

Will an ageing nursing workforce work?

The world is in the midst of a “global age-quake”⁽¹⁾. Decreasing fertility and increasing longevity mean the world’s population is ageing. In 2001, for the first time, the UK had more people over 60 than under 16⁽²⁾ and the workforce is losing technical and practical skills through retirement. It is therefore timely to consider and highlight the evidence base on the ageing profile of the workforce and the nursing workforce in particular. Drawing on recent UK studies including work carried out by the Nursing Research Unit⁽³⁾ we identify the implications for policy and practice of an ageing nursing workforce and the challenge of retaining these important workers.

Ageing workforce profile

Compared to the wider economy, the health and social care sector has an unusually old workforce, with a high proportion of employees over 45 years⁽⁴⁾.

- In 1996, 20.6% of nurses in the NHS were aged 50 or over; by 2005 the figure was 28% - a 36% increase⁽⁵⁾
- More than 100,000 nurses on the Nursing and Midwifery Council (NMC) register are aged 55 or older, and a further 80,000 are aged 50-55⁽⁶⁾
- The net annual loss of nurses due to retirement is expected to be approximately 25,000 whole time equivalents by 2015⁽⁷⁾
- There may be a higher proportion of older nurses in the primary and community workforce than in the NHS as a whole but obtaining accurate workforce numbers is problematic⁽⁸⁾.

Challenges facing older workers

An older workforce may face additional challenges. Age discrimination legislation is expected to address many of these issues but local implementation and interpretation will be key⁽⁹⁾.

Challenges include:

- Physical toll of working and health problems associated with ageing^(2,3,8,9)
- Age discrimination and a failure to value experience by managers^(2,8,9)
- Extended financial and caring responsibilities for dependent children and frail elderly parents (often simultaneously)^(3,10)
- Gaining access to retirement planning and flexible work options^(2,3,8,9)
- The pace of technological change and adapting to new technology,^(9,10) but older workers may be more willing to learn⁽¹⁾.

The case for retention of older workers

Replacing retiring nurses will not be easy given the global shortage of nurses. There is a strong economic case to retain the existing nursing workforce in terms of the cost of training and replacement^(1,9). Other key reasons to retain older nurses include their experience, knowledge and skills^(1,9), their commitment^(3,9), comparatively low sickness and absence rates^(1,9), they are often preferred by patients who report a better experience^(3,9), and they have the ability to teach and mentor younger nurses^(1,3,9) and to withstand and endure change⁽²⁾. Best practice views mature workers as “a resource to be cherished rather than a liability to be minimised”⁽⁸⁾.

Factors causing older nurses to leave the NHS early—Push factors

Retaining older nurses may not be easy. In the past 12 months a number of key reports^(1,3,8,9) added to existing work^(2,10,11,12) identifying factors which may ‘push’ older nurses towards retirement.

- Reduced job satisfaction and increased stress contribute to older nurses’ decisions to leave the NHS. Increased workload, perceived under-staffing and compromises to the quality of patient care are important underlying factors in these decisions^(2,8,9,10,11)
- Pay becomes more important when other aspects of job satisfaction are unmet⁽⁸⁾. Government restructuring of pay under Agenda for Change is not perceived to be rewarding older nurses clinical experience sufficiently^(3,8)
- Older nurses are dissatisfied with career opportunities, the way change is implemented, the style of supervision and generally do not feel properly valued and supported^(2,8,9,10)
- Unsuitable or insufficient educational opportunities are strong de-motivators and a push factor towards retirement^(2,3,9,12)
- Deterioration in physical health is another important factor pushing older workers out of work^(2,3,9,12)
- Older nurses experience an inflexible approach to retirement and to reduced work and hours and access to flexible working opportunities are limited^(3,9).

How to encourage the retention of older nurses

Retention of older nurses is paramount and more needs to be done to age-proof employment policy and to introduce a more flexible pension provision supporting a phased approach to retirement.

Specifically:

- Good working conditions that facilitate the delivery of high quality patient care^(1,2,8,9) and adequate reward for clinical experience^(8,11)
- Effective management and communication strategies to convey value and appreciation of skills and experience and challenge negative perceptions of older workers^(3,8,9,10)
- Innovation in and adequate use of the skills and experience of older nurses in new roles and ways of working e.g. mentorship roles with younger nurses^(3,8,9)
- Career advice, development and progression remain important to nurses approaching retirement age. Access to tailored education and training to reflect and build upon prior learning^(1,2,3,8,9,10,11,12)
- A proactive occupational health service to reduce the risk of older workers leaving the workforce for reasons of poor health e.g. a confidential ‘open door’ occupational health scheme^(2,3,9,10,12)
- Equal access to flexible working across all generations of nurses^(1,2,3,8,9,10,11,12)
- Flexible approaches to retirement including active retirement planning, phased retirement income and innovative schemes such as ‘wind down’ and ‘step down’ and ‘retire and come back’ with protection of full pension rights^(1,2,3,8,9,10,11,12).

Key issues for policy

Retaining older nurses requires:

- Adequate resources and support to deliver high quality patient care
- Appropriate recognition and utilisation of skills and experience
- Tailored education and training
- Continuing opportunities for career advice and progression
- Equal access to flexible working
- Proactive occupational health systems
- Flexible approaches to retirement.

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