

a guide to recruiting and retaining
older healthcare workers



HEALTHCARE EMPLOYER

TOOLKIT



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1

Introduction: An Aging Workforce

“Everyday, 11,000 boomers turn 50. There are only 43 million Gen Xers to fill the boomers’ 152 million shoes.” Beverly Kay and Joyce Cohen, T & D, April, 2008, p. 30

As the baby boom generation ages, Pennsylvania healthcare employers are facing a shrinking labor force and an increasing demand for healthcare services. In order to address the critical shortage of healthcare workers and the associated costs of recruiting and training new workers, this toolkit was created to provide employers with innovative ideas and suggestions for attracting and retaining experienced and older workers.

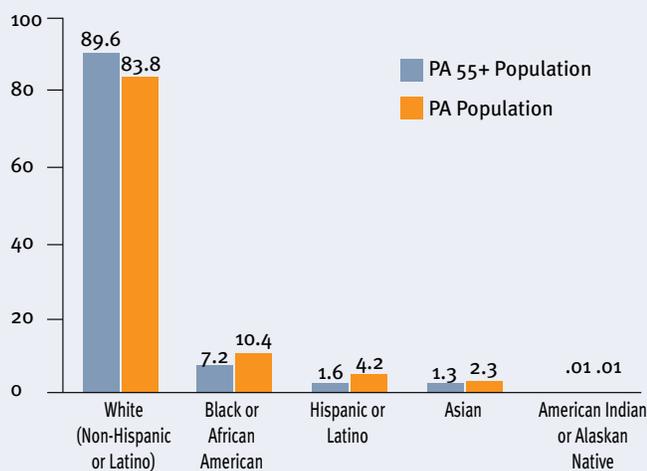
Profile of Pennsylvania Older Workers

With the third largest proportion of its population over 55, Pennsylvania is being challenged by an increasing older population. Defining “older” citizens as those 55 years of age or older, 26.5% of Pennsylvanians meet that criteria, almost 60% of whom are employed (Wong, et al.

2008). The proportion of older Pennsylvanians is expected to continue to rise, increasing by nearly 50% by 2030 (U.S. Census Projections, 2004).

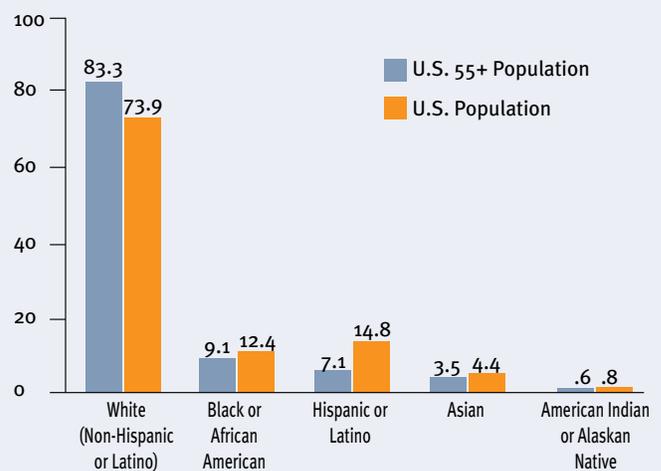
Not only is the older population increasing, but the composition is changing (Fig. 1 and 2). Nationally, 78.5% of 65 year olds in 2007 were white; however, by 2040 the percentage of white 65 year olds is projected to be closer to 58%, reflecting the increase in other ethnic groups. Pennsylvania will most likely see similar shifts, potentially changing the demographic makeup of the healthcare workforce. In order to prepare for these demographic shifts, healthcare employers should be keenly aware of their human resource policies and how they impact different groups.

Fig. 1: Pennsylvania’s Changing Population



Source: U.S. Census Bureau, 2006 American Community Survey.

Fig. 2: U.S. Changing Population



Source: U.S. Census Bureau, 2006 American Community Survey.

Similarly, the percentage of women over the age of 55 participating in the labor force is expected to grow in the next several decades (Fig. 3). The female baby boomers were more likely than previous generations to work outside the home, and these women are more likely to work at older ages. Moreover, women are living longer, healthier lives than men.

As current workers approach retirement, it is clear that they want to continue working and that working at least part-time will be an integral part of their retirement. According to an AARP survey, 8 out of 10 baby boomers plan to work after retirement from their primary

Did you know?

In 2002, Pennsylvania health services employed 15,657 workers over the age of 65.

Source: Carroll, N., and Taeuber, C. (2005) A profile of older workers in Pennsylvania: Local employment dynamics. *US Census Bureau*.

job (AARP, 2007a). Furthermore, the Bureau of Labor and Statistics projects that older workers will comprise 20% of the labor force in 2020 (Hatcher, et al, 2006). Many older workers looking for new careers will consider entering the healthcare field because of the variety of positions and types of work available. In a survey of

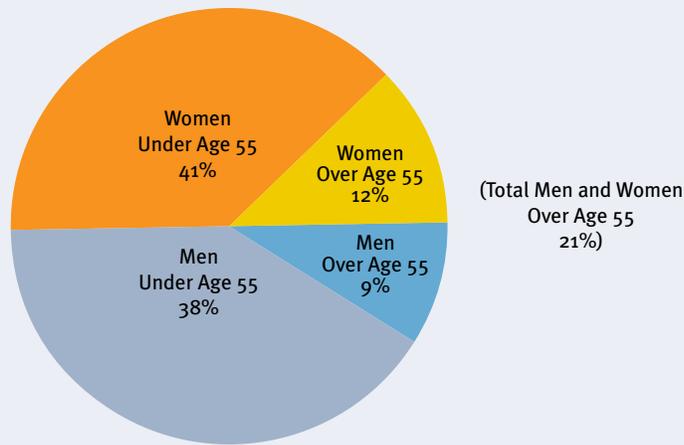
workforce development programs in Michigan, researchers found that older workers had a significant interest in healthcare positions with 63% of workers expressing interest in direct care work (Kosniewski & Hwalek, 2005).

Healthcare: The State of a Growing Industry

Not only are older workers a resource for the healthcare industry, but it is one of the driving forces behind a general expansion of the industry. As one of the fastest growing sectors in the U.S., the healthcare industry is facing an unprecedented growth rate. The demand for long-term care alone is expected to nearly double by 2030 (Wright, 2005). In Pennsylvania alone there could be a shortage of 16,000 registered nurses by 2010 (PA Center For Health Careers, 2005). Furthermore, there are fewer younger individuals choosing healthcare careers, creating a shortage of workers. Coupling the increasing demand for healthcare services with the decreasing supply of healthcare employees, the industry is experiencing a shortage of workers.

Studies have shown that employers who are willing to create friendly environments for older workers are retaining the skills and knowledge of these workers. By developing this largely untapped resource, Pennsylvania healthcare organizations have the opportunity to become national leaders in creating and promoting practices that will serve as models for healthcare organizations in other states.

Fig. 3: 2006 Pennsylvania Population



Source: U.S. Census Bureau, 2006 American Community Survey.

2

Smart Business: The Benefits of Hiring and Retaining Older Healthcare Workers

“We place such a value on older workers because of their reliability and maturity. In an industry where people count on us to be there when they need us, these are essential qualities.” Blake Martin, Vice President of Programs and Services, Right at Home

Retaining and hiring older workers is smart business. Mature workers have experience in the workplace, which can lead to better patient outcomes, improved customer service and productivity. By retaining older workers, healthcare employers can save more than 50% of an employee’s annual salary in retraining costs (AARP, 2007a).

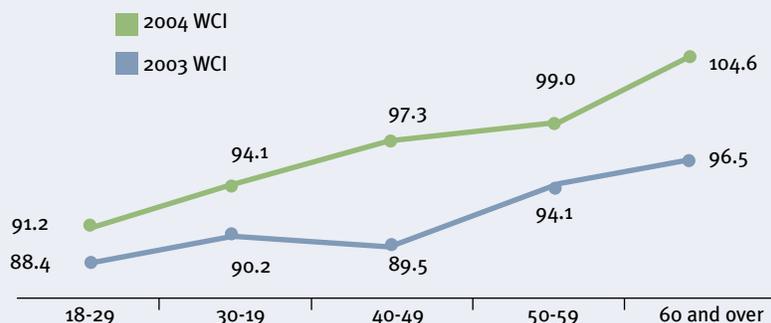
Experience = Knowledge

Through years of work in healthcare settings, many older healthcare workers have accumulated knowledge of their workplace and devised methods to work quickly and effectively. According to a survey of employers conducted by the Center for Retirement Research at Boston College, 40% of employers find that older workers are more productive than younger workers (Munnell et al. 2006). Older workers have more experience in dealing with patients, which can improve patient outcomes.

Loyalty, Dependability and Workplace Skills

Dependable workers are critical to a successful, productive and positive healthcare workplace. Older healthcare workers are committed to their workplaces and have proven they have the attitudes and skills to navigate an often hectic work environment. In a 2005 AARP study, researchers found that across all industries, healthcare workers over the age of 55 had the highest employee engagement (AARP, 2007a). These engaged employees are more likely to be loyal to employers, require less supervision, and are motivated to do a good job and thereby gain the trust of clients (Kosniewski & Hwalek, 2005). For healthcare employers challenged by how to cut costs and increase revenue while at the same time better serving patients, older healthcare workers may be the answer.

Fig. 4: Commitment and Employee Age



Source: Advancing Health in America (AHA) & American Society for Healthcare Human Resources Administration (ASHHRA), 2004.

Did you know?

Healthcare organizations with a higher turnover rates (21% or more) had a 36% higher cost per discharge rate than hospitals with low turnover rates.

Source: Joint Commission on Accreditation of Healthcare Organizations (2003). *Healthcare at the crossroads: Strategies for addressing the evolving nursing crisis.*

In a 2004 study, researchers utilized the Workforce Commitment Index (WCI), a survey tool with scored responses, in order to determine the level of workforce commitment of employees (Fig. 4; Advancing Health in America & American Society for Healthcare Human Resources Administration, 2004). Commitment levels of employees were determined through surveys based upon five criteria: 1) productivity, 2) pride, 3) retention, 4) responsibility and 5) trust. The above line graph shows that in 2003, employees over the age of 60 had an 8 point higher level of commitment compared to employees between the ages of 18 and 29. In contrast, in 2004 there was more than a 165% increase in the commitment gap of older and younger workers.

Crunching the Numbers: The Business Case

High turnover rates increase overall costs associated with a healthcare facility. Compared to healthcare organizations with low turnover rates, organizations with high turnover rates had 36% higher cost per discharge (JCAHO, 2003). High healthcare employee turnover, especially in nursing positions, has been shown to increase patient mortality rates. One study found that a nurse-patient ratio of 8:1 – four times the suggested ratio – increased the chance of death by 8.7 per 1,000 (Hatcher et al. 2006).

While employers can greatly reduce their training and replacement costs by hiring and retaining older workers, often they incur higher healthcare costs. In 2005, medical costs for employees between the ages of 50 and 60 rose 35% compared to younger employees (UnumProvident, 2005). However, in this same study, the healthcare costs of employees of all ages with severe risk factors, such as smoking, obesity, lack of exercise and diabetes were much higher. Younger employees are also more likely to have children under 18, increasing the costs for family medical insurance plans. Furthermore, the increased costs associated with older workers' healthcare are often minor compared to the increased revenue produced by higher productivity and decreased turnover costs. Most importantly, the increase in positive patient outcomes will economically benefit employers in the long run.

2002 Average Quarterly Turnover Rate for Pennsylvania Healthcare Employers

Employees 65+	8.3%
Employees 14+	9.8%

Source: Carroll, N., and Taeuber, C. (2005) A profile of older workers in Pennsylvania: Local employment dynamics. *US Census Bureau.*

Recruiting and Retaining Older Workers

“At UHS, we’ve always relied upon the strong contributions of our mature workers. The skills, experience, and reliability they bring to their jobs are invaluable to the success of our company. In 10 years, 20% of all workers will be 55 or older, which we see as very positive for UHS. We will make every effort to recruit and retain this very critical workforce over the next several years.” UHS CEO Alan Miller, Member of AARP Employer Team

Recruiting and Retaining an Older Workforce

Liberalization of the social security earnings test along with new models of retirement funding have led many older workers to continue to work for income, access to employer-sponsored benefits, and the psychological satisfaction of engaging in meaningful work. Traditional methods of recruitment and retention are being replaced because employers are becoming increasingly aware that older workers have different needs and wants than previous generations.

Older healthcare employees offer healthcare organizations a wealth of knowledge, experience and reliability. According to a study by the AARP, increasing the percentage of newly hired nurses that are over the age of 55 increases costs by 1% while retaining experienced nurses increases costs by 2% (AARP, 2005b). By knowing where and how to entice mature workers, healthcare employers can effectively recruit and retain experienced healthcare workers.

Following are suggestions that employers can use to recruit older workers (Fyock 2006):

1. Use appropriate recruitment activities and resources
2. Offer “unretirement parties”
3. Participate in open houses and (second) career fairs
4. Make presentations at senior centers
5. Advertise in uncommon newspaper sections
6. Appeal to coffee klatches

7. Approach “mall walkers”
8. Host open houses
9. Hold information seminars
10. Referral program/task force
11. Rehire retirees
12. Sponsor or participate in career fairs
13. Networking among other healthcare organizations
14. Partners such as AARP, National Council on Aging, etc.

Talent Management

There are many places available to recruit qualified older healthcare workers, including training centers, older worker career fairs, and older worker job websites. Increasingly, one-stop career centers, community colleges, and other programs are offering training for healthcare careers to older workers. Nationally 28% of U.S. one-stop training centers partnered with community colleges to provide training that targeted older workers. The Senior Community Service Employment Program (SCSEP) provides part-time work-based training to low income adults over the age of 55 (GAO, 2008). Through these organizations, healthcare employers can reach many qualified older candidates for employment.

Organizations like the Southwest Pennsylvania Area on Aging have held career fairs designed to connect older workers with employers. These fairs provide an excellent opportunity to reach potential healthcare workers. There

EMPLOYER SPOTLIGHT: CVS Pharmacy

As a member of the AARP Employer Team, CVS recognizes that mature workers offer valuable knowledge, dependability and experience. CVS has structured many of their practices and policies to attract and retain older workers. Specifically, they have recruited older workers with medical backgrounds for hard-to-fill pharmacist support positions (Edgehill & Erikson, 2005).

CVS pharmacy technicians have the opportunity to participate in a targeted training and continued access to Technician Trainers to update their skills. Through this training, retired healthcare workers can improve their knowledge base to support pharmacists.

- **Flexible Scheduling:** CVS/pharmacy offers both full-time and part-time opportunities. Some positions allow for flexible schedules, which may include evenings and weekends.
- **Employee Discount:** CVS/pharmacy colleagues receive a 20% discount on most items in the store and a 30% discount on most CVS brand merchandise.
- **Health Benefits:** CVS/pharmacy provides access to health benefits for both full-time and part-time colleagues.

Sources: Edgehill & Erikson, 2005; CVS Caremark, 2008.

EXPERT TIP:

Conducting an Age-Friendly Interview

- At the beginning of the interview let the applicant know that age will not affect your decision
- Only ask job-related questions
- Allow the interviewee to discuss their work and healthcare experiences
- Have a good knowledge of the ADEA, ADA, and PA Human Relations Act
- Plan the interviews to make sure standards and techniques are fair and consistent
- Record assessments of candidates against agreed selection of conditions, and where possible, represent a good mix of ages.

Source: Edghill, G. & Erikson, J. (2005) Maturity matters: Handbook curriculum for human resources personnel. Workforce Development Strategies, Inc.

are many employment websites that target older workers, offering specific information on healthcare jobs and employers. Finally, by tracking applicants and referrals to their organizations, healthcare employers can internally build a network to attract older healthcare workers.

Employee referrals are an important source of information, responsible for 49.2% of organizational recruitment of older workers (Reaser, Spokus, Sterns & Rothwell, 2006). Healthcare employers need to be aware of how they acquire information about potential new workers, and make sure that the avenues are open to changing and improving the process.

Benefits and Compensation

Older healthcare workers are concerned with compensation, future financial security, and healthcare insurance. Successful healthcare employers will offer potential and current employees comprehensive compensation and benefits for both full and part time employment (Hatcher et al. 2006), including:

- Competitive compensation that rewards experience and dedicated service.
- Pension plans/retirement savings plans, including 401k, 401b and 401h programs
- Health insurance
- Paid vacation and sick leave
- Long-term care insurance
- Life insurance
- Tuition reimbursement

Healthcare employers need to be sensitive about offering attractive salaries to newly-hired younger employees, while offering experienced older workers less. This action usually creates discontent among older workers who want to be compensated for their experience and wisdom.

Flexible Schedules

Many older workers have compromised other responsibilities and interests because of difficult schedules earlier in their careers and are looking for more flexibility from their employers. Due to the nature of healthcare delivery, healthcare employers are in an excellent position to provide employees with a variety of flexible scheduling options.

Many healthcare employers are already implementing these types of scheduling flexibility:

- *Self-scheduling shifts*: Some employers use a wide range of bidding, lottery and seniority systems to allow employees to schedule when they would like to work.
- *Flexible time* allows employees to determine their own hours during the day. For example, instead of working 9 - 5, employees could work 7 - 3. Some employers ensure that peak hours are covered by mandating that employees work a set of core hours, such as 10 - 2.
- *Compressed Workweek*: Many employers are allowing workers to work longer hours throughout the week in order to shorten their workweek.
- *Job sharing*: Some employers are allowing multiple employees to work part-time and share work responsibilities through job sharing. Job sharing is an excellent way to train younger employees for future positions.
- *Snow birding*: Pennsylvania healthcare organizations with offices in other parts of the country can allow their employees to spend half the year working in Pennsylvania and half the year working in another location. CVS retains their aging pharmacists who are getting ready to retire by allowing them to work at facilities in the southern states during the winter months. This practice eliminates a pharmacist shortage because of the increasing number of prescriptions that have to be filled when the snow birds move south.
- *Consulting*: Experienced healthcare workers, who would like to work part-time, can be brought back in a consulting position to share their knowledge.

Creating a Meaningful Workplace

Healthcare workers care for their patients and reap satisfaction from their care-giving role. When considering retirement options, older healthcare workers weigh the benefits of this role against their job satisfaction. According to Kevin Sheridan, there are six critical factors that influence the engagement of age 55+ healthcare workers (AARP, 2007a):

1. Work that is rewarding
2. An employer with realistic goals and objectives
3. An employer that allows employees to contribute directly to its success
4. An employer with a clear sense of direction
5. Senior managers who care about their employees
6. A job that highlights the employee's skills and strengths

There are many things that healthcare organizations can do to ensure that older workers feel motivated and engaged. These strategies include conducting employee satisfaction surveys and responding promptly and professionally to employee concerns. In addition, healthcare employers should take steps to ensure that employees feel comfortable approaching managers with their concerns and needs.

EXPERT TIP:

Johns Hopkins Health System Employee Satisfaction Surveys

Over 25% of the Johns Hopkins Health System's (Baltimore, MD) workforce are mature workers. They have found that mature workers provide invaluable experience, a positive work ethic, and reliability (Johns Hopkins Medicine, 2008). In order to better attract and retain these quality workers, Johns Hopkins developed a survey to determine employee satisfaction in the workplace. After responding to the results of the first survey and administering a second survey, employee satisfaction increased by almost 192% (AARP, 2007a). Ensuring that employees are enjoying their work and contributing to something important has been a critical component of the retention strategy for older workers (Johns Hopkins Medicine, 2008).

Quality of Work/Life

Quality of work life is a significant factor in determining whether an older healthcare worker will stay on the job (Spokus 2008). The quality of work life is defined holistically as the interaction between both the working environment and the relationship between co-workers (Davis, 1983). Organizations must examine and clarify work roles and possibly redesign the work responsibilities of nurses and other healthcare professionals in order to help assure a sense of satisfaction. It is equally important to review conditions that influence an employee's participation in organizations, particularly the ability to use the information they learn and their ability to incorporate changes.

The public will be better served by a staff that continues to improve their competencies (Spokus, 2008).

A Work-Life Evolutionary study conducted through the Boston College Center for Work and Family concluded that the work-life perspectives have expanded to include the following: 1) talent management, 2) employee relations, 3) corporate citizenship, 4) total rewards, 5) culture change, 6) diversity/inclusion, and 7) health and wellness (Harrington, 2007). Job demands which increase over a period of time result in increased pressure and stress (Demerouti, Bakker, Nachreiner & Schaufeli 2000).

Organizations that incorporate workplace flextime and flexibility for family related issues, job sharing, telecommuting, family medical leave time, child and elder care, and part-time work with benefits demonstrate more interest in integrating a work-family life balance.

Ensuring Older Employees have Work/Life Balance

Older healthcare workers have many responsibilities outside of work, including managing their lives, families and aging parents. As their parents age, older workers often have the responsibility of caring for them. As the fastest growing segment of the population, individuals over the age of 85 receive 80% of all their elder care from friends and families (U.S. Department of Health & Human Services, 2004). The increased stress associated with caring for a parent or spouse can decrease employees' productivity, time spent at work, and ability to continue working. A MetLife study found that decreases in productivity due to elder care responsibilities cost employers \$11.4 to \$29 billion annually (U.S. Department of Health & Human Services, 2004).

EMPLOYER SPOTLIGHT:

Bon Secours Richmond Health System

As Bon Secours Richmond Health System noticed that many of its older workers had to take time off to care for elderly parents they decided to support their workers in their responsibilities. To do so, Bon Secours adopted a comprehensive elder care benefit program in which they provide a 50% subsidy for elder care. In addition, employees can receive home health care assistance for their dependents up to 10 days a year.

Source: AARP (2007b). Hatcher et al. (2006).

What can Healthcare Employers do?

In order to ensure that they do not lose quality workers, healthcare employers can institute policies and practices to support older workers with elder care responsibilities. First, employers are required to abide by the Family Medical Leave Act. Second, employers can provide older workers with eldercare resources and referrals, allow employees to use paid time off to care for family, create a leave sharing pool where employees can donate a portion of their paid time off to support others with care giving responsibilities and subsidize care giving services. Finally, healthcare employers can allow employees to schedule their work hours around care needs or modifying their schedule as needed.

Passed in 1993, the Family Medical Leave Act (FMLA) provides eligible employees with a total of 12 unpaid work weeks off to care for an immediate family member (spouse, child, or parent) with a serious health condition, a new child or a health condition that does not allow them to work (U.S. Department of Labor, 2008).

Does the FMLA apply to my organization?

Employers with more than 50 employees must allow eligible employees to take time off with the FMLA.

Who is an eligible employee?

Employees who have been with your organization for more than 12 months and have worked for more than 1,250 hours are covered by the FMLA.

Phased Retirement

While many healthcare employees will want to continue working for years past the normal retirement age, others will opt for a shorter post-retirement career. Phased retirement allows these employees to slowly work less time while still contributing to their healthcare organizations. In a 2002 survey, 73% of employers responded that they allowed employees to shift to part-time work, but only 25% had formal phased retirement programs (Hutchens, 2007). Establishing formal phased retirement programs allows healthcare organizations to signal the value they place on experience and enables more employees to take advantage of phased retirement opportunities.

Older workers want meaningful work, more free time and the resources to stay abreast of the changes and challenges in today's workplace. Employers must be proactive in ensuring that their organizational culture supports older workers and that age-appropriate training is offered when needed.

Reskilling an Experienced Workforce

“Older people learn differently. They require more practical experience, but they retain what they learn better than younger people.” Cynthia Metzler, President and CEO of Experience Works

In order to effectively train and prepare older healthcare workers, healthcare employers must provide training in ways that are meaningful to the older worker. Participation in lifelong learning assures that workers are kept abreast of new ideas which lead to successful patient outcomes. Research has shown that by providing employees with the training and skills necessary to deliver quality healthcare, patients will be more satisfied with the care they receive. Employees of all ages consider training and reskilling opportunities when deciding whether to accept or continue to work in a healthcare position (AARP, 2007a). Older workers may be more willing to learn new technology and skills than younger workers (Hatcher et al. 2006). By tailoring training programs to meet older worker learning styles, organizations can more effectively motivate, recruit, and retain qualified and experienced employees.

Knowledge Transfer Programs

Not only will healthcare employers benefit from the excellent work performance of older workers, but they will have increased opportunities to help develop younger healthcare workers. In a 2006 Benchmark employer survey, more than 59% of employers noted that knowledge transfer was a challenge to their organization (Pitt-Catsouphes et al. 2006). By developing programs that facilitate intergenerational knowledge transfer, employers can capture the accumulated expertise of their older workforce.

Training Programs

Due to the rapid advances in technology and a general interest in lifelong learning, older healthcare workers are looking for opportunities to increase their knowledge and

EMPLOYER SPOTLIGHT:

Trinity Health

While Trinity Health in Novi, MI does not have a formal mentoring program, they have seen many older nurses gain skills through informal reverse mentoring. Younger nurses have partnered with and supported, older nurses by teaching them computer and technology skills. At the same time, older nurses are able to share their on-the-job experiences with the younger colleagues. Through these partnerships, Trinity Health has been able to foster a culture of mutual and lifelong learning.

“Younger nurses help older nurses with the computer and older nurses share their knowledge, wisdom and efficiencies about practice.”

—Joy Gorzeman, RN, MSN, MBA, senior vice president of patient care services and chief nursing officer for Trinity.

Source: AARP (2007b). Hatcher et al. (2006).

improve their skills. Research shows that healthcare workers, especially nurses, value continued education and new learning opportunities. Studies suggest that new employee training and educational opportunities provide healthcare employers with a competitive edge in successfully recruiting and retaining older workers (Hatcher et al. 2006). In a survey of healthcare employers, the AARP found that tuition reimbursement and training to keep skills up-to-date were the most effective means of recruiting and retaining older workers (AARP, 2007c).

In identifying which programs best match the needs of employees, it is critical that adequate assessments be made of their knowledge and experience. There are many ways to value older workers' experiences and to best fit workers to individual training programs. Due to their age and their responsibilities outside of work, older workers value education and training that is specific to their career needs. They are often less willing to sit through courses that cover material that is irrelevant to their jobs or redundant (Portland Community College Taskforce on

Aging, 2007). Healthcare employers that recognize older trainees' knowledge and that gear training courses towards workplace skills will be more successful at training and retaining older employees.

Employers are beginning to implement a variety of specialized training programs. In a 2007 report, 98% of healthcare employers indicated that they offer updated training to maintain job-related skills.

Did you know?

In the next 10 years, over two-thirds of job openings in the healthcare industry will require specialized education and on-the-job training.

Source: AARP (2007a) Focus on Healthcare.

EXPERT TIP: Designing Effective Training Programs

Recognizing the need to recruit and retain older workers, healthcare employers are implementing these and many other training programs:

- Tuition reimbursement for healthcare and workplace related courses
- Healthcare management training for older healthcare workers
- Distance learning and on-line healthcare courses
- On-the-job training programs
- Entry level healthcare training programs
- Self-tutorials courses in which healthcare employees can gain new skills
- Refresher training courses and continued education programs

Tailoring Training to Older Learners

While older healthcare workers are just as willing as younger workers to learn new skills and technology, older workers may have unique learning styles and needs. Older workers typically have extensive work experience and often have been out of school for long periods of time. They learn best from training programs that value their healthcare experience while building upon the assets they already have. Effective training programs for older healthcare workers should be tailored to meet specific learning needs, including the integration of specialized technology support, adapting materials towards older learners and structuring class schedules in a flexible manner (Project Mature Worker, 2007; Charness & Czaja, 2006). However, employers should not advertise programs as being targeted towards older workers; rather they should market the skills that will be gained and make employees aware of the available supports and resources (Portland Community College Taskforce on Aging, 2007). The following is a list of ways that your training programs can meet the needs of older learners (Adapted from Edghill & Erikson, 2005; Gross, 2004):

- Explain the purpose and benefits of the training at the beginning of the training course.
- Facilitate dialogue that encourages students to discuss

- their own healthcare experience and allow for them to contradict a concept when they disagree.
- Provide specialized healthcare technology training to mature students to foster self-confidence in the classroom. Healthcare technology rapidly changes and many older learners may feel their knowledge is not up-to-date.
- Ensure that there are enough breaks throughout the training session for employees to learn comfortably.
- Structure training in a hands-on, task-learning environment whenever possible. The skills older healthcare workers will be learning will be performed on or in the presence of patients; by providing hands-on training, courses can foster older workers' confidence.
- Ensure that the self-esteem of older healthcare learners is preserved at all times.
- Prepare classroom materials and handouts in large print with sharp colors.
- Schedule courses at flexible times to allow employees to maintain a balance between work, life, and school.
- Set up training in a manageable step-by-step format so that students are able to master the task gradually.

Training Older Workers for New Positions

With their experience and knowledge, older healthcare workers are perfect candidates for management positions as they often have the knowledge to effectively run and supervise less experienced healthcare employees. According to a survey conducted by the American Society for Healthcare and Human Resources Administration (ASHHRA), almost two-thirds of employers offer training programs to retrain experienced employees to move into different positions within their organization (AARP,

EMPLOYER SPOTLIGHT:

Pinnacle Health

Through their Pinnacle Partners, Pinnacle Health utilizes the experience and knowledge of their older workforce to train and prepare new workers. The Pinnacle Partners training program allows experienced workers to volunteer as mentors to younger workers, helping them develop and sharpen their skills. In the first year of their program, they had 25 older employees who participated.

“Our mentors truly value the program; they see it as an opportunity to foster an individual. They don’t know how much they know till they become a mentor. They gain career satisfaction by helping someone work hard.”

—Leslie Shatto, Director of Employment & Labor Relations, Pinnacle Health

EMPLOYER SPOTLIGHT:

Scripps Health

Scripps Health in California recognizes the valuable skills in older workers and the need for continued training. Over the past four years, they have developed the Scripps Center for Learning, a comprehensive training and learning program. Through the Center for Learning, all employees are able to participate in on-line training, in-house classroom training, certification courses and department-based on-the-job training. Employees are also eligible for tuition reimbursement for coursework related to their job. In addition, Scripps Health has worked to create a culture of lifelong learning by offering financial planning to employees who are paying for their children to attend college.

Source: AARP (2007b) Best Employers Program.

EMPLOYER SPOTLIGHT: Massachusetts General Hospital

In 2005, Massachusetts General created the MGH Leadership Academy to retain experienced employees and offer them a clear pathway to management positions. Experienced employees are able to take up to 23 courses that develop management skills in five areas, including people, process, financial, and communication management. Through the Leadership Academy, MGH has been able to retain many of its valuable older employees as they transition into positions with different responsibilities.

Source: Mass General Leadership Academy (2008) <http://www.massgeneral.org/leadershipacademy/index.htm>

EMPLOYER SPOTLIGHT: Home Instead Senior Care

Home Instead Senior Care, a home healthcare provider with franchises throughout Pennsylvania, actively recruits older employees. They found their mature workers were better able to relate to their clients and often had previous experience delivering care to the elderly. Home Instead Senior Care, does not require new hires to have experience or medical training. Instead, they provide all employees with comprehensive training to help them build the necessary skills to deliver quality care.

Source: AARP (2008) National Employer Team.

2007a). After working the same job for years, many older workers welcome the opportunity to gain new skills and move to new positions. Healthcare employers that develop programs that allow older workers to transition to new positions will have a competitive edge in retaining experienced workers.

The Training Pipeline

Not only can healthcare employers retain valuable employees through targeted training programs, but they can attract older workers through an increasing number of independent training programs. Over the past couple

Colleges can do much to support the older student, by increasing flexibility in class scheduling and content, providing credit for prior work-based learning, expanding counseling and advising services to assist older students to successfully reach their goals, and developing internships and other workplace training programs in partnership with local employers in the community.”

—Dr. Preston Pulliams, District President, Portland Community College, Testimony before the U.S. Senate Special Committee on Aging, Feb. 28, 2007

of years, training and one-stop career centers have been expanding their programs to reach older workers (GAO, 2008). Many of these training centers are tailoring programs to identify the training needs of older workers and to provide them with targeted education. Community colleges have reported that older individuals are enrolling at much higher rates to gain new skills and are looking for second careers (Yankelovich, 2005).

Business Sense

The good news for healthcare employers is that providing quality healthcare training for older employees is cost-effective and will improve patient outcomes. While older workers require courses that meet their specific learning needs, these courses tend to cost the same amount as any other training course. By training their current healthcare workforce effectively on new technology, employers can improve productivity while utilizing time-saving methods. Finally, older healthcare workers have an abundance of on-the-job experience, and they are an excellent resource for determining which new technologies may be most effective and cost efficient. By consulting them on needed changes in technology, organizations can ensure that they are utilizing the most cost- and work-effective resources available (Hatcher et al. 2006).

EMPLOYER SPOTLIGHT: Right at Home

As a home health care provider, Right at Home needed employees who were reliable, empathic and dedicated to delivering caring and nurturing services. They found that mature workers had the life and career experience to quickly develop caring relationships with their home care clients. Recognizing training and education were critical to recruiting and retaining these workers, Right at Home developed the Right at Home CERT ProgramSM taught through the Right at Home University.

The CERT ProgramSM provides employees with basic skills and care giving training. Courses are tailored to meet the learning needs and style of older learners. Students are able to access paper materials, internet support, multiple class levels and new technology training. Most courses are voluntary and taught at flexible times.

“Our training program has been a tremendous retention tool. We have a continued desire to get new information and resources for Right at Home.”

—Blake Martin, Vice President of Programs and Services, Right at Home.

In spite of the clear benefits of training older healthcare workers, there are several barriers that many workers and employers may need to overcome. First, training for any employee, young or old has a financial impact. Consequently, many healthcare employers are utilizing creative methods to reduce the costs of training. For example, healthcare organizations are partnering with community colleges to create and provide training programs through their HR and education departments (AARP, 2007a). While there are currently only 10 programs in the U.S. specifically tailored to mature workers, the program model is growing and educators and trainers are becoming certified to teach older learners (Eyster et al. 2008). Through targeted training programs and a culture of lifelong learning in healthcare organizations, employers can ensure that workers have the confidence and support to continue learning.

Unique Issues of Older Workers

“In the healthcare business, experience is important. That’s what we find with the older worker. As we’ve seen people approach retirement ages, we have found a way for people to retire and take their pension and work on a part-time basis.”

Caroline Arneman, Human Resources Officer, St. Vincent Health System

In order to successfully attract and retain older healthcare workers, healthcare organizations must thoroughly understand and acknowledge the unique issues and needs of older workers. As workers reach the retirement age, they become eligible for many government programs and supports. These supports present unique choices as well as challenges to older workers and human resource officers. Understanding how an older adult’s compensation package impacts their eligibility for these programs is critical to developing effective workplace policies and practices designed to recruit and retain older healthcare workers.

Pension Plans/Retirement Savings Plans, Social Security and Health Insurance

As older healthcare workers become eligible to take advantage of federal and state insurance programs, they need to understand how their compensation could affect their eligibility for these benefits. In order to ensure that your employees do not jeopardize their future benefits and to minimize disincentives to work, human resource officers should be familiar with how employee compensation and benefit packages affect these programs and the financial consequences for older workers.

Old Age Security and Disability Income (OASDI):

By continuing or returning to work, many older adults experience significant reductions in their monthly Social Security payments. Social security benefits are calculated by computing an individual’s average wage indexed to their current monthly earnings (AIME), their primary insurance amounts (PIA) and the federal regulations for allowable payment rates. Despite receiving reductions in payment amounts while working, employees who delay retirement and drawing on Social Security can potentially

increase their benefits by increasing future monthly payments. For every year employees continue to work past the age of 65, their monthly benefits increase.

Pensions Plans/Retirement Savings Plans:

Older healthcare workers often have two primary concerns related to pensions. First, they want to know whether they will be able to collect benefits while working. Second, they are concerned about the impact of continued work on the value of their pension plans/retirement savings plans.

Prior to 2006, federal tax law prohibited employees from receiving pension benefits when earning an income from the employer that sponsored the pension. With the passage of The Pension Protection Act, federal tax law now allows employees over the age of 62 to receive in-service pension benefits. In order to access

Old Age Security Eligibility

Year of Birth	Full (normal) Retirement Age
1943 – 1954	66
1955	66 and 2 months
1956	66 and 4 months
1957	66 and 6 months
1958	66 and 8 months
1959	66 and 10 months
1960 and later	67

Source: U.S. Social Security Administration (2008) Full Retirement Age

their pension funds, employees must retire. By incorporating formal phased retirement programs, organizations can make it easier for their employees to access their pension funds while continuing to work.

All pension plans/retirement savings plans are designed to provide benefits upon retirement, yet some benefit programs penalize employees who remain on the job longer than defined in their plan. The following information outlines two of the available benefit programs and their impact on an older healthcare worker's decision to remain in the workforce.

Defined Benefit Plans: Defined benefit programs begin to provide annuities to retirees at a predetermined retirement age. The value of the pension payments are usually determined by the individual's earnings in the years approaching retirement and typically decline if the individual continues working past retirement.

Defined Contribution Plans: Defined Contribution plans, including 401k plans, allow employers to make tax-deferred contributions to an employee's retirement account. Employees are eligible to withdraw funds from the account when they reach the established retirement age. Older healthcare workers who decide to continue working past age 59 ½ are able to draw funds without incurring penalties.

Already more common, defined contribution plans tend to offer more avenues for healthcare employees to work and receive full pension/retirement savings benefits. Recognizing the implications for continued work and other benefits, many employers are moving towards defined contribution plans instead of defined benefit plans. In 2004, 61% of employees were covered by defined contribution plans, while 11% were covered only by defined benefit plans (Healey et al. 2007). As many healthcare employers know, by restructuring the organization's pension programs, many healthcare workers will want to work longer.

Health Insurance, Medicare and Older Workers:

Older healthcare workers are very concerned with the rising costs of healthcare insurance. In order to maintain a good quality of life, many employees are choosing to work longer to access these much needed benefits. Employees who retire before they are eligible for Medicare often forfeit their access to employer-sponsored health insurance and are unable to receive group insurance rates. Many healthcare employers are leveraging quality health insurance as a way to meet older workers' healthcare insurance needs and retain their aging workforce. While eligible for Medicare at age 65, older employees who continue working must use their employer-sponsored healthcare as their primary healthcare insurance until they retire (Butrica et al. 2006). Many healthcare employers offer supplemental health insurance to retirees as a benefit for employees who remain in the workforce longer.

Barriers to Employing Older Workers

Unfortunately, older healthcare workers face many challenges to continued work, including decreased physical ability and the rising costs and time associated with transportation. However, there are many ways that organizations can mitigate these challenges and encourage older workers to continue working.

Physical Ability

Working in the healthcare industry can be a physically demanding job for many workers, but because of physiological changes,

EXPERT TIP: Creating Ergonomically Engineered Workplaces

Technology is making it much easier for healthcare providers to reduce the physical strain on employees. The following are just a few examples of the creative steps employers are taking to reduce the physical demands on mature workers:

- Decentralizing nursing stations
- Utilizing over-bed lifts and other lift assistance equipment
- Ensuring wires, equipment and cords are out of walkways
- Using portable electronic records keeping stations
- Aesthetically designing workspaces with good lighting, visually sensitive color schemes and aesthetic facility textures
- Decreasing noise levels
- Utilizing big screen monitors with images on dark backgrounds with white letters

Sources: Edgehill & Erikson, 2005; CVS Caremark, 2008.

it can become an increasing challenge for older workers. General overall health and chronic conditions are factors older workers consider when deciding whether to continue working or to retire. Older nurses and healthcare workers may be more susceptible to allergic sensitivities from long-term latex and chemical exposure. They may have decreased visual acuity from harsh lighting and they may suffer from musculoskeletal disorders (Hatcher et al. 2006). A 2002 study found that due to decreased muscle mass in joints, 50 % of older nurses are unable to lift weight from several postures (Hatcher et al. 2006).

By implementing safe practices and utilizing technology, healthcare employers can help older workers adapt so that they may continue working while at the same time reducing costs associated with injuries. Many healthcare organizations are installing technology, such as over-bed lifts, to reduce the physical strain on older employees. Surveyed over a 12-month period, nursing facilities that instituted “No Manual Lift” policies saw a decrease in employee injuries by nearly 97% (AARP, 2007a). The U.S. Department of Labor projects that employers saved nearly \$27,700 for every averted back injury (AARP, 2007a).

Transportation and Commuting

With increasing gas prices and long commutes, all workers are finding it more expensive to get to work. However, it can be particularly difficult for older workers to continue to justify working while incurring these expenses. By providing older employees with information about various means of available transportation, organizations can make it cost and time effective for employees who continue to work. The Pittsburgh Port Authority’s Job Perks Program allows employees of participating organizations to purchase monthly transit passes through a pre-tax payroll deduction. In addition, many communities have reduced or free fares for older riders. By restructuring shift times, healthcare organizations can enable employees to take advantage of these fares.

Retirement Programs

As the healthcare workforce ages, organizations are beginning to establish retirement organizations and clubs. Not only do these organizations connect retired healthcare workers, but they connect healthcare employers to an experienced and knowledgeable alumni network, which can be a good source for experienced part-time workers, institutional knowledge for future consultation, and resources for training younger workers. These organizations also offer employers a way to honor their retirees and create a culture of respect for experienced and mature workers.

EMPLOYER SPOTLIGHT: St. Vincent Health System, Erie, PA

Recognizing that experience was a critical component of their success, St. Vincent began to modify their policies and practices to ensure that experienced older workers wanted to continue working. They knew that their older employees were looking for workplace cultures that valued older workers and would enable them to meet their financial needs. Here are just a few of the creative solutions that St. Vincent implemented:

- *Quarter Century Club*: St. Vincent’s Quarter Century Club offers extra benefits and discounts to over 475 employees who have devoted 25 or more years of service to St. Vincent Health System. Quarter Century Club participants are able to accrue sick hours past the 1,040 hour limit of regular staff members.
- *Retired St. Vincent Valued Pacesetter (RSVP)*: Retirees of St. Vincent Health System are able to take advantage of a retiree participation program in which they can attend events, trips and promotion dinners.
- *Retire and Return Program*: Employees who are eligible for retirement but would like to continue working may work less than 1,000 hours per year and still qualify for their pensions and benefits. They also receive prorated health, dental and vision insurance.
- *Retirement Investment Advisors*: Twice a month employees can meet with a retirement representative from USB Financial to receive advice and analysis on any financial topic. In addition, St. Vincent brings in a financial advisor to speak to employees once a month.

Source: AARP (2007b) Best Employers Program.

Managing Generational Differences

“I envision a future working environment that not only celebrates gender and racial diversity, but champions the power of experience and recognizes the strength of an ageless workplace.” Cynthia Metzler, President and CEO of Experience Works

As older healthcare employees continue to work past retirement, the range of ages and generational differences within healthcare organizations will inevitably broaden. Employees from multiple generations will have varying life experiences, perspectives and life stages, and can prove to be an invaluable asset to any healthcare employer. In order to ensure that these differences are valued, employers should cultivate an age-friendly workplace that promotes dialogue and cooperation between employees. The following chapter dispels many of the myths that employees may hold about older workers and provides useful tips on ways to foster an age-friendly environment in your healthcare organization.

Older Workers in a Multi-Generational Workplace

While a multi-generational organization offers a plethora of benefits, it can present challenges as well as opportunities for human resource officers and supervisors. Unfortunately, many still hold antiquated beliefs and misconceptions about the realities of an aging workforce. By demystifying these stereotypes and promoting a realistic understanding of the benefits, capabilities and work styles of older employees, organizations can avoid the costly time and energy associated with intergenerational misunderstandings.

Myth 1: Healthcare work is too physically taxing for older workers.

Reality: While healthcare work can be physically straining on all workers, older healthcare workers are equally capable of completing the necessary tasks as other workers. A 2006 study by The Center for Health Design found that improving the physical environment along with creating a culture for health and safety in healthcare organizations greatly improved the productivity and health and effectiveness of all staff members (Joseph, 2006). Workplace restructuring through mechanical patient lifts,

decentralization, private patient rooms and sophisticated lighting schemes can enable older workers to continue working and enhance the work of younger workers (Hatcher et al. 2006).

Myth 2: Training older healthcare workers is a lost investment because they will retire soon.

Reality: Older workers are continuing to work past the previously accepted retirement age and often work longer than the lifespan of the new healthcare technology for which they are trained. Over the next 12 years, the number of employees working beyond age 55 is expected to increase by 80% (Hatcher et al. 2006). At the same time, application of new medical technology

EMPLOYER SPOTLIGHT: Beaumont Hospitals in Troy, MI

Recognizing that its labor force was growing more age diverse, Beaumont Hospitals in Michigan held an annual leadership retreat devoted to multigenerational diversity training. At the training employees participated in educational programs identifying the needs, differences, work styles and experiences of the multiple generations in the workplace. These programs focused on developing practices and policies that fostered understanding and methods for increasing productivity through teamwork, avoiding clashes and utilizing strengths of different generations (AARP, 2005a).

is expected to continue increasing at exponentially rapid rates. Additionally, older healthcare workers offer a wealth of experiential knowledge and often can be trained for management and supervisor positions that would allow them to better share their knowledge with younger workers.

Myth 3: Older healthcare workers are unable to learn new technology.

Reality: Older healthcare workers are equally willing as younger workers to learn new technology. A 2005 study in Louisiana found that older healthcare workers are often more willing than younger workers to invest the time to learn new technology (Hatcher, et al. 2006).

Myth 4: Older workers are less flexible and less willing to adapt to change (Wisconsin Department of Labor, 2008).

Reality: Older workers are just as adaptable as younger workers once they understand the rationale for proposed changes. Older workers have experience and a thorough understanding of previous practices, procedures and changes; but they often are more likely to ask why changes are being implemented (Wisconsin Department of Labor, 2008). While it does require managers to explain their choices, the experience of older workers can be beneficial in evaluating which processes and procedures can be most effective.

Myth 5: Everyone looks forward to retirement (Edgill & Erikson, 2005).

Reality: Increasingly older workers are re-imagining work past the previously accepted retirement age. Many older workers are not financially prepared to retire and can greatly increase their current and future annual income by working longer (Eyster et al. 2008). Continuing to work also has psychological benefits for older workers. Older workers prefer to engage in meaningful and valuable work, such as healthcare, where they feel they can make a difference (AARP, 2007a).

Myth 6: Older workers are taking much needed jobs away from younger workers.

Reality: The healthcare industry is experiencing rapid growth and will have more than enough jobs for both older and younger workers. For example, the Pennsylvania healthcare industry is expected to have a shortage of over 4,000 LPN's by 2010 (PA Center for Healthcare Careers, 2006).

Myth 7: Employees of different ages are unable to effectively work together...especially when supervised by younger employees (Edgill & Erikson, 2005).

Reality: All employees want respect and support from their co-workers within a respectful workplace environment. Older workers are more likely to feel that their supervisors/managers are more competent, more supportive of their success on the job and more responsive to their personal and family needs than younger employees (Families and Work Institute, 2004).

EXPERT TIP:

Effective Multi-Generational Management

1. Promote good communication
2. Provide diversity training
3. Promote flexibility, respect, and retention of talented employees
4. Accommodate employee needs whenever possible
5. Create and encourage choice in the workplace
6. Operate with a sophisticated management style
7. Respect competence, initiative and experience

Sources: Edgill & Erikson, 2005; CVS Caremark, 2008.

Managing a Multi-Generational Organization

Collaboration, teamwork, and cooperation are essential for quality patient care. There are several tools and practices that employers can implement to promote a cooperative and effective multi-generational workplace. The following are a few model programs:

Mentoring Programs: Many healthcare organizations have implemented and utilized programs that connect older and younger workers to facilitate mentoring. Mentoring programs prepare younger workers for future responsibilities while at the same time promoting dialogue between generations. For example, knowledge transfer programs value older workers' experiences and wisdom while enabling the retention of institutional memory.

Team Building Programs: Team building programs connect older and younger workers by promoting communication and teamwork. By encouraging your workforce to participate in team building, younger and older employees can foster effective interactions. As employees have increased exposure as mentors and coaches, organizations can create a respectful and collaborative work environment.

Understanding and Using Effective Policies

“To remain or become successful over the next several decades, it seems likely that many organizations will have to figure out how to engage and retain older employees with the skills and experience to add value to the bottom line.”

Ellen Galinsky, President and Co-Founder of the Families and Work Institute

As the labor market shifts and healthcare organizations face a labor shortage, there are many solutions organizations can utilize to meet this challenge. Recruiting and retaining experienced older workers will not only decrease the effects of the current labor shortage but will increase the productivity and improve patient outcomes. Recognizing how important these workers are to the industry, healthcare employers across the nation are beginning to implement policies and practices to create workplace environments that cater to the needs of older workers.

Did you know?

Of workers who have not yet retired, almost 7 in 10 workers plan to work past the average retirement age or never retire.

Source: Eyster, L., Johnson, R., & Toder, E. (2008) Current strategies to employ and retain older workers, *The Urban Institute*.

Age Audit: Healthcare Employer Checklist

Is your organization doing all that it can do to attract and retain older employees? See the included Healthcare Employer Checklist (Fig. 5) to identify practices and policies that you can utilize to create an age friendly workplace.

Other assessment tools are available from:

- <http://www.aarpworkforceassessment.org/template/index.cfm?CFID=7090378&CFTOKEN=66142384>

- *Wisdom at Work: The Importance of the Older and Experienced Nurse in the Workplace* (2006) Robert Wood Johnson Foundation. www.rwjf.org/files/publications/other/wisdomat-work.pdf

Spelling It Out: State and Federal Regulations

In order to ensure that your organization offers an age-neutral environment, you must meet Pennsylvania and federal employment laws and regulations. The following section provides an outline of several relevant regulations and provides tips on ways to fully meet and implement these policies.

Age Discrimination in Employment Act (ADEA):

The ADEA protects all employees and job applicants over the age of 40 from arbitrary age discrimination. Under the ADEA, it is illegal to set arbitrary age limits for hiring, promotion, discharge, compensation, working conditions and benefits, regardless of their job performance. Employers must not establish policies and practices that work to the disadvantage of older workers or job applicants. If an employee files a complaint, employers are prohibited from retaliating against the individual (AARP, 2006).

Does ADEA apply to my organization? Employers with more than 20 employees must meet the regulations of the ADEA.

Pennsylvania Human Relations Act:

The Pennsylvania Human Relations Act prohibits discrimination in employment based on age, race, color, familial status, religious creed, ancestry, handicap or disability, sex, national origin or the

Figure 5: Healthcare Employer Checklist

AGE NEUTRAL WORKPLACE:

1. Our organization offers age diversity training for managers and staff members on topics such as:
 - Age discrimination issues
 - Workplace inclusiveness
 - Communication and effective practices with a multi-generational workforce
 - Age stereotyping
 - Unique issues of older workers
2. Our organization trains all managers and human resource staff on the following regulations:
 - ADEA
 - PA Human Relations Act
 - ADA
3. Long time employees are recognized and awarded for their service ____
4. Our organization regularly conducts employee satisfaction surveys and offers opportunities for employee feedback ____
5. Our organization utilizes newsletters and other communication tools to connect with employees about workplace changes, events and policies ____

UNDERSTANDING AGE IN YOUR ORGANIZATION:

6. We are familiar with the age distribution of our workforce ____
7. Our organization periodically re-examines the average retirement age of our employees ____
8. We are familiar with possible barriers to work and unique challenges of older employees ____

RECRUITING AND HIRING OLDER WORKERS:

9. We are familiar with organizations and agencies in Pennsylvania that:
 - Provide training for older workers
 - Place older workers into employment
 - Hold older worker career fairs
10. When interviewing or hiring potential candidates, we provide them with the information that may be of interest to older workers, including information on:
 - Social Security Earning Caps
 - Flexible Benefits
 - Alternative Work Schedules
 - Workplace Accommodations

RETAINING OLDER WORKERS:

11. We periodically redesign our workspaces to reduce the physical demands on older healthcare employees ____
12. We provide the following benefits to our employees:
 - Health Insurance
 - Dental and Vision Insurance
 - Prescription drug coverage
 - Long-term care insurance
 - Competitive salaries
 - Defined-benefit pension plans
 - Defined contribution plans
 - Paid time off
13. Our part-time employees receive prorated or the same benefits as our full-time employees ____
14. We offer benefits to our retirees ____
15. We offer alternatives to full time work, including:
 - Part-Time work
 - Temporary work
 - Seasonal work
 - Consulting

- Job Sharing
- Flex-Time
- Flex-pace
- Compensatory Time
- Phased Retirement

16. We allow employees to schedule their shifts ____

PROMOTING WELLNESS IN THE WORKPLACE:

17. Our organization has an Employee Assistance Program in place ____

18. We offer eldercare services and referrals ____

19. We offer financial education and retirement planning programs ____

20. We offer wellness programs ____

21. We offer trainings on how to prevent on the job injuries ____

TRAINING:

22. Our organization has a knowledge transfer or mentoring program pairing older workers with younger ones ____

23. We encourage our employees to obtain further training by:

Offering tuition reimbursement for healthcare related education

Promoting cross-training skills

Offering professional and managerial skills training

Offering medical technology training

CONNECTING WITH RETIREES:

24. We maintain a job bank including retirees and other qualified workers to fill temporary positions ____

25. Our organization offers a retirement club ____

Add the number of items you checked and compare your score with the following tool:

1-13: Your organization is likely to have difficulty attracting older workers

14-26: Your organization is somewhat older worker friendly

27-40: Your organization is mostly older worker friendly

41-54: Your organization is older worker friendly

EMPLOYER SPOTLIGHT: Pinnacle Health

Pinnacle Health recognized that older healthcare employees had a highly prized knowledge set and designed their practices and policies to attract and retain the older worker. The following are several examples of their programs:

- **PART-TIME HEALTH BENEFITS:** Employees working at least 16 hours a week can receive individual and family medical coverage, family prescription drug coverage, vision and dental insurance, short term disability and long term care insurance.
- **PINNACLE PARTNERS:** Pinnacle Partners is a training program in which younger workers are matched with experienced workers who volunteer to be mentors.
- **MANAGEMENT DEVELOPMENT PROGRAM:** Employees are selected for management training and enter the Management Development Program in which their skill sets are further developed and their strengths are molded for management positions.
- **SELF SCHEDULING FOR SHIFTS:** At Pinnacle Health employees are able to schedule shifts that best fit their work needs and desires.
- **FLEXIBLE SCHEDULING:** Employees are able to take advantage of alternative work arrangements including flex-time, compressed work schedules, job sharing and telecommuting. While direct medical care employees utilize flexible scheduling most frequently, other employees can take advantage of alternative work schedules by staggering shifts within normal business hours.
- **ERGONOMIC FRIENDLY WORKSPACES:** Pinnacle Health has utilized technology to create workspaces that meet the physical needs of older workers, including large monitors, computers on wheels for electronic charting, amplifiers and head sets for phones and electronic lifting support for transferring patients.

“Looking at our human resources policies from a workforce demand perspective facilitates better patient outcomes.” —Leslie Shatto, Director of Employment and Labor Relations, Pinnacle Health

use of a guide or support animal (PA Human Relations Commission, 2003).

Does PA Human Relations Act apply to my organization? Employers with more than 4 employees must meet the regulations of the PA Human Relations Act.

Americans with Disabilities Act (ADA):

The ADA prohibits employers from discriminating against qualified employees or applicants with disabilities. It protects all individuals with a physical or mental impairment that substantially limits one or more major life activities and who is able to perform the specific job functions. Employers must make facilities usable, restructure jobs, and/or modify work schedules to

accommodate the needs of the individual (U.S. Department of Justice, 2005).

Does the ADA apply to me? Employers with 15 or more employees must meet the regulations of the ADA.

What happens if an employee files a complaint? Employees can file age discrimination complaints with the Pennsylvania Human Relations Commission (PHRC) or the U.S. Equal Employment Opportunity Commission (EEOC). If the PHRC or the EEOC determines that the case should be investigated, they will request documents, testimony and other evidence. Before allowing the complainant to file a lawsuit, the EEOC will attempt to resolve the case by providing the employer with ways to remedy the al-

Did you know?

In 2004 alone, the cost of negotiated settlements of federal age discrimination complaints totaled \$69 million.

Source: AARP (2006) Age discrimination: What employers need to know.

leged discrimination. If it cannot be resolved, the employee may file a lawsuit within 60 days.

How can healthcare employers avoid age discrimination? In order to avoid costly lawsuits, healthcare employers and employees must abandon old assumptions about older workers. There are many ways to create an environment that values older workers and creates an age-friendly workplace. Incorporating the following tips will ensure that your organization is an equal opportunity employer:

- Create an age-friendly work climate: Promote a positive work environment that facilitates respect for all employees regardless of age.
- Educate employees on older workers: Provide educational and training courses on the realities of an older workforce and their unique issues to dispel negative myths about older employees.
- Connect different generations of employees: Hold focus groups, training sessions and conversations that promote intergenerational dialogue.
- Utilize the talents and skills of an older workforce: Ensure that older workers have opportunities to use their acquired skills and talents.
- Create an older worker advisory committee: Allow older workers to assess hiring, recruitment, promotion and other employment policies to determine if they are older worker friendly.
- Train personnel on experienced worker interviewing techniques: Ensure that human resources and management employees are familiar with the ADEA and techniques to elicit the skills and qualifications of older workers.
- Accommodate the physical and mental needs of workers: Provide reasonable accommodations to older workers to enable them to continue working, including restructuring jobs, reducing the physical demand and offering modified work schedules.
- Ensure policies reflect an age-neutral workplace: Provide the same benefits to all employees regardless of age, do not set mandatory retirement ages, and do not terminate older workers to make room for younger workers.

Appendix A:

Recruitment Training and Other Resources

Recruitment and Training Resources:

Career One Stop provides information for businesses, service providers and individuals seeking support through recruitment and employment. Their website has a training search function, a job bank and employer and human resource tools. www.careeronestop.org

Experience Works offers essential services at a time of growing need in this country, serving 43 counties in the state of Pennsylvania. Employers can contact to find qualified, mature workers. www.experienceworks.org

Pennsylvania Area Agency on Aging offers a wide range of information on older individuals and employment services. Many of the agencies have employment programs, job banks and career fairs. For a complete listing of the 52 Area Agencies on Aging visit: www.aging.state.pa.us/aging/cwp/view.asp?a=552&q=177138

PA Careerlink, a division of the Commonwealth Workforce Development System, provides employment support for employers by connecting them with skilled workers, research and training programs. www.pacareerlink.state.pa.us

Retirement Jobs allows employers to search through posted resumes to find qualified older workers. www.retirementjobs.com

Retiree Careers is a job board for employers to find qualified older workers. www.retireecareers.com

Seniors 4 Hire is a nationwide career center that encourages employers to recruit older workers. www.seniors4hire.com

Senior Job Bank provides a forum for employers to advertise jobs directly to older workers. www.seniorjobbank.org

Workforce 50 is a job bank for workers over the age of 50. www.workforce50.com

Older Worker Information Resources:

AARP's Employer Resource Center is a support center for employers who are looking to recruit and retain older workers. www.aarp.org/money/careers/employerresource-center

Center for Workforce Information and Analysis provides employers and researchers with detailed statistics on Pennsylvania's workforce. www.paworkstats.state.pa.us/

Center to Champion Nursing, founded by the Robert Wood Johnson Foundation, is devoted to researching and supporting healthcare organizations facing nursing shortages. www.championnursing.org/

Internet Retirement Alliance is a good source of information about pensions, IRAs, insurance and social security. www.ira.com

National Council on Aging is a non-profit devoted to older individuals and has many resources for older workers to find jobs. www.ncoa.org

National Older Worker Career Center provides support and labor market research to employers experiencing staff shortages. <http://www.nowcc.org>

Society of Human Resource Professionals (SHRM) offers information and research on recruiting and retaining older employees. www.shrm.org

U.S. Department of Health and Human Services' Administration on Aging provides information on legislation, services and support for older individuals and their employers. www.aoa.gov

U.S. Department of Labor's senior division provides information on training and employment programs for older workers. www.doleta.gov/seniors

The Wharton School at the University of Pennsylvania has a variety of research reports on older workers and their employers. <http://knowledge.wharton.upenn.edu>

Appendix B:

Resources for Older Workers

AARP's Foundation's Featured Employers Program highlights several healthcare employers who are exemplary in their policies towards older workers www.aarp.org/money/careers/findingajob/featuredemployers/

AARP's Work Resource Center provides resources to older individuals who would like to continue working, change careers or downsize their work commitment. They also offer advice on resume writing, job searching and interviewing to obtain a job at an older worker friendly organization. www.aarp.org/money/work

Experience Works offers services at a time of growing need in this country, and serves 43 counties in the state of Pennsylvania. For qualifying individuals, they can provide job training, job search services, supplemental income, and job readiness training and counseling. To find out what services are available in your area visit www.experienceworks.org or call one of the following numbers:
1-800-854-1578 (toll free)
Martinsburg (814) 793-2205
Mechanicsburg (717) 790-0165
Pottsville (570) 622-0857
Punxsutawney (814) 938-5057
Wellsboro (570) 724-4793

On-the-Job Survival Guide for Mature Nurses provides nurses with ways to continue working at older ages. <http://content.comcast.monster.com/careersat50/healthcare/nursing/older-workers/On-the-Job-Survival-Guide-for-Matur/home.aspx>

Pennsylvania Area Agency on Aging offers a wide range of information on older individuals and employment services. Many of the agencies have employment programs, job banks and career fairs. For a complete listing of the 52 Area Agencies on Aging visit: www.aging.state.pa.us/aging/cwp/view.asp?a=552&q=177138

Pennsylvania Health Careers is a website devoted to connecting individuals with healthcare training programs and healthcare career information. Older individuals can search for careers that best suit their needs and interests. www.pahealthcareers.org

Retirement Jobs allows older individuals to post their resumes and search for jobs. www.retirementjobs.com
Retiree Careers is a job board for older workers to post their resumes. www.retireecareers.com

Seniors 4 Hire is a nationwide career center that allows older workers to post resumes and find jobs. www.seniors4hire.com

Senior Job Bank provides a forum for employers to advertise jobs directly to older workers. www.seniorjobbank.org

Workforce 50 is a job bank for workers over the age of 50. www.workforce50.com

Appendix C:

Glossary

Age Neutral: An organization is age neutral if all of the rules, benefits, and opportunities are the same for every individual within a specific position.

Age stereotyping: Attributing characteristics to people based solely on their age.

Compressed work schedules: A shortened work week in which employees work longer hours but fewer days (for example, working four 10-hour days).

Defined Benefit Plan: An employer-sponsored retirement program that provides annuities to retirees at a predetermined age based on the employees earnings.

Defined Contribution plan: An employer-sponsored retirement program that allows employees to withdraw funds from a tax-deferred contributions account upon retirement.

EAP: Employee Assistance Program in which employees are able to access support and services to manage their work and life.

Flex-Place: Workers are allowed to determine whether they would like to work from home or commute to work.

Flextime: A scheduling scheme in which employees are allowed to schedule their own hours.

Job sharing: Where two individuals share the responsibilities of one job, and work half the time.

Knowledge Transfer: The passage of experiential and institutional information from older workers to younger workers.

Medicare: Government sponsored health insurance for older individuals.

Mentoring programs: Programs in which older workers connect with younger workers to help them build skills and knowledge about their organization.

Phased retirement: Allows employees to slowly shift to part-time and retirement while still collecting their pension.

Senior Community Service Employment Program (SC-SEP): A federally funded program providing training and employment support to low income older individuals.

Social Security: Old Age Security and Disability Income provides income support to older individuals through monthly payments.

Cited Sources

- AARP (2005a) Best Employers Program Honorees. AARP. Downloaded on March 7, 2008 from www.aarp.org/money/careers/employerresourcecenter/bestemployers/winners/beaumont_hospitals.html
- AARP (2005b) The Business Case for Workers Age 50+: Planning for Tomorrow's Talent Needs in Today's Competitive Environment: A Report for AARP Prepared by Towers Perrin. AARP
- AARP (2006) Age Discrimination: What Employers Need to Know. Downloaded on April 28, 2008 from http://assets.aarp.org/www.aarp.org/_articles/money/employers/age_discrimination.pdf
- AARP (2007a) Focus on Health Care: Recruiting and Retaining Workers 50+. Downloaded on March 7, 2008 http://assets.aarp.org/www.aarp.org/_articles/money/careers/FocusOnHealthCare_full.pdf
- AARP (2007b) Best Employers Program Honorees. AARP. Downloaded on March 7, 2008 from <http://www.aarp.org/money/careers/employerresourcecenter/bestemployers/winners/2007.html>
- AARP (2007c) Training and Reskilling Practices of Healthcare Organizations. AARP. Downloaded on March 7, 2008 from http://assets.aarp.org/rgcenter/econ/health_training.pdf
- AARP (2008) National Employer Team. Downloaded on March 7, 2008 from http://www.aarp.org/money/careers/findingajob/featuredemployers/home_instead_senior_care.html
- AHA and ASHHRA (2004) AHA and ASHHRA Healthcare at Work: 5th Edition. Downloaded on March 7, 2008 from www.healthcareworkforce.org/healthcareworkforce/content/HCatWk04.pdf
- Brotheridge, C., & Lee, R. (2005). Impact of work-family interference on general well-being: A replication and extension. *International Journal of Stress Management*, 12(3), 203-221.
- Butrica, B., Johnson, R., Smith, K. and Steuerle, C.E. (2006) The Implicit Tax on Work at Older Ages. *National Tax Journal*. Vol. LVIV, No. 2
- Career One Stop (2007) Career One Stop: Pathways to Career Success. Downloaded on April 30, 2008 from http://www.acinet.org/acinet/occ_rep.asp?soccode=291111&from=&Level=&keyword=REGISTERED+NURSE&stfips=42&x=27&y=8
- Carroll, N., & Taeuber, C. (2005). A Profile of Older Workers in Pennsylvania: Local Employment Dynamics. US Census Bureau. Downloaded on March 7, 2008 from <http://www.census.gov/prod/2005pubs/LED-OW-PA.pdf>
- Charness, N. & Czaja, S. (2006). Older Worker Training: What We Know and Don't Know. AARP. Downloaded on April 20, 2008 from http://assets.aarp.org/rgcenter/econ/2006_22_worker.pdf
- CVS Caremark (2008). Seniors: CVS Caremark is a member of the AARP National Employer Team. Downloaded on May 23, 2008 from www.cvscaremark.com/careers/seniors
- Davis, L. (1983). Design of new organizations. In H. Kolodny & H. v. Beinum (Eds.), *The quality of working life and the 1980s* (pp. 65-86). New York: Praeger Publishers.
- Demerouti, E., Bakker, A., Nachreiner, F., & Schaufeli, W. (2000) A model of burnout and life satisfaction among nurses. *Journal of Advanced Nursing*, 32, 454-465.
- Edghill, G. and Erikson, J. (2005). *Maturity Matters: Handbook Curriculum for Human Resources Personnel*. Workforce Development Strategies, Inc.
- Eyster, L., Johnson, R., and Toder, E. (2008). *Current Strategies to Employ and Retain Older Workers*. The Urban Institute.
- Families and Work Institute for the American Business Collaboration (2004). *Older Employees in the Work-*

- force, A Companion Brief to: Generation and Gender in the Workplace. Families and Work Institute. Downloaded on April 17, 2008 from <http://familiesandwork.org/site/research/reports/olderworkers.pdf>
- Fyock, C. (2006). Effective strategies for recruiting and retaining older workers. In Paulette T. Beatty and Roemer M.S. Visser (Eds.), *Thriving on an aging workforce: Strategies for organizational and systemic change.* (p. 52-54). Miami, FL: Krieger Publishing Company.
- GAO (2008). *Employment and Training: Most One-Stop Career Centers are Taking Multiple Actions to Link Employers and Older Workers.* Report to the Committee on Health, Education, Labor and Pensions, U.S. Senate. Downloaded on April 30, 2008 from <http://www.gao.gov/new.items/d08548.pdf>
- Gross, D. (2004). *Different Needs, Different Strategies: A Manual for Training Low-Income, Older Workers.* US Department of Labor. Downloaded on April 30, 2008 from www.doleta.gov/Seniors/html_docs/docs/dnds.cfm
- Hatcher, B., Bleich, M., Connolly, C., Davis, K., O'Neill Hewlett, P., and Stokley Hill, K. (2006) *Wisdom at Work: The Importance of the Older and Experienced Nurse in the Workplace.* Robert Wood Johnson Foundation. Downloaded on March 7, 2008 from <http://www.rwjf.org/files/publications/other/wisdomatwork.pdf>
- Healey, P., Dobbs, J., Kane, K., Mak, D., & McNamara, T. (2007). *Employer-Sponsored Pensions.* The Center on Aging and Work: Workplace Flexibility at Boston College.
- Hutchens, R., (2007). *Phased Retirement: Problems and Prospects.* Work Opportunities for Older Americans. Downloaded on March 7, 2008 from www.bc.edu/crr
- JCAHO (2003). *Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis.* Joint Commission on Accreditation of Healthcare Organizations. Downloaded on March 7, 2008 from http://www.healthcareworkforce.org/healthcareworkforce/content/jcaho_crossroads.pdf
- Johns Hopkins Medicine (2008) *Working@Hopkins: AARP Featured Employer.* Downloaded on April 17, 2008 from www.workingathopkins.org/aarp
- Joseph, A. (2006). *The Role of the Physical and Social Environment in Promoting Health, Safety and Effectiveness in the Healthcare Workplace.* The Center for Health Design.
- Kosniewski, K., and Hwalek, M. (2005) *Older Workers in Direct Care: A Labor Force Expansion Study.* A Better Jobs Better Care Project of the Robert Wood Johnson Foundation and the Atlantic Philanthropies. Downloaded on March 7, 2008 from www.SPECAssociates.org
- Mass General Leadership Academy (2008) Downloaded on April 10, 2008 from <http://www.massgeneral.org/leadershipacademy/index.htm>
- McIntosh, B. (2004). *An Employer's Guide to Older Workers: How to Win them Back and Convince them to Stay.* US Department of Labor, Downloaded on March 7, 2008 from www.doleta.gov/Seniors/other_docs/Empl-Guide.pdf
- Metzler, C. (2008). *Barriers to Employment for Older Americans – It's All About Attitudes.* NAWDP Advantage.
- Moseley, J. & Dessinger, J. (2007). *Training older workers and learners: Maximizing the performance of an aging workforce.* San Francisco, CA: John Wiley & Sons.
- Munnell, A., Sass, S., and Soto, M. (2006). *Employer Attitudes Towards Older Workers: Survey Results.* Work Opportunities for Older Americans. Downloaded on March 7, 2008 from http://crr.bc.edu/images/stories/Briefs/wob_3.pdf
- Office of Institutional Equity, Duke University (2008). *Cross Generational Communication: Implications in the Work Environment Presentation.* Downloaded on April 28, 2008 from www.duke.edu/web/equity.html
- Pennsylvania Center for Health Careers. (2005). *The Registered Nurse Workforce in Pennsylvania: Supply/Demand Report Summer 2005.* Pennsylvania Workforce Investment Board. Downloaded on March 7, 2008 from http://www.paworkforce.state.pa.us/about/lib/about/pdf/health_careers/rn_report.pdf
- Pennsylvania Human Relations Commission (2003). *Laws Administered by the Pennsylvania Human Relations Commission.* Downloaded on April 28, 2008 from http://sites.state.pa.us/PA_Exec/PHRC/publications/literature/Laws%20READ.pdf

- Pitt-Catsoupes, M., Kane, K., Smyer, M. and Shen, C. (2006). The Benchmark Study: Summary Report: Phase I of The National Study of Business Strategy and Workforce Development. The Center on Aging and Work: Workplace Flexibility at Boston College. Downloaded on March 7, 2008 from http://agingandwork.bc.edu/documents/RH03_BenchmarkStudy_12-06_002.pdf
- Portland Community College Taskforce on Aging (2007). Boomers Go To College: A Report on the Survey of Students 40 and Older. Portland Community College
- Project Mature Worker (2007). Project Mature Worker. Grand Rapids Community College. Downloaded on April 30, 2008 from <http://www.grcc.edu/matureworker>
- Reaser, J., Spokus, D., Sterns, H. & Rothwell, W. (2006). Working longer: New strategies for managing, training and retaining older workers. New York: NY: AMACOM.
- Spokus, D. (2008). Factors influencing older worker intent to continue to work. Dissertation submitted for publication.
- Universal Health Services (2008). AARP National Employer Team Member. Downloaded on March 7, 2008 from <http://appsrv2.uhsinc.com/apps/hr/jobposting.nsf/AARP?OpenPage>
- UnumProvident Company. (2005). Health and Productivity in the aging American Workforce: Realities and Opportunities. Chattanooga, TN: UnumProvident Company. Downloaded on March 7, 2008 from http://agingandwork.bc.edu/statshow_124_1726
- U.S. Bureau of Labor & Industry & Maryland Department of Labor, Licensing and Regulation. (2008). Assessment of strategies to retain experienced technical and professional healthcare personnel after retirement age: Mature healthcare workers focus group research. Mature Healthcare Workers Research Report.
- U.S. Census Bureau (2006). American Community Survey. Downloaded on March 28, 2008 from www.factfinder.census.gov
- U.S. Census Projections (2004). Interim Projections: Change in Total Population and Population 65 and Older by State: 2000 to 2030. Downloaded on March 7, 2008 from <http://www.census.gov/population/projections/PressTab4.xls>
- U.S. Department of Health and Human Services (2004). When employees become caregivers: A manager's workbook. Center for Medicare and Medicaid Services
- U.S. Department of Justice (2005). Americans with Disabilities Act. US Department of Justice Disability Rights Laws. Downloaded on April 28, 2008 from www.ada.gov/cguide.htm#anchor62335
- U.S. Department of Labor (2008). Compliance Assistance – Family and Medical Leave Act (FMLA). US DOL: Employment Standards Administration, Wage and Hour Division. Downloaded on April 28, 2008 from www.dol.gov/esa/whd/fmla/
- U.S. Social Security Administration (2005). State Statistics: Pennsylvania. US Social Security Administration, Office of Policy. Downloaded on April 30, 2008 from www.socialsecurity.gov/policy/docs/factsheets/state_stats/2005/pa.html
- U.S. Social Security Administration (2008). Full Retirement Age. Downloaded on May 7, 2008 from www.socialsecurity.gov
- Wisconsin Department of Workforce Development (2008). Myths about Older Workers. Wisconsin Department of Workforce Development. Downloaded on March 7, 2008 from http://dwd.wisconsin.gov/olderworker/pdf/myths_about_older_workers.pdf
- Wood, D. (2007). AMN Healthcare, Inc. Downloaded on March 7, 2008 from <http://www.amnhealthcare.com/Features.aspx?ID=16839>
- Wong, M., McNamara, T., Shulkin, S., Lettieri, C., & Careiro, V. (2008). Pennsylvania Indicators: Aging and Work The Center on Aging and Work: State Perspectives at Boston College. Downloaded on March 7, 2008 from <http://agingandwork.bc.edu/documents/states/Pennsylvania.pdf>
- Wright, B., (2005). Direct Care Workers in Long-Term Care. AARP Public Policy Institute. Downloaded on March 7, 2008 from <http://www.aarp.org/research/long-termcare/nursinghomes/FOURTH>
- Yankelovich, D. (2005). Ferment and Change: Higher Education in 2015. The Chronicle of Higher Education. 52 (14).