

Menopause – Guidance for Managers



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Introduction

1. The Scottish Information Commissioner (the Commissioner) is committed to ensuring that all individuals are treated fairly and with dignity and respect in their working environment.
2. The Commissioner is also committed to ensuring the health, safety and wellbeing of their workforce. We will provide appropriate support to women who are experiencing symptoms associated with the menopause, whilst supporting line managers by providing guidance.
3. The Commissioner has a Menopause Policy, the aims and objectives of which are:
 - to make managers aware of the Commissioner's responsibility to understand the menopause and related issues, how these can affect their team members and how they can support individuals in the workplace
 - to create an environment where women feel confident enough to raise issues about their symptoms and ask for adjustments at work
 - to raise wider awareness and understanding amongst employees and to outline support and reasonable adjustments that may be available
 - to subsequently reduce menopause related sickness by supporting staff to remain in work meaning that the organisation retains valuable skills and experience.
4. This policy is supported by a set of guidance for managers (this document).

Menopause - guidance for managers

What is the menopause?

5. The menopause is normally a natural biological transition point in life – part of the normal ageing process experienced by all women, though not everyone experiences it in the same way.
6. We tend, however, to use the term “menopause” to describe the transition years when the ovaries spontaneously fail to produce the hormones oestrogen and progesterone. Periods become less frequent and then stop altogether. The menopause is said to have occurred when periods have stopped for 12 consecutive months.
7. Don't forget that while all women experience the menopause, they are not the only ones affected. Managers need to understand that trans and non-binary staff may go through the menopause too (often with little support available) and need to be treated with dignity and respect and men may need support while their wife or partner is menopausal. Everyone has different experiences and you shouldn't make any assumptions but listen to your member of staff and support their individual needs sensitively.
8. Sometimes in these sections we refer to “women” – this is because the majority of people experiencing the menopause are women and sometimes it gets clumsy if we try to list everyone affected every time but please bear in mind that other staff could be affected too.

When does the menopause occur?

9. In the UK, natural menopause usually occurs between 45 and 55 years of age, with the average age being 51.
10. However, a significant number of individuals experience the menopause before the age of 40 (some even in their teens and twenties). This is known as premature menopause or primary ovarian insufficiency and estimates suggest that around 1 in every 100 women in the UK will experience this. Premature menopause may be as a result of medical or surgical intervention or it can just happen on its own, with no clear cause.
11. Whilst menopause is generally a natural process involving gradual change, it can be sudden and acute following medical or surgical intervention (e.g. surgical hysterectomy, chemotherapy or radiotherapy).

What happens during the menopause

12. The menopause brings physical changes to the body. For many people experiencing the menopause, it can result in physical, psychological and emotional changes to which it can be difficult to adjust.
 - the particular changes involved can affect different people in different ways
 - not everyone has symptoms – some experience few or no problems around this time
 - 80% of women in the UK report noticeable changes – though the type, amount and severity of those symptoms can vary, ranging from mild to severe
 - 45% of women find their symptoms difficult to deal with

- approximately 25% of women experience very debilitating symptoms.
13. In addition, the menopause typically occurs at a challenging time in many women's lives – they may be experiencing other chronic health conditions, whilst bearing the greater share of caring and domestic responsibilities as well as being in employment. This can impact on emotional wellbeing and lead to higher or excessive levels of stress. Without appropriate support, women can be left feeling isolated and vulnerable and this can affect their work and the role that they do.

Perimenopausal Stage

14. The perimenopausal stage describes the period of hormonal change leading to the menopause. It can often last for four to five years (though it may continue for many more years for some people, whilst lasting just a few months for others).
15. During the perimenopause, the levels of hormones produced by the ovaries fluctuate, leading to menstrual irregularities in the time between periods, and the length of period and flow, until they stop altogether. Sometimes periods can stop suddenly.
16. Changes in hormone levels (particularly oestrogen) can lead to symptoms which can have an adverse impact on personal and work life. Whilst everyone's experience of the menopause will be different, most may experience some of the following:
- Hot flushes – hot flushes are experienced by most people and are described as a sudden feeling of heat, starting in the face, neck or chest, before spreading throughout the body. Most flushes last only a few minutes but during this time there can be sweating with the face, neck and chest becoming red and patchy and the heart rate becoming quicker or stronger. For some people these can be occasional, but others may have many daily – and though generally harmless, these can be uncomfortable, disruptive and embarrassing.
 - Night sweats – night sweats are when you sweat so much that your night clothes and bedding are soaking wet, even though where you are sleeping is cool.
 - Sleep disturbances/difficulty sleeping – sometimes because of hot flushes and/or night sweats, though it may also be as a result of the anxiety felt during menopause. This may lead in turn to fatigue, irritability, loss of concentration and/or forgetfulness.
 - Mood disturbances – including low mood and increased susceptibility to anxiety, which can also lead to tiredness, tearfulness and an inability to concentrate.
 - Problems with memory – and/or concentration.
 - Vaginal symptoms – such as dryness, itching and pain/discomfort during sexual intercourse.
 - Heavy periods and clots – and some periods may last longer. Periods are usually irregular and harder to prepare for.
 - Urinary problems – including recurrent urinary tract infections such as cystitis. Many women feel an urgent need to pass urine or to pass it more often than normal.
 - Reduced sexual desire (libido) – which may be a result of falling hormonal levels.
 - Palpitations – heartbeats that suddenly become more noticeable.

- Migraines and headaches
 - Joint stiffness, aches and pains
 - Reduced muscle mass
 - Skin irritation
17. These symptoms (which can vary in degree) may be experienced even though menstruation continues so women who are still having regular periods may not realise that they are experiencing the perimenopause and not understand the cause of the problems.

Menopause symptoms in other circumstances

18. There are other circumstances in which symptoms may be experienced:
- Whilst menopause is usually a process involving gradual change, it can sometimes be sudden and acute following serious illness, medication or surgery. A person experiencing sudden menopause may have more severe symptoms and may require treatment and/or post-operative care to manage related problems.
 - Younger women undergoing treatments for conditions such as endometriosis (estimated to affect around 1 in 10 women of reproductive age) and infertility (affecting around 1 in 7 couples) may experience menopausal symptoms whilst receiving treatment.

Workplace

Why is the menopause a workplace issue?

19. We have members of staff that are women between the ages of 46 and 55 and some of these members of staff may be going through the menopause or experiencing perimenopausal symptoms at any time. In addition, between 1% and 10% of women experience an early or premature menopause and so may be trying to deal with the same symptoms.
20. Sometimes going through the menopause can be uneventful for some, but for others, it can impact on their working lives, with it becoming increasingly difficult to function effectively at work as a result of their symptoms. This can leave them feeling less confident, more susceptible to fatigue and stress at work. It has also been recognised that certain aspect of work, working conditions and environment may exacerbate menopause symptoms.
21. A lack of knowledge about the menopause may mean that someone can be misdiagnosed as constantly having health issues which restrict them from fulfilling their normal role and having time off work. In addition, symptoms may impact on their performance, leading potentially to capability or disciplinary proceedings. They may be afraid to approach anyone losing confidence and feeling isolated before leaving work altogether. It has been estimated that approximately 10% of women actually leave work because of their severe symptoms and lack of support in the workplace.
22. It is therefore important that employers understand, address and manage these issues in order to protect the health and wellbeing of their workforce. Without effective support, employers risk losing key and valuable talent, expertise and experience.
23. Areas which employers can support their workforce include:
 - flexibility of working hours and working arrangements
 - encouraging women to talk to co-workers and line managers if they have troublesome symptoms at work
 - greater awareness of managers about the menopause as a possible occupational health issue
 - challenging negative expectations about the menopause and stereotypical attitudes towards mid-age and older women
 - better access to informal and formal sources of information and support
 - improvements in workplace temperature and ventilation.
24. It is also worth noting that while there is no specific legislation addressing the impact of the menopause in the workplace, there are health and safety regulations which employers should be aware of. Case law has also shown the need to take medical information into account in capability situations where ill health has been raised by the employee

Supporting and employee through the menopause

25. Menopause is a very personal experience and can affect people at work in various ways. This means that different levels of support and assistance may be needed at what can be a very difficult time. Attitudes can vary from empathy and understanding, through to insensitivity and “jokey”, to a complete lack of sympathy.

Support from managers

26. The most important and valuable thing a manager can do is listen and wherever possible, respond sympathetically to any requests for reasonable adjustments at work. People who are experiencing the menopause may need sympathetic and appropriate support from their manager. As with any longstanding health-related conditions, this support can make a major difference to how they deal with the menopause, enabling them to continue working well and productively.
27. Managers can only be sympathetic and supportive if they are aware that their member of staff is experiencing difficulties. Research has shown that people may feel uncomfortable or embarrassed approaching their manager to discuss any difficulties in managing their menopausal symptoms. This is particularly the case if their manager is younger than them or male and/or if they have no idea about the menopause. This can be particularly true for trans or non-binary staff and for men who may be embarrassed to admit that they are affected by the experiences of their partner.
28. It is therefore important that as a manager, you are aware of the symptoms associated with the menopause and understand the issues affecting people going through it. This will help in fostering an environment where we are all more comfortable talking about the menopause, the symptoms and measures that could help in minimising these. You will need to be sensitive to any feelings of discomfort, listen to concerns and complaints and consider what can be done to reduce and minimise the impact symptoms may be having on the staff member's performance within the workplace – could adjustments be made to allow them to manage their symptoms better?

Remember:

- you will need to maintain confidentiality in handling health information about the menopause
- any specific needs identified (including reasonable adjustments that are agreed) should be recorded and reviewed regularly
- you should be aware of the potential impact of menopause on performance. If someone's performance suddenly dips, it is worth considering whether the menopause may be playing a part in this
- case law has shown the need to take medical information into account in capability situations where ill health has been raised by the employee – seeking advice from the GP and/or occupational health practitioner
- staff should not experience any detriment because they may need time off during this time. Any absences should be managed in line with the Commissioner's Absence Management Policy and the Manager in understanding their employee should use discretion when applying the policy.

Risk Assessments

29. A risk assessment should be undertaken in order to consider the specific needs of individuals going through the menopause and ensure that the working environment will not make their

symptoms worse. The risk assessment will assist in identifying any potential adjustments which may be required. Particular issues to consider include temperature and ventilation. Welfare issues (including toilet facilities and access to cold water) should also be considered.

30. A template risk assessment is in VC171413. Where a risk assessment is being used, the FAM will liaise with the line manager and member of staff concerned and, also, will provide advice and guidance the relevant matters to be taken into account in the risk assessment.

Reasonable Adjustments

31. It has been recognised that certain aspects of work and the working environment can aggravate menopausal symptoms. Therefore, it is important to consider whether adjustments can be made to help people experiencing those symptoms by removing any barriers that get in the way of them doing their job. It is recognised however than every workplace is different, for example, in some workplaces it is not possible to open a window. Any adjustments should be identified through discussion with the individual concerned and, where appropriate, with additional advice from a health safety adviser or occupational health.
32. Most important of all is the need to listen to the individual and to respond sympathetically. The following are reasonable adjustments could be considered in order to help with various menopause symptoms:
- flexibility to attend clinics, hospital or appointments and for woman and men seeking advice relating to the menopause in line with the Commissioner's absence policies
 - flexibility to take breaks when needed rather than at pre-determined times
 - while undergoing the menopause employees may experience bouts of feeling unwell at work so a flexible and sympathetic approach to breaks is needed, including to take medication in a private space, to walk around and ease any pain
 - there may also be a need to leave work suddenly to return home
 - consideration of phased return after sick leave in line with the Commissioner's absence policies for women suffering with particularly severe symptoms and impairment.
 - provision of private spaces for women to rest temporarily, to talk with a colleague or to phone for personal or professional support.
 - consideration of role – stressful environments, high work demands, and long hours can aggravate menopausal symptoms and, in some cases, have been shown to bring on an earlier menopause.
33. Whilst it is important to consider whether reasonable adjustments can be made to help employees experiencing menopausal symptoms, an individual may use self-help management or seek medical help to manage the symptoms themselves.

Menopause and the law

General guidance

34. Whilst there is no specific legislation addressing the impact on the menopause in the workplace, there are legal requirements and regulations of which employers should be aware.

The Health and Safety at Work etc Act 1974

35. This Act requires employers to reasonably ensure the health, safety and welfare of all employees – and this will include women experiencing the menopause.
36. Under this Act, employers are required to carry out risk assessments and these include specific risks to menopausal women, considering their specific needs and ensuring that the working environment will not worsen their symptoms. Particular issues for consideration will include temperature and ventilation, together with welfare issues such as toilet facilities and access to cold water.

The Equality Act 2010

37. This Act protects people from discrimination in the workplace because of “protected characteristics” and includes both direct and indirect discrimination and harassment.
38. The protected characteristics are:
- age
 - disability
 - gender reassignment
 - marriage or civil partnership
 - pregnancy and maternity
 - race
 - religion or belief
 - gender
 - sexual orientation

Sex Discrimination

39. Employers can risk facing claims for sex discrimination under this Act if they fail to properly support their female employees who are experiencing the menopause. A possible claim could arise if an employer refused to take menopause symptoms into account as a mitigating factor when applying a performance management policy, when it could be reasonably assumed that similar symptoms, for example, memory loss arising from other conditions would have been taken account of as a mitigating factor for male staff.
40. The first successful Employment Tribunal concerning the menopause was in 2012 (Merchant vs BT plc). Ms Merchant alleged that she had been discriminated against on the grounds of her gender when her employer failed to deal with her menopause symptoms in the same way that it would have been dealt with other medical conditions. Ms Merchant had been

underperforming and had reached the final written warning stage of the capability process. The claimant provided her employers with a letter from her GP stating that she was going through the menopause which could affect her levels of concentration at times and that she was also suffering stress as she was a carer for two family members.

41. Whilst the employer's capability process required an investigation as to whether under performance was due to health factors, the possible impact of menopause was not investigated – rather, the manager concerned relied on his own knowledge of menopause, together with the symptoms experienced by his wife and colleague. Ms Merchant had subsequently been dismissed prior to her claim to the Tribunal.
42. The Tribunal concluded that the dismissal was discriminatory and unfair, stating that a man suffering from ill health with comparable symptoms (in this case affecting concentration) and with performance issues would not have been treated in the same way. The failure to refer Ms Merchant for an occupational health assessment following receipt of her GP's letter, before taking the decision to dismiss, was held to be direct sex discrimination.

Harassment

43. An example of harassment might be a manager commenting that there is no point promoting a menopausal employee because they are "hormonal". Even if not addressed directly at a particular employee, this could cause staff to be upset and to worry and could be considered harassment.

Disability

44. Whilst the menopause is not in itself a disability, conditions arising from it may meet the definition of an "impairment" under the Equality Act 2010. As an example, depression or urinary problems linked to the menopause and which have a substantial and long-term adverse effect on the ability to carry out normal day to day activities, mean that the person concerned would be considered to have a disability under the Act. An employer is required to make reasonable adjustments where a disabled worker would be at a substantial disadvantage compared with a non-disabled colleague.
45. Where relevant, case law shows the need to take medical information into account in capability situations where ill health has been raised by the employee – seeking advice from the GP and/or occupational health practitioner where appropriate.

Review

46. The Head of Corporate Services (HOCS) will keep this guidance under review and, when reviewing the Employee Handbook, will consider whether this guidance should continue to be stand-alone guidance or included in the Employee Handbook.
47. If you have any questions or queries about this policy, please contact the HOCS or the Finance and Administration Manager or your manager.

Document control sheet

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