



Age management in the health and social care sector - findings from the EXTEND project

Welcome

This newsletter shares findings from the EXTEND project on age management in the health and social care sector.

Both in the UK and across Europe, a huge and growing number of people work in this sector. In the UK this figure was 4.2 million people in 2017, up from 3.8 million in 2010 - a 10% increase in just 7 years. The workforce is older than in many other sectors, and in 2014 it was calculated that a 1/3 of its employees aged 50+ will leave the labour market in the next 15 years.

Workers in health and social care are often faced with particular challenges, including physically and mentally demanding working conditions, shift work, poor pay, time pressure and stress. This can lead to absenteeism, exhaustion and withdrawal.

Given the growing demands for health and social care, and the ageing workforce, we therefore need ways in which we can help support employees across their working lives to overcome these challenges. This is where 'age management' can play a vital role.

WHAT IS THE EXTEND PROJECT?

EXTEND is an interdisciplinary research project funded by the European Joint Programme Initiative (JPI) More Years, Better Lives, with partners in Germany (Naegele – coordinator, Hilbert), the UK (Walker), Denmark (Jensen), the Netherlands (Deeg) and Finland (Vuori). Its main aim is to investigate whether reforms aimed at extending working lives (EWL) might increase social inequality. Methods used include policy mapping, longitudinal survey analysis, an RCT field study, expert interviews, case studies, focus groups and economic simulations. We are paying special attention to the social care sector because it is particularly affected by the EWL challenge.

Approaches to age management

The maintenance of good health, wellbeing and functioning as employees age is crucial to ensuring a happy, productive workforce. There are two sides to this: each individuals' own health is of course fundamental, but we also need to consider the work environment and employment conditions. These aspects have been considered as two sides of the same coin of **workability**. Employers play an important role in this; not only can they adapt work and employment to match employees' needs, but they can also promote health and wellbeing directly.

This has long been recognised, since at least the 1990s across Europe. Importantly, early studies showed that **some organisations were left completely off guard**, and had to react to unexpected retirements and disability amongst their workers. **Some organisations then began to acknowledge the ageing workforce as a challenge**, and implemented policies

to keep older employees by decreasing work demands. **A far more positive and productive approach however, is to see ageing as an opportunity.** Older workers have wisdom and experience that is often underutilised, which could be shared with younger workers. Of course, employers should recognise that the needs of the whole workforce are important, regardless of age, or indeed ethnicity, gender, or any other category of difference. In this sense **a life course approach to age management is optimal** because it recognises that we should recognise diversity across working lives for later life employment.

ONLINE PRESENCE

The EXTEND can be accessed here:

<http://www.extendjpimybl.eu/>

We are also on ResearchGate:

<https://www.researchgate.net/project/EXTEND>

How can age management help?

What kinds of policy and practices can employees implement?

First, in relation to **job recruitment and exit**, we need to enable equal access and tackle discrimination. Options for partial retirement can maximise continued employee engagement.

Training, development and promotion can ensure employees have the appropriate skills and are motivated to work. This might mean making training 'older worker friendly' e.g. training in digital technology.

Flexible working practices are important so that employees can fit their jobs around other responsibilities, such as caring for their own family.

Attention to **ergonomics and job design** can help to compensate for physical decline, by eliminating heavy lifting or having good quality lighting or seating, for example.

Lastly, we need to encourage **changing attitudes within organisations**. Ideas for policies and practices are all well and good but without key personnel who really believe in age management, lasting impact will be limited. Training in ageism, equal opportunities and age diversity can help facilitate this.

What we did we find in EXTEND about age management in health and social care?

In the EXTEND project we carried out case studies in health and social care organisations in the UK, Germany, and Finland. Altogether we interviewed 54 people across 11 case studies, including management, HR, and employees.

Across all countries, we found that three age management measures were very common: health promotion, flexible working, and training. In some respects, this is very promising, but there were also gaps. Hardly any employers had policies around recruiting older workers, retirement transitions, redeployment, job/task rotation, use of assistive technologies, or intergenerational learning – where older workers share their experience with younger ones.

Examining the UK case studies in detail reveals a number of specific findings:

Whilst flexible working practices were common, in some cases employees had to be strategic in asking for flexible hours. **This suggests some workers might be less able or reluctant to ask, so this should be made as democratic as possible.**

Training was also common, **but often employees complained it was statutory**, e.g. to meet health and safety requirements rather than for genuine employee development. **Many workers lamented moves to 'e-learning' where training is online, as they do not get to meet up and discuss work related issues (which may help with coping with stress).**

In some cases, health promotion was brilliant, with the employer offering discounts for dentists, opticians and psychotherapists. **However, not all employees make full use of them.**

We also found evidence confirming existing challenges such as low pay, stress, and exhaustion, and **also regarding new ones that we were previously unaware of.** The use of agency workers brought particular challenges because these workers are typically precarious and not as able to benefit from age management measures. Night shifts were also a concern. They are of course necessary because health and social care is a 24-hour business. Yet given their potentially negative effects on health and wellbeing this needs to be managed carefully with respect to an ageing workforce.

We hope that some of the issues we have highlighted will increase awareness of the need for forward-thinking approaches to age management in health and social care. These issues will become more pressing given demographic change, but they also present opportunities for good practices and policies that will make for a healthier and happier workforce.

If you would like to read more about these findings please see a blog post on the International Longevity Centre UK's Future of Ageing blog series:

<https://bit.ly/2NAgsHO>

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