



Education Trust

‘Inspiring the individuals of today, for a better society tomorrow,
“Aspire, Belong, Collaborate”

MENOPAUSE POLICY

Review Frequency	Annually
Reviewed	June 2025
Next Review	June 2026
Agreed by Trustees	19 th June 2025



CONTENTS

Purpose	3
Scope	3
Policy	3
Definitions	3
Symptoms of Menopause	4
Roles and Responsibilities	4
Appendix 1: Managers' Guidance for Colleague Discussions	7
Appendix 2: Menopause Advice Sheet – How to talk to your GP about menopause	10
Appendix 3: External Links	12
Details of Amendment	13



INTRODUCTION

Riviera Education Trust is committed to providing an inclusive and supportive working environment for everyone who works here. Menopause is a natural part of every woman's life, and it isn't always an easy transition. The menopause itself is defined as having occurred when someone has not had a menstrual period for twelve consecutive months (for people reaching menopause naturally and not, for example, using hormonal contraception). However, some people can also have menopause induced as a result of surgery or medical treatments. Perimenopause is when you have symptoms of menopause but your period has not yet stopped. Not everyone will experience symptoms during the perimenopause but offering support to those who do should help improve their experience at work.

This policy is aimed at helping all those who are perimenopausal or menopausal, but the term 'menopause' will be used throughout this document.

This policy sets out the guidelines for members of staff and managers on providing the right support to manage menopausal symptoms at work. It is not contractual and does not form part of the terms and conditions of employment.

While menopause typically affects women, the Trust recognises that people of other genders, including trans men and non-binary individuals, may also experience menopause or menopausal symptoms. The term 'women' is used for simplicity but is intended to be inclusive.

In accordance with the Equality Act 2010, the Trust recognises that menopausal symptoms may amount to a disability in certain cases and will take all reasonable steps to ensure compliance with the duty to make adjustments and to prevent discrimination.

Aims

- Ensure that women suffering from menopause symptoms feel confident to discuss it, and ask for support and any reasonable adjustments so they can continue to be successful in their roles.
- Foster an environment in which colleagues can openly and comfortably instigate conversations, or engage in discussions about menopause.
- Set out how the Trust will make reasonable adjustments to minimise the risk of the working environment making menopausal symptoms worse for those experiencing them.
- Provide further resources to help staff, particularly line managers and HR, to support others through difficulties the menopause may cause them.
- Educate and inform managers about the potential symptoms of menopause, and how they can support women at work.
- Reduce absenteeism due to menopausal symptoms.



Scope:

This policy applies to all Riviera Education Trust Staff; however, its primary purpose is to support employees who are going through menopause.

Definitions

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

Perimenopause is the time leading up to menopause when a woman may experience changes, such as irregular periods or other menopausal symptoms. This can be years before menopause.

Post-menopause is the time after menopause has occurred, starting when a woman has not had a period for twelve consecutive months.

SYMPTOMS OF MENOPAUSE

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

Symptoms can manifest both physically and psychologically and can include but are not limited to:

- Difficulty sleeping, insomnia and fatigue.
- Hot flushes.
- Low mood.
- Anxiety.
- Reduced concentration or focus.
- Problems with memory recall.
- Migraines or headaches.
- Aches and pains.
- Irregular or heavy periods.

It is also important to note that symptoms can occur without warning and can vary in severity and frequency.



ROLES AND RESPONSIBILITIES

Members of staff:

All staff are responsible for:

- Taking a personal responsibility to look after their health;
- Being open and honest in conversations with managers/HR team;
- If a member of staff is unable to speak to their line manager, or if their line manager is not supporting them, they can speak directly to HR or another member of the SLT;
- Contributing to a respectful and productive working environment;
- Being willing to help and support their colleagues;
- Understanding any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.

Line Managers

All line managers should:

- Familiarise themselves with the Menopause Policy and Guidance;
- Be ready and willing to have open discussions about menopause, appreciating the personal nature of the conversation, and treating the discussion sensitively and professionally;
- Use the guidance in Appendices 1 and 2, signposting and reviewing together, before agreeing with the individual on how best they can be supported, and any adjustments required;
- Record adjustments agreed, and actions to be implemented;
- Ensure ongoing dialogue and review dates;
- Ensure that all agreed adjustments are adhered to;
- All notes and records relating to menopause support will be treated as sensitive personal data and handled in accordance with the Trust's Data Protection Policy and GDPR obligations.

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

- Discuss a referral to Occupational Health for further advice;
- Refer the employee to Occupational Health with the assistance and guidance from HR;
- Review Occupational Health advice, and implement any recommendations, where reasonably practical;
- Update the action plan, and continue to review.



HR Team

The HR team should:

- Signpost to avenues of support where needed;
- Support with Occupational Health referrals;
- Support safe and open dialogue.

Occupational Health

The role of Occupational Health is to:

- Carry out a holistic assessment of individuals as to whether or not menopause may be contributing to symptoms / well-being, providing advice and guidance in line with up-to-date research;
- Signpost to appropriate sources of help and advice (refer to Appendix 2 for more information);
- Provide support and advice to SMT and Line Managers in identifying reasonable adjustments, if required.

Employee Assistance (EAP)

The Employee Assistance service will:

- Provide access to 24/7 telephone counselling and face-to-face counselling for all members of staff.

The Trust will review the implementation of this policy and its impact on staff wellbeing through regular feedback, and incorporate any necessary improvements. Staff are encouraged to share their experiences to help inform future practice.



Appendix 1: Managers' Guidance for Colleague Discussions

We recognise that every woman is different, and it is, therefore, not feasible to set out a structured set of specific guidelines.

All advice is given, and written, in accordance with the Faculty of Occupational Medicine (FOM) recommendations and best practice.

If an employee wishes to speak about their symptoms, or just to talk about how they are feeling (they may not recognise themselves that they are symptomatic), or if a male employee wishes to speak about a family member, please ensure that you:

- Allow adequate time to have the conversation;
- Find an appropriate room to preserve confidentiality;
- Encourage them to speak openly and honestly;
- Suggest ways in which they can be supported (see symptoms below) – hand out the Menopause Advice Sheet (Appendix 2);
- Agree on actions, and how to implement them. Ensure that this record is treated as confidential, and is stored securely;
- Agree if other members of the team should be informed, and by whom;
- Ensure that designated time is allowed for a follow-up meeting. Avoid discussing these matters informally or in passing; ensure conversations take place in a confidential, private setting.

Symptoms Support

Symptoms can manifest both physically and psychologically, including, but not exhaustively or exclusively those listed below; support for women should be considered as detailed below:

Hot Flushes

- Request temperature control for their work area, such as a fan on their desk (where possible a USB-connected desk fan to ensure environmentally friendly) or moving near a window, or away from a heat source;
- Easy access to drinking water;
- Be allowed to adapt prescribed uniform;
- Have access to a restroom for breaks if their work involves long periods of standing or sitting, or a quiet area if they need to manage a severe hot flush.

Heavy/light Periods

- Have permanent access to washroom facilities;



- Ensure storage space is available for a change of clothing.

Headaches

- Have ease of access to fresh drinking water;
- Offer a quiet space to work;
- Offer noise-reducing headphones to wear in open offices;
- Have time out to take medication if needed.

Difficulty Sleeping

- Ask to be considered for flexible working, particularly if suffering from a lack of sleep.

Low Mood

- Agree time out from others, when required, without needing to ask for permission;
- Identify a 'buddy' for the colleague to talk to – outside of the work area;
- Identify a 'time out space' to be able to go to 'clear their head'.

Loss of Confidence

- Ensure there are regular Personal Development Discussions;
- Have regular protected time with their manager to discuss any issues;
- Have agreed protected time to catch up with work.

Poor Concentration

- Discuss if there are times of the day when concentration is better or worse, and adjust working pattern/practice accordingly;
- Review task allocation and workload;
- Offer quiet space to work;
- Offer noise-reducing headphones to wear in open offices;
- Reduce interruptions;
- Have agreements in place in an open office that an individual is having 'protected time', so that they are not disturbed;
- Have agreed protected time to catch up with work.

Anxiety

- Identify a 'buddy' for the colleague to talk to – outside of their work area;
- Be able to have time away from their work to undertake relaxation techniques;



- Undertake mindfulness activities such as breathing exercises, or going for a walk.

Discuss whether the member of staff has visited their GP. Depending on the discussion, this may be the next step suggested, particularly if the areas of difficulty are sleeping, panic attacks or anxiety.

If they have visited their GP, and are being supported by them, it may be helpful at this point to make an Occupational Health referral to give specific advice regarding the workplace.



Appendix 2: Menopause Advice Sheet – How to talk to your GP about menopause

If you are suffering from menopausal symptoms to the point they are getting in the way of you enjoying life, it's time to talk to your doctor however, this can occasionally be difficult in practice.

It is recognised that accessing a GP appointment can sometimes be challenging, and talking about symptoms can be hard, let alone if you feel rushed or unprepared. So, what can you do? The following tips may assist in preparing for your appointment.

It is important not to delay seeking support. Many individuals feel they must tolerate symptoms as a normal part of life, but if they are affecting you, there are things you can do, and support available. There is no need to wait until symptoms feel unbearable.

Read the NICE guidelines. This stands for National Institute for Health and Care Excellence and these guidelines are what your doctor will use to determine the type of conversations to have with you and treatments to offer.

There are guidelines for patients, which are useful to read before you see your GP, so you know what to expect.

Prepare for your appointment. It's easier for your doctor to understand what's going on if you provide them with all the information. That may sound obvious, but blood tests to say where you are on the menopause transition aren't always available or accurate – your hormones can fluctuate daily during this time. So, your doctor will be thinking about what to recommend for you, based on your symptoms.

Keep a list of your symptoms, your menstrual cycle, hot flushes, how you're feeling, and any changes you've noticed. Write them down, and take them to your appointment. This can help your doctor better understand your experience and it's more likely that together, you'll find the right solution faster. And, if you have any preferences about how you manage your symptoms, tell them that too – for example, if you'd like to try hormone replacement therapy (HRT), or not.

Ask the receptionist which GP has expertise or additional training in menopause support – it might not be your usual GP; it could be someone who has had special training in the subject.

Ask for a longer appointment. If you don't think your standard appointment will be long enough, try to book a double appointment, as some surgeries do offer this.

If necessary, you are entitled to seek a second medical opinion. If you don't feel you've received the help you need, ask to speak to someone else. Don't be put off, you know how you're feeling, and how it's affecting you.



Ask if there is a menopause clinic in your area. Occasionally, there are regional clinics, specifically devoted to menopause. If there is one in your area, and you think this would be helpful, ask for a referral.

Consider taking a partner or friend with you, particularly if they are supporting you during this time. Your partner, or a friend, will know how the symptoms are affecting you. They could support you at the appointment, and also find out how they can continue supporting you.

What to expect from your doctor

There are certain things a GP should – and should not – do during your appointment.

They should:

- Talk to you about your lifestyle, and how to manage both your symptoms and your longer-term health;
- Offer advice on hormone replacement therapy and other non-medical options;
- Talk to you about the safety and effectiveness of any treatment.

They should not:

- Tell you that it's just that time of your life. Yes, menopause is a natural stage, but please don't feel that means you should have to put up with every symptom without help;
- Tell you they don't prescribe HRT. Treatment decisions should be informed by your preferences and medical needs.
- Impose unnecessary time restrictions, such as they will only prescribe this once, or for a year or two. This is an ongoing conversation, and if your symptoms persist, you will still need help to manage them.

GPs are there to provide support and guidance, and you should feel comfortable and confident in talking to them about your symptoms, and any help you need. Don't think you have to struggle through menopause when there is help and support available.



Appendix 3: External Links

All colleagues can access counselling by contacting the Employee Assistance helpline on 0800 028 0199, online at <https://wisdom.healthassured.org/login>. There is also lots of useful information on their My Healthy Advantage App.

National Institute for Health and Care Excellence (NICE) guidelines.

These explain how your GP will determine what types of treatments and interventions they can offer you. You can find out more information by using the following link

<https://www.nice.org.uk/guidance/ng23>.

The National Health Service provides an overview of menopause. You can find more at:

<http://www.nhs.uk/Conditions/Menopause/Pages/Introduction.aspx>.

Menopause information. The Royal College of Obstetricians and Gynecologists offer further information in a dedicated area of their website at:

<https://www.rcog.org.uk/en/patients/menopause/>.

Premature Ovarian Insufficiency (POI) information and support on very early menopause. You can find out more at:

<https://www.daisynetwork.org/>.

Information on hysterectomy. This provides an insight into surgically induced menopause as a result of having a hysterectomy. Further details can be found at:

<https://www.hysterectomy-association.org.uk>.

Henpicked is a site that provides information on managing menopause and an insight into women's stories

<https://henpicked.net/menopause/>



DETAILS OF AMENDMENTS

July 2021

- Policy adopted.

March 2024

- Review frequency amended
- Further information was added to reflect the format of existing policies
- Links updated

June 2025

- Introduction updated to improve clarity around gender-inclusive language.
- Reference to the Equality Act 2010 added to the introduction to reinforce legal compliance.
- Appendix 2 revised to ensure a more professional and consistent tone throughout.
- A new section added outlining the approach to monitoring and review of the policy.

