Menopause Policy

Appendix 1b

Confidential Staff Discussion – Template Example

Please read Appendix 1 Managers' Guidance before completing this form

Employee's Name	Job Title	
School/Section	Location of Work	
Line Managers Name and Position:		
Date of discussion:		

Summary of Discussion:

What was discussed? E.g. Health, symptoms, impact on staff member, impact at work.

Issues to be addressed? (Please refer to Appendix 1 for information on possible symptoms and suggested adjustments)

Ask the staff member what would be helpful to them

Potential adjustments discussed

Agreed Actions/Adjustments:

Record agreed actions and how to/who will implement them

Agree next steps

Agree if other members of the team should be informed and by whom

Agree when next review meeting will be

Any other comments

Date of next review meeting
Signed (Member of staff)
Signed (Manager)
November 2022