

HOW TRAINING CAN HELP CREATE AWARENESS AND BRIDGE GENERATION GAP IN THE WORKPLACE

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ABSTRACT

This case study was carried out on a well-known local private healthcare provider with more than 25 hospitals nationwide and abroad. 10 hospitals participated in the study in 2017. Each hospital requires the service rating of above 4 out of 5 stars. Lately ratings for some had fallen below the minimum requirement and had caused management to work hard on finding the causes. Based on their findings, Generation Gap was identified as one of the major issues - old bosses and younger employees; bosses with twenty to thirty years' experiences under their belts and employees who are fresh out from college and also the experienced but burnt out ones. When you have a very diverse team, chances of stumbling into chunks of challenges are high. The organization believed via training, they could reach out to employees and make them aware of the issue and work on solving it. Failure to bridge the gap means failure in delivering premium service, which can result to losing customers loyalty as well as losing good employees. The 10 hospitals that signed up for the training wished to firstly, identify and acknowledge the core values and attributes of various generations. Secondly, to establish a new set of strategies based on the findings in order to get the most from each generation and to promote better teamwork. Lastly, to embrace new professional work culture, which promotes better understanding, rapport, communication and interpersonal skills as a team of the organization's excellent employees. An introductory course to study the effectiveness of training in solving this issue via 3 hours of intensive training was carried out. The module was designed based on the training needs analysis and a thorough study and meetings with the HQ management team on their Standard Service Procedure (SSP). Training session was conducted at each participating hospital under the HQ team's supervision and observation, whereby feedbacks were given instantly from both parties – them and us.

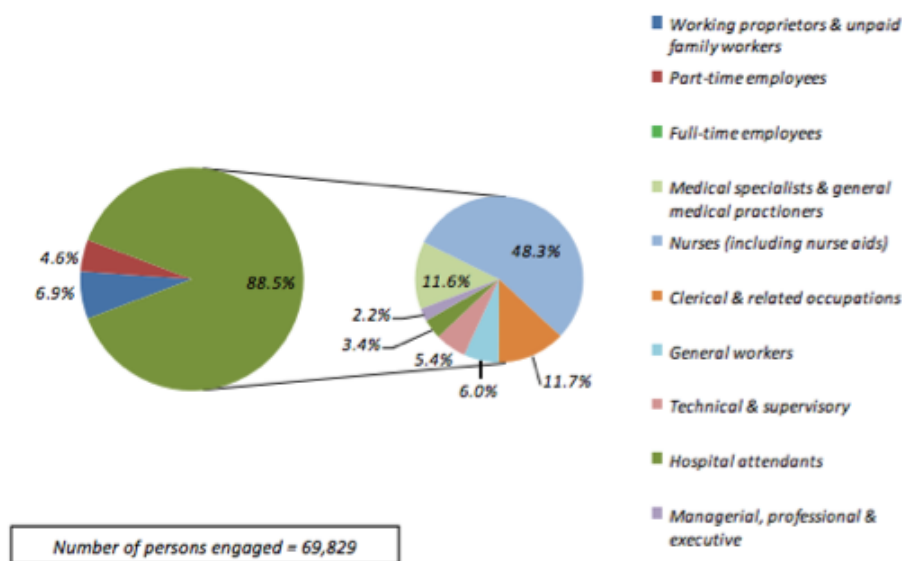
Key Words: Generation gap, service, training, employees, workplace

Introduction

1. INTRODUCTION

In 2007, 70,000 people worked in the private healthcare division in Malaysia and more than 40 per cent worked in the private hospitals (refer to Chart 1 below). The overall population in Malaysia at that time was about 27 million people; around 17 million were of the “working age category” (15 to 64 years old). There were around 195 private hospitals (MPC, 2018) with around 30,000 employees which was only 5 per cent from the total of working age population group yet the gross output from private hospital alone was a whopping RM4.2 billion (Populationpyramid.net, 2018).

Chart 1: Private Hospitals: Percentage of distribution of persons engaged by category of workers, Malaysia 2007

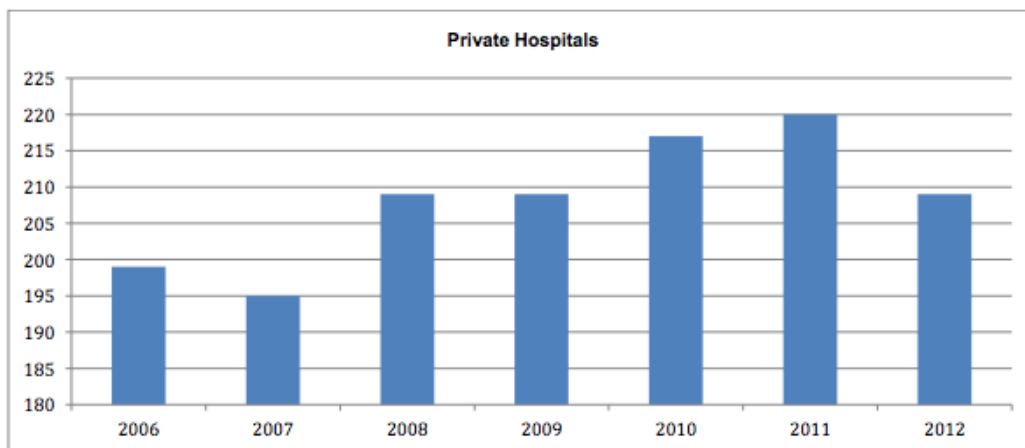


(2018)

From 2007 to 2012 there was an increase in the numbers of private hospitals nationwide – from 195 to 209 hospitals. In 2014, total gross output in the private hospitals had doubled as compared to 2007, from RM4.2 billion to RM8.3 billion. This came to show how this business was fast gaining interest from the public, and those who can afford it preferred private hospitals due to their premium service as compared to the government hospitals. Mainly because of the shorter waiting time, better and more comprehensive treatments from a pool of medical specialists. For those who could not really afford this healthcare luxury can now experience it through insurance medical cards either purchased on their own or via their employers.

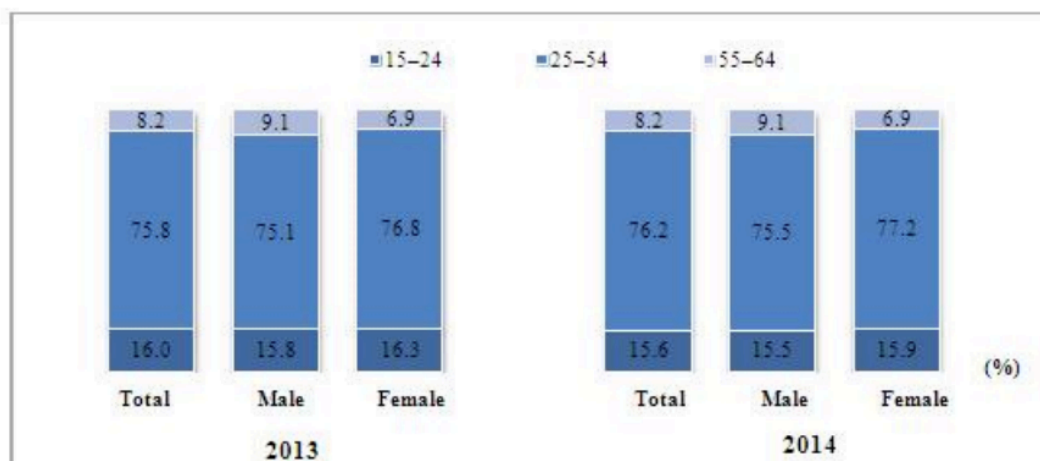
Despite of this phenomenal growth, the number of staff engaged did not grow at a similar rate to support the growth. During that period employees hired increased only by 50 per cent from 30,000 to 46,000 employees only. ("Department of Statistics Malaysia Official Portal", 2018) Why did they not hire more employees to meet the increasing demand? Can the abovementioned number of staff maintain the so-called premium customer service along with better variety of up to date healthcare products and services? How did they deliver tip top services when they had to handle more patients, more new products to learn about and not to mention to keep well-informed about new viruses and diseases and outbreaks that plague the hospitals? How did these hospitals train their staff to be of that calibre – to be able to handle any situation well that patients keep coming back even though the price is high? What were their challenges?

Chart 2: Registered and Licensed Private Hospitals, Malaysia 2006 – 2012
(Source: MOH-Health Fact 2007 – 2013) (MPC, 2018)



In order to answer all these questions, it is viable to ask this significant question first - who were these employees? Between 2013 and 2014, majority of the people employed were between the ages of 25 to 54 years old. They were made of a team of fresh graduates and those who had been working for more than 20 years. How did they work together when their age gap was so wide? What were the challenges encountered by them in working together to achieve the organisations' goals?

Chart 3: The percentage of employed persons based on age groups and sex, Malaysia 2013 and 2014 (DOSM, 2018)



In 2025, it was forecasted that those born after 1980s would make up more than 75 per cent of global workforce ("Generations: Demographic Trends in Population and Workforce", 2018). In United States based on the findings in 2016, there were more employees aged between 21 and 36 made up their workforce and the number was growing (Fry & Fry, 2018). What will this change of workforce scenario do to organisations? How do the older generations cope with the increasing numbers of younger employees and the shrinking number of their own at the workplace? Will the huge gap in the age groups create more challenges or will it create more benefits to organisations? Will there be drastic changes in doing business?

In this study, the issue of diverse workforce in a private healthcare organisation in Malaysia will be analysed specifically on multigenerational workforce. Does the issue of multigenerational lead to more pros or cons? How can the organisation leverage on such workforce to create more values to the patients and employees as well? This study shows how the right training can create more positive outcomes to the issue of multigenerational workforce that can be implemented by any industry

2. DEFINITION

Key words used in this case study:

2.1 Generation gap – Thoughts, values, sentiments and perceptions that do not synchronize between the two different age groups, which can either be between a younger and an older generations. In this case study three generations were analysed mainly the baby boomers (BB), Gen X and Gen Y.

2.2 Service – Imperceptible goods such as healthcare treatment and care that one received when one is ill or the results of the accounting on one's income tax. In this case study, we looked into a private hospital premium customer service being affected by the generation gap.

2.3 Training – Structured event participated by people who need to acquire more knowledge or skills. The case study analysed how training affect certain issue involving service quality.

3.4 Employees – People hired based on agreed contract. In this case study, we analysed employees that participated in the training.

3.5 Workplace – Premises where employees perform their job and tasks. Each hospital involved was analysed as participants' workplace.

3. CASE PRESENTATION

In January 2017, The Learning Annex Sdn. Bhd. (TLA) was invited again by our client, a prominent private healthcare provider in Malaysia to send in a proposal to address the issue of customer service in their hospitals. Founded in early 1980's, they had more than 12,000 employees and over 1000 medical consultants to serve 2.5 million outpatients and more than 270,000 inpatients in 2016 alone. TLA first collaboration with ABC Healthcare Group was in 2016. TLA was chosen to deliver a series of training entitled "The Language of Customer Service" to 8 of their hospitals. In 2017, they wanted us to propose a training that can further enhanced staff's teamwork.

3.1 Problem Statement

They aimed to achieve a 5-star rating on their overall Customer Service surveys done externally and internally. Although based on the 2016 achievement of 86.1% on the Customer Service satisfaction from patients' feedback most hospitals still fell below the 4-star benchmark as they encountered many internal issues. There had been many meetings and discussions held to gather information and data on this issue through feedbacks and findings from the management and the heads of customer services and other departments throughout the hospital chain. Some of the factors identified were as follows:

1. Communication - Unable to communicate effectively with each other due to work positions, differences in age, race and education background. Communication breakdown happened both internally and externally, which did not only jeopardize relationships but hospitals' revenue as well.
2. Teamwork – No dynamics to work as a group due to the communication problem. Not enough guidance from the bosses and not enough support from their colleagues. Different understanding on work approach, some prefer to work individually while some need others' support to excel. Can cause confusion to patients who depend on the team to heal them. If not addressed immediately, could cause patients' disloyalty.
3. Low self-esteem – Not motivated to work effectively because the support needed was missing. Staff complained of overworked and underpaid. Bosses kept pushing for better results while staff were left to fend themselves. If the issue is not tackled immediately hospitals could lose good employees and could incur more expenses on hiring and training new ones.

Before they could achieve the 4 to 5-star rating internally, a few strategies had been planned out. One of them was to reach out to all the employees at the hospitals through training. Due to the huge number of employees they have and the urgency to remedy the situation, management had ask TLA to come up with a very effective course that can create awareness and at the same time bring the spirit of teamwork back in the company again.

3.2 Programme Description

Based on the feedback gathered by the management team, it had been agreed by all parties involved that one of the reasons there was not a great teamwork was due to the diversity in their team. TLA had proposed a training to address one of the variances – the age factor which was also identified as “the generation gap”. The training that was approved by their HQ was entitled “Leveraging on the natural potential of the Gen Y to promote excellence in the service industry”. It was a 3-hour intensive training delivered in a workshop style.

3.2.1 Partners

The Learning Annex Sdn. Bhd. (TLA) together with the client’s college had proposed to conduct an introductory intensive training in order to justify the above findings. HQ sent a group of their executives to sit through all the training sessions and give immediate feedback to TLA and their college, and the personnel of the hospitals involved. One representative from their Board of Directors was also present most of the time. Each hospital was responsible in preparing the training venue, refreshments and trainer’s food and board and travel arrangements. The client’s college would liaise with TLA for all secretariat matters.

3.2.2 Design

The objectives were for participants to be able to:

1. Identify and acknowledge the core values and attributes of various generations
2. Establish new strategy based on the findings in order to get the most from each generation and to promote better teamwork
3. Embrace new professional work culture, which promotes better understanding, rapport, communication and interpersonal skills as a team of the organization’s excellent employees.

When the course was opened to all the 25 hospitals, 10 hospitals signed up and on average about 400 participants proposed to attend it. Hospitals chose the proposed dates through the client’s college. All 10 dates were booked right at the beginning, which enable TLA to plan on how to handle each hospital’s expectations and other related issues ahead of time.

Pre-Training: Each hospital would give some information on their specific issues with regards to generation gap during a brief training need analysis done at pre-training. Some of the expectations conveyed as seen in the table below

Table 2: Issues, expectation, suggestions and observations
(Source: The Learning Annex Sdn. Bhd)

A. Issues	B. Expectations	C. Suggestions	D. Observation
1. Unapproachable Boss and always pushing for more	1. Bosses should understand where we were coming from and our limitations	1. Bosses should attend similar training and listen to staff’s predicaments	1. Bosses were older (Gen X & BB) and employees were fresh graduates (Gen Y)
2. Younger colleagues twiddling with the hand phone during working hours and in front of patients	2. More face-to-face interaction and limit usage of phone to break times only. You need to listen sometimes.	2. Management should limit the usage of hand phone during working hours	2. Older staff (Gen X & BB) treating hand phone as the traditional telephone and not multifunctional where one can do work on
3. Younger staff felt bored and lost with their job tasks	3. Each task should come with a purpose “What with Why” versus “Do as I say” so that we can fully own it	3. Include the younger staff in important meetings so they can also contribute from the beginning of each task and project to ensure full understanding	3. Gen Y felt left out while older gens felt they were too young to be given more responsibility at a higher level. They should earn the experience
4. Company limited the	4. We need connect with	4. Free and fast speed Wi-	4. Gen X & BB felt

usage of wifi among staff and social media is a taboo.	each other and with patients fast, all the time and anytime so lets get online. Enough of pen and paper feedback	Fi access for staff and patients. Use technology to connect the team and the patients they serve	threatened by Gen Y's knowledge and experience on technology and made them felt inadequate. Gen Y felt 'not at home' working in an environment where Wi-Fi was a foreign word.
5. Too many emails, memos and meetings. When do we actually work?	5. Forget formality and long winded sentences. Keep it short and friendly. We have no time to read and write emails and memos. We hardly open our mailboxes.	5. Use faster and shorter mode of communication via instant messaging etc. where shorter messages were used and straight to the point	5. Gen X & BB were still doing work the conventional way while Gen Y expected speed and accuracy as they have access to more data and info which change the way business was handled

3.2.3 Implementation

During Training: In general, participants were given 3 activities to help enhance their learning process. The activities were as follows:

1. Ice-breaker: A video on a fun children song entitled "The more we get together" was played for the participants at a high volume to lead them into the theme "Teamwork, regardless of any differences". They were then asked to sing it. After that they were asked to stand up and clap their hands while singing the song to their friends in the room. By this time, they were all hyped up and friendly to each other. Then they were taught a simple step of a mambo dance by the trainer. Once they could do the steps on their own, a mambo song was played to get them dancing. During the activity, trainer introduced one new step to challenge and disrupt their routine. This activity created a lot of buzz among them and suddenly not being able to attempt something new did not cause them to be distressed but to laugh and keep on trying till they could.

2. Introduction: Participants were properly introduced to the trainer then briefed on the topic, objectives and activities they were expected to participate. The outcomes expected were spelled out right there and then to motivate them to contribute till the end.

3. What's The Big Deal: Participants brainstormed on issues that could hinder them from giving a premium customer service to each other and to patients. They then brainstormed on what could actually be the main reasons? When all unanimously agreed that the age factor played a huge role in making their quality of work to falter, trainer introduced the 4 known generations by "Age Cohorts".

4. Analysing the 4 Generations: Each gen was given a simple set of numbers each (which roughly marks the beginning and the ending of each generation group) and a public figure born in each generation group to help them understand the characteristics better and for easy remembrance. They were as follows:

- a) BB-1946-1964-Bill Clinton-Steve Jobs-Good life-Idealistic
- b) Gen X-1965-1984-Friends-Independent-Self-starter
- c) Gen Y or Millennial -1985-2005-Mark Zuckerberg-Google-Selfie-Selfish

At this stage, participants were regrouped based on their generations after they went through a game of "We are the same". At the end of the game they were asked to find people who were born within the same generation brackets as them. It was interesting to see how they were happy to be placed with people who were similar to them especially within a similar age group.

5. Core Values, needs and expectations: Each group came up with their own SWOT analysis, which they then presented with gusto. They learned about each generation core values, needs and expectations. After each value or need or character mentioned and explained by the trainer, feedback (voluntarily) from each group agreeing with each category could be heard in both positive and negative manner!

Since Gen Y was the star of the day, more focus was on them. A more intense understanding on their strengths helped others to see how they too can leverage on Gen Y's natural potential to improve the quality of their service.

6. O.M.B.R.E. Theory: This theory invented by TLA's founder helped other generation groups as well as Gen Y to meet halfway by understanding what Gen Y's strengths are, their potential and on how to approach them so they can shine and help others to shine too.

7. 5 T's Strategy: Trainer presented this strategy, which was also created by TLA's founder as a tool to guide and promote continuous progress in bridging the gap among the generations by each hospital. Participants were also asked to come up with their own 2 strategies that they would carry out both as a team and individual to achieve their set goals to communicate, work and serve others better regardless of age groups.

8. Conclusion: Each participant from each group vowed to implement the 2 strategies that they had identified as vital in changing the mind sets of their colleagues just as how they had changed theirs. A better understanding of the phrase 'generation gap' and had been achieved and how it can make or break a team. Realisation on each employee's role to play in ensuring there will be no more gap between generations.

4. OUTCOMES AND EVALUATION

The immediate outcomes were as follows:

a) Participants: More confident to talk about their differences as they were made aware the reasons why they were different from others with regards to each generation. Understanding that each generation was moulded by what was happening in the world politically, economically, physically and naturally during that 15 to 20 years period. Through a more thorough understanding participants now could place others' differences based on more tangible factors. For example, why are Gen X like to work on their own while Gen Y like to for a small community to approach any single project. They successfully answered the issues they had (as stated on Table 1) prior to the training as they experienced each activity. It was a self-realisation that helped them to change their attitude prior to this session to become more understanding and approachable. They also came up with 2 strategies that they will implement after the training with the support of their Generation team as well as their department team. The hospitals' respective head of customer service was to be in follow through with this project.

b) The Management Team: They understood better what were the expectations from these employees and would come up with new strategies to reach the company's goals. They understand the characteristics of the Gen Y better and would enhance their potentials through various new tasks and challenges to achieve their goals. They would propose more technology-based platforms to enhance and promote premium customer service especially, in line with the needs voiced out by the Gen Y. After all gen Y would be dominating the workforce in Malaysia and world wide, so it was high time that the company should think about leveraging on their strengths and potential.

c) The Representative from their board of directors: He agreed with the proposal to look into the 5 T's strategy in order to help bridge the gap and to increase the quality of service rendered. He admitted that interviewing the Gen Y's candidates could be quite trying – from the way they dress to the way they talk and think. After the sessions he relayed his gratitude for making him open his mind about this special gen and treat them with due respect. He proposed TLA's founder to speak to the top management level on understanding gen Y better to help them plan for future hiring and etc.

d) The Client's College: As a partner to TLA, they had continued engaging TLA till today with new topics under the Service Quality Management system (SQM). The 10 hospitals TLA trained proposed for more courses under SQM this year and 10 more hospitals have signed up for a topic on "Delivering Innovative Customer Service with a premium Customers' Experience"

Evaluation: Both trainer and this course were rated average between 4 to 5 stars by all the participants. Participants requested for longer sessions on the same topic. TLA is still waiting for the college to follow through.

5. ANALYSIS AND DISCUSSION

5.1 Challenges

Based on our observation through out this SQM training programme on the issue of generation gap, we stumbled upon a few challenges before, during and after the sessions. Those challenges were as follows:

1. Communication challenges - not being able to contact each hospital's Customer Service or HR head directly resulted in not having a thorough data. Going through the client's college, due to their busy work schedule as most of them are lecturers as well, caused longer waiting time and insufficient data collected. Hence each session had to be revised right there and then to suit each hospital's situation and expectation. For example by knowing the percentage of Gen Y and Gen X as well as BB coming, some activities could be further enhanced to encourage more participation and learning interest and understanding. TLA made the most out of the short discussion that took place with their heads prior to the training session whereby our trainer had to be quick to adapt the newfound data to make the activities more relevant to the group.

2. Insufficient contact hours - the 3-hour intensive session was not really sufficient to achieve 100 per cent on the objectives set. Although based on the written evaluation as well as oral feedback all parties involved agreed that this training was a success each time, however our own observation and findings, believe that objective number 1 and number 2 had been achieved, yet objective number 3 might take more trainings, observation and guidance in order to achieve it. In order to create a new work culture whereby employees work past their age biasness could be a huge challenge to deal with day in day out at their workplace.

3. Post-training session was not in order – not being able to follow up on each hospital's progress after 6 months of the training session leave us with not much data to prepare for our next training session. A few gentle reminders to the college as well as the representative from the Board of Directors have yet to see some positive response soon. We understand that their workplace is a

hospital; there is no assurance that there will be a quiet day that the management can easily gather each group again for such session.

5.2 ACHIEVEMENTS

Overall, this training programme had been instrumental in seeing immediate changes within the organisation generally and the 10 participating hospitals specifically. Although each session was too brief and there were 3 objectives to be realised as well as taking into consideration a few main factors and/or challenges, like employees' hectic schedule, the nature of their workplace that was never close, and HQ's responsibility to quickly address the generation gap issue before they could further assess the whole situation, TLA would say this training was effective and successful based on the following observation and results:

1. It had helped create awareness through better and deeper understanding of each generation exists at their workplace, which was stated in objective 1. We studied them during each activity challenge and we found that the ability to relate to other generations despite of their differences was one of the highlights during this training. This marked the beginning of bridging the generation gap.
2. The ability to see beyond age and position factors, but to really see each colleague's special skills, knowledge and potential made working in a team more meaningful and eventful, For example instead of working alone employees' quick understanding whom to turn to for each issue discussed marked the achievement of objective 2.
3. The ability to come with their own 2 strategies to promote a more professional approach to each issue by implementing each strategy during the workshop showed further understanding and readiness to own up their responsibility as a team member during the training and later at their workplace, marked the beginning of embracing a new work culture of objective 3.

6. FUTURE PLANS

TLA is planning to propose similar training to more organisations in Malaysia. As the workforce scene is changing the management has to learn to embrace the culture of multigenerational and to be prepared for the increasing number of the millennial joining the workforce. Pre, during and post training sessions would be stressed upon in order to guarantee a more effective result. TLA hopes that more organisations out there realise the potential of each generation has brought or could bring to the company's success.

7. CONCLUSION

This case study proved that through this training, more new values had been created for the hospitals as well as the employees. One person who attended this training would go back and implement his or her 2 strategies to create changes on how a multigenerational workplace should function in order to achieve dynamic teamwork and promote premium customer service. Not only he or she became the change leader, but the hospital also became a better hospital whereby its workforce can see beyond age biasness. Through our trainings we believe those potentials especially from the Gen Y can be leveraged on, and create a more harmony, ethical, dynamic and productive workforce in the workplace. We also hope this client will continue giving more input and getting output from their employees through more training sessions with us.

8. ACKNOWLEDGEMENT

We would like to express our utmost gratitude to our clients for choosing us for their training needs. Also our appreciation for all the collaboration we received from all parties involved, from their staff at HQ, the Board of Directors, their staff at the college, the 10 hospitals' CEOs and Heads of Customer Service and HR and all the participative participants that attended this training. May all of you be rewarded for your endless quest for learning and seeking personal and professional growth.

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