

What is senior competence?

English summary of Hva er seniorkompetanse? Fafo-rapport 2016:21

Fafo, in collaboration with St. Olav's Hospital in Trondheim, has carried out a project on senior competence in 2015/2016. St. Olav's Hospital is a university hospital in Sør-Trøndelag County. By the end of 2014 St. Olav's Hospital had approximately 10 000 employees, of whom approximately 2,300 were more than 55 years of age, and thus defined as older workers or *seniors*.

Active ageing is about recognizing and valuing senior resources in working life. A step towards this goal is to promote an awareness of the potentials and resources of older employees, and thus prevent forced early exclusion from working life. If age and experience make older workers valuable in working life, we need to understand in which ways this “senior competence” is valuable.

The competence of seniors is valuable for enterprises as being more than, and different from, the theoretical knowledge of e.g. employees straight out of schools and universities. In addition to the theoretical knowledge, seniors have practical knowledge acquired through experience. Bo Göranson (1990) argues that the practical and tacit knowledge of experienced workers is a necessary resource for good production. What this practical and tacit knowledge consists of and how it is being used needs to be explored in a workplace setting as it will vary with types of jobs and work tasks.

The empirical data for this exploration is a series of group interviews with a total of approximately 400 employees from all parts of the hospital over a period of three years. In addition, eight individual interviews were conducted to ensure that all professions and functions were covered. The questions discussed were: “What are the particular *senior competences* in this workplace and how/when is it being used?” and “When is high age and long experience an advantage in the performing of one’s job?”

Engaging older workers to describe and to discuss what «senior competence» means in their daily work, allowed us to capture and define a wide range of types of competences. Senior competence consists of several components, and goes beyond the most common definitions of competence. Based on the study at St. Olav's Hospital, we found that senior competence consists of experience based competence, professional competence, social competence and methodological expertise. Some factors were associated with aging, such as what stage of life you are at, understanding society, values and attitudes that characterize the present generation of older workers, and age-specific references (generational competence). In addition, we found that seniority is different from work experience, and contributes to a specific kind of competence in the workplace. Although some of these components can

partly overlap, and it can be difficult to draw clear-cut lines between them, they still contribute to senior competence in their own particular ways.

It is important to acknowledge that not all older workers possess all these components. Age is no guarantee for wisdom and senior competence is *individual*, i.e. it differs from senior to senior. A second aspect of senior competence is that it is *relational*, i.e. it appears in the interaction with others. A third important point is that senior expertise is *contextual*, i.e. it is dependent upon the specific setting in which it is expressed. Settings are necessary to understand senior competence - nothing happens in the generic “workplace”, but within specific workplaces with specific people doing practical work. This report explores and identifies how senior competence is expressed within a large hospital. It is characterized by the type of work performed and the professional groups that perform the work. The elements, or components of senior competence, may be generic, but how these are expressed is dependent on the practical workplace settings.