



INFORMATION FOR LINE MANAGERS

Menopause Guidance



Everyone's experience of menopause is different. We experience different symptoms, have different views or philosophies around how we would manage them as well as different medical histories.

This guidance is to help you understand the key facts about menopause and how as a manager you can support your colleagues.

Throughout this guidance, we sometimes use the terms 'women', 'female' and 'her'. However, we recognise that people of different gender and identities from different communities can also experience menopause or symptoms as a result of hormonal changes.



Introduction

At the RIBA, not only do we care about the health and wellbeing of our people, but we believe support for those going through the menopause is a fundamental human right.

We all need to understand more about menopause and other hormonal transitions, so we can offer the right support to you and your colleagues.

We recognise that menopause can affect us all, personally and professionally, and we want to help all our colleagues be the best they can be. Understanding the menopause is important for everyone – all genders – whether they’re experiencing it themselves or providing support for a fellow colleague, family member or friend. In addition, anyone can be affected by hormonal changes during their lives for a number of reasons, including pregnancy, fertility treatment, transitioning procedures, conditions needing hormone treatment, and menopause. These can bring about symptoms which could affect someone at work.

Trans people and the menopause

Some trans people will have medical interventions, such as hormone therapy and surgeries. However, not all trans people want this, or are able to. There are particular issues they may experience when going through the menopause.

LGBTQ+ people and the menopause

Women in same-sex relationships may go through the menopause at the same time as their partners. This can be positive, in terms of increased mutual understanding and support. However, if both partners are experiencing symptoms, this may be difficult for them.

Menopause is a stage of almost every woman’s life. This isn’t always an easy transition, but with the right support it can be much better. While everyone doesn’t experience symptoms, supporting those who do will improve their experience at work and in their personal lives.

We want everyone to feel comfortable talking about menopause, never feeling that the subject is taboo or off limits. This guide is to explain more about menopause and to help you understand what support is available to you.



What is Menopause?

Menopause is defined as a biological stage in a woman's life that occurs when her hormones change and eventually menstruation stops. Usually it is defined as having occurred when they've not had a period for 12 consecutive months (for those reaching menopause naturally). The average menopause age is 51, however it can be earlier naturally or due to surgery, illness or other reasons.

Perimenopause is the time leading up to menopause when they may experience changes and menopausal symptoms. This can be years before menopause.

Postmenopause is the time after menopause has occurred, starting when a woman has not had a period for 12 consecutive months and for the rest of her life. When we talk about menopause in this guidance, we are referring to any of these stages.

What are the symptoms of menopause?

Hormonal changes can result in a wide range of symptoms, both physical and psychological. In research, the ones women have said affect them most at work include, but are not limited to:

- Difficulty sleeping, insomnia or fatigue
- Hot flushes during the day or night
- Low mood, depression, or changes in mood
- Nervousness, worry or anxiety
- Reduced ability to concentrate or focus
- Problems with memory recall
- Migraines or headaches
- Aches and pains
- Irregular and/or heavy periods
- Urinary issues, e.g. increased frequency

Thinking about long-term health, too

Understanding menopause is more than just being aware of symptoms, it's about long-term health, too. As hormone levels change, we need to take extra care about our wellbeing, in particular heart and bone health.



Managing menopause symptoms and long-term health

Managing menopause is a personal choice. Some prefer a natural approach, others a medical approach, or for some it can be a combination of the two. Benefits, risk, and medical history also need to be taken into account.

Talking to their GP

We always recommend colleagues go to their GP if they are experiencing menopausal symptoms.

They can discuss options with their GP, including hormone replacement therapy (HRT), and advise on any lifestyle changes which could help. GPs should also be able to advise on complementary treatments, including herbal remedies. A little preparation will help them get the best from their appointment (see appendix 3 for top tips they can use).

They could also record their symptoms and detail menstrual cycle history. GPs use the NICE guidelines to help women manage their menopause - it's a good idea to read through these too.

They can research the facts on up-to-date, trusted websites, and think about ways they would like to manage not just their menopause symptoms but their long-term health.

Supporting Menopause

Don't make assumptions

Menopause is different for everyone, and for those who do experience symptoms, these can change and vary over time. Offering the right support at the right time, which means making menopause an open topic of conversation, one which is never taboo or off limits, can make a significant difference to colleagues.

Having the right conversations

Understandably, some colleagues may find it difficult to speak to you, their line manager, about menopause. You will need to reassure them that all conversations will be treated sensitively and confidentially, and that you can refer them to a different supervisor / manager (female, if preferred), Occupational Health or Human Resources if they would prefer. Always document any conversations, and remember to arrange a follow-up meeting. If you do agree any workplace adjustments, these need to be monitored and reviewed regularly (see appendix 2 for further guidance).

Workplace adjustments

Each situation needs to be considered on its own merit, as what works for one person may not for another. Equally, adjustments depend on the role, so there is a need for both colleagues and managers to be flexible and open-minded.



Some suggestions include:

Sleep disruption

- Consider temporary flexible working hours, later start and finish times or shift swaps.
- Allow homeworking on an ad hoc basis (if possible, where job role allows).

Hot flushes / headaches

- Provide a desk fan, or move their desk close to a window and away from heat sources.
- Offer easy access to cold drinking water and toilet and changing facilities (where available).
- Consider flexibility in the dress code policy, in particular with regard to uniforms. This could mean allowing them to wear breathable fabrics or offering an extra uniform.
- Limit the time wearing personal protective equipment (PPE) such as face masks (where possible).
- Provide a quiet space for short breaks and opportunities to take medication.

Psychological symptoms

- Encourage team members to discuss concerns at one-to-one meetings with you and / or Occupational Health.
- Review and discuss possible adjustments to tasks and duties.
- Signpost to the Company Employee Assistance Programme, Occupational Health, or the Colleague Network Groups (Balance).
- Identify a supportive colleague to talk to away from the office or work area, such as a Wellbeing Champion, or one of the Mental Health First Aider

Menopause dos and don'ts

✓ Do:



Your homework and understand the facts.



Talk about the menopause openly.



Encourage colleagues to have a confidential conversation with you.



Discuss reasonable workplace adjustments with them (where possible), and review regularly.



Keep an open mind and always be flexible.

✗ Don't:



Make assumptions about menopause.



Share any personal information without consent (confidentiality).



Avoid talking about menopause.



Focus on the problem – instead explore the solutions.



Address poor performance without appropriate consideration of any health issues - refer to Capability (Performance) policy for further information.



Offer medical advice. Always suggest relevant support, such as their GP.



Remember, you are not expected to offer medical advice and it's important for colleagues to manage their symptoms in the way that's best for them – which is why you should always encourage them to visit their GP for advice (see appendix 2 Menopause checklist for further guidance).

If you feel comfortable that you are aware of what support can be put in place, discuss this further with the team member. Put in place additional support, where required and feasible, or consider any alternatives.

Continue to meet with the colleague on a regular basis to review how they are doing and if their needs have changed. Some colleagues experience symptoms relating to the menopause for several years, and the support they need will change over this period. Keep some brief notes of what you have discussed and review and update these, as required.

Make sure you close any meeting by reassuring the team member that the information they have given you will be kept strictly confidential.

For a list of where you can find additional support, please refer to appendix 5 - where more help and advice is available.



Support for managing menopause

We must treat all conversations seriously and in complete confidence. If staff feel that menopausal symptoms are negatively affecting them at work, then it's important they seek support.

Their GP	We would always recommend a visit to the GP if experiencing menopausal symptoms or want to discuss long-term health. GP's can give advice on medical options, including HRT or other approaches to managing menopause such as diet and lifestyle changes. See top-tips for preparing for this conversation in the video, and appendices.
Line manager, colleagues, and support groups	RIBA Balance can also act as peer support. Reach out to colleagues who may be going through similar and consider forming an informal support group.
Employee Assistance Programme (EAP)	Provided by Health Assured, this confidential Health & Wellbeing service helps colleagues deal with a wide range of personal and work-related problems. To learn more about the services available, visit https://healthassuredeap.co.uk and login by entering Username: RIBA, Password: EAP, or you can call them 24 hours a day, 365 days a year 0800 030 5182
Occupational Health	If needed, as a line manager you may refer you to our Occupational Health provider, you can talk to HR too about a referral.
My Menopause App balance	https://www.menopausedoctor.co.uk/resources/the-balance-app This free app has been developed by Dr Louise Newson, a leading menopause doctor, to help you track your symptoms and understand more what's happening.



Guidance on starting a conversation about the menopause

As a line manager, you will be having regular informal conversations with your team to find out if they have any concerns or issues.

If you suspect a colleague in your team is struggling due to the symptoms of the menopause, have a conversation, in a private location, where you will not be disturbed. Prior to the meeting, you might find it useful to review the menopause information documents (Menopause “Flow Chart”, Menopause Managers’ toolkit, Menopause factsheet, and Menopause checklist) that have been produced to help you (see appendix 2).

Before the meeting, make sure you turn your phone to silent – it will be difficult enough for the team member to speak to you about the issue, without the conversation being interrupted by other people or phone calls. Stay relaxed and adopt open body language. Maintain eye contact (but don’t try to stare them down!).

You could then start a conversation in the following ways:

“I notice or am wondering if you are ok?” or “You don’t seem yourself” and “Is there anything you need support with?”

If the team member confirms that they are experiencing symptoms due to the menopause, but are uncomfortable discussing this with you, say that this is fine, that you understand that it is a difficult subject to discuss, and that, as an alternative, they can discuss this either with a different manager (female, if preferred), HR, or Occupational Health

When the medical report comes back from Occupational Health, go through this with the colleague. If it helps the discussion, you can use the Menopause checklist if you wish. Put into place additional support, where required and feasible, or look at any alternatives.

If the colleague confirms that they are experiencing symptoms due to the menopause and are comfortable discussing this with you, ask them what problems they are having and if there is anything the company can do to help and support them. If you are not certain what can be done, be honest and say so. Say you will look into what support can be offered and you’ll get back to them. You could also suggest that they may want to discuss their symptoms further with Occupational Health, if they wish to do so.



Key points	Considerations	
Additional information on the menopause	Does the colleague have access to information on the menopause, or signposts to where to find this information?	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>
Sickness Reporting	Is there the facility for those who are not able to attend work due to menopausal symptoms to report these to a different manager (female, if preferred) or other point of contact?	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>



Key points	Considerations	
Stress and Anxiety	Are there appropriate mechanisms in place to deal with other related issues such as stress and anxiety management, e.g. E.A.P / O.H?	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>
Occupational Health Arrangements	Has the colleague been made aware of what facilities are in place for O.H. referral and support to remain in the workplace? Have they requested a referral to O.H?	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>



Key points	Considerations	
Trade Unions and Support groups	Has the colleague been made aware of other support mechanisms in the workplace which may be able to help, e.g. Occupational Health, E.A.P., Mental Health Advocates, RIBA Communities (Balance, Origins, Generations) and Staff Reps	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>
Work Stations	Do work stations / locations have easy access to toilet and rest facilities (where possible)?	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>



Key points	Considerations	
General Facilities	<div>1. Is there access to sanitary products to be purchased (where possible)?</div> <div>2. Do rotas, shifts and schedules ensure that colleagues have easy access to sanitary facilities and toilets?</div> <div>3. Is there access to cold drinking water?</div>	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>
Temperature	<div>1. Is the colleague / RIBA able to ensure a reasonable workplace temperature is achievable?</div> <div>2. Is additional ventilation provided if necessary, e'g' portable fans?</div> <div>3. Do uniforms and PPE equipment reflect the needs of the individual? Are the clothes provided (where possible) made of natural fibres? Can alternatives made of natural fibres be worn?</div>	What is already being done? <div></div>
		What is already being done <div></div>
		Action by whom <div></div>
		Action by when <div></div>

Key points	Considerations	
Environment / duties	1. Have risk assessments (D.S.E., Manual Handling) been reviewed to take menopause into account?	What is already being done?
	2. Are there opportunities to switch to alternative / lighter duties on a temporary basis?	
	3. Can start and finish times be adjusted as part of a flexible working agreement?	
	4. Is the role suitable for flexible / agile working – if not, why not?	
	5. Is there access to natural light (where possible) or can natural daylight lamps be made available?	What is already being done
	6. Have work processes and workload been assessed to see if any reasonable adjustments are needed?	
	7. Is the environment noisy and can anything be done to mitigate this?	

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Key points	Considerations	
Environment / duties	8. Allow additional breaks if required. <ul style="list-style-type: none">• For screen-based work, this alleviate dry eyes• For regular standing, this can alleviate aches and pains• For regular sedentary (seated) roles, this can help with moving around• For customer-facing colleagues, this can help give them some 'quiet time' if needed	What is already being done?
	9. Does the colleague have symptoms of loss of confidence and / or memory loss? How can use of technology (to do lists, MS Outlook task lists, reminders) assist with this?	
		What is already being done
		Action by whom
		Action by when
		Date achieved



Key points	Considerations
Working conditions	<div>1. Does the colleague work night shifts? Does the colleague work shifts in general?</div> <div>2. Is the colleague a lone worker?</div> <div>3. Does the colleague work ad hoc / regular overtime / on call?</div> <div>4. How does the colleague travel into work? Can work location be temporarily flexed / changed?</div> <div>5. Take account of travelling colleagues' schedules / shifts and allow them to access facilities during their working day.</div>
	<div>What is already being done?</div> <div></div> <div>What is already being done</div> <div></div> <div>Action by whom</div> <div></div> <div>Action by when</div> <div></div> <div>Date achieved</div> <div></div>



Key points	Considerations
Any other points - please identify and list	<div>Type here</div> <div></div>

Talking to your GP about menopause

If menopausal symptoms are getting in the way of you enjoying life, it's time to talk to your doctor. Here are some helpful, straightforward tips to help you get the best from your appointment.

Don't wait until symptoms feel unbearable - Often women feel they must 'put up' with menopausal symptoms, but if they are affecting you then there are things you can do and support available.

Read the NICE guidelines - The National Institute for Health and Care Excellence guidelines are used by your doctor to determine the type of conversations to have with you and treatments to offer. The guidelines for patients are really useful to read before you see your GP so you know what to expect. (See Appendix 3)

Prepare for your appointment - Keep a list of your symptoms, your menstrual cycle, hot flushes, how you're feeling, any changes you've noticed. Write them down and take them to your appointment.

If you have any preferences about how you manage symptoms tell them that too e.g. if you'd like to try hormone replacement therapy (HRT) or not. Your doctor will thank you for it and it's more likely that together you'll find the right solution faster.

Ask the receptionist which doctor is best to talk to about menopause - 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 think you need it - Some surgeries will do this.

Don't be afraid to ask for a second opinion - if you don't feel you've received the help you need. Don't be put off, you know how you're feeling and how it's affecting you.

Ask if there is a menopause clinic in your area - If there is and you think this would be helpful, ask for a referral.

Take your partner or a friend with you - They will know how the symptoms are affecting you, could support you at the appointment and also find out how to continue supporting you.

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 what kind of help you need.

Importance of lifestyle:

Current health promotion says a healthy lifestyle can have a positive impact on both menopausal symptoms and long-term health, so it's important to consider lifestyle changes during and after the menopause. These can include:

Healthy eating - research has shown that a balanced diet, with low saturated fat and salt can lower blood pressure and help alleviate some symptoms. Also eating foods containing calcium and vitamin D will help to keep bones healthy.

Exercising regularly - exercise can help to manage symptoms, reduce hot flushes and improve sleep. It can also help boost mood and maintain strong bones.

Manage stress levels - getting adequate rest and relaxation. This can help balance hormones, reduce symptoms, and improve long-term health. It's a personal choice how you do this, whether it's yoga, mindfulness, going for a walk or just taking time out.

Stay hydrated - always important and drinking plenty of water, particularly chilled water, can help with hot flushes.

Cutting down caffeine and alcohol - avoiding 'triggers', including certain food and drinks such as coffee, alcohol or even spicy food for some. Keep a diary to understand what your triggers might be to avoid them e.g. prior to going into a presentation or meetings could help to avoid potential discomfort. Alcohol can also increase hot flushes and can lead to an increased risk of developing breast cancer.

Improving your sleep - looking at ways to try to reduce sleep disruption, such as fans, bedding made of natural materials, and pillow coolers.

Not smoking - smoking has been shown to lead to an earlier menopause and trigger hot flushes. It can also bring a higher risk of developing osteoporosis and Coronary Heart Disease (CHD), which is the most common cause of death in women.

Staying calm and positive - hormone imbalance during the menopause can result in added stress and even depression. Relaxation techniques and counselling can be very helpful in coping with anxiety. Research also supports the benefits of using Cognitive Behavioural Therapy (CBT) to manage symptoms.

Enjoy the outdoors - having access to natural light (where possible), or using a desk daylight lamp as an alternative, and following the [NHS recommendation of taking vitamin D](#).

Using technology - where available and helpful, such as for setting reminders and 'to do' lists.

Where more help and advice is available:

Relevant RIBA company policies	Menopause guidance documents can be found in RIBA's staff intranet. Flexible Working Policy Sickness Absence Policy
NHS menopause information	The NHS website has lots of information, visit: http://www.nhs.uk/Conditions/Menopause/Pages/Introduction.aspx .
Royal College of Obstetricians and Gynaecologists (RCOG)	RCOG offer further information in a dedicated area of their website at: https://www.rcog.org.uk/en/patients/menopause/
National Institute for Health and Care Excellence (NICE) guidelines	The NICE guidelines explain how GP's determine what types of treatments and interventions they can offer. Visit https://www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information
Early menopause	Premature Ovarian Insufficiency (POI) information and support on very early menopause. Visit https://www.daisynetwork.org.uk
Hysterectomies, oophorectomy information	For comprehensive information about hysterectomy, visit: https://www.womenshealth.gov/a-z-topics/hysterectomy
Women's stories	For more information on managing the menopause and an insight into women's stories, visit the Henpicked website at https://henpicked.net/menopause-hub

More help and advice

National Institute of Medicinal Herbalists: here's a link to find a qualified medical herbalist in your area: <https://www.nimh.org.uk/find-a-herbalist/>

Cognitive Behavioural Therapy and menopause: <https://www.womens-health-concern.org/help-and-advice/factsheets/cognitive-behaviour-therapy-cbt-menopausal-symptoms/>

Rebecca's review on CBT: <https://henpicked.net/cognitive-behaviour-therapy-help-menopause/>

Information on hysterectomy: <https://www.womens-health-concern.org/help-and-advice/factsheets/hysterectomy/>

NHS guidelines for taking vitamin D: <https://www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/>

Complementary/alternative therapies: <https://www.womens-health-concern.org/help-and-advice/factsheets/complementaryalternative-therapies-menopausal-women/>

Books we recommend:

- Menopause - the change for the better – Henpicked
- Men... Let's Talk Menopause - Ruth Devlin
- The one stop guide to menopause - Kathy Abernethy
- Older and Wider – Jenny Eclair