



The Aging workforce

TRUTHS AND STRATEGIES TO MANAGE AN AGING, BROKEN AND
DYSFUNCTIONAL WORKFORCE

The Premise

The aging workforce is a financial liability in regard to claims

The aging workforce is a productivity liability

Compounded Statistical Analysis

(3 Sources considered)

Comparison <35yo vs >55yo

1. Claim frequency was 2.5X greater
2. Claim costs were 4-5X higher
3. Short Term Disability rates were 3X greater
4. Long Term Disability rates were 2X greater

My “beef” with Statistics

- 1 Based on claim data
2. Does not account for subjectivity

Medically known facts of chronological aging

Affects Work (A) or No Affect at Work (NA)

- ▶ Reduced Body Mass (NA)
- ▶ Slower Metabolism (A/NA)
- ▶ Sleep Patterns (A)
- ▶ Joint wear and tear, osteoarthritis etc. (A)
- ▶ Joint instability (A)
- ▶ Proprioceptive changes (A)
- ▶ Dementia/Memory (A)
- ▶ Medical conditions (A/NA)

Variables

Controllable (C) or Not Controllable (NC)

- ▶ Genetics (NC)
- ▶ Past History of Accidents, Abuse, Health Conditions, Stress (NC)
- ▶ Lifestyle, Sleep (NC)
- ▶ Physical conditioning (NC)
- ▶ Dietary/Hydration (C/NC)
- ▶ Functionality (C)

What does it look like? Lumbar Spine



What does it look like? Lumbar Spine



What does it look like? Lumbar Spine



What does it look like? Cervical Spine



What does it look like? Shoulder



What does it look like? Knee



How did it get there?

- ▶ *Natural degeneration*
- ▶ *Past History*
- ▶ *Dysfunction*

Does it Matter?

- ▶ ***Yes....Risk has increased***
- ▶ ***Can it be fixed? No***
- ▶ ***Can it be managed? Yes***

Functional aging

Functional aging is created by prolonged dysfunctional movement patterns, or bad habits, resulting in excessive wear and tear on bodily structures.

Functional Aging

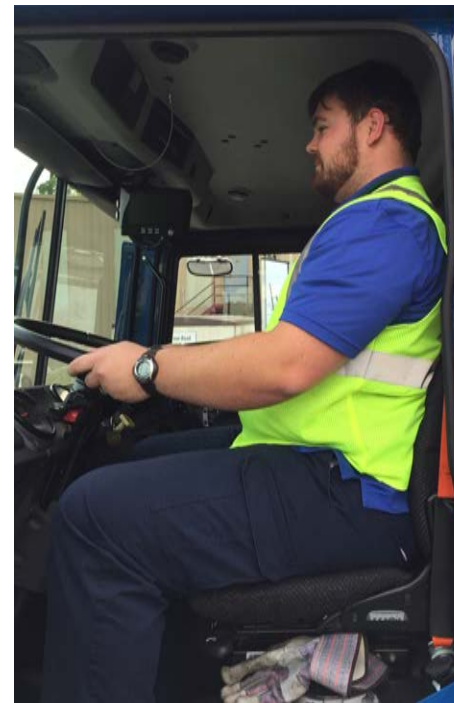
Affects Work (A) or No Affect on Work (NA)

- ▶ Accelerates joint wear and tear (A)
- ▶ Destabilizes Joints (A)
- ▶ Excessive Wear and Tear on Soft Tissue (A)
- ▶ Excessive Fatigue (A)
- ▶ Reduced Durability (A)
- ▶ Increased Claims (A)
- ▶ Increased Claim Expense (A)
- ▶ Increased Disability (A)

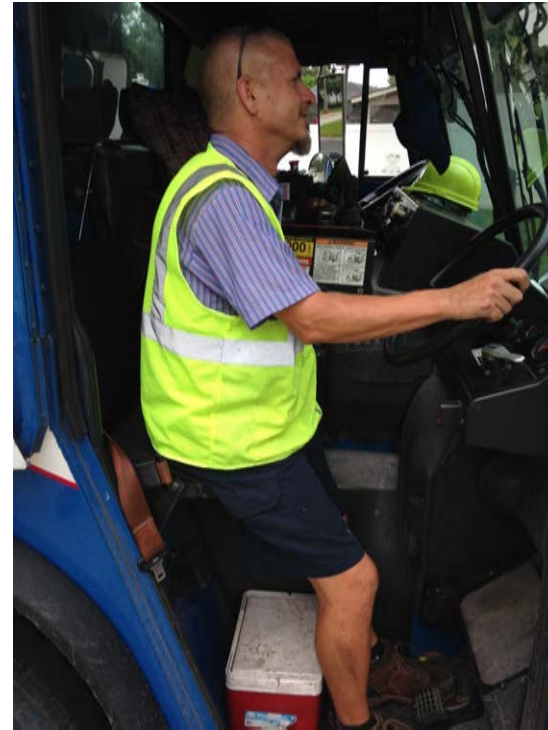
What does it look like?



What does it look Like?



What does it look like?



What does it look like?



Functional Aging

When does it begin?

- ▶ *Can begin in our 30"s*

Where does it come from?

- ▶ *Bad habits, past injuries, natural processes, life*

Can it be corrected?

- ▶ *Yes*

Where does it begin?



Hip Hinging

Functional Demonstrations

- ▶ Hip Hinge
- ▶ Low back
- ▶ Shoulders
- ▶ Knees

Solutions

- ▶ Control what you can control...function
- ▶ Acknowledge that degeneration is present in your organization
- ▶ Do not assume that risks are not present in the absence of injury claims
- ▶ Deploy movement drills to restore function
- ▶ Review major tasks and establish “standards of performance”
- ▶ Perform task training regularly
- ▶ Observe, correct and re-enforce
- ▶ Strongly consider wellness opportunities

Solutions

- ▶ **Acceptance**
- ▶ *Move forward, lead and they will follow*
- ▶ *Get buy in*
- ▶ *Begin a functional movement program (not stretching)*
- ▶ *Review task performance training*
- ▶ *Task matching*
- ▶ *Wellness programs*

Questions?

Thank You



Dr Tom Renner

2017 SWANA conference speakers review

“Managing the aging workforce”

The aging workforce is creating concerns over increased claim frequency and claim cost.

While the numbers indicate that claim frequency and claim costs are rising in the +45yo employee age group it is not entirely because of chronological age factors. The greatest factor creating these numbers is the result of accumulated trauma and prolonged dysfunction that is left uncorrected. It is entirely possible that an employee that is -45yo with excellent biomechanics will be extremely low risk and is unlikely to suffer an injury barring a catastrophic single event claim. It is also possible that a -45yo with poor biomechanics may also suffer from a higher likelihood of injury and have similar physical damage of those in the +45yo group.

The Conclusion

The conclusion would indicate that biomechanical factors outweigh the chronological factors. Granted, the +45yo employee is in a higher risk category simply because more time has elapsed allowing for a greater degree of degenerative changes thereby increasing risk.

Moving forward ... taking steps to reduce the risk of claims and improving employee health and function.

Acceptance

It is wise to move forward with the assumption that accumulated trauma and developing conditions are present in your workforce today. Without the aid of detailed imaging and biomechanical assessment there is no way of determining the true level of risk within your workforce. A strong biomechanical program will have a positive effect on all employees regardless of their current health status. The approach of doing nothing because claims are low may be dangerous especially with a high tenure workforce.

Task performance

Review all tasks for “standards of performance”. There is a right way and a wrong way to perform tasks. Just because no claims have been made doesn’t mean that task performance is safe. Identify the high-risk tasks (i.e. lift, push, pull, reach, bend, sit, drive), create a “best practices” format, train the employees on best practices and re-enforce that training in the field.

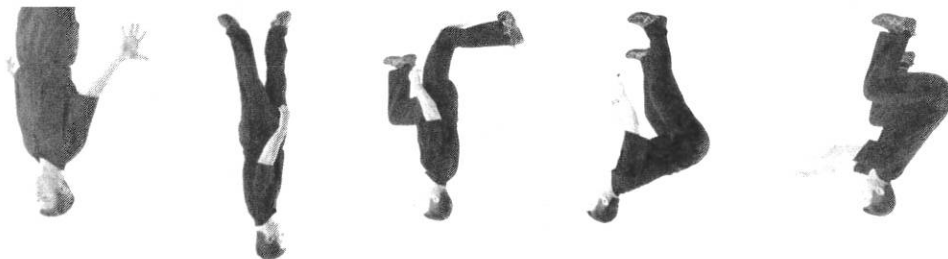
Task Matching

Make sure that the employees physically able to perform their tasks safely.

Biomechanical training

We have found that biomechanical training in the form of functional movement exercises far exceeds the effectiveness of stretch and flex programs. Most injuries occur from improper biomechanical movements rather than lack of flexibility. In some cases, excessive stretching without stabilization can increase the risk of injury especially in the high tenure workforce. The best bio-mechanical training methods include:

1. Squats (low back and core activation for lifting, pushing, pulling, sitting and driving)
2. Deadlifts (hip activation, low back protection for lifting, pushing, pulling, sitting and driving)
3. Lunges (for lifting, pushing, pulling, hip and core engagement)
4. Rotations (activities involving turning, awkward positions, engaging the core, protecting the lower spine)
5. Posterior chain movements (stabilizing the shoulders, spine, balance)



Effective biomechanical training greatly reduces the risk of injury to those employees already afflicted with degenerative changes, unstable joints and soft tissue as well as developing conditions. An effective biomechanical training session should be performed daily and only take 3-5 minutes to perform. As a side benefit the training will greatly assist employees with their existing aches and pains resulting in improved performance and reduced fatigue.

Leadership Involvement

An effective program is only as effective as organizational leadership wishes it to be. There is likely to some resistance from the workforce. To avoid this the most effective approach is to present the program to the workforce as an attempt to assist them with their existing physical concerns and personal health and an acknowledgement of your understanding of their concerns. Commit to the program and stay with it. **Lead and they will follow.**

Training/Coaching

A program of this nature needs leadership in the form of teaching and coaching. A supervisor/foreman or whomever you would choose should be trained in leading this type of program. They also should be trained in observation leading to correction. A designated employee placed in charge of this type of program will insure that the program will be sustainable.

Closing

It is well established that there are concerns with the health and function of the workforce, especially with the high tenure workforce. Moving forward without addressing the issue will only result in continued risk of debilitating injury claims and workforce suffering. Recognition of your employees efforts and sacrifices along with efforts to address these concerns will result in a culture of safety built on concern for the health and welfare of the employee. **Do nothing and nothing changes.**

Thank you for your time and attention

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