



Chelmsford Diocesan Board of Finance

Menopause Policy

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About this policy

- 1.1 This policy has been developed to promote an environment and culture that supports clergy and members of staff experiencing perimenopause and menopause symptoms.
- 1.2 We acknowledge that transitioning through the menopause can be a difficult and stressful period and individuals can experience symptoms that can impact their working life. This policy offers guidance so individuals can feel comfortable about raising issues relating to their symptoms and asking for reasonable adjustments to be made regarding their workplace environment and/or how they carry out their role.
- 1.3 This policy reflects the Diocese Chelmsford's commitment to ensuring the health, safety and wellbeing of all clergy and members of staff as well as its commitment to equality and diversity within the ministerial and professional environment and culture.
- 1.4 It also provides guidance to those offering support to clergy and members of staff, including Women's Ministry Advisers, Archdeacons, and line managers in having helpful and supportive conversations with those experiencing perimenopause and menopause symptoms.

Who is responsible for this policy?

- 2.1 This policy has been developed in partnership with representatives from the Diocesan Wellbeing Implementation Group, the Women's Ministry Team, and the Diocesan HR Team. The representatives from these groups will be responsible for review and update the policy.

Who does this policy apply to?

- 3.1 This policy is intended to apply to all ordained current and new clergy and members of staff of the Chelmsford Diocesan Board of Finance (CDBF).
- 3.2 This policy does not form part of the Statement of Particulars or the Statement of Main Terms and Conditions of Employment. The policy has been provided as a resource and guidance document.
- 3.3 Every individual's personal and professional circumstances are different. Therefore, it is neither feasible nor desirable to provide a policy with a structured set of specific actions that should be taken when seeking to support individuals going through the menopause.

What is the Menopause

- 4.1 The "menopause" is a single day, 12 months after an individual's final period. In the UK and United States, the average age for this is 51 — but that average masks a huge range of experiences. (Anything before 40 is considered "premature" - the NHS estimates that 1 in every 100 those who experience menopause will experience premature



menopause). The symptoms that come before that day are the “perimenopause”, and anything that comes after that date is “post-menopause”. The term “menopause” is often used refer to the whole period of time in which an individual experiences symptoms. This lasts about four years on average, although it can be as many as 12 years.

- 4.2 Every individual’s experience of the menopause is different and not every individual will experience menopausal symptoms. Individuals who are non-binary, transgender or intersex may also experience menopausal symptoms. However, some individuals experiencing menopausal symptoms, whether before, during or after this time of hormonal change may need additional consideration and support to fulfil the requirements of their roles.
- 4.3 About 70% of those experiencing perimenopause and menopause symptoms experience a wide range of physical and psychological symptoms and it has been found that approximately 60% of individuals find their working life negatively affected by symptoms. Each person will be affected in different ways and to different degrees over different periods of time, and menopausal symptoms can often indirectly affect an individual’s partner, families, and colleagues as well.
- 4.4 Some individuals with pre-existing health conditions, may find that the menopause can aggravate their existing health conditions or even trigger new ones. Menopausal symptoms can in turn also be made worse by any pre-existing health conditions.
- 4.5 Some individuals also experience a medical/surgical menopause which can occur suddenly when the ovaries are damaged or removed by specific treatments such as chemotherapy, radiotherapy or surgery.

Policy Principles

This menopause policy aims to:

- Enable individuals experiencing the menopause and/or symptoms of the menopause to continue to be effective and be supported in their role.
- Assist those individuals in a position of responsibility, including the Women’s Ministry Advisers, Archdeacons, Bishops or those to whom office holders are accountable as well as line managers to understand how the menopause can affect clergy and members of staff, and how they can support those experiencing the menopause as they carry out their role and perform their duties.
- Raise awareness amongst clergy and members of staff about their rights and responsibilities with regards their experiencing of the menopause and any menopausal symptoms, as well as the rights and responsibilities of their colleagues.
- Foster an environment in which individuals can openly and comfortably instigate conversations or engage in discussions about the menopause in a respectful and supportive manner.



- Offer assurance to clergy and staff that they can be confident they will not be subject to any disadvantage if they take up any of the support available or request changes to their workplace environment and/or how they perform their duties.
- Encourage clergy to request to speak to a member of the Women's Ministry Advisory team and staff to the Diocesan HR Team or another appropriate person if they are uncomfortable sharing their personal and sensitive menopausal experiences with those to whom they are accountable.
- Reassure clergy and staff that a 'need to know' only approach will be taken, keeping to an absolute minimum the number of people who are informed or involved in discussions regarding the provision of support and adjustments.
- Underline the importance of confidentiality and privacy by all concerned if other church officers need to be involved in the provision of support and adjustments.
- Highlight the need for all matters relating to an individual's menopause and any requests for support and/or adjustments to be dealt with sensitively and in confidence and in accordance with the Diocese of Chelmsford's data protection policy.
- Raise wider awareness and understanding about the menopause and impact on individuals in the workplace.
- Outline the support and reasonable adjustments available.

Support and Reasonable Adjustments

6.1 Members of Clergy

6.1.2 You are encouraged to talk to a member of the Women's Ministry Advisory Team or your Archdeacon. Appendix 2 provides guidance for individuals and managers to structure conversations and meetings. They can support you to: -

- Discuss the problems with the PCC or senior staff member if you haven't felt confident to do so.
- Make plans to temporarily alter your working pattern or working hours.
- Change your physical working conditions, such as getting you help to move your desk, or increase ventilation in your office.

6.1.3 Any agreed adjustments will be reviewed as appropriate to assess if they are still required and that they are still meeting your needs. It is recommended to agree intervals for regular review.



6.1.4 We would also encourage clergy to make use of flexibility in their working schedule to make adjustments to help alleviate the symptoms of menopause. These may include, for example:

- Allowing more time between appointments or services, to allow you time to change, recuperate or to go home in between
- Booking time into your day for exercise or other personal care activities you find helpful
- Factoring in time to recuperate after busy periods or late meetings
- Appendix 3 gives more information of possible lifestyle and ministry changes to help combat specific symptoms.

6.1.5 Members of clergy may also find an occupational health referral helpful in terms of providing recommendations and adjustments. This should be discussed with the Archdeacon and/or Diocesan HR Team.

6.1.6 Clergy may also find it useful to access the available counselling services for [clergy](#), as well as the Licenced Ministers Assistance Programme, which provides access to counselling and various resources.

6.1.7 There are also several external organisations which can provide support to individuals and appendix 6 details some useful signposts.

6.2 Members of Staff

6.2.3 You are encouraged to talk to your line manager or a member of the Diocesan HR Team. Appendix 2 provides guidance for individuals and managers to structure conversations and meetings.

6.2.4 Appendix 3 provides guidance around possible life style changes which could be implemented or adapted and you may wish to consider some or all of these.

6.2.5 The following reasonable adjustments may be made, by agreement with your line manager:

- **Temperature control:** We strive to achieve a comfortable working temperature for all members of staff. Chilled water is available in each of the kitchen areas. Desk fans can be provided if a request is made to the HR Team. We will allow flexibility with regard to dress code where reasonable.
- **Flexible working:** It is recognised that flexible working may be of assistance for those individuals experiencing symptoms. Requests for flexible working could include asking for a change to the pattern of hours worked; permission to perform work from home; a reduction in working hours; or more frequent breaks. Members of staff should discuss such requests with their line manager and the HR Team and depending on the circumstances, requests may be approved on a permanent or temporary basis.



- **Offering a quiet place to work**
- **Permitting time off for attendance at medical appointments**
- **The lifestyle changes** in Appendix 3 below may also be of value to individuals.

6.2.6 Members of staff may also find an occupational health referral helpful in terms of providing recommendations and adjustments. This should be discussed with your line manager and/or Diocesan HR Team, referrals

6.2.7 Members of staff may find it useful to access the Employee Assistance Programme, which provides access to counselling and various resources and further information can be obtained from the Diocesan HR Team or from the SharePoint folders via Microsoft Teams.

6.2.8 There are also several external organisations which can provide support to individuals and appendix 6 details some useful signposts.

Policy Review

6.2 The Policy may be amended at any time, including following changes in best practice and or employment law.



Appendices

Appendix I

Menopausal and Perimenopausal Symptoms may include (but are not limited to):

Changes to periods

The first sign of the perimenopause is usually, but not always, a change in the normal pattern of monthly periods, for example they become irregular. Eventually individuals stop having periods altogether.

Mental health symptoms

Common mental health symptoms of menopause and perimenopause include:

- changes to mood, like low mood, anxiety, mood swings and low self-esteem
- problems with memory or concentration (brain fog)

Physical symptoms

Common physical symptoms of menopause and perimenopause include:

- hot flushes, sudden feelings of hot or cold in face, neck and chest which can make one dizzy
- difficulty sleeping, which may be a result of night sweats and make one feel tired and irritable during the day
- palpitations, when heartbeats suddenly become more noticeable
- headaches and migraines that are worse than usual
- muscle aches and joint pains
- changed body shape and weight gain
- skin changes including dry and itchy skin
- reduced sex drive
- vaginal dryness and pain, itching or discomfort during sex
- recurrent urinary tract infections (UTIs)
- sensitive teeth, painful gums or other mouth problems

(Source NHS - <https://www.nhs.uk/conditions/menopause/symptoms/>)



Appendix 2

Guidance to facilitate discussions between Office Holders and the Women's Ministry Advisory Team (or alternative contact) and CDBF Members of Staff and line managers

Every individual's experience of menopause is different, and some individuals may not have realised they are going through the perimenopause or menopause stage. Because of this it is not feasible to give a structured set of specific actions to take or questions to ask. However, this guidance should help inform a conversation.

This guidance can be used when either, a) an office holder or CDBF member of staff wishes to speak about their symptoms, or b) an office holder or CDBF member of staff just wants to talk about how they are feeling or what they are experiencing (they may not recognise themselves as being symptomatic).

- Allow adequate time to have the conversation.
- Find an appropriate, comfortable and private space to talk.
- Encourage them to speak openly and honestly.
- Allow the office holder/CDBF member to be the first to raise the terms 'perimenopause' or 'menopause' first, if possible.
- Take the office holder/CDBF member of staff's symptoms or feelings seriously. Don't belittle, judge or joke about.
- Discuss ways in which they can be supported and make positive changes to their lives. See Reasonable Adjustments above for guidance.
- If appropriate, record actions, and how they will be implemented, without taking responsibility away from the individual concerned; and, if appropriate, arrange a follow-up conversation.
- Ensure that any record is treated as confidential and is stored securely.
- Agree if, how and by whom others should be informed – this may mean incumbents, Area Deans or Archdeacons, according to the particular circumstances, and may include a request for an alteration in ministry.
- Schedule a follow up conversation within six months to review support and adjustments, as symptoms can fluctuate and personal circumstances change.



Appendix 3

More detail on possible lifestyle adjustments

Line managers, Women's Ministry Advisers and Archdeacons are not medical professionals, and they are not expected to have answers to questions about menopause treatments or the causes of the menopause, etc. However, they can help those suffering from symptoms by making even small adjustments. The list below is not exhaustive but could be considered as part of a conversation. Not all items listed below will be relevant, in particular for office holders.

Hot Flashes

- Consider temperature control for their work area, such as a fan on their desk (allowing them to sit or work near a window, or away from a heat source).
- Encourage the wearing of loose and relaxed clothing.
- Use a rest room for breaks if their work involves long periods of standing or sitting, or a private quiet area if they need to manage a severe hot flush.
- Introduce regular breaks in meetings.
- Normalise online meeting attendees turning off their cameras.
- Ensure easy access to drinking water.

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.
- Acquire noise-reducing headphones if these would be helpful.
- Allow themselves the time out to take medication if needed, and for this to take effect.

Difficulty sleeping

- Consider flexible working, including late start times, particularly if someone is suffering from a lack of sleep.

Low mood/mood swings

- Agree time out from others, when required, without needing to ask for permission.
- Encourage office holders and CDBF staff to make use of the available support services, including the counselling provision.

Loss of confidence

- Ensure regular 1-2-1's with a supportive colleague, reflective pastoral supervisor, spiritual companion, coach or equivalent.

Poor concentration

- Discuss if there are times of the day when concentration is better or worse and adjust working pattern/practice accordingly.
- Review task allocation and workload.
- Encourage the use of notebooks, apps, or software (e.g. Office 365 planner) for lists, action boards, or other memory-assisting equipment or resources.



- Discuss how interruptions could be reduced.
- Have agreed un-interrupted time to catch up with work.

Anxiety

- Encourage clergy and staff members to make use of the counselling services.
- Support them in undertaking activities such as contemplative prayer, breathing exercises, or physical activities such as going for a walk.

Panic attacks

- Agree time out from others, when required, without needing to ask for permission.
- Be able to have time away from their work to undertake relaxation techniques.
- Undertake calming activities such as breathing exercises or going for a walk.

General

- Discuss whether they have visited their GP. Depending on the discussion, this may be the next step to suggest, particularly if the areas of difficulty are sleeping, panic attacks or anxiety.
- Ensure they are aware, and know where to find details, of the Pastoral Support services.
- Ensure they are aware of and encourage them to visit the Clergy Wellbeing section of the diocesan website. which has useful information to help manage wellbeing.



Appendix 4 **The Women's Ministry Advisory Team**

See the Diocesan Web site for the most up to date contacts:

<https://www.chelmsford.anglican.org/support-for-ministers/womens-ministry-support>

Name	Email	Contact Number
Revd Elise Peterson	revelisepeterson@outlook.com	07462 771888
Revd Timnat Emmanuel	revtimnat.e@outlook.com	07715 008770
Revd Sally Croft	revsally.croft@gmail.com	07850 361101
Revd Eileen Rose	eileen.rose64@btinternet.com	0208 9239477

Appendix 5

HR Team

Name	Email	Contact Number
Rachel Towns, Head of HR	rtowns@chelmsford.anglican.org	01245 294427
Aimee Huxley, HR Adviser	ahuxley@chelmsford.anglican.org	01245 294428
Jess Richardson, HR Assistant	jrichardson@chelmsford.anglican.org	01245 294410
Angie O'Shea, HR Administrator	aoshea@chelmsford.anglican.org	01245 294409



Appendix 6 Further support

Diocese of Chelmsford Counselling Services	www.chelmsford.anglican.org/support-for-ministers/ministerial-wellbeing/counselling
British Menopause Society (BSM)	www.thebms.org.uk
Daisy Network	www.daisynetwork.org
Menopause Matters	www.menopausematters.co.uk
NHS	www.nhs.uk/conditions/menopause www.nhs.uk/conditions/earlymenopause
NICE	www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information
The Menopause Exchange	www.menopause-exchange.co.uk
Women's Health Concern	www.womens-health-concern.org
The Menopause Café	https://www.menopausecafe.net/
NHS Hormone Replacement Therapy Prescription Prepayment Certificate (HRT PCC)	NHS Hormone Replacement Therapy Prescription Prepayment Certificate (HRT PPC) NHSBSA <p>(Each item on an NHS prescription usually costs £9.90. You can buy an HRT PPC for a one-off payment of £19.80 (the cost of two single items). The HRT PPC covers an unlimited number of certain HRT medicines for 12 months, regardless of why they are prescribed)</p>