Healthy Workplaces for All Ages
Promoting a sustainable working life
Good Practice in Age Management & OSH

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Chair of Good Practice Awards Jury
Labour market participation of people aged 55-64 years old is growing - increasing the proportion of ‘older workers’ in the workforce.

The employment rate among people aged 55–64 in the EU grew by almost 15 percentage points between 2000 and 2014 - faster than other age groups.

Projections suggest that the employment rate for older people, in particular for women, will continue to rise across Europe during the next 50 years, reaching 67% by 2060.

Policy-makers are attaching increasing priority to ‘extending working lives’ to improve the sustainability of social welfare systems and because remaining in good quality work can have therapeutic benefits for older workers.
Rising Economic Activity Levels
Age & Co-morbidity

Source: Labour Force Survey 3 quarter average 2013Q2-Q4
Ageing, Health & Work

- No long-term health condition: 80%
- Diabetes: 70%
- Heart, blood pressure or blood circulation problems: 65%
- Chest or breathing problems, asthma, bronchitis: 60%
- Digestive problems: 55%
- Other long-term health conditions: 50%
- Musculoskeletal problems: 45%
- Depression: 40%
- Mental health conditions: 30%

Source: Labour Force Survey 3 quarter average 2013 Q2-Q4
Action by Employers

- Employers are concerned to retain know-how and prevent skill shortages threatening efficiency & productivity – also need to consider novel approaches to job retention and adaptations which accommodate the demands of an ‘age-diverse’ workforce
- A key focus for the 2016-2017 ‘Healthy Workplaces for All Ages’ campaign
Good Practice Awards

- The Good Practice Awards 2016-17 aim to recognise companies / organisations actively managing safety and health at work in the context of an ageing workforce.
- The entries had to demonstrate a life-course perspective to risk prevention to ensure healthy ageing at work, a holistic approach to OSH management, consideration for age diversity, diversity-sensitive risk assessment followed by workplace adaptation, possibly also measures for return to work.
- 42 entries from 23 countries, five entries were received from official campaign partners.
- The awards were judged by a European jury, including representatives from EU-OSHA, the Directorate General for Employment, Social Affairs and Inclusion, the European Trade Union Institute (ETUI), the Confederation of German Employers’ Associations, and the Maltese Occupational Health and Safety Authority. The jury was chaired by Prof. Stephen Bevan.
- Eight entries were awarded and eight commended, one of the official campaign partner entries was awarded and one commended.
Good Practices – success factors

- Clear business rationale for action
- Getting senior management support – ‘hearts & minds’
- Risk and needs assessment, conducted in a participative manner
- Interventions focused on prevention - with a traditional OSH perspective but with a strong appreciation of the need for a positive psychosocial work environment
- Interventions focusing on Work Ability – job redesign
- Active worker ‘voice’ and involvement in design and implementation
- Clear evaluation of impact
- Capturing the learning from interventions
- Multi-sector entrants, from large and small employers and from multi-national businesses to those with limited resources
Innovative elements

Heidelberger Druckmaschinen, Germany

- Demand orientation, not HR driven but by departments themselves, looking at needs and concerns of employees
- Workers participation: worker’s council, HR, top management in the steering group, support from union and employer’s association
- Broad range of stakeholders involved: OSH department, medical services, various HR departments

Zumtobel GmbH, Austria

- Optimized process for return to work/rehabilitation: full pay for soft return 12 weeks, integration team support, psychological support for mental illness

Federation of Finnish Technology Industries

- Thorough evaluation of results: work well-being index, work ability index, satisfaction with management, sickness absence
Innovative elements

Region Midtjylland (Central Denmark Region, responsible for healthcare and hospitals) Denmark

- Comprehensive measures to reduce the risk of injury from patient transfer
- Design guides specifying building requirements for construction and conversion projects, such as for bathrooms, scanner rooms, bedrooms and operating rooms, so that there is room for storing assistive devices and space to perform patient transfers.

Rudnik- Mine, Serbia

- Difficult sector with physically and mentally demanding jobs
- Training system for miners, training of new workers by experienced ones, group trainings by occupations/duties,
Innovative elements

Loders Croklaan, Netherlands

- To reduce the risks related to shift work, part-time work and job sharing were introduced. Allowing employees to work part-time gives them longer recovery periods between shifts.
- Internal traineeship: employees can apply for internal traineeships to acquire knowledge in other areas and to gain the necessary skills to change jobs within the company.

Duslo a. s. Slovakia

- Day care centre for elderly to support workers with care responsibilities.

Vassiliko Cyprus

- To reduce the increased risks of shift work for older workers, the company increased the number of shifts from four to five by employing 15 new workers, allowing employees longer rest periods between shifts.
Areas for Improvement?

- Risk assessment
- From a ‘deficit’-based to a capability’-based perspective on work accommodations
- Focus on physical health and physical function – less on psychosocial health or cognitive function
- Little on early intervention and referral to OH professionals in order to prioritise effective job retention
- Vocational Rehabilitation is recognised but few included tailored approaches to redesigning work in a way which matches job demands with worker resources (‘Work Ability’)
- Weak evidence base for some interventions
- Few interventions to improve line manager capability (RTW & VR)
- Little on self-management by workers with health conditions – can improve job retention and productivity
- Lack of formal evaluation
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