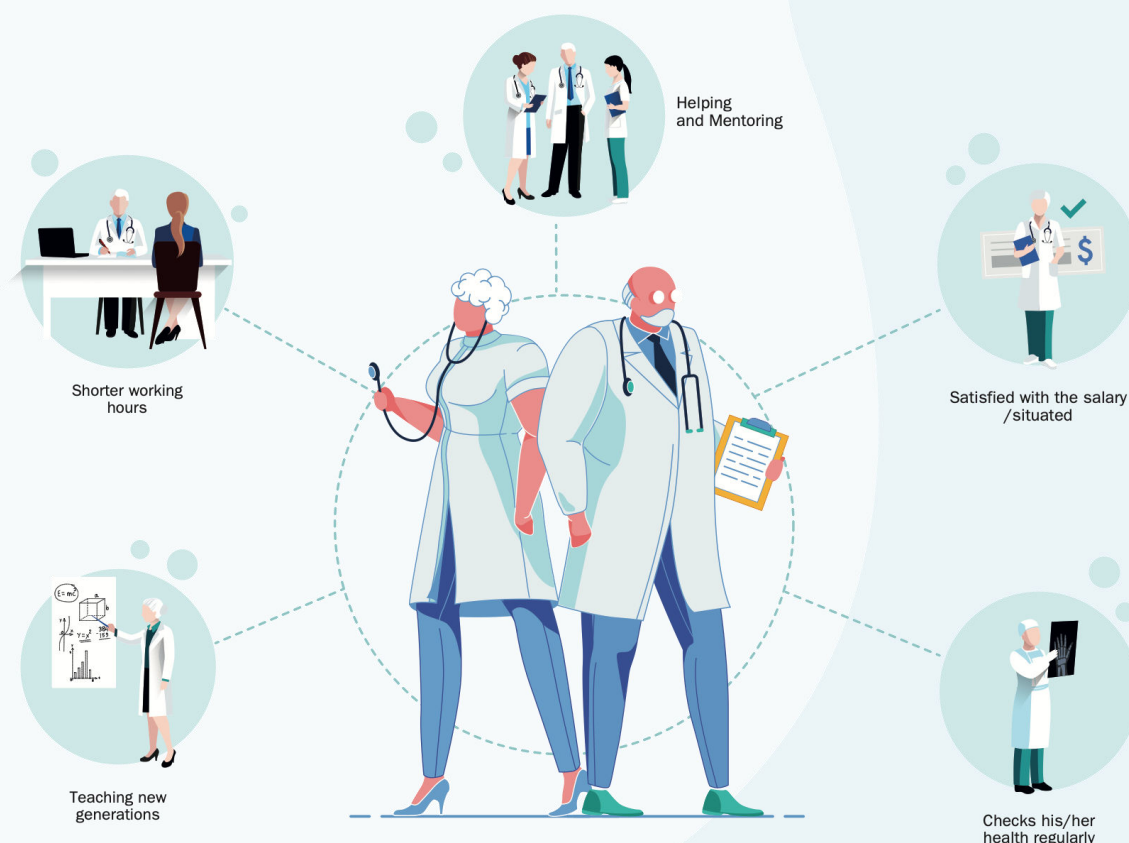


HEALTHY AGEING FOR HEALTHCARE PROFESSIONALS: A TRANSITION TO A NEW ROLE IN RETIREMENT

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Introduction

The aim of this review is to describe the impact of ageing for healthcare professionals and to provide guidelines to healthy transition to the retirement. Croatian healthcare professionals are aging and working in working sector that is in the top three most hazardous due to occupational diseases and accidents at work.

Methods

Literature review was made in PubMed database, searching only English and Croatian language articles with MeSH terms: Healthy Aging, Aging, Physicians, Chronic Diseases, Retirement, Occupational Diseases, combining with key words: healthcare workers, work ability, professional diseases. Registry of Occupational Diseases and Registry of Accidents at Work were searched to identify relevant data on occupational diseases and accidents at work in healthcare and social services sector.

Results

The data from the 2018 Registry of Occupational Diseases report showed that out of 80 recognized occupational diseases, 27 of them were from the healthcare and social services sector making the highest rank. The average duration of exposure time was 20.35 years. 42.5 – 59 years of age.

The data from the 2018 Registry of Accidents at Work report for the healthcare and social services sector showed that out of 1775 recognized accidents at work, the majority were healthcare professionals in the age

group 51-61 (32-51%) and the following was the age group 41-50 (24.56%). No data were available on Croatian healthcare professional's other aspects of health (chronic or work-related). Our review showed that the clinical ability can be compromised with reduced muscle strength, visual and auditory deterioration, which are physical issues, related to ageing. Accumulation of chronic diseases further reduces capacity. Cognitive decline is particularly important, as good medical care requires considerable cognitive function.

Here we present, the most significant recommendations how to make healthy transition in to the retirement: 1. Adjusting clinical practice to compensate for age, reducing work-load, consider slowing down in aspects of practice that require rapid cognitive processing, 2. Continuing late professional development – mentoring, teaching, contributing to professional organizations, 3. Health and well-being -maintaining a healthy lifestyle with regular health check-ups, 4. Actively and positive assisting their members to transition successfully into changing work roles towards the end of their professional life, 5. Financial health continuing working in private health sector, working part time with reduced taxes.

Conclusion

Based on literary review the most significant recommendations were emphasized to preserve health and work ability.