



University  
*of Glasgow* | Human  
Resources

# Menopause and Hormonal Changes Policy



## Menopause and Hormonal Changes Policy

### Contents

1.	Introduction	2
2.	Aims	2
3.	Scope	3
4.	Definitions	3
5.	Symptoms	4
6.	Roles and Responsibilities	5
7.	Links to other Policies and Procedures	6
8.	Further Information	6
9.	Appendices	7-14

## 1. Introduction

- 1.1 The University is committed to supporting a working environment in which all colleagues thrive as part of an inclusive community.
- 1.2 Menopause is a transition which most women and people who menstruate will experience, although the timing and nature of their experience and symptoms will differ between individuals.
- 1.3 Colleagues may also experience hormonal changes that result in similar symptoms to the peri- and post-menopause due to medical treatments or procedures including but not limited to certain cancer treatments and gender reassignment processes.
- 1.4 Fostering an inclusive environment for all colleagues to navigate these life and health transitions may require the agreement and implementation of reasonable adjustments<sup>1</sup>.
- 1.5 Moreover, such an environment necessitates a culture free from stigma and taboo when discussing embodied health and wellbeing experiences and their impact at work.

## 2. Aims

This policy aims to:

- 2.1 Remove stigma and empower colleagues to discuss their experience of menopause and/or hormonal changes alongside making requests for support or reasonable adjustments required to ensure they continue to thrive at work.
- 2.2 Raise awareness and educate people managers about different symptoms of menopause and hormonal changes and how they can support colleagues and their teams.
- 2.3 Provide tools and guidance to help colleagues and people managers engage in constructive conversations about menopause and/or hormonal changes and work.
- 2.4 Reduce absenteeism due to menopausal and/or hormonal changes symptoms through enhanced support and reasonable adjustments.

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<sup>1</sup> Menopause symptoms have been deemed to constitute a disability in some contexts. Not all circumstances will lend themselves to the same legal protections.

2.5 Outline roles and responsibilities for colleagues, managers, and service areas arising from the policy and the processes to follow as part of fulfilling their roles and responsibilities.

### 3. Scope

3.1 The provisions of this policy apply to all University employees, irrespective of the type of contract they have. Any questions or concerns regarding eligibility should be directed to the relevant [College/University Services HR Team](#).

### 4. Definitions

4.1 **Menopause:** defined as a stage in life that occurs when hormones change and eventually menstruation stops. Usually, it is defined as having occurred upon not having had a period for 12 consecutive months (for those reaching menopause 'naturally').

While the average menopause age is 51, menopause can occur earlier 'naturally' (sometimes referred to as Premature Ovarian Insufficiency if before 40) or due to surgery such as hysterectomy or oophorectomy (induced menopause), illness (such as cancer and related treatment), or other reasons.

4.2 **Perimenopause:** is the time leading up to and around menopausal transition associated with changes and menopausal symptoms. This can be years before menopause.

4.3 **Post-Menopause:** is the time after menopause has occurred, starting from the point at which periods have stopped for twelve consecutive months. Symptoms can still occur during this time.

4.4 **Hormonal Changes:** can impact a range of colleagues for a number of reasons. Many of these changes may cause symptoms that impact someone at work. Colleagues experiencing these changes may benefit from the support recommended under this policy.

Common reasons for hormonal changes that result in symptoms impacting work include, fertility treatment, health conditions requiring hormone treatment as well as hormone therapies and treatments connected to gender reassignment, such as cross-sex hormone treatments for trans and non-binary people, including those who are medically transitioning.

4.5 **Andropause:** relates to the natural decrease in testosterone as men age. The decrease is much more gradual than the hormonal decline and variation during menopause and, as such, the symptoms tend to be less wide-ranging or severe.

## 5. Symptoms

5.1. Hormonal changes can result in a wide range of symptoms, both physiological and psychological.

5.2. The most common symptoms reported to impact women at work, include:

- Difficulty sleeping, insomnia or fatigue
- Hot flushes during the day or night
- Low mood, depression, or changes in mood
- Nervousness, worry or anxiety
- Reduced ability to concentrate or focus
- Changes in memory recall
- Migraines or headaches
- Aches and pains
- Irregular and/or heavy periods or bleeding
- Urinary issues, e.g. increased frequency in needing to go to the toilet

5.3 It is important to remember that colleagues will experience menopause and hormonal changes differently. Experiences and perceptions of the menopause may also differ in relation to socio-economic status, disability, age, race, religion, sexual orientation or marital/civil partnership status. They can also be affected by the nature and type of job they do, such as whether it involves manual work, or standing or sitting for long periods of time.

5.4 Symptoms, and their frequency and/or severity, will vary and may fluctuate and change over time.

5.5 Managing symptoms is a personal health related choice and the aim of this policy and support is not to advise or direct colleagues to adopt a specific approach.

## 6.Roles and Responsibilities

### 6.1 All **colleagues** are responsible for:

- Treating all colleagues with dignity and respect and contributing to an inclusive and productive work environment.
- Accepting reasonable adjustments their colleagues may arrange, regardless of whether they know the reason for these.
- Proactively supporting their own health and wellbeing.
- Engaging in open conversations with managers about their experience should they feel any adjustments are needed.

If a colleague is unable to speak to their line manager or they feel unsupported by them, they can approach their [College/University Services HR Team](#) for advice.

### 6.2 All **Line managers** should:

- Familiarise themselves with the Menopause and Hormonal Changes Policy and Guidance (Additional information can be found in the online Menopause Training).
- Remain open and willing to hold constructive conversations about menopause and hormonal changes, taking the personal nature of the discussion into account and treating it in a sensitive and professional manner.
- Be mindful of any disclosure of menopause or requests for reasonable adjustments raised by colleagues when managing and supporting performance and development at work.
- Use [Line Manager Guidance on Constructive Menopause Conversations](#) provided to review and identify any adjustments required by colleagues and signpost support available, where appropriate.
- Record adjustments that have been agreed and any actions to be implemented in writing and share this with your colleague.
- Schedule ongoing dialogue and review dates or agree alternative ways to check-in on colleagues who have previously disclosed menopause or hormonal changes.
- Ensure agreed adjustments, which they can accommodate, are fully implemented.

Where adjustments cannot be accommodated or are unsuccessful, or if symptoms are proving more significant than local accommodations allow, the Line Manager may:

- Discuss a referral to Occupational Health for further advice.
- Seek advice from [College/University Services HR Team](#)
- Refer the employee to Occupational Health.

- Review Occupational Health advice, and implement any recommendations, where reasonably practical.
- Update recorded adjustments and continue to review.

## 7. Links to other Policies and Procedures

7.1 This policy aligns and overlaps with considerations and procedures outlined in:

- [Considering Reasonable Adjustments](#)
- [Dignity at Work and Study](#)
- [Equality and Diversity Policy](#)
- [Flexible Working](#)
- [Managing Attendance](#)
- [Policy for Managing Stress in the Workplace](#)
- [Managing and Supporting Performance](#)
- [Hybrid Working Guidance](#)

## 8. Additional Information

8.1 Colleagues have access to support and resources via:

- [Health Assured, the University's Employee Assistance Programme \(EAP\).](#)
- [Line Manager Guidance on Constructive Menopause Conversations \(Appendix A\)](#)
- [Implementing Reasonable Adjustments](#)
- [Menopause in the Workplace Online Training.](#)
- [Menopause and Hormonal Changes Peer Support MS Teams Site.](#)
- Monthly Menopause Cafes (publicised on [MS Teams Site](#)) where all colleagues can come to discuss menopause either as someone with lived experience or to learn more and provide support.

For further advice and information on this policy, please contact your [College/University Services HR team](#) or the [Equality and Diversity Unit](#).

**Document Control**

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## 9. 1 Appendix A

### Guidance for Constructive Menopause Conversations

Line managers should refer to [Guidance on Constructive Conversations](#) available as part of supporting reasonable adjustments.

Several of the key considerations and stages of a constructive conversation are relevant to menopause discussions.

In addition to that Guidance, line managers may wish to refer to evidence-based guidance: [Menopause-Savvy Conversations for Line Managers and Supervisors \(Appendix C\)](#) to support them in preparing for, and carrying out, a menopause conversation.

It is important to bear the following points in mind when arranging, attending, and participating in a discussion about menopause symptoms, adjustments, and support:

- Encourage open and honest dialogue.
- Avoid drawing on your personal experience to offer advice and/or make assumptions.
- Agree if other team members should be informed, how, and by whom.
- Prepare for the meeting by learning the definitions and symptoms listed in the Menopause and Hormonal Changes Policy and potential adjustments ([Appendix B](#)); this [additional online training](#) may be useful.
- Signpost the individual to guidance and support on tracking symptoms and advice on speaking to GP about menopause ([Appendix D](#)) and [University Teams site](#) for additional resources and peer support

Line managers are advised to record the outcome of the meeting and any adjustments and actions that have been agreed.

Arrange a follow-up meeting to review the adjustments within a reasonable time. Ensure that a designated time is allowed for this and do not rely on quick queries or chance encounters in the corridor or social spaces to undertake this review.

## 9.2 Appendix B

### Menopause and Hormonal Changes Symptoms Support

Symptoms can manifest both physically and psychologically. While this may vary and depend on each individual's unique experiences of menstruation and hormonal changes, examples of support for colleagues are detailed below and should be considered in the context of the colleague's role. In most cases, a collaborative approach should be taken with colleagues and managers working together to find solutions.

#### Hot Flashes

- Request temperature control for work area, such as a fan on desk (where possible a USB connected desk fan to ensure environmentally friendly), mobile fan if job involves moving to different locations. This may also require considering closeness to windows, or away from a heat source.
- Easy access to drinking water – check for local sustainable choices, such as tap water on majority of Gilmorehill campus.
- Discuss possible adaptation to uniforms if possible, such as by removing a jacket.
- Have access to a rest room for breaks if work involves long periods of standing or sitting, or a quiet area if needed.

#### Heavy/light Periods

- Ensure access to nearest washroom facilities and consider whether that these are practical in terms of closeness to workspace.
- Provide extra uniforms, where appropriate.
- Arrange storage space is available for a change of clothing.

#### Headaches

- Have ease of access to fresh drinking water.
- Consider whether there are quiet spaces to work nearby if based on campus and role permits this.
- Have time out to take medication if needed.

#### Difficulty Sleeping

- Consider options for flexible working, where appropriate.

#### Low Mood

- Where possible, identify and provide quiet spaces that give the opportunity to take some time or gather their thoughts.
- Signpost the University's Employee Assistance Programme.

#### Loss of Confidence

- Ensure there are regular and positive Personal Development Discussions.

- Have regular protected time with their manager to discuss any concerns or ways to support.
- Have agreed protected time to complete tasks or work.

### **Changes in Concentration**

- Discuss if there are times of the day when concentration is better or worse, and adjust working pattern/practice accordingly, where possible.
- Review and prioritise task allocation and workload.
- Provide memory-assisting equipment, such as books for lists or action boards.
- Offer quiet space to work.
- Reduce interruptions and provide guidelines of ways to communicate (such as when to use email, Teams etc).
- Have agreed protected time to complete tasks or work.

### **Anxiety and/or Panic Attacks**

- Signpost counselling services provided by the University's Employee Assistance provider, [Health Assured](#)
- Identify a 'buddy' for the colleague to talk to – outside of work their area and/or notify them about the [University's Menopause Cafes](#) for peer support.
- Encourage regular breaks if working at desk for long periods, including movement during lunch breaks.
- Identify any tasks or work activities that may serve as triggers, and collaborate to consider how these might be practically managed

Line Managers may also wish to make it clear that they do not wish to impinge in any way on health advice or guidance colleagues are following.

Depending on the discussion, they may wish to ask colleagues whether they have visited the GP, but only as a way of guiding what might work best for supporting their transition of hormonal change in the workplace.

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 and any related risk assessment.

## 9.3 Appendix C

### Menopause-savvy conversations for line managers and supervisors<sup>2</sup>

#### **Wait for employees to self-identify as experiencing menopausal symptoms**

For you to bring it up might be viewed as confronting and offensive. However, if you observe an employee displaying symptoms such as hot flushes, you might want to use that as an opening to a conversation. For example, *I noticed that you seemed to be a bit flushed during that meeting – is there anything I can help with to make you a bit more comfortable?*

#### **Prepare for a positive experience during initial disclosure**

A positive mindset and approach are central for managers and supervisors to create supportive experiences for subordinates who raise menopause. When an employee talks about menopause, ensure you communicate that it is not a problem for either yourself or the organization. It's also ok not to have all the answers during your first conversation, but simply to re-assure.

#### **Work collaboratively with others as required**

Be aware that discussing menopause is difficult due to some (unfair) stigmas around reproductive stages. If an employee chooses to raise it with another line manager or supervisor, work collaboratively with that manager rather than question why they may have not gone through formal hierarchical channels.

#### **Offer support**

Support can come in a number of different forms: some employees may just want an empathic ear, while others may want something more formal. Make sure that you have the time and the space for a confidential and systematic discussion that allows the opportunity to raise concerns, worries and steps forward. Try to ensure you leave the conversation knowing what are the next steps (if any).

#### **Develop a working plan**

Menopause is a unique experience and each employee may need different forms of support. It is useful to get an idea of what the employee feels they might require to improve their symptoms at work.

#### **Review the plan and support arrangements regularly**

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<sup>2</sup> Reproduced, with permission, from [Menopause Information Pack for Organisations \(MIPO\)](#)

Once menopausal transition has been discussed, remember to keep the conversation open periodically. The effects of menopausal transition can change over time, so support mechanisms may need to change to accommodate this.

### **Self-reflect to improve delivery**

It might be that after these conversations, you yourself need space to debrief. Make sure you have an opportunity to reflect on your own reactions and responses either by yourself or with a colleague without compromising the privacy of your employee.

### **Things to Avoid**

Be aware of saying anything that could be interpreted as one of the 3 D's:

- Derisory (problematizing or shaming)
- Dismissive (not listening or explaining away their experiences)
- Discriminatory (connecting menopause to negative ascriptions or judgements about their behaviour or performance)

### **Positive Things to Say**

- Thank you for letting me know, I'm confident we can work through any concerns you have together
- In what ways can I support you?
- Don't worry about anyone else finding out if you want it to remain confidential
- I might have to consult with HR/OHS/ senior manager to find out what our options are. Is that ok?
- You're important to the team so I want to make sure you continue to want to work with us

### **Negative Things to Say**

- I feel very uncomfortable about this, could you not just talk to someone else?
- Is this an excuse for poor performance?
- I can't help you with this...It's not my job to sort out these issues
- I/my wife didn't have any problems with menopause
- Have you thought about retirement or moving jobs to somewhere that is easier?

## 9.4 Appendix D

### How to talk to your GP about menopause<sup>3</sup>

**If you are experiencing menopausal symptoms to the point where you feel they are getting in the way of you enjoying life, it is time to talk to your doctor.**

This can be a challenging experience. Some key points and guidance to help you get the best from your appointment include:

#### **Do not delay going**

If menopausal symptoms are affecting you, then 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 really useful to read before you see your GP so you know what to expect. Print them off and take them with you if that helps.

#### **Prepare for your appointment**

It is easier for your doctor to understand what is 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 are not always available or accurate – your hormones can fluctuate daily during this time. The doctor will make recommendations for you based on your symptoms and medical history.

Keep a [list of your symptoms](#), your menstrual cycle, hot flushes, how you are feeling, any changes you have noticed. It is also worth talking to friends and family, if you can – they may have noticed changes that you are not aware of.

Write them down and take them to your appointment. Your doctor will thank you for it and it is more likely that together you will find the right solution faster.

And, if you have any preferences about how to manage your symptoms and long-term health, tell them that too e.g. do you want to try hormone replacement therapy (HRT), herbal approach, changes in your lifestyle. It is your choice, and you should ask your GP about their opinion based on your medical history.

#### **Ask for a longer appointment**

If you do not think your standard appointment will be long enough, then you can request to book a double appointment.

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<sup>3</sup> This Guide is reproduced, with amendments, from Henpicked: Menopause in the Workplace

### **Do not be afraid to ask for a second opinion**

If you do not feel you have received the help you need, ask to speak to someone else or make an appointment with another GP in the practice. Do not be put off, you know how you are feeling and how it is affecting you.

### **Ask if there is a menopause clinic in your area**

Occasionally, there are regional clinics specifically devoted to menopause. The Sandyford in Glasgow hosts the [Sandyford Menopause Service](#).

### **Take your partner or a friend with you**

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 is just that time of your life.
- Tell you they do not prescribe HRT. It is up to you what you want to try and for them to say whether it could be right for you, depending on your medical history.