

Addressing the Health of an Ageing Workforce

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Dealing with health can be expensive. With Australia spending some 8% of GDP on health services it is important in a preventative health program that we focus on the health risks in the workplace. The goal should be to improve individual employee health and provide a return on the health investment of the employer. The working age of individuals is increasing and as a consequence so is the susceptibility to a range of health risks. Addressing the health risks for the ageing worker is a step to a safer future.

Cardiovascular Disease (CVD) is responsible for nearly half of all deaths in Australia. It's also responsible for 1 in 4 men over the age of 40 retiring prematurely.

Cancer accounts for approximately 25% of all deaths in Australia. While prevention is the key to minimising cancer risk, early detection is essential for treatment.

Mental Health Twenty percent of Australian's have experienced a mental health event (in particular stress, anxiety and depression) within the past 12 months.

Diet, Exercise and Lifestyle are primary behaviours that contribute to a range of health and medical problems.

Lifestyle Choices of smoking and excessive alcohol consumption are contributing to poor health.

Asthma, Migraine and Back and Neck Pain are significant causes of time away from work and lost productivity.

Wesley Corporate Health (WCH) specialises in the development and delivery of a wide range of preventative health programs to organisations across Australia. With more than fifteen years experience, we have established an outstanding record for tailoring health programs that meet the company's specific needs and objectives as well as the needs of the individual.

WCH has teamed up with BHP Billiton Mitsubishi Alliance (BMA) to develop a sustainable employee health promotion program. BMA recognises that employees perform best when they are healthy, and that optimal employee performance is necessary for the company to be a leader in its field. With the average employee age on the rise this is becoming more and more important.

The point of difference for the BMA Health Program is a consistent approach to the management of health issues. Each mine site has an annual KPI to conduct a health needs assessment with at least three subsequent health initiatives to target the main health risks identified. Health promotion is now imbedded in the BMA business core values and performance indicators. Some of the initiatives that sites are doing are health assessments, influenza vaccinations, skin checks, cancer awareness sessions, quit smoking programs, 10,000 steps program, etc.

The ageing working force is an ideal environment for behaviour change. It is a maturing culture. The average employee recognises they are not as invincible as they once perceived themselves to be and their elders are experiencing health problems that they themselves do not want to experience. This is the right time and environment for workplace health promotion to be successful.

Through the examination of the literature into the ageing workforce, several factors challenge both the ageing employee and employers. Reviewing this literature aims to highlight the contributing factors which have created this ageing trend within the workforce. It also hopes to identify characteristics of the older workforce, review the recommendations for accommodating the older employee and discuss future directions for the ageing workforce.

Changing nature of ageing workforce:

There are several factors that have contributed to the challenge of the ageing worker for employers and the workforce. One factor that has significantly contributed to the development of an ageing workforce is an increase in life expectancy and a reduction in fertility rates. Our population spread amongst age groups, leaves us in a precarious position. As several of the examined sources agree (7,8,10) Australians are now living longer but our families are having less children. This has created a significant change in the Australian population, as a greater percentage of our total population are older (7,8,10). As the generations progress, this will generate a larger population skewed towards the older end of the age spectrum.

Changes have also been reported in relation to the continued productivity of older workers, the productive ageing stage. Previously individuals in their late adulthood would exit the workforce due to retirement or the inability to work. However, the improved health status and increased life expectancy offers older workers the possibility of staying functionally active in the workforce (7,8,10). In the past 20 years, the workforce has been ageing faster than the general population (4). Average age changes within the general population have increased from 36.6 years to 38.8 years, a 2.2 year increase. Whilst the full-time working population has increased from 35.9 years to 39.4 years, a 3.5 year increase. Specific industries have experienced even greater average age increases than the general or working population. For example, the mining industry has had an average age increase from 35.9 years in 1984 to 40.3 in 2004, an increase of 4.4 years (5). In 2003, 32% of the Australian labour force were aged 45-64 years, compared to less than one-quarter (23%) in 1983 (9). In the next decade, over 80% of growth within the Australian workforce is expected to be among those over 45 years (9). Therefore it is important for employers to understand the health impacts of an ageing workforce, which may impact on the productivity of older workers.

The examined sources also revealed the increase in the total number of Australian workers has influenced the current trend, of an ageing workforce. From early 2003 to late 2010 (7years), the number of Australian workers will increase by 1 million. From 2023 it will take a further 21 years for the same increase to occur (10). These increased workforce demands can not be entirely satisfied by the general population. Instead such increases will need to be met by the retention and return of older employees. In addition, 70% of Queensland companies are having difficulty finding skilled workers. In the manufacturing industry, 170,000 workers will retire in the next 5 years. Only 40,000 workers are being trained to replace them (10). This existing skills shortage will mean that as growth in the workforce slows, there will be increased employer competition for those entering the workforce and maintaining employment.

The development of infrastructure for retirement is also being attributed as a key challenge created within the workforce by older employees. As the baby boomer generation begin to exit the workforce, they add pressure to fund services and infrastructure for the ageing, such as social security and health care (5,8,10). It has been found that Australians tend to exit the labour force earlier than other developed countries. The prediction is that by the early 2020s, the number of Australian people retiring will exceed those entering the labour force (9). With the additional challenge to employers of the skills shortage, this adds special concern to industries such as the mining sector.

As a response to the concerns of inadequate skilled workers, the Australian Government is urging people to work longer in their industries through employee and employer financial incentive schemes (8). This causes a struggle for both employees and employers. Employees can be willing to continue working however may face resistance from employers if they aren't open to recruiting, retaining, or retraining older workers.

Characteristics of older workforce:

Despite the many challenges the ageing workforce creates the examined literature agrees that there are many positive characteristics of mature-age workers. Consensus is that knowledge, skills and experience are advantages to retaining older workers. Employers benefit from retaining older employees because of their intellectual assets - their knowledge base, skills, experience in the workforce and being distinctively competent in their specific occupation and industry (7,8,9,10). Often it is presumed older workers aren't 'up to speed' with technology used in the workplace. However mature-age people are the fastest growing group of internet users and show a high level of competency when learning new technology-based skills at their own pace (10).

It has also been shown that older workers are adaptable and flexible. Perceptions and stereotypes often affect opinions that older workers aren't as adaptable as younger workers. Studies show that they are just as adaptable, flexible and innovative as younger age groups in the same field (8). Furthermore, research has shown that mature-age workers are highly flexible in their working hours and conditions and have good coping skills when faced with change (10).

Older employees also demonstrate a high level of loyalty and a strong work ethic. This work ethic displayed by older workers adds value to the workplace. Older employees also display a higher level of reliability and employer loyalty than that of younger workers (7,9,10). People over the age of 45 tend to stay with the same employer 2.4 times longer than younger employees (10). In an age group comparison, older workers demonstrate lower absenteeism rates and higher job satisfaction (9,10). Older workers become financial and emotional assets in light of such results as they can positively impact the moral and culture of the workplace.

Whilst the literature does highlight the many positive aspects of older employees, it is necessary to also examine the negative aspects of an ageing workforce, specifically the disadvantages to the employer. For example, workers over 40 years of age may experience a higher incidence of work injuries. The average amount of time absent from work due to injury or illness is also greater for employees over 40 years of age and often involves longer recovery periods and greater costs (7,9). Rising workers compensation costs become burdens to the employer and the greater industry (9). Injuries of the older worker are typically musculoskeletal or cardiovascular related, with lifestyle habits also impacting on health. It is not only work injuries but lifestyle related diseases such as cardiovascular disease, diabetes and cancer that factor into the work limitations of older workers. Research shows the physical inability of older workers to meet the demands of their work is a major factor in early retirement (9). Older workers only stay a liability due to physical requirements if adjustments aren't made in the workplace to deal with age-related changes or varied physical capacity between workers.

Considerations for the ageing workforce:

It is a recommendation of all examined sources that the response to an ageing workforce must include considerations for the ageing employee. Without such considerations the positive aspects of older employees can not be facilitated and negative consequences will be accentuated.

For employers:

Employers need to embrace the ageing workforce and accept responsibility for their future and wellbeing. They need to address the workplace, worker conditions and adaptability for the older worker. The connection between health and productivity for employees and the workplace can be driven by the work culture and health promotion attitudes within the company (10).

Another attitude change that may be required is to be open to the potential for employing new older employees to help fill the skill shortage (8). Current older workers are a known quantity but new employees require investment of new skills and ideas. It may take more time and financial investment initially but may be worth the long-term reward.

For employees:

For example, older workers may need to be open to being flexible and adapting to new working situations –shared work hours, re-skilling to stay with an employer or switching to alternative employment to remain in the workforce. Choices within working situations change as people age as does health, financial position and different motivation to work may impact on employment circumstances (8).

It is understandable if older workers feel confused about working longer, because they face mixed messages between the government wishing them to remain employed and employers not. However, the eminent skills shortage may change employers motivations to embrace new older-worker schemes to retain their workers and remain competitive. Adjustments from both groups of the workforce should lead to a positive outcome for all.

Potential future directions for ageing workforce:

When considering the future directions for the ageing workforce, companies need to develop and apply corporate policies that encourage and reward flexibility and adaptability with individual job roles and the greater workplace. Employers could provide incentives for continued productivity by supporting services to reduce the impact of barriers such as family considerations and employee's willingness to adapt their working conditions (7). Companies could offer training and career development strategies, as well as flexible work arrangements. Recruiting and redundancy policies would also be necessary approaches for employers developing management strategies for their ageing workforce (4,6,10). A process needs to be developed for separating older workers into categories - retention, retraining, re-employment or separation – for effective management.

Implementation of health promotion in the workforce will improve risk factors of the older workforce. A strategic approach is required to ensure people make positive behaviour change for continued long term health. Assessing health risks such as blood pressure, cholesterol and blood glucose can be effective in preventing long term ill health, such as diabetes. It is also important to reward employees for accepting responsibility for personal well being and protecting their work capacity.

An important aspect of adapting to and considering the ageing workforce is creating and applying corporate resources to measure the impact of productive ageing programs and the financial return of such initiatives (7). It is important to evaluate the programs ability to address generational differences within the organisation. An effective productive ageing program will also embrace government strategies like 'Experience Pays' to help employers. This strategy "protects themselves against the labour supply shortfall and gain a competitive advantage by leveraging their most valuable asset – experienced, mature-age workers" (10). Through recruiting, retraining and retaining older workers. Other government initiatives that are aiming to avoid the skills shortage include encouragement of women to have more children; increasing skilled migration, increasing mature-aged workforce participation; increasing individual pension entitlements to those who work beyond retirement age; and recognition or promotion of employers to employ older staff with incentives (8).

Case Study - BMA

BMA owns and operates a number of Central Queensland coal mines as well as the Hay Point coal export terminal near Mackay. It is Australia's largest coal miner and exporter by tonnage. As the largest employer in the region, BMA continues to play a key role in the economic development of Central Queensland. The management of employee health has become paramount for continuing business success, because of the ageing workforce, increased labour shortage and the multitude of lifestyle health risks affecting local communities.

Why health promotion?

Promoting and encouraging a healthy lifestyle through workplace initiatives is fundamental to a worker's ability to carry out their job safely. BMA appreciates that the optimum health of its employees is as important to the business as its safety performance. This is because it can have a positive impact on injury statistics, team morale, staff retention and productivity. BHP Billiton supported this notion two years ago with the introduction of the Fit for Work Fit for Life Guidelines, which outlines the key factors in establishing a health promotion program to motivate the adoption of better health habits [1].

BMA has long since recognised that health promotion is an investment in human capital and, accordingly, sites have been implementing relevant programs for many years now in an attempt to combat health problems. Initially, however, this approach had a major shortcoming – the programs were done on an ad hoc basis and, as a result, were neither sustainable nor were they measurable. This deficiency in the business was recognised and, in 2005, the "*Health Passport*" was born.

What is the Health Passport?

The Health Passport is the main tool used to drive BMA's Healthy Lifestyle Program. It was developed by BMA, with the assistance of Wesley Corporate Health, who reviewed the document (as an expert external resource) to ensure it was scientifically grounded and consistent with the current public health approach. The Health Passport is the key to the success of the BMA Healthy Lifestyle Program.

Most serious health problems of today are largely caused by the way people live, and are so called 'lifestyle related diseases'. These include heart disease, diabetes, arthritis, high blood

pressure and some types of cancer. BMA's Healthy Lifestyle Program addresses the common health risk factors that contribute to these lifestyle diseases. During annual Healthy Lifestyle Assessments, the Health Passport is used to assess an individual's blood glucose and cholesterol levels, their blood pressure, body type, tobacco and alcohol use, nutrition and physical activity status. Other issues addressed include the person's cancer awareness, stress levels, sleep apnoea risk and immunisation status.

The Health Passport is a booklet provided to each individual that voluntarily participates in a Healthy Lifestyle Assessment, which are conducted annually by a qualified Health Promotion Provider. Individuals record their own results and use the same booklet for year-on-year assessments. This enables them to track their own progress over time and to establish health-related goals for the following year. The Health Passport becomes the employee's personal possession. BMA encourages employees to take the booklet home and share their experience and knowledge gained with family and friends. Regularly, these same health programs are extended to family members as well, fostering supportive communities in which the sites operate.

Support mechanisms that are provided at an individual, site and community level, allow employees to make informed decisions about their own health needs and to take personal responsibility for health status outcomes. BMA is committed to having an employee base that may work and retire well. This holistic approach centres on enhancement of health and wellness and not just on the minimisation of workplace injury and illness.

How is BMA's approach different to other programs?

There are a vast number of 'health' programs on the market today, especially in the mining context. So what is it that about BMA's approach that sets it apart from the rest?

The BMA Healthy Lifestyle Program aims to address the deficiencies that were identified in the business with regards to health management. The three crucial elements that differentiate BMA's approach to other programs are **sustainability**, **consistency** and addressing the most **relevant** issues at each site.

1. Sustainability:

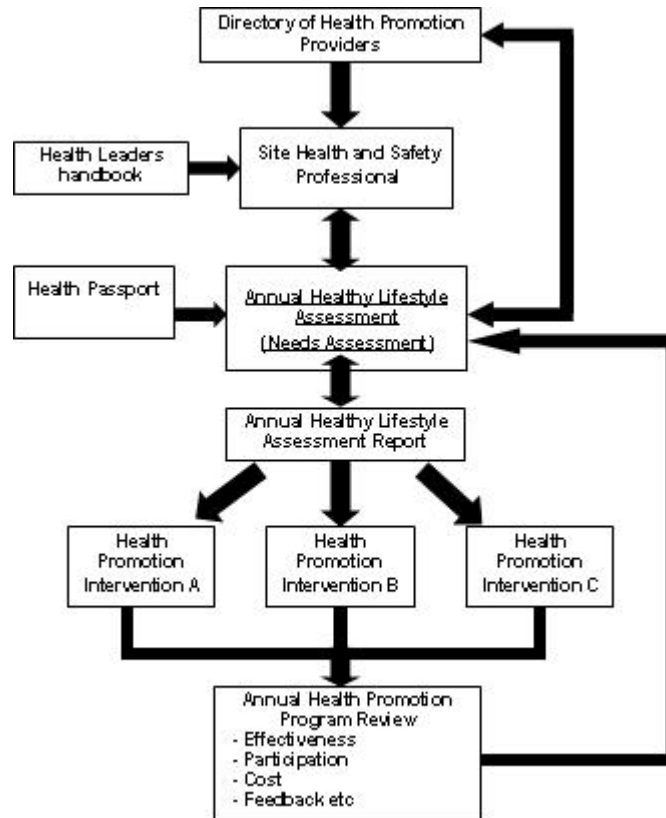
Most companies in the mining sector are addressing the area of health and wellbeing in same shape or form. Some companies continually undertake health assessments with the assumption that participants will make the necessary changes to their lifestyle on their own accord, whereas others implement health programs sporadically in the hope that some improvements in health will be achieved by those participating. The inadequacy in both of these approaches is that there is no defined framework to neither sustain these programs from year to year nor evaluate if they are successful and having a positive impact on health.

BMA realised the need for a structured and formal approach to health promotion and subsequently adopted the framework shown in figure 1 below. This process is incorporated into the business through Key Performance Indicators (KPIs) for each site. The KPIs dictate that an annual Healthy Lifestyle Assessment is to be conducted, followed by three health initiatives for the year. The program is then to be evaluated in order to measure the effectiveness of the

delivery and implementation of the health initiatives. This framework also assists in the budgeting of time and resources needed for each site.

The participation rate for the program has also been embedded into the BMA 5 Year Business Plan (2008-2012). This clearly demonstrates that the health of its employees is vital to BMA's journey towards its goal of Zero Harm and a Step Change to a safer future.

Figure 1. Flowchart of Health Promotion Activities



Another feature of the BMA program is the focus on sustainable health outcomes. Attainable and more importantly maintainable improvements in health parameters, such as blood cholesterol and waist/hip measurements, are a result of lifestyle changes. Short-term or 'quick-fix' solutions seldom show results that are able to be maintained in the long term. Consequently, BMA's program has a 5 year focus and this long term approach to improving health outcomes is imperative in retaining an ageing workforce.

2. Consistent Approach:

In order to compare site against site for health reporting purposes, a consistent approach to the management of health issues across the business is needed. This is especially important in a business such as BMA which has a variety of operations including open cut and underground mining as well as a port and corporate offices.

Sites are provided with the necessary tools to follow the steps outlined in the flowchart above and implement the Healthy Lifestyle Program. Corporate provides each site with:

- The Health Leader's Handbook – outlines the rationale of the program and provides the process for implementation;
- Measurement Protocols – for maintaining consistent and accurate assessments of the health risk factors during the Healthy Lifestyle Assessment;
- Directory of Health Promotion Providers – a list of companies who are able to conduct the assessments and/or assist with the implementation of health initiatives for a site; and
- The Health Passports – used to record a participants health data during a Healthy Lifestyle Assessment.

This ensures that all BMA operations follow a similar process and are collecting the same information using consistent methods, allowing reliability and validity. Sites then have the flexibility as to how best to meet the program KPIs, given the unique operating environment of each site. Sites decide on the types of programs they wish to implement and at what time, in order to fit in with operational requirements associated with production.

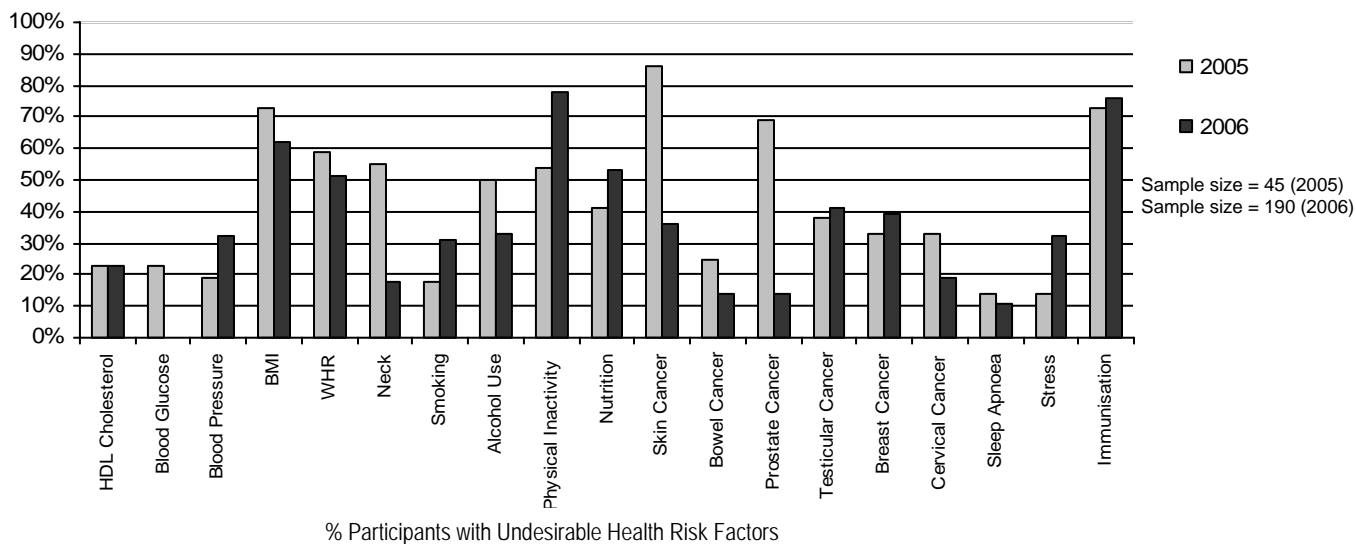
3. Addressing Relevant Issues:

Although similar health issues may exist across the business, and indeed throughout Australia, BMA's Healthy Lifestyle Program allows sites to address their most relevant health issues, as determined by the annual Healthy Lifestyle Assessment.

De-identified data collected from the annual Healthy Lifestyle Assessments is analysed and a formal report is provided to the site. This population data is used to establish priorities for that particular site and support the implementation of targeted health programs.

A 'Health Risk Profile' is developed for each site and is used to identify changes in the health of the workforce and assess the impact of any interventions undertaken. An example of a Site Health Risk Profile is given below in figure 2. An obvious change from 2005 to 2006 is the Skin Cancer parameter. The percentage of Healthy Lifestyle Assessment participants that had not received a recent 'skin check' decreased significantly. This was a direct result of the site promoting skin cancer awareness and providing employees with the opportunity to receive a free skin check. This is a clear example of a BMA site targeting a pertinent health issue, as revealed by the Healthy Lifestyle Assessment data, and being able to see the results of the subsequent intervention.

Figure 2. Site Health Risk Profile



Other initiatives that BMA sites have implemented include:

- Vaccination programs;
- Quit smoking programs;
- Physical activity promotion through the 10,000 Steps program (with substantial community involvement); and
- Cancer awareness seminars.

BMA's Approach to Confidentiality

During the initial stages of the program, there were concerns from employee groups as to how the information collected during the Healthy Lifestyle Assessments would be used. These concerns were allayed with the inclusion of a consent form. Consent enables the Health Promotion Provider to only collect de-identified data which is used solely for the purpose of health promotion programs and not for employment purposes. Individuals record their own Health Passport results and become the custodian of this booklet. Site data is made available to employees in the form of the annual Healthy Lifestyle Assessment Reports. Dissemination of this information provides valuable feedback to not only employees, but also to management, which assists in justification of future health programs.

Conclusion

Managing health risks in the workplace improves individual employee health and is a healthy investment for the employer. The current trend of ageing within Australia's workforce has heightened the need for such health promotion programs. In collaboration with WCH, BMA have developed a health promotion program focussing on sustainability, consistency and relevance. By investing in health promotion BMA are ensuring that their ageing workforce are safe, maintain high productivity levels and the skills present in those older employees becomes a resource that is available for extended periods of time. .

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