





AT SEVEN OAKS GENERAL HOSPITAL



# **Presenters**

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#### Introduction

- Ageing Global Workforce.
- Labor force continues to grow, but overall participation rate is falling due to low fertility and Baby Boomer retirements.
- Baby Boomers, Older Workers, Mature Workers and Grey Nomads currently underutilized.
- Economic down turn has delayed retirements of many Boomers
- Employers need to continue to address older worker issues with retire and return to work options.

#### **Overview**

#### • HRSDC: Workplace Skills Initiative Program (WSI)

• March 2008 – June 2010

#### Goal

• To identify, develop, implement, evaluate and disseminate lessons learned from evidence based practice initiatives for the retention of older health care workers.

#### **Objectives**

- Determine factors that influence older workers decision to retire.
- Identify barriers and opportunities for extending careers of experienced health care professionals.
- Pilot and evaluate initiatives related to older worker retention.
- Disseminate Project information & results.

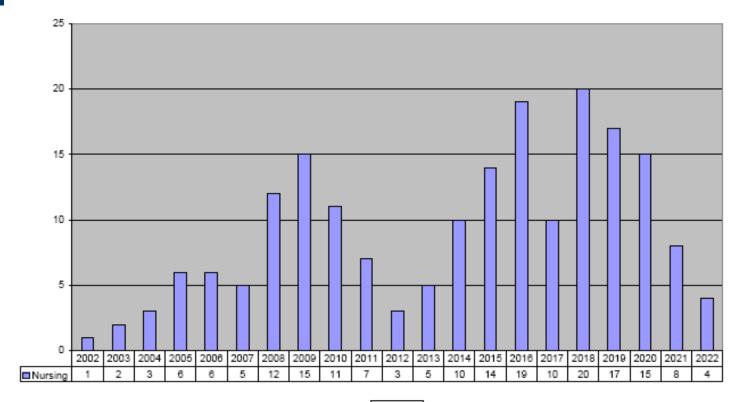
#### **SOGH Demographics**

- 48 % of 1547 staff over 45
- 349 staff from targeted professions (Nursing, RT, Technologies, front line Managers) over 45+ and eligible to retire by 2024
- 32 % or 99 staff over 50
- 5% at or past Magic 80

#### Nursing

Seven Oaks General Hospital # Employees Over Age 50 at Magic 80 by Year As At July 12, 2008

Nursing



Nursing

#### **Lit Review**

- Most literature speculative and inconsistent in outcomes.
- No studies to date where an intervention evaluated for efficacy; thus no evidence-based recommendations.
- Literature identifies "PUSH" and "PULL" factors

#### **Push Factors**

- Stress of job: physical, mental, emotional
- Excessive changes eg technological
- Shift away from patient care focus
- Financial independence
- Overall job dissatisfaction
- Nature of the work
- Personal or Social reasons

#### **Pull Factors**

- Opportunities in the workplace
- Ability to move between jobs
- Phased retirement and flexible work options
- Adjustment of duties to maximize skills and accommodate needs.
- Customized Retirement Planning Education
- Eldercare support
- Fitness and Wellness options
- Corporate culture that supports the aging workforce

#### SOGH 45+ Survey

• 126 respondents; 36% return rate

- Stratification by profession:
  - 60% of respondents "Nurses"
  - 20% of respondents "Allied Health"
  - Remaining 20% "Other"

#### **Themes**

- Respect
- Flexibility
- Provision of effective care
- Ability to gain further knowledge
- Pass on the Profession
- Taking care of patients
- Being taken care of by employer

#### **Priorities**

- 1. Special arrangements & flexible hours leading to retirement
- 2. Retire and return to work options
- 3. Improved physical working conditions
- 4. Healthy work environment
- 5. Decreased responsibilities and workload
- 6. Recognition of prior learning and experience

#### **50+ Manager Focus Groups**

- Flexible Work Options
- Recognition of older workers experience & skill sets
- Work load relief
- Financial Incentives

#### **Retiree Focus Group**

- Impart knowledge to younger staff
- Less physically demanding work
- Less paper work
- Social connectedness
- Exit Interviews

#### **Project Initiatives**

- Retirement Planning Education
- Work Life Issues
- Older Worker Programs
- Knowledge Transfer

#### **Older Worker Programs**

# Programs that prolong the labor market participation of older health care workers.



#### **Older Worker Leave (OWL)**

- LOA from current position for 12 or 24 weeks
- Pilot Study completed: June Jan 2009
- 15 participants

#### Purpose

- **REST and REJUVENATION.**
- Address cumulative fatigue.
- Professional or personal development.
- Trial retirement period.

## Eligibility

- Minimum 50 years of age.
- At or beyond Magic 80.
- More than five years service at SOGH.
- Good performance and attendance record.
- Priority to targeted professions.

#### **Provisions**

- 55% of current salary
- Operational impact
- Ability to back fill the position
- Prohibited from working within the health care sector
- Return of Service Agreement of 1 2 years

#### **OWL Research Tools**

- "OWL Eligible" Survey
- Pre/ Post interviews: Participants
- Focus Group: Managers
- Co-worker Survey
- Interviews: OWL Replacements
- Financial Implications

#### **OWL Outcomes**

- Variety of health care professionals participated
- Two 24 week OWLs
- 13 12 week OWLs
- 14 still employed; one retired
- Cost of initiative: \$153,000.00 (\$4,000 returned)

#### **OWL Eligible Staff Survey**

- Peers discouraged them from applying
- Lack of support from Managers
- Lack of support from Manitoba Nurses Union
- Current economic conditions
- Job security was more important than time away for self-care
- Difficult to back fill position
- Financial implications: buying back pension; prepayment of benefits
- Loss of seniority
- Return of service

#### **OWL Manager Focus Groups**

- Staff replacement issues
- Positive impact on staff attitude, stress level and productivity
- Financial benefit to some areas

## **OWL Co-worker Survey**

- OWLs provided short term leadership opportunities
- Temporary break for older staff
- Opportunity to establish new roles & relationships
- Replacement issues and workload increase in some areas
- Appreciated the value & expertise of older worker
- Trial retirement

#### **OWL Benefits**

- Physical and mental rejuvenation
- Opportunity to reflect on career and retirement options
- Better idea of the actual retirement date
- Trial Retirement
- Financial benefit related to staff replacement for site







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# Questions

