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Working with Generations in Emergency Medicine Toolkit

Introduction

The present day workforce in the emergency department is unique in that it is comprised of four different generations of physicians: the Traditionalists (1925 – 1945), the Baby Boomers (1946 – 1964), Generation X (1965 – 1980), and the Millennials (1981 – 2000). The competency of this diverse group of physicians to provide optimal health care is unfathomable; however, the generational differences in perspectives and work values that exist have the potential to create conflicts and tension within the workforce. With the existing stressful environment of the ED, there is no doubt that distinguishing methods to mitigate work conflicts and tension are essential and beneficial to not only the provision of emergency care, but also to the retention and recruitment of EM physicians.

This toolkit is designed to stimulate discussion about the assets and challenges of working with multiple generations in emergency medicine. The toolkit contents are designed to start a dialogue and not necessarily provide all of the answers. We look forward to hearing your input on positive strategies you are using to maximize the benefit of working together.

Living through the same political and social events, and experiencing similar parenting styles in childhood, each cohort includes members with similar personal and professional values, work ethic, communication preferences, and leadership styles (Howell et al. 2009; Mohr et al. 2011). For example, the Silent Generation (also known as Traditionalists or Veterans), greatly influenced by the Depression and WWII, are often described as loyal, hierarchal, patriotic, and altruistic. Baby Boomers were raised during a time of economic growth and prosperity. However, due to the large size of this cohort, while considered optimistic, they are also very competitive. Gen Xers were the first of the "latch-key kids" and therefore are independent, question authority, and are more casual in their approach to work and life. Millennials (also called Generation Y or Echo Boomers), brought up in child-centered families, and always having technology available to them, are more globally aware, team-oriented, and technology savvy (Howell et al. 2009; Mohr et al. 2011). Baby Boomers are often described as "living to work", while Gen Xers "work to live," and Millennials "work while living." (Schmidt et al. 2011). These generational differences are a potential source of conflict in the workplace. Table 1 summarizes the characteristics of each group.

Recent data from the Association of American Medical Colleges (AAMC 2014) shows that there are currently about 830,000 active physicians in the United States, with emergency physicians (EPs) numbering about 37,000. Of these, 34% (12,638) are age 55 or older (Silent Generation

and Baby Boomers). At the other end of the spectrum, approximately 5,600 residents and fellows are currently in training (mostly Millennials with some late Gen X). Women in emergency medicine (EM) account for 25.5% of the current workforce, and 37.5% of the physicians in training (AAMC 2014). Academic medicine is especially likely to have all four generations working together. Because the Silent Generation's identity is their work, many continue to hold positions as emeritus faculty. (Howell et al. 2009). Baby Boomers, taking a page from their book, are also putting off retirement. Reasons proposed for this include a feeling of "not being old," they can't financially afford to retire, and they enjoy the power associated with their work and leadership roles. (Gilhooly & Gilhooly 2009). This delayed retirement has the unintended consequence of decreasing the number of women in leadership, inducing a lack of succession planning, and causing dissatisfaction in the younger generation ready to assume leadership roles (Mohr et al. 2011). The leadership positions are mostly held by Baby Boomers, while Gen Xers are relegated to midlevel positions (Mohr et al. 2011). Understanding the different preferences and frames of reference is essential for collaboration and teamwork (Bell 2013).

Emergency Medicine in particular continues to be a male-dominated field. (Keyes 2008) Despite the fact that medical school classes are now 47% female, the number of women choosing emergency medicine as a career is proportionally lower. (AAMC 2014; Clem et al. 2008) While 75% of women in EM are satisfied with their career choice, (Clem et al. 2008) younger women may avoid this career due to a perception that the field is more suited to men (Pelaccia 2010). Gender and generational differences are a barrier to the much-needed recruitment of women into the field.Women in leadership have additional barriers. Many employees expect women managers to be more sympathetic to personal and family issues (Bickel 2012).

Women often feel they must change their behavior when being authoritative, while men are able to adopt more easily to an authoritative style (Kolehmainen et al. 2014).) Men tend to be more direct in their communication, whereas women are more indirect (von Hippel et al. 2011) Communication styles are perceived differently by the generational cohorts, but generally this indirectness is considered to be a sign of incompetence by Baby Boomers and indecisiveness by Gen Xers and Millennials. Understanding the differences among the generations, especially the values and preferred communication and management styles, is an important step in the recruitment, retention, and advancement of women in emergency medicine.

Generation	Birth Years (age in years in 2014)	Influencing Events	Childhood parenting style	Personal characteristics	Management style
Silent Generation	1925-1945 (70-90)	Great Depression; WWII	Traditional family, married young, divorce rare	Loyal, patriotic, value hierarchy, "company man"	Chain of command
Baby Boomers	1946-1964 (50-69)	Post War prosperity, Viet Nam war, Civil Rights, Space race, TV	Traditional family, many "stay-at-home" mothers	Optimistic, competitive, desire personal gratification	Service-oriented, self-centered, judgmental
Generation X	1965-1981 (34-49)	Political scandal, AIDs, Increase in divorce rate, computers	"Latchkey" kids, single parent homes or both parents working	Independent, more accepting of diversity, informal	Not intimidated by authority, self-command, direct
Millennials	1982-2000 (15-33)	Globalization, terrorism, instant technology	Child-centric, "helicopter parents"	Optimistic, collaborative, polite, need praise	Global view, technology use expected, collaboration

Table 1: Characteristics of generational groups [Lieber 2010; Shaw 2013.]

Team Stepps® Communication Model

TeamSTEPPS® is a popular and validated model to teach teams to communicate in their focus on patient safety. The triangle figure illustrates the four trainable teamwork skills. These are:

1.   Leadership.

2.   Communication.

3.   Situation monitoring.

4.   Mutual support.

TeamSTEPPS® has been shown to achieve improvement in three areas:

1.   Performance.

2.   Knowledge.

3.   Attitudes.

Following TeamSTEPPS® can also provide a framework for positive intergenerational communication by promoting training in the four teachable skills. Resources and free courses are available both online and in person by consulting **https://www.ahrq.gov/teamstepps/ images/tslogotxt.html**

https://www.ahrq.gov/teamstepps/instructor/essentials/pocketguide.html#keyprin
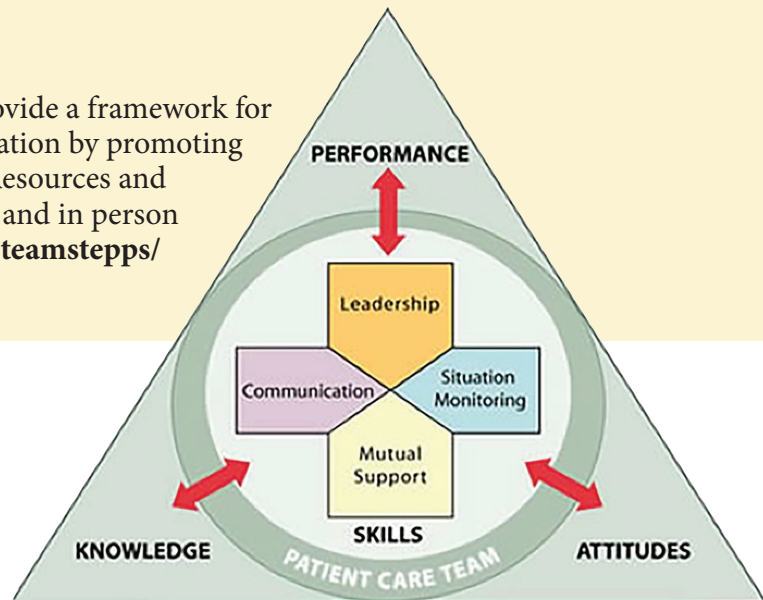
ACEP Member Survey Results

We distributed a survey to members of the American College of Emergency Physicians using Qualtrics®. The survey data was collected after 10 weeks and analyzed using STATA (n=696).

Table 2. Proportion of physicians responding by age and gender

Age	Gender		Total
	Male	**Female**	
18 – 25	7 (1.68)	10 (3.57)	17 (2.44)
26 – 34	84 (20.14)	74 (26.43)	158 (22.67)
35 – 44	97 (23.26)	84 (30)	181 (25.97)
45 – 51	58 (13.91)	49 (17.50)	107 (15.35)
52 – 70	158 (37.89)	62 (22.14)	220 (31.56)
Older than 70	13 (3.12)		13 (2.01)
Total	417	279	696

More than 70% of respondents observed conflict in the workplace that they attributed to generational communication. Their observations were coded to develop "conflict categories" and highlights of that analysis are presented below.

Agreement of Themes by Age
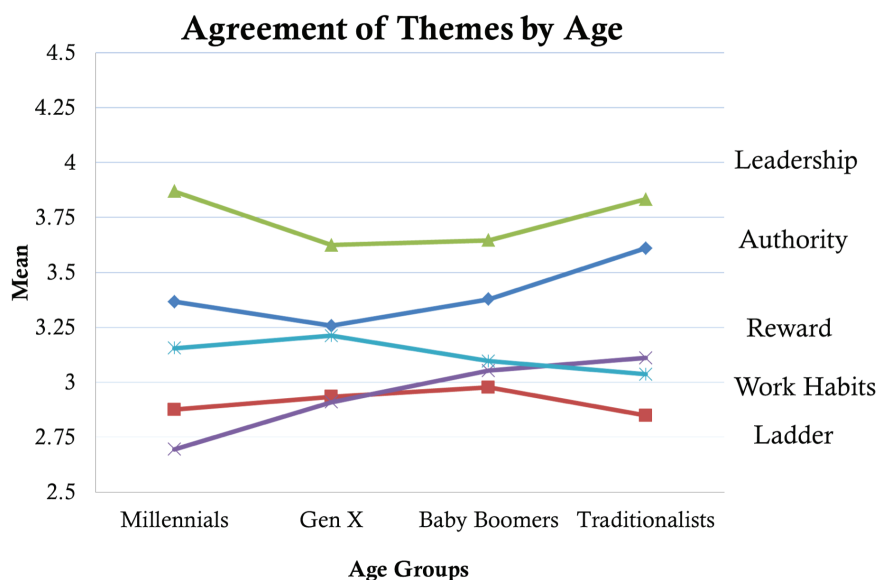
Results Summary

This project was performed to elucidate areas of conflict between different generations of physicians in the ER and serve as an empirical study to confirm the opinions and values of the generations. A close analysis of the survey revealed a number of themes that were of statistical significance in distinguishing differences between generations. Authority, rewards, and work habits were among the validated themes that were highlighted in the survey results.

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Table 3. Potential Categories of Conflict between Generations

Theme	Statement	Mean (SD)	n	Age Mean (SD)				H test probability
				18 -34	35-51	52-70	Older than 70	
Authority	I would be comfortable reporting to someone who is younger than myself. [AUTHORITY]	3.90 (0.80)	405	3.75(0.08)	3.75(0.07)	4.13 (0.06)	4.11 (0.26)	< 0.01
	Authority figures always command my respect. [AUTHORITY]	2.77 (0.99)	404	2.99(0.12)	2.76(0.08)	2.63 (0.08)	3.11 (0.35)	0.04
Ladder	I consider the opinions of people with more experience as more influential than those newer to the field. [LADDER]	3.42 (0.87)	404	3.40(0.08)	3.53(0.07)	3.30 (0.07)	3.56 (0.41)	0.05
	Loyalty to a specific employer is key to success. [LADDER]	2.45(0.94)	402	2.35(0.10)	2.34(0.08)	2.66 (0.08)	2.14 (0.34)	0.01
Leadership	Leaders call attention to what others can get for what they accomplish. [LEADERSHIP]	3.33(0.76)	401	3.51(0.08)	3.28(0.06)	3.27 (0.06)	3.56 (0.24)	0.06
	I appreciate receiving critical feedback to improve my performance. [LEADERSHIP]	4.05(0.70)	402	4.22(0.06)	3.97(0.06)	4.02 (0.06)	4.11 (0.20)	0.08
Reward	Maturity comes with age and experience. [REWARDS]	3.68(0.89)	404	3.39(0.10)	3.69(0.07)	3.86 (0.07)	3.56 (0.30)	< .01
	Years of service are the most important criteria for promotion. [REWARD]	2.16(0.84)	405	2.00(0.09)	2.13(0.07)	2.25 (0.07)	2.67(0.44)	0.06
Work habits	Nothing is impossible if you work hard enough. [WORK HABITS]	3.40(1.19)	405	3.45(0.13)	3.57(0.09)	3.21 (0.10)	3.00 (0.41)	0.03
	I feel uneasy when there is little work for me to do. [WORK HABITS]	3.20(1.06)	404	3.47(0.10)	3.22(0.08)	3.01 (0.09)	3.33 (0.33)	0.02
	Younger people tend to be in a hurry and take too many shortcuts. [WORK HABITS]	2.86(0.96)	404	2.55 (0.09)	2.83(0.08)	3.07 (0.08)	2.78 (0.32)	< .01

Note: Comparison test calculated using Kruskal-Wallis H test. P < 0.05 considered significant.

Authority

The statements regarding issues of authority questioned the typical nature of Baby Boomers and Traditionalists to conserve the hierarchy in the work force, with a committed respect for physicians who are more experienced (Lieber; Phelan). The results of the survey not only verify the value and respect that older generations place on individuals in positions of authority, but also clarify a common misconception that those authority positions may be held by older physicians. This finding is important as it clarifies that Baby Boomers and Traditionalists are respectful of authority figures who may be younger than themselves, and that the hierarchy of the system is independent of the ages of individuals in that system. As Gen X individuals agreed less with statements that acknowledge organizations and hierarchy in institutions, it confirms the characteristic given upon this generation that they distrust institutions and organization (Weingarten).

Reward

Baby Boomers and Traditionalists were more likely to agree with statements outlining experience and years in the workforce as deciding factors for rewards and promotions. The older generations are known to value dedication and commitment of long hours to their work (Phelan). Consequently, Baby Boomers in particular are more likely to be placed in positions whereby they may receive promotions and develop their careers (Moriarity, Brown and Schultz). The survey results for statements regarding how rewards and promotions are distributed, confirm the perception of the older generation. Though Millennials also agreed with these statements, they agreed to a lesser extent. These results validate the perceived inherent feelings of unfairness felt by the Millennials, who believe that they are viewed with less regard due to their lack of experience (Gursoy, Maier and Chi). Moreover, the potential for receiving promotions is limited by the current rewards system and the subjective nature by which they are distributed (Mohr et al.). The decreased likelihood of Millennials receiving promotions and rewards contributes to their decreased willingness to recognize experience as a requirement for receiving rewards, as is seen in this survey.

Work Habits

Younger generations value having a work-life balance, and dedicating time to their personal lives and work lives equally. As such, these individuals tend to heed strictly to the work hours they are given, and less willing to spend extra time at work (Phelan). Therefore, the perception that older generations have of younger generations is that they are not dedicating the appropriate amount of time to complete their work. The results of the survey show that Baby Boomers agree that younger individuals rush their work, and that perception is not shared by those who are part of the younger generations. These findings confirm the differences in work habits and values between the older and younger generations, verifying that the older generation sees medicine more as a vocation and the younger generation sees medicine simply as a job (Mohr et al.).

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Previous research has shown how engaging employees at work is becoming increasingly important (Solnet and Kralj). This finding is confirmed by the survey results indicating that Millennials are uncomfortable when there is little work to do. As such, while the older generation may perceive the Millennials as being too hasty with completing their work, being constantly busy with work is something of importance to Millennials.

Theme	Statement	Highest	Lowest
Authority	I would be comfortable reporting to someone who is younger than myself.	Baby Boomers/ Traditionalists	Millennials/Gen X
	Authority figures always command my respect.	Traditionalists	Baby Boomers
Reward	Maturity comes with age and experience.	Baby Boomers	Millennials
	Years of service are the most important criteria for promotion.	Traditionalists	Millennials
Work Habit	I feel uneasy when there is little work for me to do.	Millennials	Baby Boomers
	Younger people tend to be in a hurry and take too many shortcuts.	Baby Boomers	Millennials

Planning Tool for Promoting Positive Communication

- o   Developed from survey results

- o   Discussion guide to promote awareness and education regarding generational differences

- o   Activities that can be adapted for faculty discussions and team building meetings

Checklist for Examining Generational Conflict in Your Workplace

1. Review each statement and put an "X" in the appropriate column.

2. Select 5 statements that are issues in your department to develop a generational communication action plan.

Statement	Conflict Category	This is not an issue in our department.	This might be an issue in our department.	This is an issue in our department.
Keeping up with advances in medical technology is essential to making correct medical decisions.				
Younger people tend to be in a hurry and take too many shortcuts.				
Maturity comes with age and experience.				
I would be comfortable reporting to someone who is younger than myself.				
Years of service are the most important criteria for promotion.				
I learn best by watching others.				
Life is more meaningful with leisure time.				
Nothing is impossible if you work hard enough.				
It is important to stay busy at work and not waste time.				
I consider the opinions of people with more experience as more influential than those newer to the field.				
Opportunity for social interaction is a priority at work.				
I feel uneasy when there is little work for me to do.				
I am willing to spend time outside of work to participate in team-building activities with co-workers.				
Outcomes take priority over methods in my work.				
Authority figures always command my respect.				
One should always take personal responsibility for one's actions.				
I ask for help when I do not understand how to use new technology.				
A mentor is essential to succeeding in the workplace.				

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Statement	Conflict Category	This is not an issue in our department.	This might be an issue in our department.	This is an issue in our department.
When under stress, it is OK to raise your voice to make a point in the workplace.				
Loyalty to a specific employer is key to success.				
I devote time outside of work to helping others.				
It is essential to stay up to date with trends in popular culture.				
I work best with leaders who communicate a charismatic mission to nurture pride in the organization.				
Leaders should intervene only when problems arise.				
I appreciate being told what to do with as few words as possible.				
Leaders are most successful when they seek to understand the concerns of individuals.				
I am inspired by leaders who challenge assumptions to look at problems in new ways.				
Leaders call attention to what others can get for what they accomplish.				
Working as a team is the best way to get something done.				
Leaders should ask no more of others than what is absolutely essential.				
Conflicts are best managed by talking it out with other people.				
The best way to solve a conflict is to focus on a solution.				
I prefer to depend on the strength of relationships I've developed to resolve conflict.				
I prefer to quickly start working on the answer to a problem.				
I appreciate receiving critical feedback to improve my performance.				

Working in Fours Action Plan

1. Transfer the 5 items you selected in the previous exercise.

2. Follow the example to forge an action plan to address the issue.

WORK SHEET

Statement	What do Millennials need regarding this issue?	What do Gen Xers need regarding this issue?	What do Baby Boomers need regarding this issue?

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EXAMPLE

Statement	What do Millennials need regarding this issue?	What do Gen Xers need regarding this issue?	What do Baby Boomers need regarding this issue?	What do Traditionalists need regarding this issue?	List some steps the department might implement to address this issue.	Who will be responsible for implementing this action?
EXAMPLE: I communicate best using technology.	I prefer texts and video and social media. I'm skeptical about your expertise if you aren't on the internet.	I love meeting virtually and depend heavily on email or instant message.	Technology is important, but I think a memo is a more formal and professional way to communicate, but the phone is OK too.	I prefer the phone and meeting in person and I value privacy in my communication.		

What do Traditionalists need regarding this issue?	List some steps the department might implement to address this issue.	Who will be responsible for implementing this action?

Use these scenario guides in group meetings to generate discussions about how to promote intergenerational communication.

Scenario Discussion Guide

OLDER DOCS AND TECHNOLOGY

Dr. Traditional is Program Director for a well-respected and large ED. He prides himself on establishing a strong rapport with the residents, and frequently finds himself offering advice on all aspects of their lives including parenting and family relationships. This year he is growing in frustration because the residents are not talking to him as much. They all want his personal cell number so they can text and their texts are mostly focused on requests for schedule changes and not personal discussions. Residents use salutations like "Hey!" or use texting to let him know they will be late instead of calling on the phone. Dr. Traditional even had to ask a grandchild for texting lessons.

DISCUSSION QUESTIONS:
- How could this situation contribute to conflict in the ED?
- How is Dr. Traditional feeling?
- What does Dr. Traditional need?
- How are residents feeling?
- What do residents need in this situation?
- What is the best plan for patient care?
- Discuss some potential resolutions to this situation. What resources, policies or practices are needed to support positive communication between generations?

SPECIAL CONCERNS FOR WOMEN

Dr. Genex, a junior faculty member, would like her schedule to accommodate some sports activities of her children. This will limit the specific shift times she is able to work, leaving less desirable shifts for the other physicians. Dr. Boomer, her female medical director says "That is selfish and unprofessional. The group is counting on you. Your career should be your priority and you should be doing everything possible to advance that. Commitment is essential to your career."

DISCUSSION QUESTIONS:
- How could this situation contribute to conflict in the ED?
- How is Dr. Genex feeling?
- What does Dr. Genex need?
- How is Dr. Boomer feeling?
- What does Dr. Boomer need in this situation?
- What is the best plan for patient care?
- Discuss some potential resolutions to this situation. What resources, policies or practices are needed to support positive communication between generations?

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EM IS A SHIFT JOB NOT A COMMITMENT

A patient was unstable for at least 3 hours awaiting an ICU bed. Millennial resident and Gen X attending were working hard to care for them and communicate with the family as a team. At 6:55pm, the patient coded. The resident was involved for the first response, and at 7:00pm, said, "Oh, my shift is over right now, so I am leaving. I'll sign out the notification to the family members to Dr. X (oncoming resident)." The attending waited until the next day to give the resident critical feedback. The resident acted surprised, almost offended, by explaining "I had personal plans and needed to leave. You are always telling us to pursue wellness and my plans were really important. If you really needed me you should have said something or sent me a text to come back. I feel like you are yelling at me."

DISCUSSION QUESTIONS:
- How could this situation contribute to conflict in the ED?
- How is Dr. Gen X feeling?
- What does Dr. Gen X need?
- How is Dr. Millenial feeling?
- What does Dr. Millenial need in this situation?
- What is the best plan for patient care?
- Discuss some potential resolutions to this situation. What resources, policies or practices are needed to support positive communication between generations?

CONFLICT IN STANDARDS OF CARE

Dr. Boomer explains to Dr. Traditional that the current treatment guidelines are different than the care recommended by Dr. Traditional. Dr. Traditional says in a condescending tone: "if you really cared about the patient, you would treat them my way. I know there might be some suggestions for changes, but this way has always worked and I have some papers I can show you to prove it." Dr. Boomer says that he heard a podcast recently that disagrees and recommends newer medications.

DISCUSSION QUESTIONS:
- How could this situation contribute to conflict in the ED?
- How is Dr. Boomer feeling?
- What does Dr. Boomer need?
- How is Dr. Traditional feeling?
- What does Dr. Traditional need in this situation?
- What is the best plan for patient care?
- Discuss some potential resolutions to this situation. What resources, policies or practices are needed to support positive communication between generations?

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Summary

We outlined five key foundational themes that may be a source of conflict between groups. Moreover, the categorization of described conflicts outlines principal areas in which conflicts most commonly arise, providing a framework from which strategies to reduce conflicts can be developed.

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