



## **CORPORATE HEALTH AND SAFETY COMMITTEE - 1ST MARCH 2017**

**SUBJECT: AGEING WORKFORCE – IMPLICATIONS AND OPPORTUNITIES**

**REPORT BY: ACTING DIRECTOR OF CORPORATE SERVICES**

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### **1. PURPOSE OF REPORT**

- 1.1 The report is provided in response to a union request for consideration of the implications of an ageing workforce, in particular front line staff who are undertaking physical roles. The report provides an overview of the issues which are likely to affect work as well as some options to consider in supporting an ageing workforce. The report is seeking the views of Members prior to its presentation to the Council.

### **2. SUMMARY**

- 2.1 The challenge of an ageing workforce, combined with shrinking pools from which to draw new workers, has been particularly apparent in the public sector as well as other industries. Organisations are facing a number of issues associated with this trend. In response, they are attempting to extend the working career of their employees through alternative work arrangements, preserve organisational memory and balance the work/life needs of multiple generations within the employee population. This report will examine the health challenges of an ageing workforce, the positive aspects of employing older people and some options in supporting our more experienced employees.

### **3. LINKS TO STRATEGY**

- 3.1 The report outlines considering the importance of employing an ageing workforce. Highlighting the importance of a working environment in which peoples physical and mental well-being is maximised, contributing to following Well-being goals within the Well-Being of Future Generation Act (Wales) 2015 by exhibiting:
- A resilient Wales
  - A healthier Wales
  - A more Equal Wales
  - A Wales of cohesive communities.
  - A prosperous Wales.

### **4. THE REPORT**

- 4.1 It's anticipated that by 2020 1 in 3 workers will be over 50 years of age. There are now more than 1 million people aged over 65 in employment. The ageing of the "baby boomer" generation of the 1950 and 1960s means we can expect to see this statistic rise with the number of over 65s in the population expected to increase by 49 % by 2023. There is a growing acceptance that the way we think about work and retirement will be very different

from our parents and grandparents. As a society we need to work for longer. Many people are seeing the financial necessity of working for longer with the state pension age rising. We know that delaying retirement and remaining in paid work has huge benefits in terms of financial security for later life. DWP 2014 estimates that 12 million people are currently heading towards an insufficient retirement income. The rise in ageing workforce is due to combination of events, the scrapping of the default retirement age: people retaining better health into older age: the UK's pension and savings crisis: a lack of younger workers coming through: and the general economic climate meaning that people are less prepared to give up work. In the EU life expectancy has risen significantly, life expectancy in EU was estimated at 83.3 for women in 2013 and 77.8 for men. The fertility rate has been declining since 1965. The result of combination of trends is by middle of this century there are expected to be 48 million fewer people aged 15-64 and 58 million more people aged 65 and over in EU. There are no historical examples of age distribution where the oldest age groups are bigger than the younger. (BMA 2016)

The health benefits that good work can bring have been widely evidenced, most recently by Chief Medical Officer's annual report (DWP 2016) which shows that good work can contribute to self-esteem wellbeing and cognitive benefits. When the Centre for Ageing Better asked retired people what they missed most about work the frequent answer was social connections. Good management and working conditions for older workers are no different than for any other employee. Nothing magically changes at 50 but research has shown that 3 key aspects related to age and life history, determine different priorities and requirements for older workers.

- Older workers look for employment that is personally meaningful to them. This can be work that is enjoyable, helps contribute to their personal identity or makes a difference to the lives of other people.
- They look for roles and tasks that are interesting, challenging, stretch them and fully use their skills and experience. Many have built up considerable experience, and using and sharing this can add fulfilment at work.
- Older workers find that autonomy is important - having control over their own tasks, the order they do them in and the methods they use to complete their work. This also relates to flexibility in choosing location of work. Older workers appreciate being able to influence the wider organisation by having the opportunity to make suggestions about change, and have these taken seriously.

4.2 Research by the Centre for Ageing Better showed that for many older workers one of the main benefits of working in later life is the opportunity to make and maintain social connections. Compared to younger employees, older workers may place a greater importance on being part of the social fabric of the company.

Health is the most prominent factor affecting older workers decisions about continuing work. It's important to remember that many people remain healthy well into later life; poor health can be one of the biggest reasons for older workers leaving. Helping older people manage and accommodate long term conditions, chronic health problems and disabilities is essential to make work viable and satisfying. A good occupational health provision and work place adaptations can support older workers by making it easier to balance health conditions and work.

In one respect it's good news- experienced workers can add value, potentially playing an important mentoring role to less experienced colleagues. On the other hand there is an issue of health, as it's understood our health deteriorates as we age. With this in mind businesses' have a vested interest to take a proactive approach to their workers' health. Health deterioration can be drastically reduced. As we grow older, associated health issues are reported to be a combination of effects of genetics (25%) and lifestyle and environment (75%). This then implies if we manage our lifestyles appropriately, there is, in theory; no reason that for most of us, we can't be as productive and energetic in our 70s and 80s as we are when we are younger.

In 2013 DWP produced Age Positive initiative that brings together research and information from employers on effectively managing an ageing workforce. It addresses misconceptions about employing older workers concerning productivity, up-skilling, health and blocking opportunities for younger workers. Many successful employers report the benefits of employing older workers as part of a multi-generational workforce include:

- A broader range of skills and experience;
- Opportunities for mentoring new recruits;
- Transfer of skills across the workforce ;
- Reduced staff turnover: and
- Improved staff morale.

4.3 People over 50 are more increasingly likely to have caring responsibilities for family members and others. Having a workplace that supports flexibility is essential for working carers.

- Employers should operate flexible working times and allocate shifts that meet individual needs.
- Line managers understanding and willingness to allow older worker to leave the workplace at short notice is important to offer the practical support that carers need. Those carers who have access to comprehensive support to help them care find it easier to strike a balance, are more likely to remain in work. Fulfilling work isn't an extra- it is essential to longer working lives.

#### 4.4 **Biological effects of ageing**

##### **Functional Impairment:-**

##### 4.4.1 **Hearing**

Structural and sensorineural degeneration occurs throughout the auditory system causing age-related hearing loss and age related balance problems. Varying degrees of hearing loss are experienced by older adults, often with tinnitus, is worsened by occupational exposure to noise. Dizziness is common in adults with 25% of 65-69 reporting this. Benign paroxysmal positional vertigo BPPV is the commonest cause, and peaks at about 50 years of age.

##### 4.4.2 **Eye sight**

World-wide 65% of visually impaired and 82 % of all blind people are aged 50 yrs and over. Age related visual changes include presbyopia, impaired contrast sensitivity, dark adaptation, colour discrimination and peripheral vision. Additionally cataracts, glaucoma, macular degeneration, retinal detachment and vitreous separation are more prevalent with increasing age. Impaired vision may affect close detailed work; DSE use and safety critical tasks but need not affect job performance and in most cases are overcome by corrective eye wear or adapting technology.

##### 4.4.3 **Muscle strength**

Muscle strength and aerobic capacity decline progressively with age. Much variation exists but on average this reduces physical capacity by 20% between ages of 40 and 60 yrs. of age. Muscle strength peaks around 3rd decade, is maintained until 45-50 years of age and declines at an average rate of 12 to 15% each decade after.

Those who use physical strength in their jobs retain better strength than those who do not, while an active lifestyle helps to preserve some aerobic capacity.

Little evidence that these declines in muscle strength and aerobic capacity adversely affect performance. Reduced physical capacity is only problematic in jobs with high physical workload. In these cases older workers may benefit from longer recovery periods. In most cases people should be capable of continuing to work in their roles despite an increased retirement age.

#### 4.4.4 **Cognitive function**

While age related cognitive decline may commence in 3<sup>rd</sup> decade the deterioration isn't generally marked before the age of 70 and possibly older, with only 5% of people over 65yrs showing any sign of cognitive impairment.

Language ability and ability to process complex problems improve in most cases serious decline in memory or intelligence is not apparent until the age of 85 yrs. The onset and impact varies considerably between individuals, influenced by lifestyle factors. Regular physical activity is positively associated and a sedentary behaviour is negatively associated with cognitive function over a lifespan.

Reduced reaction time may only be a problem in high risk environments however any evidence related to professional drivers is that slower reaction speed is compensated for by experience. Driving accident rates do go up with increasingly age in the general population, but this does not seem to be reflected among professionals, perhaps because they continue to drive on a regular basis, while driving declines in general population particularly after retirement. (NHS 2013)

Some employers concerned that older workers are less productive, however no consistent evidence that older workers are less productive than younger workers. Most reviews conclude that job performance is generally same across age groups. When abilities match job requirements and when experience is considered, there is little difference between performance of older and younger workers. Performance need not decline with age because most jobs do not require employees to work at full capacity, except those that are persistently arduous. As well as there being little evidence that performance of core skills declines with age, there appears to be evidence that other aspects of performance such as good timekeeping, helping co-workers, better anger management and people skills increase with age. Some studies have shown that older workers perform better in terms of accuracy and output consistency.

#### 4.4.5 **Shift work**

Ageing is associated with changes in circadian rhythm. There is evidence to suggest that older workers performance is adversely affected by night shifts while younger workers are adversely affected by early morning shifts. Time needed for recovery increases with age especially relevant in context of extended 12 hour shifts.

### **5. EQUALITIES IMPLICATIONS**

- 5.1 The Equality Act 2010 protects against unfair treatment on the basis of certain characteristics including age. The report has no Equality implications and upholds the principles set down in this legislation.

### **6. FINANCIAL IMPLICATIONS**

- 6.1 There are no direct financial implications for the Council arising from this report.

### **7. PERSONNEL IMPLICATIONS**

- 7.1 There are no direct personnel implications arising from this report, but the issues raised in the report will be considered in future organisational planning in relation to the ageing workforce.

### **8. CONSULTATIONS**

- 8.1 All comments from consultees have been included in the report.

## **9. RECOMMENDATIONS**

9.1 For H&S Committee Members to note the contents of the report.

## **10. REASONS FOR THE RECOMMENDATIONS**

10.1 Provide relevant information on the subject of the ageing workforce for discussion and consideration.

## **11. STATUTORY INSTRUMENTS**

11.1 The Health and Safety at Work etc. Act 1974, the Equality Act 2010.

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Appendix 1 Presentation – Occupational Health