can also help to protect against heart disease and stroke.
- **Pelvic floor exercises** can help strengthen pelvic muscles (squeezing and releasing the muscles that support the bowel, bladder and vagina). This may also improve bladder control. Guidance on pelvic floor exercises can be obtained from a physiotherapist, or the website of the British Association of Urological Surgeons (also see Section 7 for the link to their leaflet on pelvic floor exercises).
- **The menopause causes loss of calcium in the bones**, so it is particularly important to try to include two or three portions of calcium-rich foods in the daily diet. It is also important to get enough vitamin D because it is vital for bone health.
- **Cut down on salt and saturated fats.**
- **Some women gain weight whilst** going through the menopause, especially around the abdomen (stomach area). This may be linked to lowered oestrogen levels, but also to general ageing and lifestyle changes. Losing excess weight may help those who experience hot flushes and night sweats. This will also help reduce risk of getting heart disease.
- **Stop smoking.** Smoking can lead to an earlier menopause and may trigger hot flushes. There are many other good reasons to stop smoking. A GP or practice nurse can provide advice and support, and the NHS provides information on line about stopping smoking.
- **Limit alcohol intake**. Alcohol may trigger hot flushes in some women, and it may help to limit alcohol intake. For more about recommended limits for alcohol, see NHS on-line information (see section 7).
- **Medical Advice and Interventions**
  - Seek advice from a GP who can help, will have helped many other women in this situation before, and can tailor their medical advice to the individual's needs.
  - If symptoms are difficult to manage consider an occupational health referral and counselling support from your EAP, (see Section 7).
  - Hormone replacement therapy (HRT): For women finding it hard to manage symptoms, their GP may suggest hormone replacement therapy (HRT). HRT can help some symptoms of the menopause, such as night sweats and hot flushes, mood swings and vaginal dryness. It can also help reduce the risk of osteoporosis. Most symptoms improve within three months of starting HRT.

7 FURTHER GUIDANCE

7.1 Many different sources of wellbeing support are available such as the school's Employee Assistance Programme (EAP), and policies to support staff, such as the Flexible Working Policy.

7.2 Headteachers/Managers can access their Employee Assistance Programme (EAP) to seek further advice and also recommend it to staff. EAP advisors can help with all number of subjects, including work/career, relationships, children, money, rights, health and wellbeing, and management support.

7.3 The NHS website has some good, basic information about the menopause: https://www.nhs.uk/conditions/menopause/

7.4 NHS information on alcohol misuse: https://www.nhs.uk/conditions/alcohol-misuse/

7.5 The British Menopause Society: https://thebms.org.uk

7.6 Women's Health Concern: https://www.womens-health-concern.org

7.7 British Association of Urological Surgeons Pelvic Floor exercise handout: https://www.baus.org.uk/_userfiles/pages/files/Patients/Leaflets/Pelvic%20floor%20XS% 20female.pdf

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