

Practice meeting 12 July - Menopause

Thoughts ..

Foster carers - what is the ages of your carer population, how you are aware of this and additional support that could be required

Use of effective supervisions, seeing a change in presentation or approach to children and fostering

Impact of caring for children and the physical demands as well as getting good sleep, how we manage our own anxiety, low moods, reduced concentration and memory and strains on relationships if we are not feeling our best

How we seek to understand this if considering reasons for changes in care - and are considering compliance, or standards of care

Staff - as above

Members discussion

- A reminder that both staff and carers are affected
- Policy to support both carers and staff – different things to consider
- Support to remain in the workplace
- Training and support to foster carers – acceptance of additional support but recognition of how might impact on caring for children
- Symptoms differ and impact differs from everyone
- Talking more in supervision of staff and foster carers – sensitive to ages of women
- Role of GP – recognition of menopause and not labelling as depression
- Health and exercise and natural wellbeing – encouraged and supported
- Support groups – forum – for females
- Also, recognition of forum for males – and impact
- Support groups ran by females that have been through the menopause
- Links and support networks – provided
- Remove the taboo
- Policy to be reflective of support and recognition
- Discussion re males and changes as aging or being with partner
- Used to be “swept under the carpet” but now trying to enable carers and staff to discuss and consider if this could be menopause related
- Changes in presentation – what is going on for them
- Cultures – difference and our acceptance of change during the aging cycle – celebration for some cultures
- Brain fog discussed – and how this can impact on memory or concentration – consider this when working with staff or speaking to carers re expectations

- Energy levels – can dip – tired, not sleeping and brings additional complications for managing children or being in work
- Reports that once through the menopause or during this – can lift and feel better
- Individual experience – all different
- Talk of humour and how this sometimes enables people to discuss
- Consider your carer and staff workforce and how this could impact on stability in the workplace or carer retention
- Not to isolate men – and their understanding and impact
- Consciously see male carers during this time and see if changes in their relationship – see together
- Women of menopausal age – same sex couples who foster
- Example of a foster carer who became very low in this stage of life – had sibs a long time and considered giving notice – how can this be supported
- Mental health – resilience tested
- Hot flushes – discussion re how warm the home is – example person who is always hot, turns heating off – child might report to being cold – is this about menopause and carer feeling too warm, or other reasons – keep open mind
- Work environment – fans on desk, consider assessment to ensure people can remain in work – adaptations
- Example of a child that said “given silence treatment” – carer struggling – support to able to recognise and manage emotions
- Withdraws from agency
- Family meetings – so all included to consider how can support – alongside agency?
- Those that are pro-active and willing to talk and share with others – briefings from others
- Those that refuse to accept – can be difficult, but could be impacting on role and resp
- Duty to carers but also to children
- Medicals and expectations of medical advisor – knowledge etc
- There might be contraindications for fostering – how is this considered
- Work with medical advisors
- Prompts by service to consider this naturally when women are around 50 (although can be younger and older) – but where recognise something might be a little different – discussion also with medical advisor
- Equality act / health and safety at work
- Changes to lifestyle
- Self-led journey
- HRT
- Carer – “thought I was going crazy”
- Change of approvals – to reflect if needs change
- Helping carers and staff to maintain vitality – exercise, support groups that feature yoga, nutrition, massage etc

- Sometimes discussion is “not welcome” by staff or carers – but need to work through this as it can impact on ability in the workplace or caring for children

Further information / links:

- [Menopause - NHS](#)
- [Health A-Z: Menopause - NHS 111 Wales](#)
- [Menopause – NHS Inform Scotland](#)
- [British Menopause Society](#)
- [Menopause Facts, Advice and Support - The Menopause Charity](#)
- [Menopause and the workplace - NHS Employers](#)
- [Menopause in the Workplace - Public Health Wales](#)
- [Menopause and the workplace: Resource pack – Alliance, Scotland](#)
- [Menopause policy - NHS Wales](#)
- [How to offer Menopause Support: a toolkit - Peppy Health](#)
- [Menopause and motherhood: Raising children while menopausal - Avogel](#)
- [Menopause information for partners – Jean Hailes](#)
- [Health talk: advice to partners about menopause](#)
- [NHS Inform; supporting someone through menopause](#)
- [LGBTQ+ menopause research](#)
- [Attitudes towards menopause: time for change - The Lancet](#)