



HUMBERSIDE FIRE AND RESCUE SERVICE

People & Development

Menopause Policy

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What we must
do well



How we support our
communities



We value and support
the people we employ



We efficiently manage
the Service

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1. INTRODUCTION

This policy has been designed to outline to staff and managers the ways in which female employees should be supported during the menopause.

Statistics and supporting information in this guidance have been taken from research done by The University of Nottingham (2010), ACAS-Menopause at work, The British Occupational Health Research Foundation (BOHFR 2019), TUC-Supporting working women through the menopause and Faculty of Occupational Medicine (FOM)-Guidance on Menopause and the Workplace, The Journal of musculoskeletal & neuronal interactions and Menopausefriendly.co.uk.

Core Code of Ethics

HFRS has adopted the Core Code of Ethics for Fire and Rescue Services. The Service is committed to the ethical principles of the Code and strives to apply them in all we do, therefore, those principles are reflected in this Policy.

National Guidance

Any National Guidance which has been adopted by HFRS, will be reflected in this Policy.

2. EQUALITY AND INCLUSION

HFRS has a legal responsibility under the Equality Act 2010, and a commitment, to ensure it does not discriminate either directly or indirectly in any of its functions and services nor in its treatment of staff, in relation to race, sex, disability, sexual orientation, age, pregnancy and maternity, religion and belief, gender reassignment or marriage and civil partnership. It also has a duty to make reasonable adjustments for disabled applicants, employees and service users.

3. AIM AND OBJECTIVES

This policy sets out the expectations, parameters and consideration for all employees, dealing with the welfare of operational and non-operational staff experiencing symptoms of the menopause.

All staff should be aware of this policy and all managers and supervisors with responsibility for staff should be aware of the arrangements that should be put in place within the Service that will ensure women experience no disadvantage because they may need occupational adjustments.

4. ASSOCIATED DOCUMENTS

- [Equality Impact Analysis](#)
- Legal References
 - Health and Safety Management Regulations

- National Guidance
There is no specific national guidance relating to this policy.
- [Flexible Working Policy](#)
- FOM - Guidance on Menopause and the Workplace and
- The Journal of musculoskeletal & neuronal interactions.
- TUC - Supporting working women through the menopause
- ACAS - Menopause at work
- Research from The British Occupational Health Research Foundation (BOHFR 2019)
- Research from The University of Nottingham (2010)
- Maltais, Desroches, & Dionne (2009)

5. HEALTH AND SAFETY

HFRS has a responsibility to ensure the health, safety and welfare of our employees and we are required to carry out risk assessments under the Health and Safety Management Regulations, which should include any special risks for women experiencing the menopause.

The Service recognises its moral and legal duty to consider the physical and psychological needs of the workforce.

6. THE MENOPAUSE

Menopause is defined as a biological stage in a woman's life that occurs when her hormones change and eventually menstruation stops. Usually, it is defined as having occurred when they have not had a period for 12 consecutive months (for those reaching menopause naturally). An individual's experiences before and during menopause are recognised as personal; as a result of this, the menopause is an issue that is not commonly talked about. As women make up 47% of the UK workforce with approximately 3.5 million aged over 50, there is a need to understand the occupational health issues they may face at work because of the menopause. Employers, managers and colleagues need to recognise and provide the support that may be required.

The menopause usually happens between the ages of 45 and 55 years of age with the average age of onset in the UK being 51. However, several factors can lead to women experiencing premature or early menopause under the age of 45. Around 1 in 100 women experience premature menopause.

Factors that can lead to premature menopause include:

- Surgery to remove the ovaries
- Radiotherapy to the pelvic area as a treatment for cancer
- Some chemotherapy drugs for cancer may lead to early menopause

- A hysterectomy before the menopause can lead to the ovaries stopping oestrogen production at an earlier age.
- A family history of early menopause
- In some women with early menopause no reason can be determined.
- IVF Treatment can also bring on early menopause

The time leading up to the menopause is known as the perimenopause stage and this is when the changes that are associated with the menopause may occur. Women can begin to experience symptoms as hormone levels fluctuate. Some have almost no symptoms but around 80% do experience noticeable changes and of these, 45% find their symptoms difficult to deal with.

Post menopause is the time after the menopause has occurred, starting when a woman has not had a period for 12 consecutive months and for the rest of her life.

When this policy refers to the menopause, it is referring to any of the above stages.

7. SYMPTOMS AND WORK RELATED ISSUES

Everyone is different, some may not experience any symptoms at all, however, three in four women may experience physical and/or psychological symptoms and as many as one in four may experience serious symptoms. These symptoms are associated with a decrease in the body's production of hormones. The resulting low and changing levels of hormones, particularly oestrogen, are thought to be the cause of the perimenopausal symptoms in many women.

The most common symptoms that affect working women include:

- Hot flushes during the day or night.
- Difficulty sleeping, insomnia or fatigue, irregular and/or heavy periods
- Aches and pains
- Migraines or headaches
- Urinary problems, e.g. increased frequency
- Low mood, depression or changes in mood
- Poor concentration and memory
- Nervousness, worry or anxiety

Overall, this period of hormonal change and associated symptoms can last from four to eight years and for a small amount of women it can be longer. Not every woman will experience all these symptoms and they may not occur continuously.

Without appropriate support and consideration, these symptoms can adversely affect the quality of both personal and working life. At work they can cause embarrassment, diminish confidence and can be stressful to deal with. The menopause may be compounded by the development of other health conditions.

In 2011, the British Occupational Health Research Foundation (BOHRF) published research from the University of Nottingham. This study showed:

- Many women found they are little prepared for the arrival of the menopause,

and even less equipped to manage its symptoms at work. Over half had not disclosed their symptoms to their manager.

- The majority of women responding, felt they needed further advice and support.
- Workplaces and working practices are not designed with menopausal women in mind.
- Heavy and painful periods, hot flushes, mood disturbance, fatigue and poor concentration pose significant and embarrassing problems for some women, leaving them feeling less confident.
- Women are not comfortable disclosing their difficulties to their managers, particularly if those managers are younger than them or are male.
- Where women had taken time off work to deal with their symptoms, only half of them disclosed the real reason for absence to their line managers.
- Some women said they worked extremely hard to overcome their perceived shortcomings.
- Others considered working part-time, although they were concerned about the impact on their career if they did so and/or had even thought about leaving the labour force altogether.
- Over half of the sample reported they were not able to negotiate flexible working hours or working practices as much as they needed to in order to deal with their symptoms.
- Over half of the women felt that it would be useful to have information or advice regarding the menopause and how to cope with work from their employer.
- Temperature in the workplace appeared to be an issue for many women. Nearly half of the sample reported not having temperature control in their usual working environment. Some could not open windows or experienced interpersonal difficulties doing so in shared workspaces.

8. SUPPORTING WOMEN AT HFRS

Many women may prefer to develop their own coping strategies such as:

- Obtaining fans or opening windows.
- Adjusting their working hours or routine.
- Wearing layers of clothing and having a change of clothes at work.
- Altering diet.
- Doing more exercise.
- Seeking out information about the menopause.
- Using HRT or alternative remedies to help cope with the more troublesome symptoms at work.

However, the following approaches will be taken by HFRS as a responsible

employer to support women and lessen the impact of this issue:

- Publishing and promoting this guide for line managers will assist in understanding the potential impacts of menopause and the simple adjustments that can be made.
- By raising awareness with all staff through workshops, staff can support colleagues (if required) and know menopause is not something to be embarrassed about.
- In creating a positive attitude to menopause and developing a culture of openness, the aim is to increase knowledge for all staff as their colleagues, partners, spouses or family members could be affected by menopausal symptoms.
- Information will be available on how to get support for any issues that arise as a result of the menopause.
- Identifying women's groups that other women can talk to.

9. WORK ADJUSTMENTS

While women in all occupations and roles may suffer varying menopause symptoms, it is recognised that women who work shift patterns, work in hot environments, have little say over uniform or PPE and who deal with trauma and stress due to the nature of their role, may need specific support at work.

Management risk assessments should consider the special needs of menopausal women and ensure the working environment will not make symptoms worse. In the case of firefighters it is likely to include being able to cool down quickly after wearing fire kit or post-incident.

A number of areas that were indicated as being key considerations for women were better access to:

- Cold drinking water,
- Toilet facilities (welfare unit on the incident ground)
- Comfortable rest room
- Adjustable workplace temperature and ventilation
- Access to fans
- Comfortable chairs
- Shower facilities
- Consideration of the most suitable materials to be used for uniform that allow better body temperature regulation
- Advice about the importance of maintaining aerobic fitness levels and taking weight bearing exercise throughout their working lives, where appropriate.

Guidance for Managers/Employers

One of the key outcomes of the BOHRF research was for organisations to make

sure that their female staff feel empowered to speak openly about their health-related problems and ask for help.

Menopause can affect strength and performance; however, this does not have to be the case. Research on changes in muscle mass and strength after menopause suggest resistance training and adequate protein intake can help reduce the risk of sarcopenia and the loss of muscle (Maltais, Desroches, & Dionne (2009)). It is important, therefore, that women work on maintaining physical strength and preserving muscle mass. Employees can self-refer to the fitness advisor for advice and support on maintaining fitness.

Employers and managers have a responsibility to ensure the health, safety and welfare of their employees. Therefore, risk assessments should take account of any special risks for women going through the menopause.

Women should be able to expect support and practical assistance during what is, for some, a difficult time. Regular, informal conversations between manager and the employee may enable discussion of any change in health, including issues relating to the menopause. Such conversations can identify any support needed at work and so help women to be safe and well in carrying out their work duties. It can also encourage women to seek further support from GPs or other health practitioners.

However, employers need to recognise that some women may be reluctant to have discussions about their experience of the menopause with their manager and signposting to an Occupational Health, HR or FBU female representative or Voices for Women members can be useful.

Employees should be able to expect respectful behaviours at work including those that relate to their gender and/or age.

Information and sign posting to other agencies that can offer support will be made available via the intranet and other means (e.g. Occupational Health campaigns).

Guidance for Employees

Women who find their menopausal symptoms are affecting their wellbeing and capacity to work should:

- Find out more about the menopause from available sources of information (see hyperlinks at the end of this guidance).
- See a GP for advice on available treatment options.
- Discuss practical needs with their line manager or another manager they feel comfortable talking to.
- Use technology where this is helpful, e.g. for reminders or note taking.
- Speak to an Occupational Health professional to discuss support and possible work adjustments.
- Talk about symptoms with colleagues, particularly those who are also experiencing symptoms. Work out preferred coping strategies and working patterns. If those they work with are supportive, this can make a big difference.

- Avoid hot flush triggers (such as hot food and drink) especially before presentations or meetings.
- Consider relaxation techniques such as mindfulness techniques and other potentially helpful techniques such as cognitive behaviour therapy, as these can help reduce the impact of symptoms.
- Consider lifestyle changes such as weight reduction, smoking cessation and exercise.

Further guidance for women that could help support them during their Menopause include:

- Consider asking for changes to garments worn under PPE, e.g. moisture and temperature management tee-shirts if necessary.
- Consider making requests to adjust the workplace temperature and ventilation – and explain why so colleagues understand.
- Request workplace adjustments
- Use the Flexible Working Policy to help manage severe health conditions arising from the menopause (note: flexible working requests are not guaranteed).

10. FURTHER SOURCES OF INFORMATION

[ACAS Menopause at work](#)

[British Menopause Society](#)

[FBU Good Practice Guidance for Menopause](#)

[Maltais, Mathieu & Desroches, J & Dionne, Isabelle. \(2009\).](#) Changes in muscle mass and strength after menopause. Journal of musculoskeletal & neuronal interactions. 9. 186-97.

[Menopause-NHS](#)

[Managing short-term menopause symptoms NICE Pathways](#)

[Menopause Diagnosis and Management NICE](#)

<https://www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information>

[Supporting Working Women- TUC](#)

[The Menopause Support Guide to Understanding Menopause for Men.](#)

**For further guidance/information relating to this document, please
contact Occupational Health & Wellbeing**