



**Social Dialogue Hospital Sector
Working Group 3/2011
16 September 2011, Brussels
HOSPEEM-EPSU Working Group “Ageing Workforce”**

- 1) Draft Outline (HOSPEEM)
- 2) Ideas on focus/topics (EPSU)
- 3) Recalling prior EPSU-HOSPEEM work on ageing (health care/nursing) workforce
- 4) Presentation in Working Group 2/2011

Brussels, 15 September 2011

1) Draft Outline HOSPEEM-EPSU Working Group “Ageing Workforce” (proposal HOSPEEM)

Issue

The European demographic trends show an increase number of elderly people and fewer active workers. This situation puts pressure on the labour market and on the delivery of services. Many experienced medical staff are expected to retire within the next few years. This will have implications for all healthcare employers in the EU 27. The European Commission estimates that there is going to be a shortage of one million health professionals by 2020. For this reason, it is important for the European hospital and healthcare employers to discuss policies that provide hospital managers with instruments to deal with present and future challenges. Together with an effective application at national level of the Framework of Action on recruitment and retention, which is essential to try to increase and attract a wider number of staff, specific policies can also be developed to tackle the issue of ageing workforce, for example how to best use their experience to the benefit of the organisation, taking into account that they may not be able to do what they did previously

Background

- Item “Ageing workforce in the hospital sector” was present in the Hospital Sector work programmes since its foundation.
- A specific working group was created to deal with the issues arising on an ageing workforce.
- In 2006, HOSPEEM and EPSU, with the financial support of the European Commission, commissioned to *ECOTEC Research and Consulting Ltd* a research to chart the age profile of the hospital sector workforce in Europe to identify and to analyse initiatives within the hospital sector that have addressed the issue of ageing.
- HOSPEEM and EPSU were going to submit a proposal for a European project on the ageing workforce to the European Commission to address this issue. However, we were not able to take this work forward because both HOSPEEM and EPSU had other issues which had greater priority (e.g. the negotiation on sharp injuries).
- The Hospital Social Dialogue committee decided to drop this issue temporarily.

Main Contents

- Identify the future needs of the ageing workforce;
- Make the hospital and healthcare sector an attractive environment (connections with the FoA on Recruitment and Retention): promoting working in the sector, reduction of the turn-over and attracting former employees to come back to the profession;
- Training and lifelong learning to cope with future competences/skills need;
- Make the best use of the experience of an aged workforce.
- Consider how best to use the skills of the existing workforce, both young and old in a positive and constructive way.

Instrument

- HOSPEEM members believe the best way forward would be to develop a set of guidelines and best practice models.
- A project co-financed by the European Commission could still represent a good opportunity to exchange good (and bad) experiences and provide good examples to help healthcare organisations in Europe to deal with the ageing workforce. In particular the project would help to collect case-studies in the field of age management, consider the development of a handbook, arrange workshops/seminars and a conference on the topic.
- Connect our work to the initiative planned by the European Commission for the European Year 2012 on Ageing workforce;
- DG SANCO activities in the framework of the Action Plan on the Health Care Workforce

Timeline

- Dedicate the working group meetings of 16 September 2011 and 26 October 2011 to this topic;
- Constitute a HOSPEEM – EPSU drafting group, 5 people from each side.
- Write to Jean-Paul Tricart in DGEMPL informing him on our proposal and asking for financial support for the meetings of the drafting group;
- The aim is to reach an agreement by mid 2012.

2) Texted copied from report "Promoting realistic active ageing policies in the hospital sector"

- HOSPEEM and EPSU agreed to build on work done in former WG on the ageing workforce and to take on board insights from the study commissioned in 2006
- As a reminder and to sum up things for the work to be started in autumn 2011, please find below summary info taken from report "Promoting realistic active ageing policies in the hospital sector", jointly commissioned by EPSU and HOSPEEM in 2006, see <http://www.epsu.org/a/7410> and <http://www.epsu.org/r/586>

The study concludes that the pursuit of a comprehensive policy approach, based on an explicit strategy, with personal and institutional commitments is critical to success.

List of key initiatives implemented by various NHS Trusts (UK) on a pilot or regular basis.

- *Improving attractiveness of working environment by taking into account specific needs and wishes of older employees, e.g. better provision of continued education and training, change in working hours; preventive: setting up well-being centres to monitor stress, burdens, individual adaptation needs*
- *Slow step-down option, i.e. into a less demanding job but which corresponds to professional qualifications and experiences*
- *Wind down, i.e. longer phasing out, reduced working hours at an earlier state, but then later no early retirement; work on negotiated basis, with chosen number of hours and their position during the day and week*
- *Part-time work to reduce working time and to reduce shift work for older employees*
- *Managing knowledge transfer (including tacit knowledge and experience)*
- *Ongoing participation in life-long learning, retraining of older workers to facilitate adaptation to new technologies, administrative procedures, management techniques, etc.*
- *Workforce planning including age profiling*
- *Measures to remove discrimination based on age (e.g. in recruitment and retention procedures)*

3) Recalling prior EPSU-HOSPEEM work on ageing (health care/nursing) workforce

**Social Dialogue Hospital Sector
Working Group Meeting 2/2011
21 March 2011, Brussels**

Ageing health care workforce

- Ulrike Neuhauser (CEEP/VHA) and Herbert (ver.di) summarised the work and outcomes of the former HOSPEEM-EPSU working group on the ageing workforce
- Ulrike highlighted the following points: 1) growing share of workforce aged 50+; 2) shortage of skilled staff; 3) risk of loss of organisational memory with a larger share of the workforce 50+ leaving in the years to come; 4) examples from NHS: flexible retirement age; healthier workplace campaign; adaptation of training and continued professional development; workforce planning with a mix of physically strenuous and less strenuous tasks; 5) example from Austria: experienced and elder nurses retained and taking care of interface management/of organisation the process of leaving the hospital and entering another institution, e.g. elderly care home, or moving back to own place
- Herbert recalled that the working group collected a number of examples/potential good practice cases. He highlighted the need to develop/offer models of staff retention taking into account specific needs and competencies of the health care workforce 50+. Herbert also mentioned a pilot initiative in Heidelberg (university clinics, with the support of foundations and enterprises) to support "healthy ageing" and to improve the well-being at the workplace
- Josie (RCN)
http://www.epsu.org/IMG/pdf/11.03.21_Ageing_Nursing_Workforce_UK_Irwin_RCN-2.pdf => next page
- In the debate the following issues were highlighted: 1) Recruitment from outside the EU helps lowering the average age of the health care workforce, but there are risks and problems of shifting the problem to third-party nationals instead of putting more emphasis on improving working and pay conditions within the EU for those residing and already working there; 2) With a high share of nurses going to retire, those that stay will very probably will have to work longer hours and more years; 3) Guidance or recommendations on the employment of older nurses could be useful
- The idea launched by HOSPEEM to re-launch a working group on the ageing health care workforce was not contested. HOSPEEM suggests to work towards an agreement (in the months after summer 2011)
- EPSU Secretariat again underlined the need and our request to put work on the ageing health care workforce in the context of policies to achieve a balanced health and social care workforce, which implies that the social partners work would need to address a broader range of topics and challenges
- Agreement to build on work done in former WG and to take on board insights from the study commissioned in 2006 (<http://www.epsu.org/a/7410>) when developing and implementing initiatives and models

4) Presentation on ageing (health care/nursing) workforce in Working Group Meeting 2/2011

**Social Dialogue Hospital Sector
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21 March 2011, Brussels**

The Ageing Nursing Workforce in the UK

Josie Irwin
Head of Employment Relations
RCN

Ageing nursing workforce

- 25% of all nurses, midwives and health visitors in the UK are over 50
- Average age of a nurse is 42
- Higher numbers of older nurses work in the community.
–44% of NHS health visitors
–and 37% of district nurses are over 50
- 200,000 nurses to retire in the next ten years
- But the recession may delay retirement of some and attract others back, adding to already ageing profile.
- Older nurses who stay are less likely to work full-time, meaning a reduction in nursing hours available

Responses

- Age discrimination unlawful in employment, training and education since October 2006
- Upper age for payment of Statutory Sick Pay removed – people still working after age 65 are entitled to SSP for up to 28 weeks in the same way as other employees
- Default retirement Age 65 to be phased out in 2011
- NHS Pension Scheme introduced a Choice for existing members of the scheme to retire at age 65 plus additional flexibilities
- Age strategies including 'healthy workplaces'
- Lord Hutton's review of public sector schemes
- 'Staff will work longer, pay more and receive less benefit'

RCN research

- What would encourage nurses to work post retirement?....
- Good health and well being
- Feeling that experience is valued
- Less stress at work
- Working reduced hours or less intensive work
- Flexible working and adapted working hours eg annualised hours, graduated retirement, job share

RCN Guidance on employment of older nurses

- Avoid generalisations – some wish to wind-down, others look for challenge
- Policies should make most of older nurses' experience and expertise
- Support informed retirement decisions
- Good OH provision
- Flexible working options
- Involvement and engagement