

## **Menopause and the workplace webinar Q&A's**

### **Q: Which Menopause books would you recommend?**

**Alex & Suzanne:** *There are plenty of books that are available on the menopause but the ones both trusts in the webinar have been using is Menopause: The Change for the Better by HENPICKED.*

### **Q: Have you noticed a subsequent reduction in females reporting stress and anxiety?**

**Suzanne:** *We haven't seen a significant reduction yet but what we have seen is that staff who are going through the menopause are citing this reason in their Occupational Health appointments and in their conversations with their line managers. What we have also seen is an increase in awareness of women linking their stress and anxiety symptoms to the menopause when they may not have done that previously.*

### **Q: How are requests for flexible working have been managed for shift workers?**

**Alex:** *Flexible working is trickier for us as staff are community staff and do long days instead of long days. A section has been added into our flexible working policy where people can do short-term adjustments to working patterns. It allows our organisation to see if it fits as someone might not need it long term. For any requests that have been declined, these are reviewed at local version of our staff management council meeting with the assistant director of that department, human resources and a trade union rep. Our menopause guidance refers people to things they can consider.*

### **Q: How do you support staff who are yet comfortable to talk about it?**

**Alex:** *For staff who are not yet comfortable to talk about it, we have provided support that they can access such as the staff intranet page, the Menopause book through the Wellbeing Library and signposting to other services. For us, it is about providing the support that the individuals needs at the time and not expecting everyone to want to discuss it. We ensure we regularly publicise the support available so that it is identifiable without needing to ask.*

**Suzanne:** *We offer monthly support sessions topic based, talk about menopause at each monthly Chief Nurse bulletin and general comms monthly when promoting support session, training for managers.*

### **Q: How would you identify performance issues as opposed to menopausal symptoms?**

**Alex:** *Menopausal symptoms could provide mitigation for a change in an individual's performance, so it is important to encourage open communication between the individual and their manager and use Occupational Health / GP advice as required to understand the nature and extent of any menopausal symptoms and the impact this might be having on work. Every woman will have their own experience of the menopause, so it is important to understand their experience and its impact.*

**Suzanne:** *We can only be guided by a one to one basis as to whether staff raise this as an issue. We cannot assume its menopause as some women do not experience any symptoms but are within this age profile.*

**Q: Please can you give us an idea of what you covered as an agenda for the conferences?**

**Suzanne:** *Myself and the project team planned the trusts' first menopause conference on World Menopause Day 2018 which launched guidelines, leaflets and intranet support for all our staff. The first half of the agenda focused on line managers and how they can become better informed to confidently support their staff. The second half of the agenda focused on all staff and showcased what advice and support was available in the organisation for them. signs and symptoms of menopause. An example of our agenda can be found below:*

- *Key issues e.g. HRT, mental health and anxiety*
- *Reasonable adjustments and having conversations*
- *Our stats within the workforce - age demographics and sickness details for females compared to average*
- *Guidelines and leaflets*
- *Q and A session*

**Q: Suzanne - Is Menopause reported monthly to directorates in the same way stress and anxiety is reported?**

**Suzanne:** *Unfortunately, no, because we don't have an ESR code so cannot be sure that's the correct diagnosis.*

**Q: Are you aware if there will be any updates to ESR functionality regarding recording sickness as menopause?**

We have received the following update from ESR:

*Following enquiries from users ESR will be enhanced to enable the recording of menopause related absence and thereby allow monitoring of its impact on the workforce.*

*The hitherto unused 'DH Monitoring' field within the Additional Absence Details form will be repurposed and renamed to 'Related Reason'; it will initially contain the following single value:*

- *Menopause*

*The renamed field will continue to be available to report on locally through business intelligence (BI) and at national level through the Strategic Data Warehouse.*

*This enhancement is currently in progress; users will be advised of the planned release date in the 'ESR Development Schedule' which is published on the [ESR Kbase](#)*

*You can find more details regarding ESR including functionality and contact details on the [ESR website](#)*

**Q: A lot of the focus seems to be on how individuals might cope with the menopausal symptoms. Have any communications or projects focussed on removing the taboo around menopause for those who aren't going through it - including men?**

*Alex: Our monthly health and wellbeing briefing was aimed at all staff and cascaded through all teams and addressed that even if you are not experiencing symptoms of the menopause, your colleagues may be so this is how you can be supportive – both as peers and managers. This has been reinforced in the Menopause Guide which has a section to help colleagues understand how they can be supportive if their colleague is experiencing menopausal symptoms.*

*Suzanne: Our comms is targeted at all staff and the conferences are too. We separated out last year's conference to a line manager one and then one for colleagues affected by the menopause*

*Significant number of men attended the line manager training. We also discuss reasonable adjustments with all line managers on their induction training and capture menopause as part of this. Men may not be going through the menopause, but most men will be affected in some way either through work collages or home situation and as such raising the awareness is important*

**Q: For those that have a menopause policy, are adjustments made to absence policy triggers for menopausal related absences?**

*Alex: not explicitly as a separate reason to make an adjustment to the triggers. Line managers have discretion to have conversations with staff if it is going that way and HR are part of those discussions. We have kept ours around the legislation which is around the disability or long-term condition.*

**Q: What support have your estates team offered around supporting staff with the menopause?**

*Suzanne: we have worked closely with our estates team. We have introduced water stations in staff areas to make sure staff stay hydrated in all clinical and non-clinical areas. We have also got fountains throughout the organisation. Staff can order fans through their line managers and we have guidance around where they can be used. We have fans in staff break rooms and non-clinical areas. We also provide changing room facilities on site and worked with reception staff and their line managers to make sure they have a space to step away and get a drink should they need that break.*

*Alex: our facilities map was instrumental in helping us identify locations where staff could use but also important in ensuring that those sites had the things, they said they had. We also made sure we had a core offer for staff so our main bases, fans available, space to make sure windows can open effectively, water coolers, having spaces that are to a nice standard that staff will want to use as people may want to*

*change their uniforms etc. Our estates team sit on our health and wellbeing group, so they are good at supporting our infrastructure.*

**How have you involved managers with supporting staff with the menopause as most might be unaware of what they need to do or the conversations to have with staff?**

**Suzanne:** *Our first conference was separated out, so in the morning was directed at line managers with a bespoke session so managers are aware, and the representation was brilliant. In the afternoon conference for staff, the first question that was asked was, have you trained the managers?*

*Our second site conference was merged and captured line managers and colleague training as one. Our sickness absence training with line managers includes the menopause. When new line managers start in the organisation and have their training (Band 7 and above) and as part of that it includes the menopause.*

**Are you aware of any communications projects that have helped to remove the menopause taboo?**

**Suzanne:** *We have one of our senior comms managers on our project group. Every time we meet there is always a briefing that goes out in our general comms. Comms have been doing a bespoke section in the run up to our conference and always link the trust into the national work taking place around menopause.*

**Our organisation is tight on resource to be able to have lots of face to face staff engagement, what as a minimum would you suggest we could do to support our staff and managers?**

**Alex:** *Due to our dispersed geography we use a lot of social media and have an active Twitter and Facebook account. We use that as a really resource to get the conversation started. Our health and wellbeing briefing are well received by managers and comes out on the first of every month and all staff can access it via our intranet. At the back of our briefing every month we have a team challenge. In the run up to women's health week in our trust the challenge was to talk to two people, male or female, friend or colleague about women's health and helps get the conversation started. It is more important colleagues talking to colleagues as opposed to trust wide doing the staff engagement down. We try our best to get the conversations started from the bottom up.*

**Our organisation is starting to think about how we are going to support all our staff with the menopause, in your experience, what top tip could you suggest getting us started?**

**Suzanne:** *You need to get Exec sign up to champion for you. As an exec you are in a privileged position to be able to champion things. It is about talking in as many forums as possible about the menopause and will always link something in. Look at your sickness absence and age profile and use your data wisely. The more you talk about it the less of a taboo it becomes. We also use Twitter a lot which can have a great impact and working out what works best for you in your organisation.*

**Alex:** *we have found having a male champion is helpful and makes it OK for men to talk about it as well. It is about weaving it into everything you do and is important when you can update something and reference it then do.*

**Q: interesting slides, will they be made available after the webinar please.**  
*Yes, you can access the slides along with the webinar recording on our webpages.*

**Q: Interested to see other Trusts Menopause Strategies?**  
*NHS menopause guidance can be found on our [menopause and the workplace webpage](#).*

**Q: Can a copy of Norfolk's Menopause Guide be shared please?**  
*Yes, this can be found on our [menopause and the workplace webpage](#).*