International School of London

Menopause Policy

Date reviewed:
August 2025

To be reviewed:
August 2026

Mission statement

Since 1972, we have established a welcoming and inclusive community. Our diverse cultures and languages drive all our learning experiences.
We nurture creativity and curiosity to stimulate deep thinking. We foster insight, compassion and resilience to enable us to play a meaningful part in a changing world.

Vision statement

We celebrate our stories, our worth and our purpose to make a difference in a shared world

At the International School of London, we believe in:

- Empowering students to maximise their learning opportunities and to fulfil their potential.
- Actively integrating cultural diversity in the curriculum.
- Creating inclusive, vibrant and innovative learning communities.
- Offering a diverse and extensive international programme that supports personal, social and professional growth. coming and inclusive community. Our diverse cultures and

Purpose

- International School of London 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. With the right support, it can be much better. Whilst everywoman does not suffer with symptoms, supporting those who do willimprove their experience at work.

- Menopause should not be taboo or 'hidden'. We want everyone to understand what menopause is, and to be able to talk about it openly, without embarrassment. This is not just an issue for women, men should be aware too.

- The changing age of the UK's workforce means that between 75% and 80% of menopausal women are in work. Research shows that the majority of women are unwilling to discuss menopause-related health problems with their line manager, or ask for the support or adjustments that they may need.

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

SCOPE

This policy applies to all International School of London staff and leadership.

POLICY

The aims of this policy are to:

- Foster an environment in which colleagues can openly and comfortablyinstigate conversations or engage in discussions about menopause.
- Ensure all staff understand what menopause is, can confidently have good conversations, and are clear on International School of London policy and practices.
- Educate and inform line managers about the potential symptoms of menopause, and how they can support women at work.
- Ensure that women suffering with 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 or studies.
- Reduce absenteeism due to menopausal symptoms.
- Assure women that we are a responsible employer, committed tosupporting their needs during menopause

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1) Definitions

1.1 **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 laterthan this due to surgery, illness or other reasons.

1.2. **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.

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

2) Symptoms of Menopause

2.1. 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.

2.2. Symptoms can manifest both physically and psychologically including, but not exclusively, hot flushes, poor concentration, headaches, panic attacks, heavy/light periods, anxiety, and loss of confidence. Some women also experience difficulty sleeping.

3) Drivers

3.1 International School of London has used guidance from the Faculty of Occupational Medicine (FOM), and the National Institute for Health and Care Excellence (NICE), to inform this policy. The NICE guidelines setout the recommendations for medical professionals when treatingmenopausal women, and for patients as to the treatment and guidance they should be offered.

3.2 Self-management, with support from International School of London, leadership and colleagues, will help to manage symptoms. Appendix 1 details some recommendations to support symptomatic women, and men who may need advice and support. Appendix 1a is a template to assist you in recording conversations, and agreed actions and adjustments,with members of staff.

3.3 In accordance with FOM and NICE guidelines, women should be advised to seek medical advice from their GP in the first instance. Appendix 2 offers a helpful guide for women on how to have constructive conversations about menopause with their doctor.

4. Roles and Responsibilities

4.1. Members of staff**:**

4.1.1. All staff are responsible for:

- Taking a personal responsibility to look after their health;
- Being open and honest in conversations with line 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 the HR Manager oranother 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.

4.2. Line Managers (see Appendix 1 for Managers' Guidance)

4.2.1. 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 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.

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

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

4.3. Occupational Health

4.3.1. 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/wellbeing, providing advice and guidance inline 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 SLT and Line Managers in identifying reasonable adjustments, if required;

4.4. The HR Manager & SLT

4.4.1. The HR Manager and SLT will:

- Offer guidance to managers on the interpretation of thisPolicy and Guidance;
- Attend training sessions, and develop briefing sessions, for staff;
- Monitor and evaluate the effectiveness of this policy inrespect of related absence levels and performance.

4.5. Counselling

4.5.1. Employees may be encouraged to see a Counsellor where appropriate

Appendix 1 Line 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 actions, and how to implement them (you should use the templateat Appendix 1a to record the meeting, so that all parties agree what has been discussed, and the next steps, before the meeting ends). 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. Do not relyon quick queries during chance encounters in the corridor or break room.

Symptoms Support

Symptoms can manifest both physically and psychologically, including, but notexhaustively 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;
- Have access to a rest room for breaks if their work involves long periods of standing or sitting, or a quiet area if they need to manage a severe hotflush.

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 outside lessons;
- Offer the choice of using noise-reducing headphones to wear in open offices;
- Have time out to take medication if needed.

Low Mood

- 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';
- Speak to HR for support options

Loss of Confidence

- Ensure there are regular Personal Development Discussions;
- Have regular scheduled time with their line manager to discuss any issues;
- Have a support work plan developed with line manager

Poor Concentration

- Discuss if there are times of the day when concentration is better or worse,and discuss support that might help;
- Provide books for lists, action boards, or other memory-assisting equipment;
- Offer the use of noise-reducing headphones to wear in open offices;
- Reduce interruptions where possible;
- Have a support plan to catch up with work.

Anxiety

- Promote counselling services in school
- 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 relaxationtechniques;
- Undertake mindfulness activities such as breathing exercises, or going fora walk.

Panic Attacks

- Agree time out from others in meetings, when required, without needing to ask for permission;
- Identify a 'buddy' outside of work area;
- Be able to have time away from their work to undertake relaxationtechniques;
- Undertake mindfulness activities such as breathing exercises, or going fora 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 helpfulat this point to make an Occupational Health referral to give specific advice regarding the workplace.

Appendix 1a Confidential Colleague Discussion – Template

Member of staff' details:			
Name		**Job Title**	
Department/Division		**Location**	

Present at meeting (line manager name and position)	
Date of discussion	

Summary of Discussion:

Agreed Actions/Adjustments:

Date of next review meeting

.....

Signed (Member of staff)

.....

Signed (line manager)

.....

Appendix 2 Menopause Advice Sheet – How to talk to your GPabout menopause

If you are suffering from menopausal symptoms to the point they're getting in the way of you enjoying life, it's time to talk to your doctor. But, sometimes, that's easier said than done.

We all know how difficult it can often be just to get an appointment, and then it's often only ten minutes. And talking about symptoms can be hard, let alone if you feel rushed or unprepared. So, what can you do? We've put together some helpful, straightforward tips to help you get the best from your appointment.

Don't wait. It is all too common for women to feel they must simply 'put up' with menopausal symptoms as a part of life, but if they are affecting you, thereare 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.

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 duringthis 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'refeeling, and any changes you've noticed. Write them down, and take them toyour appointment. Your doctor will thank you for it, and it's more likely that together, you'll find the right solution faster. And, if you have any preferencesabout 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 doctor is best to talk to about menopause. Theyare often the fount of all knowledge at a surgery, and can help you find the best person to speak to – 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 appointmentwill be long enough, try to book a double appointment, as some surgeries do offer this.

Don't be afraid to ask for a second opinion. If you don't feel you've receivedthe help you need, ask to speak to someone else. Don't be put off, you knowhow 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.

Take your partner or a friend with you. The chances are, you spend your life supporting others and, during menopause, it's your turn to ask them for support. 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-medicaloptions;
- 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. It's 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;
- 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 tomanage them.

Remember, your GP is there to help and support you, 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 throughmenopause when there is help and support available.

Appendix 3 External Links

National Institute for Health and Care Excellence (NICE) guidelines.These explain how your GP will determine what types of treatments andinterventions they can offer you. You can find out more information by using the following link https://www.nice.org.uk/guidance/ng23/ifp/chapter/About-this- information.

The **National Health Service** provides an overview of menopause. Youcan find more at http://www.nhs.uk/Conditions/Menopause/Pages/Introduction.aspx.

Menopause information. The Royal College of Obstetricians and Gynaecologists offer further information in a dedicated area of theirwebsite at: https://www.rcog.org.uk/en/patients/menopause/.

Premature Ovarian Insufficiency (POI) information and support onvery early menopause. You can find out more at https://www.daisynetwork.org.uk.

Information on hysterectomy. This provides an insight into surgicallyinduced menopause as a result of having a hysterectomy. Further details can be found at https://www.hysterectomy-association.org.uk.

Henpicked. This site provides information on managing menopause,and an insight into women's stories (see https://henpicked.net/menopause/).

At ISL London, Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all practitioners should make sure their approach is child-centred. This means that they should consider, at all times, what is in the best interests of the child.