The RCN’s Working Longer Project

Working in partnership to create a culture that supports staff to work later in life
Executive Summary

In April 2015, the RCN was granted funding from the Union Learning Fund, for a one-year project to consider how unions and employers could work together, to develop learning strategies that could address some of the challenges that staff face as they work to their pension age.

Initial research was undertaken to enable the team to scope the parameters of the project. Several reports and publications were reviewed, the most relevant being that of the NHS Working Longer Group.

The project had two work streams:

- exploring partnership working with five organisations to: understand organisational culture and learning needs, develop learning strategies, deliver learning and agree the key factors to successful partnership work
- creating and delivering learning directly to our members or other groups and organisations.

Findings from both our research and from those participating in the project

1. Workplace culture - We found that most feel workplaces do not value older workers or provide much support to help people prepare for working later in life. There are some perceptions of inequality or discrimination.

2. Pensions and financial planning – There are low levels of knowledge and understanding about pensions and financial planning. Women are particularly disadvantaged due to career breaks or part time working to accommodate child care. Young workers can make unwise and ill-informed decisions that will impact on their retirement.

3. Health and wellbeing - Support with mental health and wellbeing was of far greater importance to our members than physical health with many noting that, as a caring profession, self-care was remarkably low on the agenda. Staff felt that organisational health and wellbeing initiatives were often patronising and ill-judged and peer support, particularly those who had experienced health issues themselves, was more effective.

4. Planned career progression - The Midlife Development Review workshops were, by far, the most engaging and popular of all learning offered. Individuals, team managers and HR professionals all saw the value in such a simple, yet powerful exercise that could help people to plan careers that would meet their needs and aspirations as an older worker.

5. Flexible working - Flexible working is probably the most significant factor in enabling staff to work later in life. Employers recognised the challenges involved in implementing flexible working and that supporting line managers to implement flexible working patterns would be key. While this is not something that can necessarily be provided in partnership, unions can help to disseminate good practice from other organisations.

6. Partnership working - By having the two work streams (working in pilot sites, and direct delivery to members) we have been able to evidence the value of partnership working. Whilst we had great success with engaging learners directly, this activity finished with the end of the project funding. The pilot site activity, built through partnership working has the potential to continue beyond the work of this project.

The employer, working in partnership with unions, and particularly maximising the role of the Union Learning Representative (ULR), can make a huge difference in the development and implementation of any learning strategy. They are in the heart of the workplace, providing peer support to staff. They enhance an organisation’s learning offer by bridging the gap between ideas and implementation, ensuring that staff are engaged at every level.

‘Valuing Older Workers: A 10 Step Action Plan for Partnership Working’

Working later in life and supporting an older workforce is one of the biggest issues that faces health care in the next 20 years. We hope that all employers and unions, working in health care, can work in partnership to ensure that staff feel valued and prepared to lead long, healthy and rewarding careers.

The RCN will be publishing this report along with Valuing Older Workers: A 10 Step Action Plan for Partnership Working (Publication code 005 696).

The action plan, includes steps to challenge perceptions, demonstrate commitment, understand learning needs and implement effective learning strategies, based around the key learning and resources identified during the project. It includes a list of tools, resources and activities that can support organisations to create a positive culture that values older workers and supports staff to
prepare for working to retirement age.

The RCN’s Working Longer Project – Working in partnership to create a culture that supports staff to work later in life

The RCN’s Working Longer Project
In April 2015, the RCN was granted funding from the Union Learning Fund, for a one year project to consider how unions and employers could work together, to develop learning strategies that could address some of the challenges that staff face as they work to their pension age.

An aging population and the impact on the state pension provision has led to the removal of the default retirement age and an increase in the State Pension Age for most working adults. This means that most staff, currently working in health care, will have to work much later in life than they may have initially expected. This has consequences for both the individual worker and for an organisation.

The existing research, resources and tools
Research prior to the project had indicated some of the potential issues and challenges. The most relevant research was that of the NHS The Working Longer Group. This was a partnership group of national recognised NHS trade unions, NHS employers and health department representatives. It was established to review the implications of the NHS workforce working to a later, raised retirement age.

There were several other key research reports, resources and tools that had been created for a broader audience or other industries which gave the RCN a basis for developing a project that would consider what was needed in a health care setting and, in particular, for the nursing team.

Proposed purpose, process and outputs of the project
At the outset of the project, we agreed that the purpose was to work with health care trades unions and employers to create a practical guide that enables organisations to develop learning strategies that support staff to prepare for working longer.

We would work with five organisations that would broadly represent the vastly different settings, areas of practice and working environments across health care. In those pilot sites, we would work, collaboratively to understand the culture and learning needs of both staff and the organisation. We would then develop a learning strategy, and start to deliver appropriate learning interventions. The learning offer would begin to support staff to prepare to work later in life but also to start to shift the organisational culture to one which is seen to value older workers.

We agreed that the primary output of the project would be the publication of a freely available guide, which directs the reader to develop working longer learning strategies through partnership working. In addition, we hoped to see some emerging learning strategies and to deliver a number of ‘quick win’ learning packages available for delivery in each pilot site.

The pilot sites
Five employers agreed to become pilot sites for the work:

- **Cheshire and Wirral Partnership NHS Trust** is a large NHS trust in the North West of England, provides mental health services for children, adults and older people, as well as learning disability and drug and alcohol services.

- **Partnerships in Care** are a large independent sector organisation providing specialist mental health, secure and step-down care across the UK.

- **The Queen Elizabeth Hospital Kings Lynn NHS Trust** is an acute hospital serving the communities of West Norfolk, South Lincolnshire and East Cambridgeshire.

- **Rennie Grove Hospice Care** is a charity providing care and support for patients diagnosed with cancer and other life-limiting illness and their families in Hertfordshire and Buckinghamshire.

- **East Midlands Ambulance Service NHS Trust** provides emergency 999, urgent care and patient transport services for the 4.8 million people within the East Midlands region.

Although we appreciate that there are a vast number and types of organisations providing health care services, we felt that these sites broadly represented the key settings and environments staff may be working in. (NHS, Non-NHS, large, small, single and multi-site)

Activity within the pilot sites set off at different paces and, unfortunately, two of the five sites had competing priorities, including a Care Quality Commission review and a large organisational change. The short time frame of the project meant that we were unable to take forward much activity, however both sites remain committed to the work and will continue to work with the RCN at a regional level to roll out activity.
**Direct delivery of learning to RCN members and other groups and organisations**

In addition to the work been undertaken in the pilot sites. We intended to create a number of learning workshops that could be delivered directly to our members or other groups and organisations. This was partly intended to meet the learner outcomes required by the funding, but also as a way of testing the learning to ensure the resulting guide and resources were fit for purpose.

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<tr>
<th>Quarter 1</th>
<th>Partnership working with pilot sites</th>
<th>Direct delivery to others</th>
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<td></td>
<td>Work commenced in April 2015 to secure the pilot sites and agree a Memorandum of Understanding between the employers and the RCN.</td>
<td>We developed a ‘learning offer’ based on the learning needs identified during the pre-project research and refined during the stakeholder day with pilot sites.</td>
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<td>A stakeholder day took place in May which brought together the leads from each site already secured to sketch out what a guide might look like, and what learning interventions might be required to deliver a learning strategy.</td>
<td>Workshops were developed and delivery partners were identified where required.</td>
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<td>The groups identified a number of steps that they felt would need to be taken to change the culture and to develop a learning strategy. It was agreed that the areas of learning most likely to be required were relating to pensions, career pathways, health and wellbeing, and flexible working.</td>
<td>Delivery commenced.</td>
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<td>A draft guide, with a 10-step action plan was circulated.</td>
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<th>Quarter 2</th>
<th>Partnership working with pilot sites</th>
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<td></td>
<td>Activity began in each workplace with a focus group. This was followed by the delivery of requested learning workshops.</td>
<td>Continued delivery of learning workshops.</td>
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<th>Quarter 3</th>
<th>Partnership working with pilot sites</th>
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<tr>
<td></td>
<td>Activity continued in each pilot site.</td>
<td>Continued delivery of learning workshops.</td>
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<td>As part of a bid for future funding, a further review of research and resources was undertaken. The new material was used to review and refine the guide.</td>
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<th>Partnership working with pilot sites</th>
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<td></td>
<td>A final focus group was held in each pilot site.</td>
<td>Continued delivery of learning workshops.</td>
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<td>The findings from each focus group were analysed by an independent reviewer. This evidence, along with the existing research, will provide evidence to support any employer or union to make a case for dedicating time and resources to value older workers.</td>
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The project ended in March 2016.
Project outcomes

As described earlier, the research undertaken to before the project had highlighted various areas where learning interventions could have a positive impact. It should be noted that the aim of this research was to build a case for a funding application and was, by no means exhaustive or academic.

During the project we checked out the lived reality of that research through our work in each pilot site, and particularly, the stakeholder day and focus groups and when delivering learning.

1) Key findings from research, stakeholder day and pilot site activity

a) Organisational culture: how older workers are perceived

Research

Despite older workers forming a significant part of the workforce, a survey of executives undertaken by the Economist Institute Unit showed that they believed older workers are less productive and are harder to manage than younger workers¹. The report to government, A new vision for Older Workers stated that ‘outdated stereotypes, unconscious bias and age discrimination all contribute to preventing older people from staying in or returning to work.’²

Findings from project activity

The focus group findings looked more generally at organisational culture, rather than specifically at how older workers were treated.

- There was clear feedback around the current climate of uncertainty and change with many participants talking about poor levels of support from their employer in terms of redeployment and job share options and from occupational health.
- There was a very strong sense of inequality and discriminatory practice voiced by some participants. There was a feeling that women were unfairly impacted upon by the changes as they are often part-time and were more likely to have had breaks in service to care for dependents.
- Some expressed fears about retirement and worrying about what they would do if they were not working. However, not all have the same view of retirement and there were some who felt strongly that it was important to move on and leave space for the next generation.

Some participants noted:

I feel like I am being farmed across the organisation.

Employers try to put you back firmly into your box and keep you where you are. They don’t want clinical staff doing an admin role.

I resent the extra six years I have to work. I will be a senior citizen when I retire. I was 60 last year. The State Pension Age has changed three times recently. It is very disappointing to have plans that change suddenly by things you have no control over. I feel quite angry.

It’s the uncertainty. People are trying to plan for their future and it’s difficult. Employers could play a big role in supporting us.

Employers we worked with recognised that a cultural shift was required to support staff to prepare for working to State Pension Age, and valuing the older workers. As part of the stakeholder day, it was agreed that any partnership activity had to start with a visible commitment to valuing older workers.

b) Financial awareness: understand pensions and retirement planning

Research

The NHS Working Longer Group found that people’s understanding and engagement with financial planning was poor. ‘The complexity of calculating retirement income, in particular the interplay of employer, State and other benefit income is beyond most individuals’³. In 2013, The Money Advice Service had reported that 21% of people lack confidence with managing their money and that, in relation to pensions 13% of those under 35 think it is better to start paying into a pension in your 50s rather than in your 20s.⁴

The Pensions Policy Institute reported that “The structure of the UK pension system means that any

¹ Economist Intelligence Unit, 2014 - Is 75 the new 65? Rising to the challenge of an ageing workforce, www.ieu.com
² Altman, 2015, A new vision for older workers, A report to government by Dr Ros, Altman CBE https://www.gov.uk/government/publications/a-new-vision-for-older-workers-retain-retrain-recruit
³ NHS Working Longer Group, 2013 - Extending Working Life Audit of research relating to impacts on NHS Employees www.nhsemployers.org/wlr
⁴ Money Advice Service, 2013 - The Financial Capability of the UK. This report has now been superseded by the 2015 financial capability survey which still finds that over 12 million people have not planned for their retirement see www.fincap.org.uk
group with low earnings or an irregular employment record will lose out in retirement. The system disadvantages groups such as women, ethnic minorities and disabled people, who are more likely to work part-time and have low earnings”.

Findings from pilot site activity

Our pilot site activity confirmed the lived reality.

• There were low levels of knowledge and understanding about pensions and their entitlements.

• Some respondents were disillusioned about the NHS pension, having thought that they had a good deal but now discovering that it was not as good as they had hoped.

• Many participants felt strongly about the financial inequalities for women in terms of their potential to build up a secure pension pot and the many competing demands on them which put them at a disadvantage.

• Some were concerned about the financial implications for them if they returned to work after retirement on a temporary contract.

• Participants also openly shared that they had made unwise and ill-informed decisions, earlier in life, that impacted on their pensions.

It is hard to get information about pensions and retirement – it’s so confusing. It would be good to have some advice – say I don’t know what to do with my lump sum – how do I invest? Don’t know what to do to make sure it works for me.

I am really struck by the fact that you need to be giving effective pension advice to much younger people.

I was attracted to the pension - that’s why I joined the NHS. Having listened to all of this discussion the NHS doesn’t feel as safe an organisation as I thought. It’s seen as a benefit but it doesn’t feel like that anymore.

At our initial stakeholder day, it was agreed that financial planning was a vital part of any strategy to support staff to plan for working to their pension age. The group gave a clear steer to the project team that the employer and unions could raise awareness, but that learning should be delivered with an expert partner.

c) Health and wellbeing: keeping physically and mentally healthy, and making reasonable adjustments to roles

Research

Both the Working Longer Review and the Government’s Fuller Working Lives report highlight the individual’s physical wellbeing and capability as a key concern in an aging workforce. ‘Physical strength does diminish with age and older workers tend to require longer recovery periods following physical exertion’. ‘Almost half of the people aged 50 – State Pension Age, have a long-term health condition, a quarter have more than one long-term condition and a quarter are disabled. A quarter of women and a sixth of men aged 50-64 have informal caring responsibilities for a sick, disabled or elderly person’. The NHS Working Longer Review found that there was a cumulative impact of emotional and mental strain in some professions.

Findings from pilot site activity

Physical and mental health and wellbeing is a vast and varied area. Our pilot site activity enabled us to focus on the areas that seemed most important in a health care setting. These could be broken down into physical, mental health and managing ill-health.

• Many people spoke about the physically demanding nature of the nursing role and work patterns leading to physical problems. Added to this is the culture of working additional hours on top of their contracted hours and the lack of protected break times.

• Some participants spoke about the more demanding needs of clients as they too live longer and often with complex and debilitating conditions.

• A significant number talked about the tendency to address physical issues within the nursing workforce as capability issues.

• Many participants commented on the high stress levels being faced by nursing staff and the physical and emotional impact of ageing on their ability to cope with stress.

• It was noted that many nursing staff have additional caring roles at home which can add to the physical and emotional challenges they face.

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4 Money Advice Service, 2013 - The Financial Capability of the UK. This report has now been superseded by the 2015 financial capability survey which still finds that over 12 million people have not planned for their retirement see www.financial-capability.org.uk

5 The Pensions Policy Institute, 2003 The Under-Pensioned www.pensionspolicyinstitute.org.uk


7 NHS Working Longer Group, 2013 - Extending Working Life Audit of research relating to impacts on NHS Employees www.nhsemployers.org/wl
Many participants also noted the costs of the physical demands of the nursing role on their social/home life.

Some respondents felt that the NHS was an unpleasant place to work and cited a lack of strong relationships and support at work.

*Nursing is physically demanding. The culture of extra hours and other’s high expectations exacerbates this.*

*We are fitter than our parents were at our age, but working life is far more complex and I am absolutely worn out.*

*Physically I am not sure I can keep going. My brain stops by 6pm and I can’t process information. By 7pm I am exhausted and go home and sleep!*

Working in partnership with employers, helped us to consider how unions could support staff to engage with existing health and wellbeing support that was already provided by the employer. Unions within health care had a wide range of resources and support available for members, who felt they needed a safe or confidential space away from their organisation and therefore a partnership approach would ensure that staff had a wide range of options.

Overall, we learned that peer support it vital in this area. Staff often felt that health and wellbeing initiatives were patronising and were sometimes offended by the suggestion that they could fit more time in their day to devote to health and wellbeing, given staffing levels and workloads. Colleagues, particularly those who had experienced health issues themselves, were the most powerful voice and should be central to any strategy.

d) Planned career progression: Building on skills and experience and progressing into suitable and rewarding roles

Research

The NHS’s *Working Longer Review* found that ‘there is a cultural stigma attached to redeployment, but many older staff may stay in work longer if they are able to move to less stressful or physically demanding roles. The cultural attitude towards redeployment needs to change so that movement into new roles is considered positively*⁸

Added to this is a perceived or real discrimination in terms of providing learning and development for older workers. ‘Many older staff have reported that such access is limited or restricted for them’⁹. The mid-life career reviews evaluation report, states ‘many workers are sceptical and think that age discrimination still exists in the workplace’ and that ‘people think they are too old to participate in training and development opportunities or to change careers completely.’¹⁰

Findings from pilot site activity

This area was not particularly referred to in depth during focus groups. Regarding redeployment, analysis of the focus groups discussions did note:

- there was a lack of enthusiasm expressed for the alternative roles available
- there was clear feedback around the current climate of uncertainty and change with many participants talking about poor levels of support from their employer in terms of redeployment and job share options and from occupational health
- participants raised the issue of the loss of knowledge and expertise to the organisation and the individual when experienced staff were not accommodated to remain in role as they got older or were not appropriately redeployed.

Although this was discussed less at the focus groups, it was considered a top priority at the stakeholders day and the Midlife Development Review workshops were, by far the most engaging and popular of all learning offered. Feedback from reviews included:

*The midlife review was invaluable and has given me a sense of direction.*

*I was not aware that my retiring age was 67 until I attended this course. It has certainly enhanced my knowledge and how to decide my career path.*

*Very useful: it made me consider skills/aspects of myself I would not have otherwise looked at.*

*Brilliant – I’ll definitely use this. It made me realise just what is out there and what I can do.*

This feedback, when viewed with the focus group notes would suggest that while people are concerned about their future, and their career, they are simply unaware of the benefit, or opportunities that may come out of a midlife development review.

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⁸ NHS Working Longer Group, 2013 - Extending Working Life Audit of research relating to impacts on NHS Employees www.nhsemployers.org/wlr
⁹ As above
e) Flexible working: Changing the culture around flexible working

Research
The NHS Working Longer Group found that ‘some staff retire and then return to some form of health care employment. Their reasons for doing so are usually because of more preferable working arrangements including reduced hours, fixed shift patterns, not working nights, as well as a desire to supplement existing pension income. Many have a strong sense of vocation and commitment to patient care and wish to continue working but need more favourable working conditions in order to keep doing so’.

They recommended that ‘All staff should be supported to work effectively and productively throughout their working lives, acknowledging that this may require change and/or adaptation of their roles and working environment and/or patterns at appropriate times.’

Findings from project activity
The need for flexible working was loudly voiced by all focus groups.

• Some participants reported that flexible working/retirement was available in their workplace. Generally however this was more in relation to flexibility around work tasks covered rather than hours worked.

• Other participants reported that their employer was not responsive to providing flexible working options and that often their own policies were not delivered. This was often accompanied by a perception that flexible working could not be delivered because of the work being covered or due to cost.

• Some participants were unclear about the options available around flexible working and the way in which decisions are made.

• Others raised the issue of inequality of provision of flexible working options and a lack of standardisation across the organisation.

• There was a clear pattern emerging from the focus group discussions around the option of moving from the NHS in order to be able to continue working up to retirement age.

• The cost of using bank/agency staff when you could have substantive staff working flexibly was raised as an issue.

It’s about balance and flexibility in your job, not necessarily hours, but variety of what you are actually doing.

What if the team you are working with can’t manage doing a flexible working pattern?

It’s very challenging to try and recruit and manage part time work.

Flexi hours is a big carrot but not every job is suitable for that.

The flexi policy is not used properly, not well explained.

The employers involved in the pilot site activity, and in our wider project work, recognised the challenges involved in implementing flexible working and, most importantly, supporting managers. While this is not something that can necessarily be provided in partnership, unions can help to disseminate good practice from other organisations and to give employers tangible examples of where flexible working patterns have been adopted successfully.

2) Learning resources and interventions

As outlined in our project activity, we immediately set out to develop and deliver learning in the areas highlighted by the research. The working longer agenda seemed to capture the interest of our members across the organisation and in workplaces around the country.

During the project 862 learners accessed learning to help them prepare for working later in life. Participants included; RCN members, representatives and staff, members and representatives from other unions. In workplaces our workshops were attended by staff covering a wide range of job roles including nursing and health care support, administration, facilities. We were particularly pleased to engage many HR and learning and development teams and, in some specific events, the leads for education and equalities.

Midlife Development Reviews
By far the most engaging learning activity were the Midlife Development Reviews. The activity was developed as part of a collaborative project between National Institute for Adult and Continuing Education (NIACE) and Unionlearn (the learning and skills organisation of the TUC)

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11 NHS Working Longer Group, 2013 - Extending Working Life Audit of research relating to impacts on NHS Employees
www.nhsemployers.org/wlr
It is a simple, fun activity using a set of ‘Value My Skills’ cards that enable the learner to take stock of their skills by rating their competence, confidence and enthusiasm for the skills featured. Because the cards are based on skills and not job roles, it can be freeing and can encourage the learner to think more widely about opportunities outside of their current role and help them to plan moves into roles that may be more suitable for working later in life. Real examples from our sessions included nurses in midlife considering what skills they may need to build on to step into procurement, project management and teaching.

Pensions and financial planning
Early in our work, we agreed that our role as a union was to organise and raise awareness rather than delivering any learning or advice around pensions and financial planning. We delivered a number of workshops to raise awareness and found that they provided a valuable space for staff to share their experiences, anxieties and to offer some useful hints and tips for others. For example in one session, we had two staff who had both retired and returned to work who had very different experiences of their pension planning and very different incomes as a result. They had decided to attend the workshop to share their experience and hopefully support others to act early.

The overriding messages were to seek professional advice and that the cost of professional fees was a good investment in your future. Most unions do have a partnership with an organisation that provides some free support for their members (a free consultation by telephone or a workplace drop in surgery). Those that attended the workshops, and shared their experience recommended some steps you could take to make the most out of the free support by getting organised before you access it. Using this valuable experience, we were able to develop a quick guide for RCN reps to enable them to signpost members. We published this, as an article in a ‘working longer special edition’ of our reps magazine Activate in February 2016.

In addition to the awareness workshops. In the pilot sites, we began to explore how employers could work with financial advice companies to deliver workshops in the workplace. There is an approved supplier list for NHS organisations and many companies are willing to deliver free day-long workshops for staff. These workshops cover all aspects of pensions and retirement planning including not only pensions, but also aspects such as wills and inheritance, tax and benefits entitlements. In return for this service, the companies usually ask to promote their services and financial advice. This offer is always made under the understanding that there is absolutely no pressure placed on participants and they do not have access to any participants contact details.

Two pilot sites ran a full-day workshop with one of the approved suppliers and the feedback was very positive.

Health and wellbeing
We quickly understood that support with mental health and wellbeing was of far greater importance to our members than physical health. Stressbusting, sleep hygiene and mindfulness workshops were welcomed with many noting that, as a caring profession, self-care was remarkably low on the agenda and it was good to dedicate the time to this.

As with the financial planning, we felt confident to deliver awareness raising sessions where participants felt they could share their experience and provide peer support, but that any wellbeing sessions should be delivered in partnership with a professional. We drew on the expertise already within the RCN and used the RCN’s Healthy Workplace, Healthy You resources and activities.

3) Flexible working
As noted in our findings, flexible working is probably the most significant factor in enabling staff to work later in life. This project focused on learning interventions and we had intentions to begin to explore how we could work in partnership with employers to work with managers to change perceptions and enable them to implement more flexible working for staff.

Whilst we did not have the time, within the year, to explore this fully, we did have significant success with one pilot site who made changes to their flexible working policy as a result of listening to the outcomes of the focus groups and looking at flexible working through the lens of the aging workforce and the needs of older workers.

One of the sites that were unable to be very active during the time of the project noted from the beginning that although they had a good flexible working policy in place, managers were reluctant to implement it and agree to requests from staff. Despite not being able to participate fully in the project, none the less, they have commissioned a piece of work to explore how they can address this issue with managers.
4) Partnership working and the Older Workers Charter

We feel that by having the two work streams, working in pilot sites, and direct delivery to members and other groups and organisations, we have been able to evidence the value of partnership working. Whilst we had great success with engaging learners directly, this activity stopped with the end of the project funding. The pilot site activity, built through partnership working has the potential to continue beyond the work of this project.

The most significant evidence of embedding this work, was the development of an Older Workers Charter. This is a formal commitment, between an employer and unions to work together to support older workers and all staff to consider and prepare for working later in life. The charter was developed with the three active pilot sites and, each has the intention of signing and celebrating the charter in the near future as part of their ongoing commitment to valuing older workers.

As part of the pilot site activity, we reviewed many of the policies and workforce development issues and some sites have made some bold moves into creating more flexible working patterns, recruiting and growing existing talent.

Although our work covered only a short period of time, there has been a great deal of activity, research and resources undertaken relating to the aging workforce. The project and its dynamic way of working suited this shifting landscape well, but it did mean reconsidering the ‘output’ of the project. We had initially intended producing a guide which would be accompanied by a set of tools and resources. During the project, we found that there were other toolkits and guides which were published and which we considered to be of high quality and effective. We therefore felt that the role of the project was to pull these together and signpost, rather than produce yet another guide. What was needed, we agreed, was a clear step-by-step process that supported partnership working between unions and employers.

5) The role of the union representative, particularly the Union Learning Representative (ULR)

Unions can often be perceived as being in opposition to employers, being reactive, and being solely concerned with employment relations on an individual and collective scale. We feel that this work demonstrated the value of union stewards, safety representatives and learning representatives as positive, proactive partners in creating a good workplace culture. All three UK representatives committees agreed that the working longer agenda was a shared responsibility and could be a very good vehicle to demonstrate partnership working, not only between unions and employers, but between RCN reps and unions together in the workplace.

The successes outlined, have, overall, led to a change in perception of the role and influence of the learning representative, both in the workplace, and within the RCN. While there is still a long way to go, and more hearts and minds to win, there has been a notable cultural shift amongst the RCN representative community. Often the support that learning representative provide can be informal and difficult to both capture, and showcase. This work involved, simple, tangible, yet powerful learning interventions that demonstrated immediate impact and potential for far greater impact in the medium and longer term. The Midlife Development Reviews in particular showed employers how informal union led learning, can engage their workforce and enhance their own learning offer.
6) The challenges

The short time frame of the project was the most significant challenge. We had been encouraged to think of the work as a three to five year project and apply for further funding, however we were unable to secure this. As noted earlier, two of the five pilot sites had competing priorities which meant they were not able to become significantly active within the short time frame of the project.

Learning strategies

We had a considerable amount to achieve in a short period of time from identifying pilot sites and establishing a partnership approach to assessing the learning needs and delivering the learning. The sites that were active achieved a great deal, however it was probably at the expense of working in a more structured way and the learning strategies were more organic and developmental. Given this initiative did not result in a three to five year project, we were unable to progress the lessons from the first year into a more structured format.

Baseline measures

We did not have time to establish formal baseline measures and a structured evaluation framework, however the focus groups and feedback forms did give us immediate indicators which enabled us to evaluate the partnership approach with confidence and discuss the outcomes in this report. We have also used our learning from the project to include advice and guidance for setting measures, capturing data and evaluating impact as part of the 10-step guide for partnership working (RCN publication code 005696).

7) Enable partnership working to support and value older workers

The employer, working in partnership with unions, and particularly maximising the role of the Union Learning Representative (ULR), can make a huge difference in the development and implementation of any learning strategy. They are in the heart of the workplace, providing peer support to staff. They enhance an organisation’s learning offer by bridging the gap between ideas and implementation, ensuring that staff are engaged at every level.

Working later in life and supporting an older workforce is one of the biggest issues that face health care in the next 20 years. We hope that all employers and unions, working in health care, can work in partnership to ensure that staff feel valued and prepared to lead long, healthy and rewarding careers.

The RCN published this report along with Valuing Older Workers: 10 Step Action Plan for Partnership Working (publication code 005696). The action plan, includes steps to challenge perceptions, demonstrate commitment, understand learning needs and implement effective learning strategies, based around the key learning and resources identified during the project. It includes a list of tools, resources and activities that can support organisations to create a positive culture that values older workers and supports staff to prepare for working to retirement age.

The RCN’s UK Representatives Committees have agreed that all representatives should use the guide to engage with this activity in their workplace.