



**DISABILITY MANAGEMENT EMPLOYER COALITION**



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## State of the Field: Absence and Disability Management Practices for an Aging Workforce



DMEC White Paper Series



## State of the Field: Absence and Disability Management Practices for an Aging Workforce

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## Introduction

### Integrated disability and absence management

The goal of absence and disability management programming is to limit absence, control costs, and retain workers to maintain a productive workforce (Geisen, 2011). Key elements of disability management programs include the development of supportive policies (e.g. flexible work options), manager and employee education, supportive benefit programs, a coordinated approach to addressing injury and illness, communication plans to share information about programming, a return to work program, performance measurement for programming, and workplace wellness interventions (Dyck, 2006). Many organizations now strive to have integrated disability and absence management (IDAM) programs to provide a better experience for employees while lowering costs. An integrated approach might combine typical components of disability management such as workers compensation, short and long-term disability, and family medical leave, but may also integrate other aspects such as health and wellness programming (Disability Management Employer Coalition, 2009).

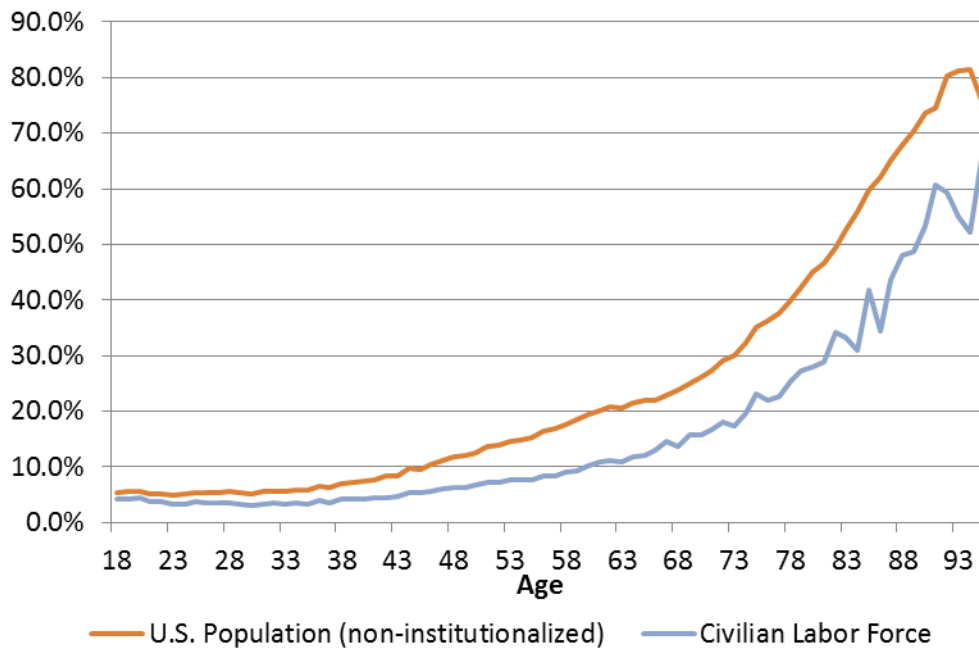
Absence and disability management professionals frequently use needs assessment data on employee demographics, health, and risks in order to inform program design and implementation (Akabas, Gates, & Galvin, 1992). For example, wellness programs often focus on issues known to cause absence generally (e.g., smoking or excessive weight) or issues known to be among an organization's specific workforce (e.g., musculoskeletal injury among employees engaged in physical labor). By monitoring shifts in workplace demographics, health, and risks, absence and disability management professionals can better understand the impact of programming and use these insights to design and tailor programs, especially when data suggests that targeting a particular cohort would be efficacious. Increasingly, older workers have become one of these groups of interest among absence and disability management professionals.

### Aging workforce

An increasing number of baby boomers are forgoing retirement and working longer, both out of financial need, and also because they enjoy their work and desire to stay involved (Brown, 2012; Collinson, 2012). Their extended employment is shifting the demographics of the broader workforce; in 1990, 11.9 percent of the labor force was 55 years and older, while by 2010, 19.5 percent was over 55 years. Projections suggest that by 2020 those 55 and over could account for one out of every four workers (Toossi, 2012).

With the shift in workforce demographics, we can anticipate a greater number of workers with disabilities. As demonstrated by Figure 1, disability prevalence increases with age. For those in the labor force less than 40 years old, the prevalence of disability is less than 5%, but among those 60 years old, the rate is closer to 10%. When factoring in the entire U.S. population, the trends are similar with even higher disability prevalence rates. Employers are wise to consider the needs of aging workers, both to aid retention, and to create an environment that is inclusive and productive.

Figure 1. Disability Prevalence in the United States by Age



Source: Calculations by Cornell University, Employment and Disability Institute, 2010 American Community Survey, Public Use Microdata Samples (PUMS). Estimates are for civilian non-institutionalized population

Examination of the U.S. Equal Employment Opportunity Commission (EEOC) employment discrimination charges data reveals that employers are struggling to keep and accommodate older workers, with discharge being the most common issue cited on both Age Discrimination in Employment Act (ADEA) and Americans with Disabilities Act (ADA) employment discrimination charges. Failure to provide a reasonable accommodation is the second most common issue for charges filed jointly under the ADEA and the ADA. Among ADA charges and those filed jointly under the ADEA, many of the most common specific impairments cited increase in prevalence with age, such as orthopedic impairments, diabetes, heart and cardiovascular conditions, cancer and hearing and vision impairment (Bjelland et al., 2010).

Habeck et al. (1991) state that “as demographic changes in the labor force threaten profitability, companies are compelled to maintain the health and productive employment of current skilled workers and to accommodate older workers with chronic impairments, in preference to seeking new hires, who may not be available or may not have the necessary skills” (p. 211). However, many organizations and their leaders are not taking the steps necessary to prepare for and retain an aging workforce (Critchley, 2004). Given that integrated disability and absence management workplace policies and practices play a critical role in managing organizations’ disability-related costs, this lack of preparation represents a potential financial risk to organizations in terms of both loss of productivity due to disability as well as “brain drain” when the organization cannot retain this experienced population. Without adequate organizational preparation for managing age-related disability issues, organizations may struggle to meet disability management goals and contain costs.

While general human resource retention practices for an aging workforce have been explored (e.g., Tishman, Van Looy, & Bruyere, 2012; Brown, 2012), less is known about how absence and disability management programs are responding to this demographic shift. Research supports a positive relationship between absence and disability management practices, in general, and retaining employees who develop potentially disabling conditions (Habeck, Hunt, Rachel, Kregel, & Chan, 2010), but it is not clear from the research what are the leading absence and disability management practices for an aging workforce.

## Current study

This study is focused on how professionals providing absence and disability management services and their organizations are responding to an aging workforce. Through a poll and subsequent follow-up interviews, we asked DMEC membership representatives to gauge their organization's concern about the impact of an aging workforce, identify what they believe are the leading practices and challenges for retaining an aging workforce, and discuss how their organization has responded to date.

## Methods

In October of 2012, Cornell University and the Disability Management Employer Coalition (DMEC) conducted a short online poll of the Disability Management Employer Coalition (DMEC) membership and conference attendees entitled *State of the Field: Absence and Disability Management Practices for an Aging Workforce*. The Survey Research Institute (SRI) at Cornell was contracted to conduct the poll of disability management professionals.

## Instrument development

The poll was developed in collaboration with the DMEC leadership—specifically Marcia Carruthers (President/CEO) and Charles M. Fox (Executive Director)—based on the identification of the aging workforce as a critical issue for disability management professionals. Prior to this poll, the DMEC had not systematically surveyed its membership to better understand how organizations were responding to the changing demographics of their workforces. In advance of constructing the poll, we conducted interviews with two key informants who were active among the DMEC membership. They both identified an aging workforce as an area of concern, but one that their companies had not specifically targeted. These key informants and DMEC leadership felt that pursuing this topical area and gathering information on leading practices would inform disability management practitioners who were considering approaches to addressing this issue in their organizations.

The poll included open-ended items as well as rating scale items, and focused on the perspective of disability management professionals on: 1.) whether the aging workforce is a concern for their organization, 2.) what they perceive as leading practices for an aging workforce, and 3.) how they are incorporating aging workforce concerns. The poll was designed to be completed by either employer (managing absence and disability management services for their own organization) or supplier (providing absence and disability management services to employers) members. The first poll question asked respondents to identify themselves as either an employer or supplier, and the poll then branched based on that question. While items were generally parallel for employers and suppliers, wording was tweaked to better tailor the question to the audience. Employers were asked additional

items about motivating factors and progress toward the goals of their organization's general absence and disability management practices. We did not define a specific age on the poll for inclusion in the "aging workforce", as there are many possible cut-points, 40 years for coverage under the Age Discrimination in Employment Act, 50 and 55 years are also common lower-cut-points. During key informant interviews there was no consensus about the age to use in defining older workers. For the purposes of this poll we did not impose a limitation on the aging population about which they may be concerned. The poll was reviewed by the DMEC advisory board as well as DMEC leadership and revisions were made based upon their feedback. A copy of the poll is available in Appendix A.

## Sample

All registered DMEC members and individuals who attended the most recent (August 2012) DMEC Annual Conference in Denver were emailed a poll. Poll participants were contacted via e-mail with invitation e-mails sent out on October 12th, 2012. Reminder e-mails were sent to non-responding primary contacts[1] of the suppliers and all employer non-respondents on October 18th, and October 22nd, 2012.

Data collection ended on October 30th, 2012. In total, 863 professionals at least partially completed the survey out of a possible 4,529 with valid email addresses, yielding a response rate of 19.1%; however, when only including those who completed the poll in the numerator the response rate drops to 14.4%. Partially completed polls were included in the analysis and sample sizes are reported in presentations of data.

An organization may officially be recorded in the DMEC database as a supplier; however, in some cases an individual within a supplier organization acts as a disability management professional for that company and therefore functions as an "employer." [2] Using the self-report for distinguishing employer and suppliers, we had responses from 557 employers from 239 companies and 306 suppliers from 104 companies. When limiting to only primary contacts of supplier organizations we had responses from 79 supplier primary contacts. We retained data from all respondents in our analysis, including responses from multiple individuals within the same organization, because the poll focused on collecting leading practices, and individuals within organizations have different knowledge and experiences with practices. While the survey was sent to conference attendees as well as members, the vast majority of respondents were DMEC members (96%).

Demographic information such as industry, region and employer size were extracted from the DMEC membership files.

## Interview follow-ups to poll

In order to follow-up on the interesting trends and issues identified in the poll, we contacted a select group of three employers for a short half-hour interview. Respondents to the poll were given the option to participate in this follow-up and 164 respondents provided contact information to follow up. We chose to contact those who were identified as pursuing interesting approaches or had recommendations on which we wanted more clarification. During the interviews we took notes and used these notes as we compiled this report to guide our thinking about recommendations for absence and disability management professionals who are planning or implementing a plan that takes into account aging workforce issues. The follow-up interviews were designed to provide more in-depth information on organizational concerns and the processes used to address aging issues in their absence and disability management programs. The interview script is included in Appendix B.

## Data analysis

Some poll items asked participants to use a rating scale when responding; these item responses were aggregated and presented as frequencies. The item on organizational concern was analyzed by industry, geographic region and employer size. These bivariate results were reported only where statistical significance was found. To summarize responses to the two open-ended items, a thematic analysis was conducted, using responses to both questions together.[3] This included first reading through all responses and identifying salient categories, then coding each response into one or more categories. These coded responses were then grouped into themes, which form the subject headers in the report that follows (Braun & Clarke, 2006). Open-ended responses were extracted as quotes to illustrate the themes. Spelling errors were corrected in responses, however grammatical errors were not.

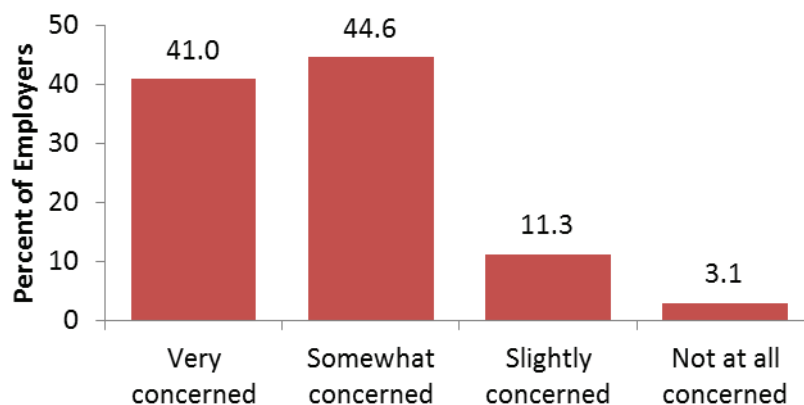
## Results

### Concerns about an aging workforce

Both supplier and employer respondents were reminded of changing demographics and related workforce implications at the start of the poll: “Older workers account for a growing proportion of the U.S. workforce, as the baby boomer generation ages and older workers remain in the labor force longer. The prevalence of disability increases with age and may have implications for organizations.” This was followed by asking employers: “How concerned is your organization with the impact of an aging workforce?”

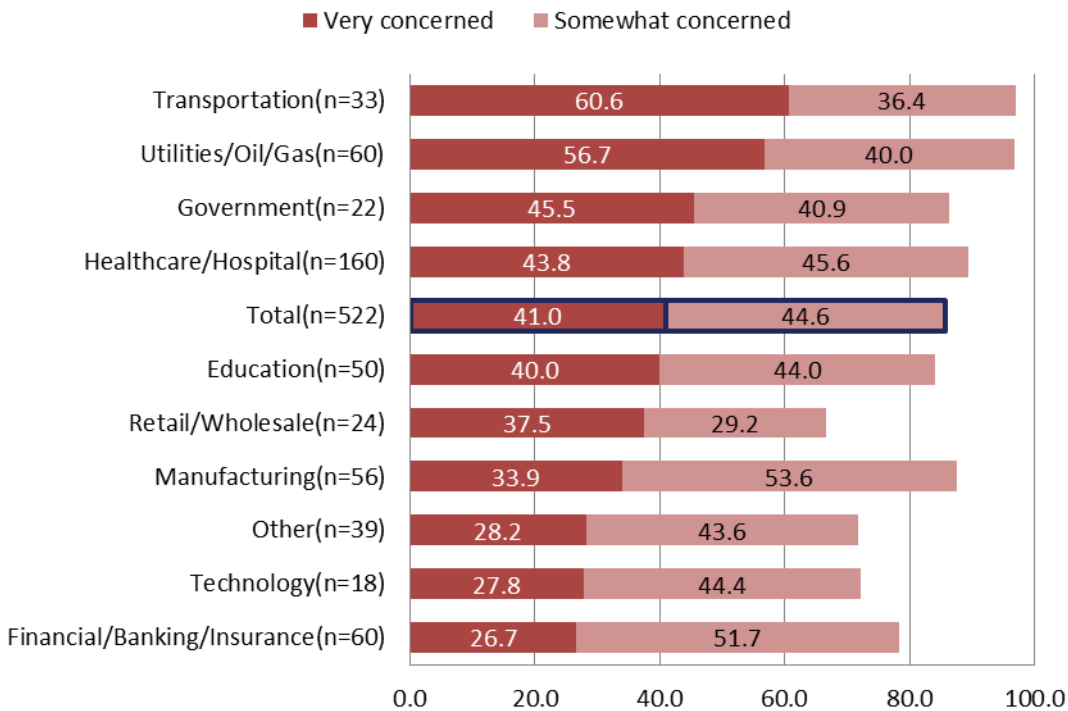
Figure 2 shows the response rate to the question on the level of concern about the aging workforce in the respondents’ organizations. Among the 522 employer respondents, 85.6 % indicated that their organization was either very concerned (41.0%) or somewhat concerned (44.6%). This varied by the industry as demonstrated in Figure 3, with the Transportation (60.6%) and Utilities/Oil/Gas (56.7%) industries being most likely to be very concerned. The Financial/Banking/Insurance (26.7%), Technology (27.8%), Other (28.2%), Manufacturing (33.9%) and Retail/Wholesale (37.5%) industries reported being less likely to be very concerned. Interestingly there was very little variation in level of concern by employer size or geographic region.

**Figure 2. Employer respondents:  
Organizational concern about the impact of an aging workforce**



Note: Question text - How concerned is your organization with the impact of an aging workforce?

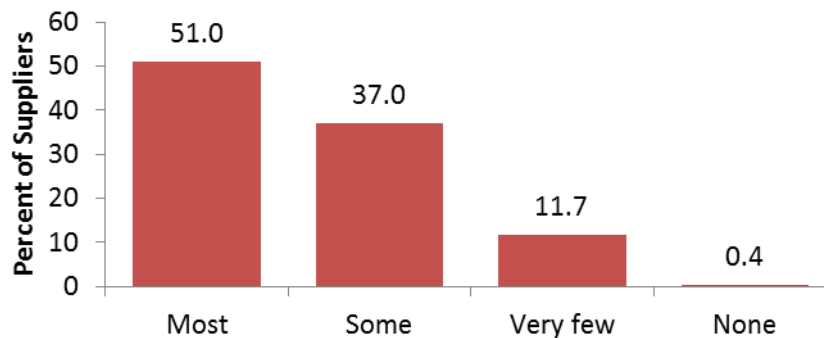
**Figure 3. Employer respondents:  
Organizational concern about the impact of an aging workforce by industry**



Note: Question text - How concerned is your organization with the impact of an aging workforce?

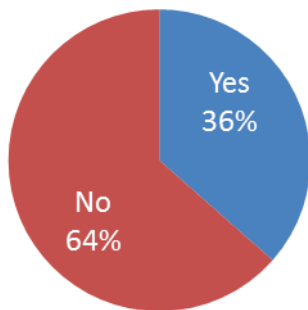
Supplier respondents<sup>[4]</sup> indicated that many of the companies that they work with are concerned about aging workforce issues. Out of 257 supplier respondents who responded (and did not say “don’t know”) to “How many of the organizations you serve are concerned with the impact of an aging workforce?” 51% said “most” and 37% said “some.”

**Figure 4. Suppliers: How many of the organizations you serve are concerned with the impact of an aging workforce?**

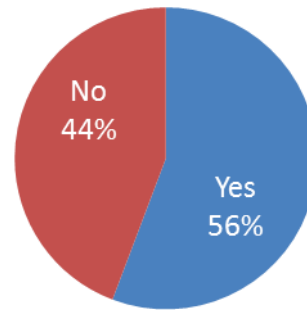


Employer and suppliers were also asked parallel questions about whether their organizations had considered the aging workforce in the design of absence and disability management programming (see Figures 5 and 6). While only 36% of employer members had, 56% of primary supplier members[5] had considered this issue when working with employers on developing their absence and disability management approaches.

**Figure 5. Employers: Has your organization considered the aging workforce in designing its absence and disability management program(s)?**  
(N=485 employers)



**Figure 6. Suppliers: Has your organization considered the aging workforce in designing its absence and disability management program(s) for employers?**  
(N=75 primary suppliers)



### Leading practices for an aging workforce

While not all respondents had considered an aging workforce in the development of their programming, we were interested in learning about perceived leading practices from all respondents. The poll asked respondents: “What do you feel are the leading Absence and Disability Management practices for retaining older workers?” For those who *had* considered aging workforce issues we also asked, “How has your organization incorporated aging workforce considerations into the design of Absence and Disability Management program(s)?” Over 450 employers and suppliers provided a wide range of responses to one or both of these questions, highlighting the importance of:

- flexibility
- maintaining and enhancing benefits
- wellness programming
- safety checks
- accommodation
- stay-at-work and return-to-work programs
- communication and recognition

Each of these seven themes is discussed in more detail below. Several respondents noted that good practices for retaining older workers are usually good practices for all employees, regardless of age.

#### Flexibility

Within the open-ended responses, participants frequently identified flexibility as a key strategy, including flexibility in scheduling, working location, leave, and the availability of job sharing and

phased retirement. Many of the respondents noted that their organization had implemented several of these policies, e.g., “There are a couple of things our organization has done to assist older workers such as a phased retirement program, offering a reduction in work hours for short periods of time and allowing flexible work schedules where feasible.”

**Flexible scheduling** was identified as critical both so that older workers could take care of their own health, particularly if they have chronic health conditions, as well as providing flexibility to care for the needs of their parents: e.g., “Flexible work schedule so workers can attend to the needs of elderly parents and also attend their own medical appointments.” One respondent noted a need for “a change in the work culture of today that rewards doing a good job even when the person does not spend many hours in excess of 40 working.”

**Part-time/seasonal schedules and phased retirement** were frequently highlighted, including seasonal or other contract opportunities for retirees and older workers who are no longer working fulltime.

**Flex-place opportunities** (telecommuting or work-from-home) were identified by several respondents as having the potential to improve retention of older workers; for example, “Our organization has developed education into its programs to support use of a remote workforce as well as a flexible workforce that supports earlier return to work for injury and disability.”

**Flexible leave programs** were mentioned by many respondents. As noted, elder care can be one reason for requesting a leave; personal health issues can be another. One respondent noted the following challenge:

“dealing with unexpected serious illnesses, e.g., cancer, heart conditions, surgeries for aging bones, ALS, etc. We have had all of these in our organization in the last 3 years. Issues of finding coverage for these knowledgeable folks and making sure that the company can pay for their absence, replacement and insurance.”

Several noted that generous leave programs and increasing the flexibility of existing programs were particularly important for older workers, e.g., “It seems that more employers are requesting leniency in the decision making process and adapting a ‘treat them like family’ attitude in managing absences.” Key points in this area included:

- Organizations focusing on the value of the Family and Medical Leave Act (FMLA) in providing leave to care for family members.
- A need for job protection and income replacement after FMLA, in part to “honor our long term employees.”
- Employees having options to buy additional coverage, if desired.
- Providing more “consistent application and compliance” with the ADA, FMLA and state-specific leave laws, with additional training and performance expectations for managers and supervisors who often are not familiar with these regulatory processes.

One respondent highlighted the goal of flexible practices as: “Building absence management programs that allow for flexibility/needed time off, and staffing practices that allow our managers to cover for folks who are off.”

## Maintaining and enhancing benefits

While flexibility has many advantages for older workers, when individuals are no longer employed full-time they may lose access to needed or desired benefits, such as affordable health care and leave coverage. Poll respondents mentioned a variety of ways in which employers could respond to older workers' desire for continued benefits.

**Benefits education** was mentioned by several respondents. This included responses about the need to be sensitive to the benefit needs of older workers, and suggests that employers offer counseling about considerations as individuals approach Medicare eligibility. One respondent mentioned working to meet the needs of older workers by “providing benefit options meetings with employees [including] representatives from Benefits, Retirement, and Leaves & Accommodations to assure employees are informed of their options.”

**Bridging or enhancing benefits** was mentioned by several respondents, who suggested that “including part-time benefits to bridge the 60-65 age group” was an effective strategy for employees who may be phasing into retirement but are concerned about losing needed health care coverage. One respondent noted that “Enhancements to continuation/extensions of leave-based coverage, ... providing coverage above and beyond age 60/65, [and] providing separate levels of benefits for a standard retiree vs. a disabled retiree” was increasingly common.

**Short and long term disability leave policies** were addressed by many respondents. Many poll participants noted that short-term disability (STD) and Long-Term Disability (LTD) should cover all classes of workers, including part-time workers; and that long-term disability benefits should be made available at a reasonable cost.

One respondent also noted the advantages of automatically enrolling employees in disability coverage: “Few workers understand ... how the probability for an extended absence due to disability increases with age. So, in my prior role as a plan sponsor, I embraced automatic enrollment features (choice architecture/behavioral economics applications) with respect to long term disability coverage.”

While many respondents identified the above practices as effective, one respondent pointed out the tension between these practices and organizations' actual decision-making: “Despite the need to retain older workers, there is a growing trend where employers are reducing benefits for long-term employees, e.g., reducing paid time off. They are also eliminating the bridging of benefits when an employee returns to the employer (after leaving for a period of time). In my opinion, these practices work at cross-purposes for retaining older workers.”

## Wellness programming

Healthy employees are key to continued productivity. Beyond health care coverage, respondents identified a wide range of wellness, disease management, preventive care and employee assistance programming as effective ways to maintain and improve the overall health of employees.

**Employee data** was used by both employers and suppliers to inform the best use of limited resources in designing health and wellness programming: “by analyzing our health care cost drivers in relation to our disability drivers we are targeting health and wellness programs to the workforce.” One supplier noted that examining disability data can inform health management programming, for example for older workers there may be, “more ... health management programs that address the issues associated with musculoskeletal conditions (back and arthropathy), as well as cancer.”

**Preventative health programming** was reported as an important aspect of wellness programming. One respondent noted that “wellness programs that promote health awareness [through] education, resources, and training ([health reimbursement accounts], health coaches, biometric screenings, etc.)” are effective in targeting the needs of an aging workforce.

**Disease management programs** were noted by several respondents as “...help[ing] older workers address the co-morbid medical conditions that might keep them from work.”

**Onsite wellness opportunities** were noted as important for increasing participation, including:

- “flexibility and accessibility to preventative health programs on site.”
- “On-site availability of medical personnel to assist in chronic disease management.”
- “We have included complementary and alternative medicine as a benefit option including onsite massages.”
- “Tai Chi breaks to preserve mental health and to refresh.”

**Integration of wellness and health insurance** was highlighted by one respondent as a strategy to ensure a healthier aging workforce with fewer and better managed chronic conditions by:

“taking a very proactive approach to wellness programs by integrating them into our health insurance offerings. Employees and their spouses are required to have annual physicals and members identified by insurance claims as having a chronic condition are automatically referred to disease management.”

**Incentives** for participating in wellness, preventive care and disease management programming were highlighted as a leading practice. One respondent noted that at his/her organization “employees receive discounts off their benefit premiums for achieving results (maintaining a healthy weight, consistent participation in exercise).” Another noted that they try to reduce disability claims proactively: “We do it on the front end by giving employees incentives to reduce their medical premium by living healthy life-styles.” Some employers encourage wellness programming participation, but others noted that they “offer biometric screening and have connected the results to employee contributions for health insurance.” Another organization was expanding “preventive care efforts, providing better reimbursement for preventive services, offering incentives for HRAs and initiating a ‘Know Your Numbers’ campaign.”

**Work-life resources** that go beyond health were mentioned by several respondents. This included:

- “work/life benefits that offer ways to increase [an employee’s] economic security and balance between work and life activities.”
- “... working on expanding our wellness and life event planning initiatives (financial planning workshops, health fairs, on-line resources, sponsorship/participation in community health events) to raise awareness, making it personal by allowing family participation.”

**Employee Assistance Programs (EAP)**, which offer support to workers who may have issues in their personal lives, providing counseling and referrals on a range of issues including personal relationships,

mental health, substance abuse and personal finance, were highlighted by many respondents as a leading practice for retaining older workers, particularly when included as part of an individual's choices in returning to work. One respondent noted that older workers may particularly value the use of EAP services for issues around aging, long term care planning, dealing with aging parents, depression, anxiety and losses. An employer recommended “EAP at the onset of an injury to guide/direct an injured employee to correct medical specialty and answer questions.”

Comprehensive health initiatives were suggested by many respondents as a leading practice. But, as one respondent noted, employer follow through is imperative; there is a need for “Better integration of health initiatives within the workplace, not simply a workplace policy that is essentially hand-waving and not actually [put] it into practice.”

### Safety checks

Workplaces and jobs vary tremendously even within an organization or industry, from more physically demanding blue-collar jobs to white-collar jobs where the majority of time is spent at a desk working on a computer. Respondents from a wide range of perspectives pointed out the need to proactively assess safety in the workplace, including ergonomic assessment and work site evaluations.

**Appropriate equipment and use of technology** were noted by several respondents as key to ensuring workplace safety, especially for more physically demanding work:

- “providing the appropriate equipment to allow workers to safely perform their job with less physical stress demands.”
- “We need to determine if we are capable of using technology more, teaching better techniques and acknowledge the reality that we need to treat employees as assets not machines.”
- “due to the physical nature of some of our work involving direct patient care, we have made significant financial commitments to purchase assistive lifting equipment/ergonomic devices to reduce injuries.”

“**Creating a culture of safety**” was also noted as critical to preventing and responding to workplace injury. This includes:

- “...providing tools that support the aging workforce [, f]or example, patient lifts. In addition, looking at slip-trip-fall hazards, and addressing the environment. [Creating] improved proactive interventions related to preventing workplace injuries and improving employee morale.”
- Regular ergonomic assessments: “[e]rgonomic assessments at hire; at three-year intervals, AND on demand,” especially “... for those jobs with high demands/repetition.”
- Reinforcing the importance of safety in the workplace: “All employees receive training throughout the year to keep ‘safety above all’.”
- Attending to shifts in safety considerations as employees age “... considerations may change based on the changing abilities of our workers.”

As with each of the sections of this report, many companies who are working toward addressing aging workforce issues use a combination of proactive programming, for example one respondent noted that:

“The heavy duty work requirements within our industry [are] not going away. We have to continue to be innovative in how we get the work done. We have worked closely with various functions within our organization to review absence information, safety initiatives, and collaborate on [RTW] initiatives. The medium to light duty work levels are more considered via more flexible schedules and via accommodations. Approximately 33% of our medical leave claims are musculoskeletal and the majority of those are employees who would be considered part of the “aging workforce.” We have made a considerable effort to have a robust safety program and a proactive accommodation program.”

### **Accommodation**

Accommodation was the most commonly cited leading practice for retaining older workers. Respondents noted how important it is to “make a sincere effort to explore and offer reasonable accommodations” and “[value] the employee’s years of experience and communicat[e] the desire to keep that experience by providing reasonable accommodations.”

Respondents spoke generally about accommodations rather than describing specific accommodations made, although some noted common accommodations, (e.g. “changed to 23-inch computer monitors, large text options, long term planning/budgeting for improved worksite access for those with mobility impairments...”). Often accommodations overlapped with other strategies, such as job modification, work retraining and ergonomic adjustments, which are all types of accommodations.

**Creativity in making accommodations and training managers** were noted by several respondents as leading practices:

- “Flexibility in job accommodation is particularly important to this segment of the workforce.”
- “Practicing creative reasonable accommodation requests. Making it part of the normal culture to offer various solutions to older workers.”
- “We have designed a program that integrates the expertise of an aging in place RN with the accommodation expertise of an occupational therapist for individual, job specific and corporate assessments.”
- “For all jobs, making sure through training, that employees and managers understand that accessibility and accommodations are critical and [that] includes those issues which might be more prevalent in an aging population—hearing loss, for example.”

**Building strategies and support systems** was one approach that several respondents mentioned, as helping them prepare for the aging of their workforce:

- “From a business perspective, we need to understand and prepare for an older workforce. Understanding that an aging workforce will translate to an increase in disabilities and accommodations [are] important. Our company began developing processes last year to address disabilities and accommodations more aggressively. In particular, we have outsourced our short and long term disability to a vendor and have added, internally, a Workplace

Adjustment/Accommodation Coordinator that partners daily with our vendor, HR, supervisors and employees.”

- “our company provides consultants to help work with older workers to help them stay at work through accommodations and/or job modifications.”

**Reaching out to community and regional resources** for support for disability issues was one way in which employers built capacity to address aging issues:

- “[we work] with Vocational Rehabilitation and Rocky Mountain Disability and Technical Center to provide additional information and tools for helping management and employees continuing to be successful in their jobs.
- “[we are] currently exploring incorporation of JAN into processes for both occupational and non-occupational situations.”

One supplier noted a “pre-disability” vocational services program to support employers who want to proactively address concerns—“Vocational counselors in these programs can assist the employer and the employee with education, vocational counseling to address workplace behaviors, ergonomics, and recommendations for ways to accommodate employees.”

**Updating job descriptions** to ensure they are accurate and properly identify essential functions of the job and associated functional capabilities was another strategy identified by several respondents. Others noted that job demands should be defined through measured job evaluations or analysis, e.g., “assessing job duties that include lifting, pushing, and pulling.” A job description can be a helpful tool when exploring accommodation options.

### Return to work programs

Respondents noted several strategies for supporting and expediting employees’ return to work after an absence, including personalized case management, stay-at-work and transitional assignments and training/retraining programs.

**Personalized case management** was highlighted as critical following the onset of a chronic medical condition: “Ensure they receive medical and vocational case management services as soon as possible when they encounter difficulties performing their job as the result of a medical condition. The services need to be provided by a professional who is familiar with the employer’s environment and culture.” One respondent suggested “aggressive Case Management Preventative approaches—[stressing] early intervention.” An employer noted that their “Occupational Health Nurse also works more closely with the older worker to monitor the employee’s recovery/treatment, so that early complications can be addressed quickly and effectively.”

Employers noted that an individualized approach to case management was important in return to work, with older workers this may mean better understanding and addressing their motivation when returning to work. One respondent noted a belief that older workers may have lower motivation to return to work than younger employees, “We have a specialized Return to Work program that evaluates each employee on an individual basis, and motivation to return to work is a large component. We’ve seen that older workers are less motivated to return to work, even with accommodation, so it is increasingly a challenge to figure out how to return these employees to gainful employment.”

As part of an individualized approach one respondent said, “We take a holistic approach to reviewing claims. We investigate all aspects of someone’s life[:] their home-life, stressors, multiple [diagnoses], etc. We know not one single [diagnosis] will affect someone[’s] life, [and] all will have an [e]ffect on someone’s ability to work and do their job. We provide resources that will help the employee understand their conditions and the bills that may come from the providers, [s]o that they are in control of their decisions regarding their medical conditions.”

**Stay-at-work programs and transitional work assignments** were also cited as a leading strategy. There is considerable evidence that getting an employee back to work sooner is better, but this must be done with attention to the ability of the worker. Development of a stay-at-work program focusing on ability of the worker was recommended. Several respondents noted that transitional work, including job modifications and job transfers to light duty, is often necessary when returning individuals, including older individuals, to work, e.g., “We also have a transitional work program which allows injured employees to continue working with restrictions in the event that their [department] is unable to accommodate them safely.”

Transitional work was also discussed as one part of the return to work process and personalization in the case management process; for example, one employer highlighted his organization’s integrated approach:

[we p]rovide in-house return to work assistance, provide flexible scheduling, modified work assignment, as well as temporary work assignment in a different department. Employees not able to continue performing their jobs due to medical conditions, permanent restrictions, etc. are provided with [leave of absence] as accommodation and assisted to transfer to another position in the organization.”

Some respondents noted specific policies around transitional placements and return to work:

- “We have a Placement program that allows anyone with a permanent restriction to look for another position within the organization for 90 calendar days.”
- “Older employees may experience extended recovery periods, and policy is designed to support longer term transitional work assignments if worker is making steady medical progress.”
- “Help employers design a program that looks at the workers declining abilities and adjust the requirements to help keep the employee at work or enable them to come back sooner with job modifications.”

Several respondents also noted the importance of requiring fitness for duty evaluation prior to returning to work to ensure an employee’s health, safety, and ability to perform the work.

**Work training and career progression** were noted as sometimes necessary in order for employees to qualify for a modified work assignment. This could be part of a return to work process or an approach to keep older workers at work by offering a career progression: “We have a strong placement program that includes training and placing individuals to areas that are more suited to their abilities. Adaptive equipment is utilized as needed. A vocational disability manager and occupational therapist is on staff to assist associates” and “Training opportunities are available so that employees may gain skills for less physical jobs as they advance in their careers.”

From an organizational perspective one respondent noted that it is important in planning to: “Identify skill sets needed to retain, or prepare for succession planning, and look for opportunities to retain skilled workers in positions that provide more flexibility and options to transition [within] the organization (using skill sets with less physically demanding functions, etc.).”

While retraining and planning for career progression were often cited as leading practices for retaining older workers, some respondents noted that an organization must be sensitive to possible implications: “Transitioning older workers into positions where they can remain productive in the workplace and understanding that this isn’t a demotion or something that one should lose face over within the organization.”

**Mentoring** was suggested by several respondents as a good practice for maintaining the engagement of older workers. One respondent noted: “We also need to support knowledge transfer and succession planning, so exploring opportunities for transitional positions to accomplish this.” As another respondent noted, providing opportunities for mentoring can demonstrate that the organization “valu[es] their knowledge and experience.”

### **Improving communication and culture**

Many of the leading practices suggested by respondents focused on the workplace culture of the organization. In particular, several noted the importance of equipping frontline managers, to understand issues around aging and to help them to improve communication.

One respondent noted the need for “Managers who understand the impact of the job on the aging workforce and who are easily accessible to staff.” Another noted that staff and manager training is one way to accomplish this goal: “Our company has employee training which incorporates aging workforce considerations so that our employees are more aware of this issue / considerations.” Yet another suggested training could focus on “different communication styles when speaking with individuals of different generations.” With improved understanding of aging issues and communications skills, it can be easier to address difficult issues, for example: “respectfully handling cognitive issues before they become safety problems.”

While training can be one way to meet the needs of staff and managers around this area, another option was suggested for targeted support: “We have incorporated technical assistance specific to the aging workforce.” Communication and recognition were mentioned by several respondents who recommended that employers ensure older workers “are engaged and feel their work efforts are appreciated and rewarded.” Employers need to fully recognize the important contribution of older workers: “It’s not simply recognizing the number of years that an employee has been with a company, but recognizing the importance of providing history and continuity of services depends up[on] the experience of older workers.”

## Strategizing

While the leading practices highlighted above have the potential to help retain older workers (and workers in general) respondents to the survey and participants in post-poll interviews also discussed the role of strategic planning and implementation in achieving the best results (i.e., return on investment). Rather than attempting to implement all of the practices above, respondents discussed the need to select approaches strategically based on specifically identified organizational needs. For example, while some organizations may benefit most from organization-wide disease management programming, other organizations may achieve better results by focusing on succession planning for specific positions.

### Analyzing Organizational Data

More than 50% of the 522 employer respondents reported that their organization analyzed workforce demographics; 17.8% reported that their organization did not, and 28.9% did not know. Such workforce analysis can inform employers' understanding of workforce trends. For example, these analyses can identify current issues (e.g., examination of claims) and help to anticipate issues that may arise in the future (e.g., aging trends among workers by position, function, or location), in order to allow informed decision-making about where resources should be focused.

Several respondents noted that they were looking at data specifically in order to pinpoint where to invest resources.

- “We provide age related reporting of losses to highlight differences and points of attack for assisting older employees.”
- “Review client data to understand positions with aging workforce and which departments have the highest disability claims for older workers. Then [we] have applied solutions to improve retention, promote safety, promote health of older workers to reduce incidence, build appropriate RTW programs to improve productivity.”
- Use health-related data to study “comorbidities in the aging disabled population for trends and tailoring our products to meet the demands.”
- “We track our return to work statistics by workers age >55 and workers age <55. We also track claims with complications vs. those without, which also usually take into consideration the older workforce.”

One respondent also noted that this analysis provided insights not just about aging workers, but about disability trends among other age groups:

“Actually, on a per capita basis, there are fewer absence claims from workers over 40 than workers under 40. Yes, the total number is higher - but that's because there are more workers in the over 40 cohort. In addition, women over 40 file the same number of claims as they did when they were under 40 and are out of work for about the same amount of time. Men over 40 file slightly more claims (not statistically significant) but, more importantly, are out for a longer period[s] of time. Frankly, my bigger worry, is the percentage of employees under 40 who are filing more claims on a per capita basis.”

## Planning and implementing a plan to address aging issues

During the post-poll interviews, we had the opportunity to learn more about the process by which organizations are using insights from workforce analysis to inform the design and implementation of programming.

While each of the interviewees had a unique perspective, cumulatively they outlined an approach that included: (1) identification of issues, (2) organizational education, (3) planning, and (4) implementation.

**Identifying issues.** Interviewees talked about the need to identify issues within the organization, and their impact or potential impact on the business. This included aging trends and other demographic patterns, as discussed above, but also included assessing relevant legal issues (such as patterns in EEOC or other charges) or issues of productivity or employee engagement. Identification of these issues was then used to develop related improvement objectives. One interviewee emphasized the need to make sure to align these objectives with important, existing organizational goals, such as cost saving, as well as the importance of gaining both upper management, and frontline manager buy-in around understanding and committing to resolving identified issues.

**Organizational education.** Interviewees also discussed the need to provide education and information to both business leaders and front-line managers – including raising awareness of aging and related issues, as well as best practices in responding to these issues. This frequently involved training or other informational events conducted with managers and other employees.

**Planning.** In addition to basic education, these individuals also spoke about planning more complex initiatives and programs. This might include developing more intensive educational programming, but also included planning changes to organizational practice or encouraging cultural shifts. One interviewee emphasized the importance of including mid-level and line managers in this planning process, rather than focusing only upper management. She noted that these individuals are more familiar with their employees and can thus identify programming that is more likely to be effective. In addition, these individuals are the ones most likely to be charged with actually implementing changes, making their buy-in critical to the success of the initiative. This interviewee also noted that practices and policies may not work across the board for an organization—locations or departments may have different needs—so planning should be flexible enough to account for these varied needs.

**Implementation.** Each of the interviewees spoke about challenges related to implementing planned programming. While many organizations expressed an interest in addressing aging issues through programs, it was not unusual for these businesses to stop short of actually engaging in programming, or to change policy in name only.

One respondent noted that this break down between planning and implementation may be a function of concern among employers about the legality of such programming, namely concerns that it might open the door for possible perceived age-related discrimination.

Among organizations that do proceed with implementation, another interviewee noted that it is key to measure the financial and other benefits of the program by selecting metrics that are meaningful for the organization and its bottom line.

## Conclusion

The findings of this collaborative effort between Cornell University and the DMEC highlight that many organizations are concerned about the implications of an aging workforce, but relatively few have considered an aging workforce in designing integrated absence and disability management programming. Leading absence and disability management practices for retaining an aging workforce were identified by over 450 absence and disability management professionals. Flexibility, maintaining and enhancing benefits, wellness programming, safety checks, accommodation, return to work programs, and improving communication and culture, were identified as good practices for retaining all workers, and as particularly important in addressing the needs of older workers. There was also an emphasis in the participant responses on the importance of using organizational data, both workforce demographics and absence and disability management metrics, to target the planning of integrated absence and disability management programming for an aging workforce.

While this study offered the opportunity for absence and disability management professionals to share ideas around leading practices for an aging workforce, additional dialogue and research is needed in order to better inform employer and supplier practices in selecting, planning and implementing programming. In particular, in-depth case studies of organizations that have successfully targeted these issues through absence and disability management programming would be helpful in working toward a better understanding of how to retain and engage this experienced and valuable group of workers.

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## References

- Akabas, S. H., Gates, L. B., & Galvin, D. E. (1992). Chapter 3 Components of a Disability Management Program. Disability management : a complete system to reduce costs, increase productivity, meet employee needs, and ensure legal compliance. New York, NY: AMACOM.
- Bjelland, M. J., Bruyère, S. M., Von Schrader, S., Houtenville, A. J., Ruiz-Quintanilla, A., & Webber, D. a. (2010). Age and disability employment discrimination: occupational rehabilitation implications. *Journal of occupational rehabilitation*, 20(4), 456–71. doi:10.1007/s10926-009-9194-z
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. doi:10.1191/1478088706qp063oa
- Brown, S. K. (2012). What Are Older Workers Seeking? An AARP/SHRM Survey of 50+ Workers. Retrieved from: [http://www.aarp.org/content/dam/aarp/research/surveys\\_statistics/econ/2012/What-Are-Older-Workers-Seeking-An-AARP-SHRM-Survey-of-50-Plus-Workers-AARP.pdf](http://www.aarp.org/content/dam/aarp/research/surveys_statistics/econ/2012/What-Are-Older-Workers-Seeking-An-AARP-SHRM-Survey-of-50-Plus-Workers-AARP.pdf)
- Collinson, C. (2012). Redefining retirement: The new ‘retirement readiness’: The 13th annual Transamerica Retirement Survey. San Francisco, CA: Transamerica Center for Retirement Studies. Retrieved from <https://www.ta-retirement.com/resources/TCRS%2013th%20Annual%20Thematic%20Report%20Final%205-14-12.pdf>
- Critchley, R.K., (2004). Doing Nothing is NOT an Option!: Facing the Imminent Labor Crisis. South-Western Educational & Professional.
- Disability Management Employer Coalition. (2009). Tools of the trade: A compilation of programs and processes for the absence, disability, health, and productivity professional. San Diego, CA: Disability Management Employer Coalition.
- Dyck, D. (2006). Disability management : Overview. In D. Dyck (Ed.), *Disability management : theory, strategy and industry practice* (3rd ed.). Markham, Ontario: LexisNexis Canada.
- Geisen, T. (2011). Workplace Disability Management as an Instrument for Human Resources and Organizational Development. In T. Geisen & H. G. Harder (Eds.), *Disability management and workplace integration: international research findings*. Burlington, VT: Gower.
- Habeck, R.V., Leahy, M.J., Hunt, H.A., Chan, F., & Welch, E.M. (1991). “Employer factors related to workers’ compensation claims and disability management,” *Rehabilitation Counseling Bulletin*, 34(3).
- Habeck, R., Hunt, A., Rachel, C. H., Kregel, J., & Chan, F. (2010). Employee retention and integrated disability management practices as demand side factors. *Journal of Occupational Rehabilitation*, 20(4), 443–455. Retrieved from <http://search.ebscohost.com/login.aspx?direct=true&db=psyh&AN=2010-23784-006&site=ehost-live>
- Tishman, F., VanLooy, S., & Bruyère, S. (2012). Employer strategies for responding to an aging workforce. New Brunswick, NJ: NTAR Leadership Center. Retrieved from [http://www.dol.gov/odep/pdf/NTAR\\_Employer\\_Strategies\\_Report.pdf](http://www.dol.gov/odep/pdf/NTAR_Employer_Strategies_Report.pdf)
- Toossi, M. (2012). Labor force projections to 2020: A more slowly growing workforce. *Monthly Labor Review*, 135(1), 43–49. Retrieved from <http://www.bls.gov/opub/mlr/2012/01/art3full.pdf>

## Appendix A: Poll

### State of the field: Absence and Disability Management Practices for an Aging Workforce

The Disability Management Employer Coalition (DMEC), in collaboration with the Employment and Disability Institute at Cornell University, invites you to participate in a short poll entitled—*State of the field: Absence and Disability Management Practices for an Aging Workforce*. The poll asks questions about whether the aging workforce is a concern for your organization and what you feel are leading practices in this area. Your responses will help us understand current practices and their perceived effectiveness. **This poll should only take about 5 minutes to complete.**

By completing the survey you are agreeing to participate in the research. Your participation is voluntary and there is no penalty if you choose not to participate. Your survey responses will be confidential, with identifying information removed from the data set after collection. Survey responses from all participants will be analyzed and the findings reported only in their aggregate form, without any information that would identify you or your organization. Note that electronic communications are not necessarily secure and could be viewed by a third party, however we anticipate that participation in this survey presents no greater risk than everyday use of the Internet.

The main researchers conducting this study are Susanne Bruyere and Sarah von Schrader at Cornell University. If you have any questions, you may contact Sarah von Schrader at (607) 254-8088. If you have any questions or concerns regarding your rights as a subject in this study, you may contact the Cornell University Institutional Review Board (IRB) for Human Participants at 607-255-5138 or access their website at <http://www.irb.cornell.edu>. You may also report your concerns or complaints anonymously through Ethicspoint online at [www.hotline.cornell.edu](http://www.hotline.cornell.edu) or by calling toll free at 1-866-293-3077. Ethicspoint is an independent organization that serves as a liaison between the University and the person bringing the complaint so that anonymity can be ensured.

By continuing onto the poll you are agreeing to participate this study.

### Continue to Poll

This research is funded by the U.S. Department of Education National Institute on Disability and Rehabilitation Research for the Employer Practices Related to Employment Outcomes among Individuals with Disabilities Rehabilitation Research and Training Center (grant #H133B100017).

1. I am responding to this poll as a(n)
  - a. Employer (managing disability, risk, workers' compensation, absence, safety, health or wellness functions exclusively for my own organization's employees)
  - b. Supplier (serving employers by providing health, absence, insurance, and productivity related programs, services and strategies.)

Older workers account for a growing proportion of the US workforce, as the baby boomer generation ages and older workers remain in the labor force longer. The prevalence of disability increases with age and may have implications for organizations.

[If employer]

2. How concerned is your organization with the impact of an aging workforce?
  - a. Very concerned
  - b. Somewhat concerned
  - c. Slightly concerned
  - d. Not concerned at all
3. Has your organizations analyzed workforce demographics to better understand how aging workers will impact your organization?
  - a. Yes
  - b. No
  - c. Don't know
4. What do you feel are the leading Absence and Disability Management practices for retaining older workers?
5. Has your organization considered the aging workforce in designing its Absence and Disability Management program(s)?
  - a. Yes (if yes, how?)
  - b. No

**About your Absence and Disability Management Efforts (programs for all of your employees)**

6. Please rank the following factors from 1 (most important) to 5 (least important) based on how important you think they are in motivating your organization's Absence and Disability Management efforts for all employees.
  - a. \_\_\_ Controlling cost of employee benefits
  - b. \_\_\_ Preventing absence
  - c. \_\_\_ Maintaining health and productivity
  - d. \_\_\_ Retaining employees in the organization
  - e. \_\_\_ Legal compliance
7. How far along do you think your organization is in each of the following components of a comprehensive approach to Absence and Disability Management?
 

1=Beginning Stages  
5=Successfully Achieved

(a) Preventing health/injury risks and disability from occurring	1 2 3 4 5
(b) Improving health and managing health conditions	1 2 3 4 5
(c) Resolving disability and bringing back to work	1 2 3 4 5

8. Would you be willing to participate in a short interview to help us better understand current Absence and Disability Management practices related to aging workers?
  - a. Name
  - b. Email
  - c. Phone

[If supplier]

2. How many of the organizations you serve are concerned with the impact of an aging workforce?
  - a. Most
  - b. Some
  - c. Very few
  - d. None
  - e. Don't know
3. What do you feel are the leading Absence and Disability Management practices for retaining older workers?
4. Has your organization considered the aging workforce in designing its Absence and Disability Management program(s) for employers?
  - a. Yes (if yes, how?)
  - b. No
5. Would you be willing to participate in a short interview to help us better understand current Absence and Disability Management practices related to aging workers?
  - a. Name
  - b. Email
  - c. Phone

## Appendix B: Interview Protocol (Post-Poll)

### Key informant interviews: Oral consent and interview questions

{Hello, introduction, and confirm availability for interview}

I want to remind you about the purpose of this study, and why your participation is so important. You recently completed a survey sponsored by DMEC and Cornell University that focused on how your organization has taken the aging workforce into account when designing and implementing absence and disability management programs.

This interview is a follow up to that survey, as we try to learn more about organization's concerns about the aging workforce, and the process they have followed to address aging issues in their absence and disability management programs.

Our interview should about 30 minutes of your time.

Participating in this interview is completely voluntary, and of course, you may withdraw at any time or choose to not answer a question. Your responses will be kept completely confidential. If you have any additional questions about the study I can provide contact information at any time for the principal investigator, Susanne Bruyere.

The interview will be confidential, but we would like to take notes during the interview. Is this okay with you?

As we mentioned, this interview will focus on aging workers and workers with a disability. We define an aging worker as an individual 55 and over and a person with a disability as someone who has a physical and/or mental impairment that substantially limits a major life activity. This could include (but is not limited to) individuals with a physical disability, a chronic health condition, a vision or hearing impairment, a mental health condition, or a workplace injury or illness.

### Interview Questions

*You mentioned in your survey response that your organization is concerned about the impact of an aging workforce.*

1. Can you tell me a little about what your organization's concerns are and why? (e.g., why did your organization become concerned and what are they most worried about?)
  - a. Findings from data analysis?
2. What has your organization done to try to address concerns about aging workforce issues, specifically with relation to Absence and Disability Management?
  - a. Altered programming?
  - b. Added programming?
  - c. Analyzed data differently?
  - d. Changed policy?
3. How successful do you think your organization has been in addressing concerns about an aging workforce? Why?

4. What have you found to be challenging about addressing aging issues within absence and disability management programming?
5. What recommendations do you have for other organizations as they begin to try to tackle aging issues within their disability and absence management programs?
6. We are interested in sharing the results of this research broadly with disability management professionals—what publications or organizations would you suggest we work with in order to reach as many people as possible?

[1] Each member organization has a one primary contact, while the survey was sent to all individual members in the organization as there may be more than one member per organization.

[2] Specifically, respondents were asked: I am responding to this poll as a(n)...

- Employer (managing disability, risk, workers' compensation, absence, safety, health or wellness functions exclusively for my own organization's employees); or
- Supplier (serving employers by providing health, absence, insurance, and productivity related programs, services and strategies.)

[3] What do you feel are the leading Absence and Disability Management practices for retaining older workers? Has your organization considered the aging workforce in designing its Absence and Disability Management program(s)? Yes (if yes, how?)

[4] There were a total of 257 supplier responses to this question, but more than one supplier could have worked for a single company. There were virtually no differences in this variable when looking at primary members only.

[5] There were a total of 75 respondents who were primary members for an organization. Using only primary members eliminates multiple responses from a single company; when all 257 suppliers were included the proportion who had considered the aging workforce dropped to 50%.

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**The Disability Management Employer Coalition (DMEC)** is a non-profit organization that provides educational resources to employers in the areas of disability, absence, health, and productivity. The primary goal of DMEC is to assist employers in developing cost-saving programs, encouraging responsive market products, and returning employees to productive employment. Visit [www.dmec.org](http://www.dmec.org) for more information about educational publications and events.

**DMEC currently** has over 4,700 members in chapters across the United States and two international exchange programs. Both Employer and Supplier memberships are offered. DMEC strives to provide excellence in service and industry leadership by adhering to the highest principles of integrity, honesty, and ethical standards.

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