TODAY'S LEADERSHIP

Workforce to Leverage Opportunities

By Karen Wagner

A couple of years ago, hospital administrator James A. Diegel, FACHE, was conducting an interview for a high-level position when the young candidate surprised him with an unusual request: a sabbatical after five years on the job.

"I'm scratching my head going, 'I've never had a sabbatical in my career, and usually you don't see those sometimes until you've worked 30 or more years,'" says Diegel, CEO, Howard University Hospital, Washington, D.C.

That moment crystalized a major difference between Diegel's generation, baby boomer, and that of the candidate's, millennial, underscoring just

one of the challenges of managing a workforce made up of multiple generations.

A Crowded Workplace

Whether it's the 20- or 30-something who wants better work-life balance or the 50-something who wants a better retirement plan, leading the multiple generations in today's workplace has perhaps never before presented so many challenges—and opportunities.

Today, one workplace can have as many as five generations: traditionalists, born before 1945; baby boomers, born between 1946 and 1964; Generation X, born between 1965 and 1980; millennials (also known as

Generation Y), born after 1980; and the emerging generation known as Generation Z, born beginning in the mid- to late-1990s. This summer a new "microgeneration" also emerged. Dubbed the "Xennials," this group is said to be born between 1977 and 1983 and shares characteristics with both Generations X and Y. It's worth noting that no official model exists for the exact dates of any of the generations.

These multiple generations are known for a diverse set of values, expectations and attitudes toward life and work. Baby boomers, for example, are accustomed to working 40-plus hour weeks but may not be as eager to adapt to new communication channels such as texting and Twitter. Meanwhile, millennials place a great degree of value on their personal time outside work and often use texting as their main form of communication—both personally and professionally.

Such differences among employees of various generations can be burdensome for leaders to manage, especially in the healthcare field.

"A lot of the infrastructure for how we run our organizations and deliver care comes from the baby boomer generation," says Diegel, who was chairman of the committee that produced the American Hospital Association's 2014 report, *Managing an Intergenerational Workforce: Strategies for Health Care*

Transformation. "This includes aspects such as our employment practices, our retirement plans, our benefits packages, how we approach salary, how we approach performance reviews, how we look at loyalty or commitment to organization, and how we look at leadership. Yet, what we're finding now is our workforce is very rapidly becoming clearly a Generation X and Generation Y workforce, with many of us from the baby boomer generation still in place in terms of leadership."

Many comparisons have been made between the baby boomer and millennial generations due to their similarity in size. In 2016 there were 74.1 million baby boomers and 79.8 million millennials in the United States, according to the Pew Research Center. As baby boomers retire, it's the millennials who will be taking over many of those leadership roles.

> "What we're finding now is our workforce is very rapidly becoming clearly a Generation X and Generation Y workforce, with many of us from the baby boomer generation still in place in terms of leadership."
>
> —James A. Diegel, FACHE
> Howard University Hospital

According to Seattle-based consulting firm Slalom, millennials are projected to make up 75 percent of the U.S. workforce by 2030. This trend is evident at Texas Health Resources, a 29-hospital system with more than 24,000 employees that serves the Dallas-Fort Worth area. Millennials made up 13 percent of the workforce in 2012, according to the health system; today, that number has grown to 35 percent. Meanwhile, baby boomers make up 25 percent of the workforce, while Generation X makes up 40 percent. Traditionalists account for less than 1 percent of the workforce, and the health system has 28 employees from Generation Z.

"If you think of X, Y and Z, that's three-quarters of our workforce population now," says Barclay E. Berdan, FACHE, CEO of Texas Health Resources.

Acknowledging the Challenges

Managing such varied motivations, expectations and goals among the generations has definitely become more challenging, something William G. Sisson, FACHE, president of Baptist Health Lexington (Ky.), a 391-bed acute and regional tertiary facility that is part of Louisville, Ky.-based Baptist Health, knows firsthand.

Sisson says his younger employed physicians, mainly in their 30s, have a very different work philosophy than

their older colleagues. "We're seeing a total shift in how physicians want to be paid and how physicians want to work," he says. "They really do care about having time off yet are still committed to their patients. They just often put their families first."

The hospital's younger hospitalists and laborists desire shift work also and don't want to be on call or manage an office setting, Sisson says. Meanwhile, many of the organization's younger primary care physicians desire outpatient clinic work only and don't want to conduct rounds at the hospital.

Sisson says 10 to 15 years ago, a primary care physician would often check on his patients in the hospital, rather than rely on a hospitalist to do so. Now, most primary care physicians leave that work to hospitalists and focus on their office practices.

Similar differences persist across the Baptist Health Lexington non-physician workforce, which is made up of 22.4 percent millennials, 47 percent Generation X, 29 percent baby boomers, and 2 percent individuals who fall outside these groups. For example, the younger employees are really not interested in working overtime. "They're really interested in the quality of life and scheduling flexibility, and that's not always the biggest priority for those employees who are in their 50s and 60s," Sisson says.

Educator Cindy Brubaker, EdD, RN, also sees a different mindset and values among the newer faculty members in the department of nursing at Bradley University, Peoria, Ill., where she is department chair and an associate professor.

"They're not going to be tied to their desk or their job, and that's a learning curve for those of us who have been working for a while," Brubaker says.

These 30-somethings also don't often foresee spending their entire careers with one or two organizations, as many of the baby boomer faculty members have done, Brubaker says. This has resulted in younger nurses pursuing advanced academic degrees and entering the teaching field at a much younger age. The

> **"If you can figure out how to leverage a team of individuals who have different perspectives and experiences but are all focusing on the same problem, seeing things through their unique lens, then I think we could solve some of healthcare's most complex problems."**
>
> —Joseph Anton, RN
> Thomas Jefferson University Hospitals

mindset of these younger faculty is much more focused on their work-life balance, which can be a source of contention with the baby boomers who are typically much more career and work focused, she says. With about one-third of the 25 faculty members at the university hailing from the millennial generation, the challenge is to bring these two generations together to embrace the strengths of each in order to work in harmony.

"I'm trying to get them more involved in the academic culture," Brubaker says.

Recognizing the Opportunities

Despite such differences and the challenges they present, this generational disruption often can have positive consequences.

"I would say you have, in some respects, a clash of generations, but not in the negative sense of the term," Diegel says. "It's just that our perspectives—how we show up, how we work, how we think, how we make decisions—are different from those of the generations that precede or follow us."

The younger generations, Diegel continues, definitely have traits that older colleagues can admire and even learn to emulate. For example, Diegel has noticed that the students in an undergraduate course in healthcare management he teaches often study in groups, searching for solutions collaboratively rather than

separately—and often finding them much more quickly.

And, they're definitely not satisfied with the status quo. "They ask very probing questions about why we do things," Diegel says. "They are testing assumptions maybe more than my generation did."

Although that probing mind may be off-putting to more seasoned workers, it can be an asset in healthcare, says Kristi Caldararo, associate administrator for clinical services at Thomas Jefferson University Hospitals, a 951-bed health system based in Philadelphia.

Caldararo's colleague, a member of Generation X, agrees.

"As an effective leader, you have to be sure to explain what you're doing and why," says Joseph Anton, RN, vice president, clinical and support services, and an ACHE Member. "Millennials will benefit from this extra level of clarification, which allows them to more effectively focus on not only completing their work, but doing it correctly. Their propensity to be more inquisitive will help them accept direction more easily and make them more likely to excel at the tasks at hand."

Deploying Strategies

It's up to current leaders to understand the varied values, motivations and skillsets of the generations working under one roof, says Anton.

"If you can figure out how to leverage a team of individuals who have different perspectives and experiences but are all focusing on the same problem, seeing things through their unique lens, then I think we could solve some of healthcare's most complex problems," he says.

Some strategies for fostering a successful multigenerational work environment include:

Educate your managers.
At Baptist Health Lexington, the composition of the workforce is regularly evaluated in every department, and that information is used to guide management and human resources strategies, including vehicles for communication. Managers also are educated about how to lead and work with staff members from various age groups, including those generations different from their own.

Most managers at Baptist Health Lexington report the positive aspects of a multigenerational workforce. Leaders learn to develop and reinforce a culture accepting age diversity among their own staff members. Managers, for instance, have regular department meetings, where they discuss the need for everyone to be focused on the end goal yet maintain some individual perspective and input about how to achieve results. The message is: What employees value personally may be different, "but everybody here knows that what we're trying to do is be the very best we can to create a safe environment for our patients," Sisson says. "We may implement the strategies differently, but the generations of employees know the end goal: caring for the patients as we would our own families. That simple goal translates well to all employees of all ages."

Create a flexible environment.
Whether it's allowing telecommuting, flexible schedules or more personal paid time off, healthcare organizations must be willing to adapt to generational work styles and preferences. "Our organizations have to figure out now how we create compensation and benefits packages that are attractive to Generation Y because they have different expectations," Diegel says.

One approach to compensation may be to offer a set of standard benefits and some benefits a la carte, he says, giving employees flexibility in how they buy health, dental and vision benefits.

Baptist Health Lexington will be implementing a new paid time off policy next year. Rather than separate PTO into sick days and vacation days, the policy lumps both together, and employees can use the PTO more liberally. The new policy was implemented based on requests from employees, particularly those new to

the organization, according to Sisson. Additionally, some employees can choose from different shift lengths, such as working 40 hours over four days rather than the traditional five. "We try to accommodate as much as we can, and our leaders have adopted flexibility when possible," Sisson says.

Developing nontraditional career opportunities also is important to new generations of workers. For example, the traditional career track for nursing leadership is to move from a clinical care nurse role to a charge nurse, nursing supervisor, nurse manager and on up the administrative career ladder.

"But not everyone wants to follow a traditional leadership track," Berdan says. Consequently, Texas Health Resources developed career development programs that allow nurses to expand their careers by gaining additional experience at the bedside. A clinical care nurse may work on a medical-surgical patient unit and then perhaps move to the ED or the OR.

Listen, then act—quickly.
All employees want their opinions to count, but younger generations in particular vocalize their preferences and expect their organizations to act. Texas Health Resources has a "You Said, We Did" program, which, Berdan says, means, "we get

feedback, and we act on it." The program was initiated a few years ago in response to an annual employee engagement survey.

The "you said" requests can be local to a facility, such as a wish for new carpeting and paint for a patient unit. That request is plugged into the health system's work order system, the work is implemented and then managers follow up with the employee group that made the request to ensure satisfaction, Berdan says.

The health system is currently implementing a no-rating employee performance review, which provides

> **"Everybody here knows that what we're trying to do is be the very best we can to create a safe environment for our patients. We may implement the strategies differently, but the generations of employees know the end goal: caring for the patients as we would our own families. That simple goal translates well to all employees of all ages."**
>
> —William G. Sisson, FACHE
> Baptist Health Lexington

ongoing, in-the-moment feedback to employees about current activities, goals and outcomes, Berdan says. He compares the approach to coaching a sports team—feedback is provided in the moment before the next play rather than in a retrospective review on video later on.

"Performance feedback that is one time a year and sort of a retrospective review is really not relevant with people anymore, particularly the younger generations," Berdan says. "They want more frequent feedback."

Anton uses a professional development plan with some of his leadership team to ensure they have outlined a clear road map to success. The one-page plan lists both professional and personal short- and long-term goals along with planned competencies. Anton meets with the staff member regularly to review the plan and intends to roll out the plan more broadly within his span of control.

"We recognize that if we want to recruit and retain top talent, we are going to need to invest in their growth and development," he says.

Provide leadership opportunities for all.
Dismissing the leadership potential of those under 30 means likely missing a tremendous opportunity to cultivate new ideas and new approaches to solving problems, Anton says.

By providing official mentoring and leadership training programs at the beginning stages of employees' careers, organizations can harness talent early on and take advantage of millennials' desire to rise quickly within an organization.

For example, Caldararo started her position at age 23. By 24, she was overseeing the transplant services program when her director went on maternity leave for several months. Caldararo credits Thomas Jefferson University Hospitals' administrative fellowship program with giving her the skills and credibility to succeed, and her supervisor for giving her the opportunity in the first place. The fellowship is a one-year postgraduate position that provides experience and leadership opportunities in operations across the health system.

Such programs, in addition to mentoring by experienced colleagues who provide guidance, help to produce loyal, extremely talented leaders, Anton says.

"You have to make sure you have the right organizational structures in place that are going to help develop, mentor and retain employees or they likely won't stay or reach their full potential," he says.

Leverage social media tools.
Many of today's early careerists grew up using social media platforms such as Facebook. It's only natural, therefore, to extend that use to their professional world. Diegel says some organizations even use Twitter internally to communicate with their employees.

Using social media is important for both internal and external communication, especially for recruiting and marketing, Berdan says. Texas Health Resources hosts a YouTube channel that is used for such purposes.

Berdan adds that it's important to use leaders and other employees from within the organization, rather than actors or models, to deliver the messages. These representatives from the organization also should reflect the diversity of the organization in terms of gender, ethnicity, age and experience level, he says.

Leading the Future
A widely held but perhaps inaccurate view about the healthcare industry is that because of the importance of its services, it cannot be compared with other industries and has to use unique approaches to management, says Diegel.

"We're different, but we're really not that different," he says. "We can be more courageous in how we lead and take more risks to figure out what works well for our complex matrix of a multigenerational workforce."

Today's healthcare leaders have a lot on their plates, but Anton believes managing that transition of leadership from one generation to the other will need to be just as much a priority as managing the transition from volume to value or other transformative changes seen in the healthcare field.

"This transition will happen whether we proactively manage it or not," Anton says. "The degree to which we can leverage our past, and all that expertise and experience, and the degree to which we can bridge this transition will be instrumental to how we're set up for success in the future."

Karen Wagner is a healthcare freelance writer based in Forest Lake, Ill.

Editor's note: There are many resources available to put your leadership abilities to further use to help develop and strengthen future leaders. ACHE's Directory of Postgraduate Fellowships is one resource. Visit **ache.org/Postgrad** for more information.

> "They're not going to be tied to their desk or their job, and that's a learning curve for those of us who have been working for a while."
>
> —Cindy Brubaker, EdD, RN
> Bradley University