

European Agency for Safety and Health at Work

Safer and healthier work at any age – Final overall analysis report

Executive summary

Authors: Alice Belin, Claire Dupont, Lise Oulès, Yoline Kuipers (Milieu Ltd)

Contributions from Juhani Ilmarinen (Juhani Ilmarinen Consulting Ltd), Paulien Bongers (TNO), Maria Albin (Lund University), Irene Kloimuller (Wert:Arbeit), Stephen Bevan (The Work Foundation), Maciek Dobras (NIOM), Joanne Crawford and Richard Graveling (IOM), Sonja Hagen Mikkelsen (COWI).

Edited by Grainne Murphy.

Project management: Boglarka Bola, (EU-OSHA)

EU-OSHA would like to thank members of its focal point network for their valuable input.

This report was commissioned by the European Agency for Safety and Health at Work (EU-OSHA). Its contents, including any opinions and/or conclusions expressed, are those of the author(s) alone and do not necessarily reflect the views of EU-OSHA.

**Europe Direct is a service to help you find answers to
your questions about the European Union**

**Freephone number (*):
00 800 6 7 8 9 10 11**

(* Certain mobile telephone operators do not allow access to 00 800 numbers, or these calls may be billed.

More information on the European Union is available on the Internet (<http://europa.eu>).

Luxembourg: Publications Office of the European Union, 2016

© European Agency for Safety and Health at Work, 2016

Reproduction is authorised provided the source is acknowledged.

Executive summary

This report provides a summary of the main findings of a three-year pilot project initiated by the European Parliament and directed by the European Agency for Safety and Health at Work (EU-OSHA) — based on a delegation agreement with the European Commission — on the occupational safety and health (OSH) challenges posed by an ageing workforce¹. As mentioned in a decision of the European Parliament, the original aims of the pilot project were to enhance the implementation of existing recommendations, facilitate the exchange of best practice and further investigation of possible ways of improving the safety and health of older people at work². The project also aimed to assess the prerequisites for OSH systems in different European countries to take account of an ageing workforce and ensure better prevention for all throughout working life.

The European population has aged³ significantly in recent decades as a result of increasing life expectancy and declining birth rates. This trend is predicted to continue and intensify: by 2040, the proportion of the EU population over 65 years of age is expected to account for nearly 27 % of the total population (Eurostat, 2014). At the same time, the working-age population (those aged 15-64 years) is shrinking, meaning that the ratio of the working-age population to those aged 65 and over will continue to decrease (Fotakis and Peschner, 2015).

Although life expectancy has continually increased in Europe over recent decades, these extra years of life are not necessarily spent in good health. Since 2005, healthy life expectancy has remained stable for men and has actually decreased for women (EC, 2009). In addition, the incidence of chronic diseases is rising as a result of population ageing.

An ageing population has important implications for society and for our socio-economic systems, including social challenges linked to the raising of retirement ages. Ageing will put pressure on the stability of pension systems, as they will have to cope with contributions from fewer workers while supporting greater numbers of pensioners. The growing problem of ill-health in later years will cause a rise in age-related public expenditure, including expenditure linked to health care and long-term care, imposing significant pressures on the stability of pension systems and social security schemes (EC, 2012).

Ageing also has significant implications for OSH systems. Although the OSH legal framework is generally considered sufficient to protect the older workforce, the increase in the official retirement age in many Member States has given rise to challenges in terms of prolonging working life, keeping workers healthy and maintaining their employability and work ability until the retirement. Management of an ageing workforce, new problems linked to longer and cumulative exposure to occupational hazards and the prevalence of chronic health conditions will need to be taken into consideration by national OSH systems.

At the workplace level, an ageing workforce is both an opportunity and a challenge. With chronic health problems becoming more prevalent, and workers being exposed to workplace hazards for longer, OSH management in the workplace has to evolve, and workplaces need to adapt working conditions and develop return-to-work procedures to avoid long-term sickness absence and early exit from work for health reasons. In addition, workplaces will face increasing challenges regarding avoiding discrimination in relation to career progression and improving access to vocational training. At the same time, older workers cannot be treated as one homogeneous group, as health changes or reductions in work capacity are not inevitable for all. In addition, older workers often have greater experience and know-how, bringing many opportunities for cross-generational exchange. These challenges underline the importance of having an effective OSH system.

¹ The findings are based on reviews on ageing and OSH, rehabilitation and return to work; on an examination of current policies, programmes and initiatives for sustainable work, including those related to rehabilitation and return to work, in the 28 EU Member States and the four European Free Trade Association countries; and on an analysis of the drivers for implementing health protection and promotion practices for an ageing workforce at the workplace level, based on case studies and group interviews in large and small European companies.

² Official Journal 29.02.2012 — 04 04 16 — Pilot project — Health and safety at work of older workers.

³ The expression 'the ageing of the population' is used throughout this report to describe the demographic change that has been occurring since the 1950s, namely a rapid increase in the median age of the population in almost all of the countries in the world.

A number of prerequisites for OSH systems to create and maintain the conditions for sustainable work have emerged from both desk and field research, including

- improved risk prevention for all;
- specific measures for a diverse workforce;
- a holistic approach to risk prevention and the promotion of well-being at the workplace;
- support for companies, in particular small and micro-enterprises;
- social dialogue at all levels;
- integrated policies cutting across different policy areas.

This report explores the extent to which these elements are reflected in national policies and workplace practices related to the ageing of the workforce, the extension of working life, and rehabilitation and return-to-work systems and programmes in Europe.

Concepts and factors influencing policy development⁴

Conceptual frameworks

A number of countries have implemented integrated policy frameworks to support sustainable working lives. Such frameworks are often based on one or several concepts that have emerged over the past 50 years through the development of innovative approaches to the challenges of population ageing and its impacts at micro- (individual/worker), meso- (organisation/workplace) and macro- (society) levels.

Relevant concepts include:

- healthy ageing;
- active ageing;
- rehabilitation;
- workplace health promotion/health-promoting workplaces;
- wellbeing at work;
- return to work;
- age management;
- diversity management;
- employability;
- work ability;
- sustainable work.

All of these concepts advocate an *integrated approach*, i.e. taking a broader view across different societal and policy areas. They also all take a *life-course perspective* to healthy ageing, recognising that older people's socio-economic status, mental health and physical health are a consequence of their cumulative experiences and their past (health-related) behaviour. The life-course perspective acknowledges that each age group faces particular challenges at work and in other areas of life, making them vulnerable to the development of health problems. During the fieldwork carried out for this project, stakeholders highlighted the possible drawbacks of putting too much focus on older workers, in particular in terms of stigmatisation of these workers and in terms of a lack of action in relation to other age groups that are similarly in need of protection and support. Thus, when actions are taken that target a specific age group, their impacts on other age groups need to be considered and, if necessary, mitigated.

⁴ The following sections are based on the reports 'Safer and healthier work at any age — Analysis report on EU and Member States policies, strategies and programmes' and 'Rehabilitation and return to work: an analysis of EU and Member States systems and programmes', produced in the context of the present project. These analyse information from 31 country reports examining national policies on the OSH of older workers and rehabilitation and return to work.

Supranational and national factors influencing policy development

The comparative analysis of national systems highlighted a number of factors common to all European countries that play a role in the development of policy frameworks for the extension of working life. Past *demographic developments* prompted the Nordic countries and Germany, in particular, to take action as early as 1990, following the dramatic increase of the median age of their populations. In other countries, such as Belgium, Austria and the UK, a continuous increase in the old-age dependency ratio⁵ highlighted potential issues with the sustainability of their pension systems and motivated governments to take action.

- *EU legislation and policies* have had an important influence on the development of national policies related to the ageing workforce. The EU legal frameworks on OSH and anti-discrimination played a major role in the implementation of minimum requirements regarding age discrimination in employment and adaptations of the workplace to individual abilities and needs. *International policy developments* have contributed to shaping EU policy in relation to the demographic change that is occurring and to raising awareness, globally and more specifically among European countries, on issues related to population ageing.
- Individual countries' policy approaches to sustainable working lives owe much to their *legal and institutional frameworks*, determined by national traditions and historical developments in relation to OSH and social welfare. Rehabilitation and return-to-work systems, for instance, are strongly determined by the degree of involvement of social security institutions and by the legal framework regulating sickness absence.
- *Social dialogue* can significantly influence the development of OSH, employment and social security policies. In a number of countries, in particular the Nordic countries, but also Belgium, Germany, France and Austria, tripartite or collective agreements support the improvement of working conditions in the context of extending working life, as well as the development of mechanisms for rehabilitation and return to work.
- Finally, because of the *economic crisis*, reducing the level of unemployment among young people has become a political priority in many countries, sometimes to the detriment of other employment considerations, such as the improvement of working conditions to keep older people at work.

National frameworks to address the challenges of an ageing workforce and the extension of working life

Key elements of a policy framework dealing with an ageing workforce

Over the past 20 years, European countries have established a variety of policies, programmes and initiatives in the fields of employment, public health, social justice, social policy and vocational education to address the challenges of an ageing workforce. In a number of cases, national policies have been influenced by EU-level policy and legal developments.

- *Socio-economic measures*: most governments throughout Europe have introduced reforms to their pension systems, including raising the official retirement age — up to 67 years old in some countries — and limiting access to early retirement benefits, e.g. to certain occupational groups or people with a medical condition. For example, in Spain, early retirement is possible for those employed in particularly dangerous, toxic or unhealthy work and for workers with a degree of disability greater or equal to 65 %.
- *Employment measures*: policies related to the older workforce generally aim to maintain or increase employability, in particular through the development of skills and competences. In some cases, they also maintain or enhance a person's work ability, taking into account health, work environment and/or work organisation, and work–life balance considerations. For instance,

⁵ The old-age dependency ratio is the ratio of people aged 65 and over (who are not employed) to the working-age population (those aged 15-64 years).

the French law promoting the employment of older workers includes provisions on the improvement of working conditions.

- *OSH measures:* national OSH legislation and policies show two broad trends. In a number of countries, older workers are considered a sensitive or vulnerable category of workers, requiring specific health protection measures (e.g. additional medical examinations above a certain age). In other countries, a life-course perspective is taken to health protection at work, with OSH policies designed to enhance the work ability of all workers, through early intervention. This is the case in Sweden, where the Work Environment Act requires that working conditions are adapted to workers' individual physical and mental capabilities. Some Member States have broadened their risk prevention approach to OSH; for example, Finland includes wellbeing at work within its OSH legislation.
- *Public health measures:* the most relevant developments of the past two decades in relation to the ageing of the workforce are the implementation, in many countries, of ageing policies, such as healthy and active ageing, and the development of workplace health promotion, defined as 'the combined efforts of employers, employees and society to improve the health and wellbeing of people at work'. For example, Slovakia has adopted the National Programme for Active Ageing 2014-2020, which aims to increase the safety of working environments and protect the health of workers over the age of 50 years.
- *Social justice and equality measures:* fighting discrimination on the grounds of age and disability has been high on the agenda of EU and national policy-makers for a number of years. In addition to Member States' obligation to transpose into national law Directive 2000/78/EC on equal treatment in employment, a number of countries are putting in place measures to support the development of workplaces that are 'fit for all'. For instance, the Austrian Labour Inspectorate started a programme to ensure that the work of the labour inspectorate took into account gender and all dimensions of diversity. Some Member States provide support to help employers introduce adaptations to facilitate the continued employment of workers with disabilities.
- *Education measures:* upgrading the skills of workers that are particularly vulnerable to economic restructuring, including older workers, is at the forefront of the EU 2020 Strategy. Lifelong learning strategies enable and encourage workers of all ages to take part in education and training. Those targeting older workers are often part of Member States' active ageing strategies.

A few countries have put in place multidisciplinary and integrated policy frameworks in relation to demographic change and the extension of working life. Specific policies to foster the employability of older workers are incorporated into a broader framework that deals with the extension of working life from an integrated perspective. Information related to the impact of these policies is scarce, owing to a lack of proper evaluation of these frameworks. However, national stakeholders have identified a number of areas for improvements related to⁶:

- the implementation of the OSH legal framework, in particular in small and micro-companies;
- the stigmatisation that comes with focusing on older workers as a 'vulnerable category of workers' and the risk of ignoring early signs of chronic health problems in middle-aged workers;
- the lack of coordination across activities and policy areas and the lack of awareness of employers and workers about existing initiatives to encourage sustainable working lives;
- cultural perceptions at the societal level and attitudes and behaviours in the workplace.

National systems for rehabilitation and return to work

Rehabilitation and return-to-work systems are an integral part of any strategy to maintain people's work ability and employability throughout working life and extend working life in a sustainable manner. Effective return-to-work systems also aim to prevent the exclusion of people from the labour market because of a reduction in work capacities due to their health.

⁶ Information collected during the national expert workshops, which took place between March and July 2014 (more details provided in the introduction of the full report).

The development of national rehabilitation and return-to-work systems is built on two main pillars: the rehabilitation of people with disabilities and the management of sickness absence. All of the European countries investigated in this project provide some form of rehabilitation support to people with a recognised degree of disability or permanent work incapacity. Some go significantly further and are moving towards a more positive and work-oriented approach to disability, focusing on an individual's remaining capacities and the adaptation of the workplace. For example, in Hungary, a recent reform of social security systems in 2012 introduced a shift from looking solely at a person's health impairments to considering their remaining capacities and capabilities relevant to their employability.

In addition, all European countries have rules regarding the management of sickness absence and many have general provisions on workplace adaptations. A smaller number of countries have increased employers' responsibilities in the successful reintegration of workers following a sickness absence, or are providing financial incentives to workers to, for instance, return to work early on a part-time basis. This is the case in the Netherlands, where, pursuant to the 2002 Gatekeeper Act, the period of employer-paid sick leave was extended to two years, and to three years if the employer fails to fulfil certain obligations.

Finally, a handful of countries have developed comprehensive policy and legal frameworks with the primary objective of retaining people at work or in the labour market. They are based on a number of common principles, including a tailored approach, early and interdisciplinary interventions, inclusive systems, and the development of case management. The recently developed 'fit2work' network in Austria and 'Fit for Work' services in the UK put these principles into practice. Interdisciplinarity has been promoted in Sweden through the establishment of joined-up budgeting at the local level for all institutions (the social insurance agency, municipalities, employment agencies) involved in the rehabilitation process.

There have been few nationwide evaluations of return-to-work systems. The few that have been carried out have, overall, shown positive results (NFA, 2012). However, national stakeholders have identified a number of areas for improvements related to⁷:

- the complexity of the legal and institutional frameworks governing the rehabilitation and return-to-work process;
- the lack of support for workers who no longer have access to disability or early retirement benefit schemes;
- the lack of appropriate tools for many health problems and in particular mental health; issues related to medical confidentiality;
- the lack of awareness of those directly targeted by the programmes, i.e. workers, employers and doctors.

Mapping European countries' policy profiles

By conducting an analysis of the existing national policies, programmes and initiatives in Member States, country clusters could be identified that had similar policy development in this field, based on criteria such as the scope and overall orientation of the relevant policies, the level of coordination across policy areas and across stakeholders, and the number and quality of the initiatives undertaken in implementing the policy framework. However, the categorisation of clusters cannot fully reflect the considerable diversity of contexts and situations across countries.

Pension reforms have been carried out throughout Europe, with retirement age being increased and access to early retirement being restricted. Measures promoting the employment of older people through various economic incentives and providing subsidies to companies have been complementing these pension reforms.

A smaller number of countries have begun to tackle the policy challenges of the extension of working life and the diversification of the workforce in an integrated and more comprehensive manner by addressing these challenges through a broader range of economic, employment, OSH, public health, social welfare, anti-discrimination and education policies, and with a life-course approach to risk prevention. In some cases, the various policy initiatives are combined in integrated frameworks based

⁷ Information collected during the national expert workshops, which took place between March and July 2014 (more details provided in the introduction of the full report).

on concepts such as ‘well-being at work’ or ‘sustainable employability’. The concept of ‘work sustainability’ (i.e. ensuring that people are willing and able — physically, mentally and socially — to work throughout an extended working life and that they remain healthy and autonomous for as long as possible) is increasingly used at the policy level. In these countries, cross-policy and multidisciplinary initiatives and activities are carried out by a wide range of institutional and non-institutional actors. In Finland, for instance, the National Working Life Development Strategy to 2020 was prepared through a broad tripartite collaboration and involves stakeholders at all stages of its implementation.

In general, studies looking at the effectiveness of integrated policy frameworks have focused on two different indicators: the employment rate of older workers and effective retirement age. However, there is a lack of evaluation of the effectiveness of these policies in relation to workers’ wellbeing. An important shortcoming relates to transfer opportunities between different social benefit schemes. Restricting access to early retirement benefits — an increasingly common measure in EU countries — could lead to people transferring to unemployment or sickness and disability benefit schemes, thus reducing the effectiveness of such measures in terms of increasing employment rates. A number of European countries have reformed these benefit schemes, or parts of them, to prevent transfers. Such reforms, however, need to be accompanied by development of adequate support mechanisms addressing the different factors that contribute to sustainable working lives. Without such support mechanisms, workers are at risk of exclusion from the labour market if they cannot find a job that is adapted to their capacities or may continue in jobs that are not adapted to their capacities, thus further risking their health.

As in many other policy areas in the EU, there is no ‘one size fits all’ model for a policy response in relation to the ageing of the workforce. European countries are at different levels in relation to changes in demography and in the policy development process and their actual needs differ. While it is likely to be difficult to transfer broad policy initiatives related to the ageing of the workforce and the extension of working life from one country to another — given the complexity and specificity of these policies — many of the policies identified in this report share a number of useful core characteristics to build on. In addition, a number of specific measures that have proven successful in certain countries could be transferred and adjusted to the national context.

Successful workplace practices to address the challenges of an ageing workforce

Within the context of evolving policy and legal frameworks, different types of measures and programmes have been put in place to address the challenges of an ageing workforce at the workplace level. Although the limited number of case studies investigated during this project does not allow a generalisation of findings, some patterns emerge in relation to the drivers prompting companies to take action and the factors that support the successful implementation of a practice or a policy.

Internal drivers

Internal drivers for the initiation of programmes or measures to address the challenges of an ageing workforce include:

- avoiding the loss of skills and expertise of older workers;
- offsetting labour shortages arising from the difficulty in recruiting young skilled workers;
- maintaining employees’ productivity and avoiding costs linked to sickness absence and early retirement;
- maintaining the health and wellbeing of employees and promoting health at work; and
- improving corporate image.

External drivers

National policies and legislation and the provision of financial and technical support by governmental and intermediary organisations can be important drivers to initiate action, and can influence the approach taken by companies. Examples include the national campaign on ‘sustainable employability’ in the Netherlands, the development of ‘senior policies’ in Denmark and Norway and the 2009 law on the funding of social security in France, which requires companies with more than 50 employees to negotiate a company agreement for the promotion of employment of older workers.

Success factors

Success factors for the development and implementation of programmes or measures include:

- *Involvement of employees in the development and implementation of measures:* the involvement of employees via surveys, focus groups or other consultation tools improves the focus of the measures and increases employees' motivation to participate.
- *Management's involvement and commitment to measures:* a strong commitment from top management ensures that measures are rooted in the company culture and processes are implemented in the long term.
- *Inclusion in a broader programme or strategy:* a company-wide programme or strategy can guide and structure measures and initiatives.
- *Strategic approach and diversity of measures:* combining the complementary perspectives of and measures from the OSH and the human resources contexts is considered crucial in setting up workplace interventions that are capable of addressing the challenges of an ageing workforce.
- *Adopting a life-course approach:* a life-course approach at the workplace means adopting measures that focus on all employees, independent of age, with the aim of preventing physical and mental ill-health from the early stages of workers' careers.
- *Flexible approach:* different measures should be offered based on employees' individual needs, including needs linked to age. Adopting a flexible approach, tailored to the individual, is particularly important in relation to the return to work of workers after a medium- or long-term sickness absence, as each returning worker will have different capacities and needs.
- *Systematic planning, monitoring and evaluation:* a realistic number of measures that correspond to the needs of the workers and that are in line with available resources should be focused on, and lessons learnt during implementation should be incorporated in this process.

Specific needs of small and micro-enterprises

The analysis of workplace practices reveals a number of differences between small and large companies, reflecting the specific features and needs of micro- and small companies:

- A lack of financial and human resources is more commonly an issue in small companies than in larger companies. Certain types of measure can be difficult to implement in small companies owing to the limited number of employees, the dependence on one person to act as an ambassador and the lack of motivation among employees.
- Measures in micro- and small companies are often ad hoc, reactive and informal rather than deriving from an explicit OSH or senior policy. Research has shown that such practices can be more effective than formal strategies put in place in large companies (Hilsen and Midstundstad, 2015).

Policy measures should take into account and address the specific needs of micro- and small companies, considering the particular difficulties these companies face in the design and implementation of measures to ensure sustainable working conditions.

▪ **Conclusions**

Over the past decade, European countries and EU policies have acknowledged and begun to address — notably by increasing retirement age — the links between economic prosperity, employment and health. While policy developments at EU and national levels are promising, the gradual shrinking of the European workforce and the growing burden of chronic health conditions and the associated costs for social security systems will remain a challenge for the EU in the future.

Legal and policy frameworks for sustainable work

Extending working lives has been a high priority on the agenda of most Member States' employment and socio-economic policies and, over the past 20 years, all European governments have reformed their pension and disability benefits systems. Many Member States have been raising the official retirement

age, however prolonging working life poses challenges for workplaces and implications for people's health:

- An age-diverse workforce, the proportion of older people in the workforce is growing
- longer; cumulative exposure to workplace hazards and risks
- increased prevalence of chronic conditions among workers

In the majority of national OSH systems, the issue of the working conditions of an ageing workforce does not feature prominently, mostly because the OSH legal framework of the EU is considered sufficient to protect the older workforce. Anti-discrimination legislation, through EU Directive 2000/78/EC on equal treatment in employment, plays an important role in prohibiting age and gender discrimination and in supporting the reintegration of workers with reduced work capacity. However prolonging working life presents opportunities to change working conditions for the better for everyone through application of the **following measures**:

- good OSH management that includes risk prevention and workplace adaptations can prevent chronic illness and disability
- human resource management that places, special focus on age management
- adopting age-sensitive risk assessment
- integrating OSH and workplace health promotion
- working conditions adapted to the workers' needs
- development and implementation of rehabilitation and return-to-work systems to avoid long-term sickness absence and prevent early exit from work
- providing structures for vocational training and lifelong learning

The majority of European countries have introduced some measures related to health, rehabilitation, vocational training and lifelong learning in their policies targeted at the older workforce. The extent to which these measures have been implemented, their scope and their target group vary greatly across countries.

A few countries have developed multidisciplinary and integrated policy frameworks that bring together measures from different policy areas, with the objective of creating healthy working environments for all and maintaining work ability and employability throughout the life course.

Population and workforce ageing is a cross-policy issue and the challenges can be addressed in an efficient way by **integrating the concept of active ageing into all relevant policy areas**. This includes:

- flexible retirement policies allowing gradual retirement and the combining of work and pension, and including financial incentives to carry on working;
- promoting equal treatment in employment, removing age barriers and eliminating age discrimination;
- removing disincentives for employers to hire older workers;
- improving structures for adult education, vocational training and skills development, and promoting lifelong learning;
- creating systems for vocational rehabilitation and reintegration into the labour market;
- promoting work–life balance and consolidation of work and family by developing child care and elderly care, as well as by supporting carers;
- strengthening occupational health care and introducing periodic health examinations for workers over 45 to detect problems at an early stage and allow for the development of early interventions;
- improving data collection on health, disability and absenteeism according to age, gender and occupation to support policy development and in order to develop solutions;
- focusing efforts to reduce health inequalities on the most problematic sectors and occupations and the most disadvantaged groups in the labour market;
- training occupational healthcare personnel, labour inspectors and OSH experts in issues relating to ageing and work;

- strengthening health education and health promotion as part of efforts to shift the focus from cure to preventive actions;
- promoting the concept of solidarity between generations and making efforts to change attitudes towards older people.

Supporting actions

The implementation of the policies described above can be promoted at national level through technical and financial support and through awareness-raising activities.

All relevant stakeholders should be involved in the development and implementation of integrated policy frameworks. Critical partners include social partners, labour inspectors, and other intermediaries, such as local governments, occupational insurance organisations, OSH external advisory services, non-governmental organisations, etc. The creation of formal structures for stakeholder coordination (e.g. stakeholder networks) facilitates collaboration and the efficient implementation of policies.

▪ Policy options

The findings from the present project suggest that a number of **prerequisites are necessary for OSH systems to create and maintain the conditions for sustainable work**. These include:

- *Improved prevention for all* to ensure that workers do not leave the labour market prematurely for health reasons, can maintain and enhance their work ability throughout their professional life and reach retirement healthy.
- *Specific measures for a diverse workforce*, through diversity-sensitive risk assessments, taking into account age, gender and different abilities, as well as the type of work task, occupation and sector, professional history and cumulative exposure to hazards.
- *A holistic approach* to prevention and the promotion of wellbeing at the workplace, linking traditional OSH components to other aspects not traditionally considered OSH, such as training and skills development, career development, flexible working time arrangements and gradual retirement, through cooperation between occupational health services, prevention services, human resources management, labour inspectorates and other relevant stakeholders.
- *Support for companies*, in particular small and micro-enterprises, to ensure that businesses can take a proactive role in the creation of sustainable working conditions beyond mere compliance with regulatory requirements.
- *Integrated policies* cutting across different policy areas, in particular OSH, employment, public health, socio-economic affairs, social justice and equal opportunities, and education.
- *Promoting social dialogue at all levels*.

Development and implementation of **rehabilitation and return to work systems and support** are not only essential after accidents and illnesses but area also an integral part of any strategy to maintain work ability and employability for an extended working life.

Successful return to work systems have a number of elements in common, i.e. the legal or policy framework covers all aspects of the return to work process, there is effective coordination across all relevant policy areas and between actors involved in the return to work system, the scope of the system targets all workers, there is early intervention and the interventions are tailored to the workers' needs. Furthermore, in these systems multidisciplinary interventions are applied, there is a case management approach, the employers responsibility in the process is increased, economic drivers for the employer and worker are involved and finally, financial and technical support is provided to the employer to facilitate the process.

Policy relevant findings in the area of rehabilitation and return to work are the following;

- The scope of the system should be broad, covering all workers

- Rehabilitation and return to work systems should be part of an integrated policy framework for sustainable working life which requires coordination across policy areas
- Coordinated systems require combined action of different actors, at system and workplace level
- Joined-up budgeting can increase resource efficiency at system level
- Financial and technical support for micro and small enterprises to develop individual reintegration plans and workplace adaptations are needed to foster action

Supporting the above, the following recommendations have also been identified for national policy level:

- Public health policies should recognise the workplace as an important potential contributor to the promotion of healthy lifestyles and the prevention of ill-health.
- Healthcare policies should emphasise the key role played by primary care professionals in health surveillance, the return-to-work process and the need for cooperation with non-medical professionals.
- Reforms of sickness, disability and pension benefit schemes should be complemented with the development of supporting programmes to foster people's employability and work ability.
- Return-to-work systems and supporting activities should be part of the integrated policy framework to address the challenges of an ageing workforce and the extension of working life.
- Health issues experienced by men and women are influenced by gender differences, the types of jobs they do, their conditions of work and the occupational risks they face throughout their working lives. Therefore, policies on sustainable working life should adopt a gender-neutral approach.

At EU level

The review of policies developed at national level to address demographic change shows that the EU legal and policy framework is a driver for action in Member States.

OSH legislation

The current OSH legal framework is based on the principle of adapting the working environment to the needs and abilities of each individual worker, which provides a basis for taking into account diversity in risk assessment and OSH management in general.

The EU Strategic Framework

Tackling demographic change is identified in the Strategic Framework on Health and Safety at Work 2014-2020 as one of the challenges for OSH. The Framework refers to the importance of sustainable working life and, as a prerequisite for it, the need to promote safety and health at work and create a culture of prevention. It also emphasises the importance of lifelong employability. The review of the Framework, offers an opportunity to propose more specific EU-level actions to address OSH in the context of an ageing workforce.

Mainstreaming age considerations into different policy areas

The ageing of the population and workforce affects many different policy areas. Cross-policy coordination at EU level is critical for the implementation of successful policies.

- Employment and economic policy recommendations on the reform of social security and pension systems should better acknowledge the potential consequences of pension reforms and raised retirement ages for workers and their health.
- Public health policies related to the ageing population should better acknowledge the impact of work on health and work as a social determinant of health.
- The large number of court cases on the application of Article 6(1) of the Employment Equality Directive suggests that there is a need for more guidance on what can be considered equal treatment.

Supporting actions

- Guidance and tools should be developed and disseminated to support the development and implementation of national policies on sustainable working lives and return-to-work systems.
- The establishment of a specific platform to foster exchange of knowledge and good practice should be considered.
- EU-wide statistical data collection on health at work and sickness absence caused by occupational and non-occupational health problems should be improved.
 - The issue of rehabilitation and return to work should be mainstreamed into different policy areas, in particular social justice and public health policies.
- EU funding mechanisms such as the European Social Fund, the European Structural and Investment Funds and the EU Programme for Employment and Social Innovation, as well as lifelong learning programmes funded by the EU, should further promote age management and active ageing.

Workplace level

At the workplace level, the main drivers for taking action of both small and large companies are related to maintaining employee productivity while avoiding sickness absence and early retirement. The fear of losing skills and expertise is another important reason for taking action, particularly when the recruitment of competent young workers proves difficult or costly.

The following **measures at workplace level** have been identified as key to promoting sustainable working lives:

- Taking a life course approach to prevent ill health from the early stages of a career
- Using a holistic approach, taking into account factors beyond OSH that have an impact on OSH
- Implementation of workplace health promotion measures
- Using age/diversity sensitive risk assessment: measures should be adapted to the employee's individual needs, including needs linked to age, gender and functional ability.
- Adopting HR policies that support OSH management (flexible working time, training, skills development)
- Ensuring return to work support, workplace adaptations: return-to-work considerations should be integrated in company policies
- Providing management and leadership: senior management should be fully involved and committed
- Promoting social dialogue and worker participation: employees should be involved in the development and implementation of measures through various participatory approaches communication and dissemination tools.
- Programmes and policies should be built on a systematic approach, including a needs assessment with mapping of skills and human resources, and regular evaluations.

National policy frameworks have an important impact on the policies and practices enterprises develop in relation to an ageing workforce and they can support effective age management at company level, comprising:

- training and skills development;
- career development;
- flexible working time and work–life balance;
- OSH and working conditions;
- knowledge transfer;
- health promotion.

Needs of micro and small enterprises

Particular attention should be paid to the situation of micro and small enterprises. In line with the objective of the EU Strategic Framework on Health and Safety at Work 2014-2020, support should be provided specifically to micro and small enterprises. This support might include specific funding schemes, guidance, e-tools and awareness-raising activities.

Intermediaries:

Intermediaries are essential in assisting businesses, especially small and micro-companies, in the implementation of their legal obligations and the development of company policies on OSH, age and diversity management, and return to work.

Labour inspectorates should be equipped to support the management of diversity in the workplace and help build discrimination-free sustainable workplaces.

Social partners should play an important role in the development and implementation of policies and programmes on work, age and health.

Other intermediaries should get involved in the development and implementation of initiatives or measures related to sustainable work and return to work. They have a key role to play in raising awareness and disseminating information at the company level on issues related to health, work, age and diversity, and in providing technical support and guidance.

For effective policies to ensure sustainable working life, higher employment rates and better health for all, development of cross-policy and multidisciplinary systems and structures, coordination between actors and establishment of support schemes remains a challenge for many European countries.

References

- EC — European Commission (2009), *Healthy life years in the European Union: Facts and figures 2005*, European Communities. Retrieved on 15 February, from: http://ec.europa.eu/health/ph_information/reporting/docs/hly_en.pdf
- EC — European Commission (2012), *2012 Ageing report: Economic and budgetary projections for the 27 EU Member States (2010–2060)*, European Economy 2/2012, Publications Office of the European Union, Luxembourg. Retrieved 11 February 2016, from: http://ec.europa.eu/economy_finance/publications/european_economy/2012/pdf/ee-2012-2_en.pdf
- Eurostat (2014), Population projections, Main scenario — Population on 1st January by sex and single year age [proj_13npms], last updated on 1 April 2014. Retrieved on 17 June 2014, from: <http://ec.europa.eu/eurostat/web/population-demography-migration-projections/statistics-illustrated>
- Fotakis, C., Peschner, J. (2015), *Demographic change, human resources constraints and economic growth — The EU challenge compared to other global players*, Working Paper 1/2015, Publications Office of the European Union, Luxembourg. Retrieved 11 February 2016, from: <http://ec.europa.eu/social/BlobServlet?docId=13727&langId=en>
- Hilsen, A. I., Midstundstad, T. (2015) 'Domain: Human resource management and interventions', in Hasselhorn H. M., Apt, W. (eds), *Understanding employment participation of older workers: Creating a knowledge base for future labour market challenges*, Federal Ministry of Labour and Social Affairs, Berlin. Retrieved 15 February, from: http://www.jp-demographic.eu/wp-content/uploads/2015/07/JPIUEP_Brochure1.pdf
- NFA — Det Nationale Forskningscenter for Arbejdsmiljø (2012), *Det store TTA-projekt: Proces-, effekt- og økonomisk evaluering*, Det Nationale Forskningscenter for Arbejdsmiljø, Copenhagen. Retrieved 15 February 2016, from: <http://www.arbejdsmiljoforskning.dk/~media/boeger-og-rapporter/den-store-tta-rapport-051212.pdf>

The European Agency for Safety and Health at Work (EU-OSHA) contributes to making Europe a safer, healthier and more productive place to work. The Agency researches, develops, and distributes reliable, balanced, and impartial safety and health information and organises pan-European awareness raising campaigns. Set up by the European Union in 1994 and based in Bilbao, Spain, the Agency brings together representatives from the European Commission, Member State governments, employers' and workers' organisations, as well as leading experts in each of the EU Member States and beyond.

European Agency for Safety and Health at Work

Santiago de Compostela 12, 5th floor
48003 Bilbao, Spain
Tel. +34 944794360
Fax +34 944794383
E-mail: information@osha.europa.eu

<http://osha.europa.eu>



Publications Office