

## **A guideline document about fertility treatment**

### **Why talk about fertility treatment?**

Infertility problems are extremely common in the UK. According to the NHS, around 1 in 7 couples may have difficulty conceiving. This is approximately 3.5 million people in the UK.

Infertility can have a profound impact on an individual's mental health and on their wellbeing as a whole. Physical, emotional, sexual, spiritual, and financial aspects of one's life can all be affected. The most common mental health concerns reported by fertility patients are symptoms of anxiety and depression, and this can have a lasting impact on someone's ability to undertake their work properly.

Queen Mary recognises the emotional and physical challenges which may arise from undergoing fertility treatments, and supports members of staff who wish to undertake fertility treatment. These guidelines are intended to assist line managers support eligible staff members in the logistical and emotional aspects of undergoing treatment.

There are 3 main types of fertility treatment:

- medicines
- surgical procedures
- assisted conception – including intrauterine insemination (IUI) and in vitro fertilisation (IVF)

A full list of fertility treatment options can be found here:

<https://www.hfea.gov.uk/treatments/>

### **Eligibility and proposed action**

Female or male employees undertaking fertility investigations or treatment are encouraged to discuss their situation with their line manager or with their HR Adviser. Managers should treat such information with sensitivity and confidentiality.

Investigations regarding infertility, consultations exploring treatment options and medical interventions aimed at assisting conception should be regarded as medical appointments and time off to attend such appointments should be given in the usual manner for a medical appointment. In addition, line managers should adopt a flexible approach to working for the duration of the treatment, so that the employee may request to work from home on the day of an appointment, to avoid travelling into work for short periods of time.

In the case of IVF, once a fertilised egg has been implanted in the uterus, a woman is deemed legally to be pregnant. From that time, she is legally protected from unfavourable treatment for the duration of her pregnancy, and is entitled to time off for antenatal care and pregnancy-related sickness, as per the University's ante-natal leave guidance. Managers should bear in mind the usual Health and Safety procedures associated with women who are or who may be pregnant, and should follow the guidance which can be found in the New and Expectant Mothers risk assessment form. Both the ante-natal leave guidance and risk assessment form can be found on the University's webpages here:

<http://hr.qmul.ac.uk/procedures/leave/maternity/>

## Requesting leave

In common with other leave options, staff should request leave in advance where possible. Queen Mary recognises that eligible members of staff may require unforeseen time off before or after fertility treatment.

Below are examples of how an employee might need to use leave for the purposes of undergoing fertility treatment.

Type of leave	Reason
Medical appointment	Investigating reasons for infertility; initial exploratory consultations regarding treatment options; collecting ova; ova implantation; IUI; other treatment options
Sickness leave	Physically recovering from the effects of a procedure; illness arising from pregnancy; illness arising due to fertility treatment

## Glossary of terms:

A full glossary can be found here:

<https://fertilitynetworkuk.org/trying-to-conceive/fertility-treatment/fertility-glossary/>

**Infertility** – Failure to conceive after regular unprotected sexual intercourse.

**Intra Cytoplasmic Sperm Injection (ICSI)** – A process in which a single sperm is inserted directly into the cytoplasm of an oocyte, thus bypassing all natural barriers a sperm has to encounter. Usually used when there is a low sperm count or reduced sperm motility.

**Intra Uterine Insemination (IUI)** – Insertion of a prepared sperm sample into the uterus through the cervix.

**In Vitro Fertilisation (IVF)** – A procedure whereby an egg or eggs are recovered by laparoscopy or vaginal ultrasound aspiration. This can be a natural or stimulated cycle, when drugs are used to make the ovaries produce more eggs. They are then placed with a specially prepared sperm sample – partners or donors – so that fertilisation can take place. The pre-embryo(s) is/are then transferred to the uterus when it/they may implant and develop.

## How long does fertility treatment last?

Below are some average timeframes for common fertility treatment options:

IUI	3-4 weeks
IVF	4-6 weeks.
ICSI	4-6 weeks

\* [www.hfea.gov.uk](http://www.hfea.gov.uk)

### Where to go for help?

- The HR Adviser for your faculty can help you with any queries you may have regarding these guidelines. Contact details can be found here: <http://hr.qmul.ac.uk/contact/>
- All QMUL staff can access counselling via Workplace Options, a free, confidential and independent service.  
Freephone: 0800 243 458 (username and password not required)  
Website: [www.workplaceoptions.co.uk](http://www.workplaceoptions.co.uk) (username: queenmary and password: employee).

### Further information:

- Fertility Network UK, the UK's largest charity for people experiencing fertility problems has an excellent range of resources and fact sheets [www.fertilitynetworkuk.org/](http://www.fertilitynetworkuk.org/)
- The Human Fertilisation and Embryology Authority is the UK's independent regulator of fertility treatment and research using human embryos, and has an excellent range of information on fertility treatments and clinics [www.hfea.gov.uk/](http://www.hfea.gov.uk/)
- [www.fertilityfriends.co.uk](http://www.fertilityfriends.co.uk) is the leading infertility community in the UK, with members at every stage of their journey.
- What happens during IVF: <https://www.nhs.uk/conditions/ivf/what-happens/>
- The National Institute for Health and Care Excellence (NICE) fertility problems guidelines explain how your GP will determine what types of treatments and interventions they can offer you. [www.nice.org.uk/guidance/cg156](http://www.nice.org.uk/guidance/cg156)