

# Are 2 heads better than 1?

## *Perspectives on job sharing in academic family medicine*

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**B**uilding an academic career in family medicine while managing a practice and a satisfying personal life can be challenging. Job sharing is a creative approach to pursuing and achieving career goals for those with substantial obligations outside of their profession. Examples of those with these obligations include physicians who want or need to be home to care for family members, wish to pursue advanced education, are considering graduated retirement, or have health challenges.

*Job sharing* is a general term to describe an “alternative work schedule in which two employees voluntarily share the responsibilities of one full time job.”<sup>1</sup> We are all involved in successful academic family medicine job shares and we are interested in describing our experiences and in exploring the literature on job sharing in medicine. Our aim is to increase awareness of job sharing among family physicians—those seeking job shares and those who are in hiring positions. Here are our stories.

### Sharonie and Jordana's story

Five years ago, Sharonie was returning from maternity leave and was wondering how she was going to manage her academic role as Undergraduate Hospital Program Director at North York General Hospital in Toronto, Ont, her practice, and her young family. Jordana, having covered the role for the year as a locum, wanted to keep her hand in academia. To reconcile the workload dilemma with our career aspirations, we proposed to our chief that we job share the position. We want to highlight that having a chief who was open-minded and supportive of our idea was a key factor in our success.

The job share started out as a fun and exciting venture—we went to meetings together, ran ideas by each other, and planned collectively. Determining the division of duties in the “shared” component of our job was a trial-and-error process. We definitely did not get it right the first time! The undergraduate clerkship curriculum is conveniently divided into 6 separate but identical rotations, so it was easy to divide equally. However, e-mails were initially sent to both of us and we believed we were both expected to respond to

all of them. We both attended all meetings. This was our first pitfall and it effectively meant we were each doing 75% of the job, while being remunerated with 50% of the salary. We remedied that by deciding that only the person who was on rotation would respond to e-mails and attend meetings, based on a schedule that we adhered to. When one of us was off rotation, we were truly off duty and had extra time for our families and personal lives.

Five kids (between the 2 of us) and 5 years later, we believe our job share works extremely well. The Undergraduate Hospital Program Director position is now rich with the collective intelligence of the 2 of us, which brings more ideas, more innovations and improvements to the students’ rotation in family medicine. This keeps us fresh and creative in our role. We have automatic backup in one another for holidays, maternity leave, and unforeseen absences. We rely on one another for advice and support and thus have become mentors to one another. This helps to maintain morale in our roles. We have learned that communication and trust are key to our success. It is imperative that we meet regularly to ensure we each have the pulse of what is happening in the program, and send each other any important correspondence, even when we are off rotation. Equally important is the trust that we have in each other that allows us to represent the other at meetings and provide opinions on behalf of both of us. After job sharing the position, we cannot imagine doing it any other way.

### Ian and Ruth's story

We are married family physicians with 5 children. Our impetus for job sharing was to allow us to care for our children ourselves and to maintain our clinical skills. Early in our careers we informally shared our work in the northern communities in which we practised. For 10 years, while Ruth was alternately pregnant or breastfeeding and looking after the other children, she worked part time and Ian worked full time. After our last child was born, Ruth took on a full-time academic position and Ian worked part time (in the same Department of Family Medicine) to be at home with the growing children. When our youngest child was 13 years old, Ian resumed a full-time position. We continued to find that the benefits of job sharing suited us, both clinically and in administrative work. We share an obstetric practice, seeing our prenatal patients

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alternately and telling them that one of us will try to be there to deliver their babies. Job sharing in obstetrics worked out particularly well for Ian, at least at night, because the telephone in our bedroom is on Ruth's side of the bed. We also share an administrative position in our Department of Family Medicine as co-directors of faculty development.

For us, the advantages of job sharing have been the opportunity to raise a large family and the ability to support each other by contributing relatively more at home or work, whichever was needed and suitable at different stages of our lives. We also enjoy talking over patient and academic issues, adding to each other's ideas. The disadvantages for our colleagues might include initial uncertainty when communicating with us as to who will respond. We found that as long as one of us responds in a timely way, while assuring that communication between the 2 of us is up to date, patients and colleagues are reassured.

### Literature review

The concept of job sharing is not a new one in business and health professions. We reviewed whether any evidence existed on how effective job sharing is. A literature search in Ovid MEDLINE (1946 to 2011) revealed 134 articles using the following subject headings: "Medical Staff, Hospital"; "Personnel Management"; "Personnel Staffing and Scheduling"; and "Job Sharing." We expanded our search further using the subject headings "Family Practice," "Physicians Family," and "General Practice," and limiting ourselves to review articles in English. This yielded 47 articles; after reviewing abstracts for relevance to the health professions (clinical or educational practice), we chose 22 articles to focus on.

The literature we reviewed<sup>2-23</sup> comes from American, Australian, and European sources. There is a paucity of literature looking at job sharing in physician roles and we found no articles on job sharing in family medicine. However, several themes emerged that had relevance to family medicine and were generally consistent with our experiences.

First, there is an overall positive perception of job sharing arrangements by employees in terms of work morale and satisfaction in personal life.<sup>7,11</sup> Second, creating a successful job share requires trust, open communication, and shared beliefs between the employees involved.<sup>7,9,23</sup> Third, the benefits of job sharing in the workplace include greater employee satisfaction, decreased absenteeism, and increased productivity.<sup>8,11,17,19</sup> However, in addition to the benefits identified, there were also disadvantages to job sharing, including greater than 50% workload per employee, increased administrative costs, incompatibility of job sharers, and lack of fair credit for work done or toward promotions.<sup>3,13,14,17</sup>

### Analysis and reflections

Through our experiences and reviewing the literature, we have come up with some useful conclusions that can be applied to anyone interested in pursuing a job share opportunity in family medicine (**Box 1**).

#### Box 1. Tips for successful job sharing

- Remember that you are sharing 1 position, not 2 part-time jobs
- Make it easy and seamless for those who communicate with you by being sure that each person in the job share is aware of what the other is doing (and communicate well with your administrative assistant)
- Set aside time to discuss and troubleshoot problems
- Make sure that only 1 of you attends meetings—do not "double up"
- Support your partner's decisions; work out disagreements privately
- Enjoy the flexibility of the job share
- Brainstorm together—remember that "collective intelligence" will provide you with more ideas and solutions
- Be easily accessible—demonstrate to faculty and staff who is taking the lead on individual tasks
- Obtain the support of your chief, chair, or director
- Ensure that you are both taking credit appropriately for paired and individual work for curriculum vitae and teaching dossier purposes

The advantages of job sharing are easy to identify. Certainly, work-life balance tops the list. It allows junior faculty to keep a hand in the academic world, while balancing young families and household responsibilities. It might allow them to consider a role that would otherwise seem too large to tackle. For those in later stages of their careers, job sharing provides opportunities for mentorship, both to junior faculty and among peers, and allows faculty to try new positions with partnership support. This type of peer mentorship allows for a sense of camaraderie, learning, encouragement, and backup, especially in more difficult leadership situations. This opportunity would also encompass what we term *collective intelligence*, which is the ability to brainstorm and plan together. Creatively, this allows for an increased number of ideas and solutions, which will assist in more effective curricular or program development. From an administrative point of view, job sharing allows for decreased absenteeism and improved vacation coverage.

The execution of a successful job share is not an easy task, and involves regular assessment and troubleshooting. Inherent to this success is the trust that each individual participating in the job share has in his or her partner. This can be difficult, as the areas of accountability becomes less black and white, and each partner must be willing to accept both praise and

criticism on his or her counterpart's behalf. Giving up control to the partner will be easier if the job share is between individuals who share similar values and opinions. Regardless of how the job is divided, it is imperative that both members can equally do all tasks, as this is what makes it a job share and not part-time work. Once the division is determined, ongoing and periodic evaluation for redundancy is mandatory.

More and more graduating physicians going into family medicine are women,<sup>24,25</sup> who might more often face the challenge of balancing career and home responsibilities; men too might want this balance. For academic family medicine to remain an enticing career choice, it must evolve to offer career opportunities that can provide this needed balance. A successful job share takes work and dedication, but provides academic family medicine with the benefits of having a greater pool of talented and committed faculty. 🍁

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#### Competing interests

None declared

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