

## Employers See Healthy Aging as Business Necessity

By David J. Fetcher, M.D.

The Gray Tsunami is already hitting our shores and is expected to present challenges for employers and occupational health professionals for decades to come.

The U.S. population is aging, life expectancy is increasing and birth rates are declining. Meanwhile, many members of the baby boom generation are facing the reality that retirement at the traditional age of 65 is not feasible in today's economic climate.

### Risks and Rewards

Employers are learning that hiring and retaining older workers carries both rewards and risks.

"There is enough of a critical mass at this point where employers have an interest in investing in the aging worker," said William Gingold, Ph.D., of the University of Illinois, College of Medicine, who is a specialist in senior issues. "The best thing employers can do is enhance the work environment. They should do things that allow the aging worker to have high productivity and high performance."



Although the elderly population today is, on average, healthier, better educated and wealthier than that of previous generations, there are major reasons for focusing on the health and safety needs of older workers. The burden of age-related chronic disease (e.g., arthritis, diabetes, cardiovascular conditions) creeps up past 45 years of age and represents increased risk and higher group health insurance costs for employers.

Baby boomers are expected to account for approximately 40 percent of U.S. spending by 2015, including a disproportionate share of consumption of health care services.

According to government figures, 13.6 percent of the population of workers over age 60 is considered disabled, and that percentage is expected to rise. Further, about 60 percent of boomers suffer from chronic conditions that affect productivity and burden employer-sponsored health plans.



### Older Workers, Safer Workers

While older workers may have more chronic disease burdens than their younger counterparts, studies show their lost-time work injury rates are less than half that of workers under 45. However, when they get hurt, their injuries tend to be more severe and costly to treat than those of younger workers, especially when exacerbated by underlying chronic disease.

In 2006, the City of Decatur, Illinois' Risk Management Department did a detailed study that showed the cost of work injury was double for workers 45 and up. This local study is confirmed by U.S. Bureau of Labor Statistics data that show the duration of time off work is much higher in older workers. The median lost-time duration for a work-related injury experienced by a worker under 25 was five days compared to 12 days for workers 55 and older. Rehabilitation of older workers also takes longer and is more expensive than it is for younger workers.

## Keeping Your Heart on Track

A Heart Health and Performance Program at the Mayo Clinic in Scottsdale, Ariz., specializes in meeting the needs of individuals who want to optimize their health and prevent a heart attack. During a one-day screening process, patients undergo a comprehensive evaluation using non-invasive diagnostic techniques. Patients receive feedback on the status of their heart and guidance from a team of experts in cardiology, nursing, executive health, nutrition and exercise physiology.



The screening protocol includes a physical exam and consultation by a physician, review of medications, blood work to measure cholesterol levels, blood count testing, liver and kidney function tests, body fat analysis, electrocardiogram, echo stress testing and carotid artery ultrasound to measure the thickness of the artery wall, which is a strong predictor of future heart attack and stroke risk.

## Take a Walk

Here is a way to cut health-care costs without spending a dime: Take a daily 15-minute walk as part of a weight-loss program. According to the Centers for Disease Control and Prevention, ending obesity would save the health care system 50 percent more than a cure for cancer. In total, obesity costs the U.S. an estimated \$147 billion a year.

## Resource Directory

1. **The 10 Steps To Financial Wellness: Your Personal Guide To Rock-Solid Financial Health;** promoted as an employee health fair giveaway; [www.welcoa.org](http://www.welcoa.org).
2. **Investing in What Matters: Linking Employees to Business Outcomes;** using analytics to tie employee data to business results; Society for Human Resource Management, [www.shrm.org](http://www.shrm.org).
3. **Lean Works!** website sponsored by the Centers for Disease Control and Prevention features worksite obesity prevention and control programs; [www.cdc.gov/leanworks](http://www.cdc.gov/leanworks).

## Small Businesses Advised to Prepare Now for Influenza

*Planning for 2009 H1N1 Influenza: A Preparedness Guide for Small Business*, issued by the U.S. Department of Homeland Security, includes tips for writing policies, recommendations for how to keep employees healthy and answers to frequently asked questions. Employers are encouraged to assign a workplace coordinator who will be responsible for dealing with flu-related issues and their impact at the workplace; develop policies for leave, telecommuting and employee compensation; identify essential employees and business functions; and prepare and disseminate plans on business continuity, flu pandemic response and emergency communications. Other recommendations include:

- Policies that encourage ill workers to stay home without fear of reprisal;
- Resources and a work environment that promote personal hygiene;
- Education and training materials on risk factors, prevention, treatment and related topics;
- Encouraging workers to obtain a seasonal flu vaccine and the H1N1 vaccine when it becomes available if they are in a priority group.
- Be prepared to minimize face-to-face contact among workers if advised by local health authorities and when an employee becomes ill at work.

Refer to [www.flu.gov/professional/business/smallbiz.pdf](http://www.flu.gov/professional/business/smallbiz.pdf)



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For example, shoulder problems, particularly rotator cuff injuries, are a relatively common occurrence among older workers, in part because of diminished blood supply, increased bone spur size and increased incidence of degenerative-related tears. Shoulder complaints often require surgery and extensive post-operative rehabilitation in order for patients to regain range of motion and strength. Because of the extent and nature of their injuries, older workers often have permanent work restrictions, and some require vocational rehabilitation.

Another anticipated consequence associated with the aging workforce is the growing number of underinsured and uninsured employees who may try to use the workers' compensation system to treat their age-related problems. This likelihood hands occupational health physicians the challenging task of rendering opinions on compensability.

In addition, employers need to be aware that there

## Work Ability Index Assesses Need for Functional Testing in Older Employees

The Work Ability Index (WAI) is a strategy employers may use to assess older workers' fitness for duty. The WAI is based on research pioneered in 1981 by Juhani Ilmarinen of the Finnish Institute of Occupational Health. It is an evidence-based instrument used in clinical occupational health and research to assess work ability during health examinations and workplace surveys.

For both job-placement and return-to-work purposes, the worker completes a questionnaire before undergoing an interview with an occupational health professional who rates the responses and recommends, if appropriate, job-specific functional testing.

**Reference:** The Work Ability Index; J Ilmarinen; *Occupational Medicine*, 2007:57:160)

is a sub-population of older workers now subject to drug testing who are found to abuse illicit drugs. Prescription drug abuse also is relatively common in the older workforce, especially among truck drivers.

## What Should Employers Do?

Employers have to weigh the positives associated with employing older workers (e.g., accountability, productivity, experience) against the negatives (e.g., higher injury treatment and general health care costs, the need for workplace accommodations). Equilibrium can be achieved to a great extent by creating ergonomically correct and age-friendly work environments.

Examples of simple improvements include:

- Stair handrails and visual contrast on stairwells;
- Improved office lighting, acoustics and signage for those whose hearing and eyesight are declining;
- Periodic training on safe lifting, correct sitting postures, etc.;
- Wellness and nutritional education programs, particularly for those with chronic diseases that can impair work abilities;
- Exercise and stretching programs.

## Summary

By employing older workers, employers can tap into a workforce that is experienced and dependable. However, employers need to be prepared to address the challenges an aging workforce brings. When employers create age-friendly work environments, they support the work ability and health status of older workers and reap benefits in terms of improved safety, productivity and competitiveness.

## References & Resources

1. *Boomers Face Stark Choices in Bleak Economy*; John W. Schoen, MSNBC, March 11, 2009, [www.msnbc.msn.com/id/29535417/from/ET](http://www.msnbc.msn.com/id/29535417/from/ET).
2. *Health and Safety Needs of Older Workers*; D Wegman, J McGee, eds.; National Academies Press, 2004.
3. *Capitalizing on an Aging Workforce*: [www.pmagroup.com](http://www.pmagroup.com)



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## Enforcement Budget

President Obama's fiscal year 2010 U.S. Department of Labor budget request includes \$564 million for the Occupational Safety and Health Administration (OSHA), which is 10 percent more than the agency received in FY 2009. Meanwhile, OSHA has notified more than 13,500 companies nationwide that their injury and illness rates are considerably higher than the national average. The agency also has published an "Outreach Trainer Watch List" in an effort to crack down on fraudulent trainers and strengthen its 36-year-old Outreach Training Program. Visit <http://osha.gov>.

## Government Contractors Under Scrutiny

The Government Accountability Office and the Office of Management and Budget have been directed to review federal contractor policies with an eye toward much tighter management. A recent rule change that requires employers to verify federal contractors' employment eligibility through E-Verify, the government's electronic employment verification system, is consistent with the administration's new policy.

## NIOSH Director Named

John Howard, M.D., has been re-appointed as director of the National Institute for Occupational Safety and Health (NIOSH). Dr. Howard previously served as director from 2002 to 2008.

## National Wellness Strategy

A joint version of the House Ways and Means, Energy and Commerce and Education and Labor Committees' health reform legislation seeks to establish a National Prevention and Wellness Strategy. The initiative would establish national priorities for prevention and wellness programs and research and allocate funds for public health and wellness projects. Visit <http://energycommerce.house.gov>.

## Personal Protection

NIOSH has issued *Recommendations for the Selection and Use of Respirators and Protective Clothing for Protection Against Biological Agents*, the first update in eight years. *Assigned Protection Factors*, a new guidance document published by OSHA, provides information for selecting respirators for employees exposed to airborne contaminants.

## ADA Amendments Act Moves Toward Implementation

The Equal Employment Opportunity Commission (EEOC) published a *Notice of Proposed Rulemaking* in the Sept. 23 *Federal Register* proposing sweeping changes to its regulations and interpretative guidance of the Americans with Disabilities Act (ADA). The much-anticipated notice represents a major step toward implementation of the ADA Amendments Act of 2008. The regulations will be finalized following a 60-day public comment period. An implementation date has not been set.

The overall intent of the Amendments Act is to make it easier for employees and applicants who allege employment-related disability discrimination to establish that they are disabled as defined by the ADA. Under key proposed revisions, the definition of "disability" will be interpreted much more broadly than it is under existing regulations.

Employment law attorneys noted that the proposed regulatory changes provide some relief for employers by clarifying that individuals covered only under "regarded as" disabled provisions are not entitled to reasonable accommodations. In addition, an individual still needs to be qualified for the job he or she holds or desires. However, limits will be placed on employers' ability to use selection criteria in employment decisions by prohibiting the use of qualification standards, employment tests, or similar criteria.



## References

1. Equal Employment Opportunity Commission: [www.eeoc.gov/ada](http://www.eeoc.gov/ada)
2. *Federal Register: Federal Register*: <http://edocket.access.gpo.gov/2009/E9-22840.htm> (*Notice of Proposed Rulemaking*)