INTRODUCTION

The demographics of our profession have changed drastically over the past 40 years. In 1972, only 24% of students enrolled in pharmacy schools were women. By 2007, this number had increased to 66%. In the 1970s, few women entering pharmacy pursued academic positions. Historically, women have faced both social and professional barriers, including the negative perception of women in professional roles and the difficulty of attaining tenure and promotion while maintaining family responsibilities. For these and other reasons, many women chose not to pursue advanced education or training. Presently, female pharmacists hold elected offices in national pharmacy associations and serve as directors of pharmacy as well as academic administrators. Nevertheless, a discrepancy exists between the number of female pharmacy students graduating and the number of female pharmacists in practice. This underrepresentation within the profession as a whole is also reflected in academia, where females comprise 30% of deans of colleges or schools of pharmacy and 20% of chairs of pharmacy practice. The percentage of female pharmacy faculty members at the rank of full professor has risen slowly despite the dramatic increases in the number of female graduates.

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Only 20% of full professors in 2007 were women. At the rank of assistant professor or higher, only 1,768 out of 4,075 (43%) of full-time faculty members were women, with more than 57% (1098 out of 1907) at the rank of assistant professors. Although this is much higher than the mere 5% in 1973, a diligent effort to encourage women to enter, advance, and remain in academia is warranted.

Although two-thirds of all pharmacy students and graduates are women, less than half of actively practicing pharmacists are women. More female pharmacists work part-time than their male counterparts (24% vs. 13%), and women tend to switch to a part-time schedule earlier in their careers than men. The average age of women pharmacists working part-time in 2004 was 31 to 35 years while the average age for men was 72 years. In the National Pharmacist Workforce Survey, the most important factor in deciding to stay in a job was work schedule and flexibility. Offering alternative work or flexible schedules, such as job sharing, is one way to recruit and retain women in all areas of pharmacy practice. If these options are not available to women, many will quit working altogether. In 2004, 70% of nonretired licensed pharmacists not working were women. Furthermore, an estimated shortage of approximately 160,000 pharmacists by the year 2020 is expected according to the Pharmacy Manpower Project. This shortage is compounded by the aging of the pharmacy workforce. In 2000, 17% of practicing pharmacists were over the age of 55 years, and this
percentage increased to 25% in 2004. The “graying of the faculty” and impending retirements will worsen the shortage in academia and lead to the loss of valuable leadership. Although encouraging pharmacy students to consider a career in academia is one strategy, innovative ways of retaining experienced faculty members are also needed. Given the aforementioned statistic that female faculty members desire part-time work schedules at a relatively early stage in their careers, one retention strategy is to offer faculty members more flexible work arrangements, such as job sharing.

Although 72% of permanent part-time employees in the United States are female,9 when a female pharmacist in academia or pharmacy practice desires to work part-time (even if temporarily), her commitment is sometimes questioned.10 Having a balanced life can be a realistic and attainable goal for women and men in pharmacy today and job sharing may be one option to consider. In this paper, the benefits of job sharing to both employer and employee and strategies for successful job-sharing are discussed, and experience with a nontenure-track job-sharing position at the University of Tennessee College of Pharmacy (UTCOP) is described.

JOB SHARING

The term job sharing emerged in the 1970s when the concept of sharing work responsibilities to allow employees more flexibility became popular.12 Job sharing was offered by 19% of US employers in 2005, down from 26% in 2001.11 There are many terms for job sharing or part-time employment such as flexible scheduling, job splitting, professional partnering, or simply part-time job-sharing has been defined as “a form of part-time employment in which the schedules of 2 or more part-time employees are arranged to cover the duties of a single full-time position. Generally, a job sharing team means 2 employees at the same grade level but other arrangements are possible.”9 Job sharing does not necessarily mean that each employee works 50%, or that the total number of hours per week equals 40. The job structure can be flexible to accommodate a variety of work schedules.

The business world has recognized the need to provide flexible schedules for decades. Hewlett Packard, Verizon Communications, and Abbott are major corporations that have adopted unique job arrangements to accommodate the personal needs of their employees. In the health care setting, job share arrangements are increasing. The nursing profession pioneered alternative work schedules 30 years ago and they are now commonplace in that profession. Nursing has encountered issues similar to those pharmacy faces, such as a severe shortage of professionals, an aging workforce, and a desire among professionals to work part-time. Additionally, female physicians also desire for more flexible schedules. MomMD, launched in 2000, is an online community for mothers in medicine looking for job share partners.13 Medicine faces the same academic challenges as pharmacy. One female tenure-track physician described balancing work and family obligations as the “predicament of every driven, intelligent, professional woman who has the curiosity, determination, and desire to challenge herself professionally while yearning for a calm and tender life with her family.”14

BENEFITS TO THE EMPLOYER

There are clear benefits to an employer who provides flexible work arrangements, such as job sharing, to employees. One is retaining experienced employees who have a wider range of skills than a single employee. Decreased burden on full-time employees and a reduction in absenteeism are other benefits. For example, when a full-time employee is out sick or on vacation, their work is not covered until the employee returns. When a job share partner is out, the other partner may be able to step in to cover responsibilities. Although administrative time and costs required for a job share team may be higher, these are offset by decreased employer time and costs from reduced staff turnover, recruitment, and training. Although counternotivitive, improved productivity is also a possible benefit of job sharing. Of 200 people in senior-level jobs who had flexible working arrangements, 70% had a 30% higher level of productivity and scored higher on leadership and commitment than their traditional full-time colleagues.15 This may be due to better time management by part-time employees who strive to complete their work in the limited available time. Morale can be higher among those who share jobs because the employees are grateful for the flexible work arrangement and willing to “go the extra mile” for their employer. This greater loyalty also results in better productivity.9,11 When the job sharing partnership consists of 2 committed and compatible employees who have unique individual strengths, the employer benefits.11

BENEFITS TO THE EMPLOYEE

Job sharing allows employees with special circumstances, such as those close to retirement, students, those with disabilities, and those caring for young children, to work part-time and thereby improve their work-life balance. When there is a balance between their professional and personal lives, employees come to work in a more positive frame of mind, are more productive on the job, and go home more satisfied.15 Professionally, job share employees are able to maintain their knowledge and skills
by remaining in the workforce. They have more opportunities for advancement and promotion than if they had left the workforce, even temporarily. Other specific benefits include greater job satisfaction and the opportunities to learn from and motivate the other job-share partner.15

MAKING IT WORK

There is a wealth of information on the Internet pertaining to job sharing. There are other resources describing how to develop and propose a job-sharing arrangement, as well as how to make it successful.16 Positions from administrative assistants to administrators can be shared successfully. Management support is crucial for this type of arrangement to be successful. Communicating with job sharers on a regular basis, resolving conflict, and setting clear goals and responsibilities are necessary. More difficult to share are jobs with unpredictable hours, undefined tasks, or heavy travel requirements.11 For academic positions, a job share arrangement may not be as feasible for those in a tenure-track position due to the requirements for tenure. More suitable, in our opinion, are educators/clinicians in non-tenure track positions whose main job responsibilities are education of pharmacy students and maintaining a clinical practice. With increasing class sizes and new pharmacy schools developing nationwide, there are many practitioners in these roles.

Not everyone makes an ideal job share partner. Usually, the most successful are well-organized workers with excellent communications skills. They must be team players and more interested in their combined success rather than individual success.11 Moreover, regular ongoing communication, flexibility with scheduling, comparable level of knowledge, and appropriate division of workload between partners is necessary. Often the job share partners have a vested interest in making their arrangement successful and are willing to put forth the effort to ensure continued success. A specific job-share proposal may be necessary or required to define the specific details of the arrangement. Important considerations include what schedule the partners will work, communication strategies, division of workload, how performance evaluations will be conducted, and salary and benefits compensation.11

Work Schedules

Including the job share partners in the discussions and plans for defining work responsibilities and scheduling is important. Work schedules should be based on what works best for the job-sharing partners and the position, and can range from an equal division of 2½ days per week; 1 partner working 1 week and the other working the next; or even 1 partner working Monday and Tuesday, the other working Thursday and Friday, and alternating Wednesdays. A consistent work schedule is preferable so that coworkers, supervisors, and others know who is working each day.11 Employers should not consider the team as 2 separate employees when it comes to mandatory participation on committees, attending meetings, etc. Rather, they should be considered a team, where 1 partner represents the pair at required meetings.

Communication/Organization

When 2 employees share a job, organization and communication in the partnership are paramount. Regular communication via e-mail or phone is necessary to provide continuity in patient care as well as teaching. Organization of strategies to accomplish such goals, such as sharing patient daily sheets and regular documentation of student performance, can lead to more efficient work practices. Whether a formal procedure is established should be left up to the employer and job-sharing partners.

Division of Workload

Appropriate division of the workload is an important aspect of any job-sharing arrangement. If one partner carries a heavier workload than the other on a regular basis, resentment can develop and potentially lead to failure of the job-sharing arrangement. Often the workload will fluctuate, with one partner picking up extra work for the other partner during certain times and vice versa. Regular and open communication between the job-share partners is crucial to ensure an appropriate division of work.

Evaluation Process

The employer should establish a plan to conduct performance evaluations of the job-share partners at the beginning of the arrangement.11 Whether the job-share partners are reviewed as a team or individually depends on the work setting. In an academic setting, evaluating job-share employees as individuals may be preferable, especially if the faculty members have different academic statuses, such as associate professor and assistant professor. Individual evaluations simplify future promotion assessments and encourage the faculty members to pursue scholarly activities independent of the job-sharing partnership.

Compensation/Benefits

The compensation of job-share partners may depend on the level or years of experience of the individuals prior to initiating the partnership. Some employees may split a salary evenly, while others may receive half of what they were paid prior to becoming a part of the job-share team.11
In the academic setting, prior rank will likely be a consideration for compensation. Guidelines for accrual of vacation and sick leave and eligibility for health and retirement benefits usually are determined by the institution/employer and will often be the same as for other part-time employees.

**JOB-SHARING EXPERIENCE**

In 2006, the authors, 2 female adjunct faculty members at the University of Tennessee College of Pharmacy, proposed a job sharing arrangement that would allow an increase in advanced pharmacy practice experiences (APPE), expansion to a year-round patient care service, and the creation of 2 elective courses. This nontenure track position was unique not only to our institution but also to pharmacy academia. In a survey of deans of 74 schools and colleges of pharmacy, only 3 (5%) reported faculty job share positions. Specializing in cardiology, we precept on average 12 students per year on monthly rotations at an area hospital, teach 2 month-long elective courses for third-year pharmacy students, lecture approximately 16 hours in therapeutics courses, facilitate 2 semester-long Applied Therapeutics classes, which exposes students to patients at area hospitals, precept on average 4 pharmacy practice residents per year, precept residency research projects, and serve as mentors to pharmacy students taking a research elective. In addition we each serve as a faculty advisor on an Academy of Student Pharmacists (ASP) committee and participate in community outreach programs.

During months on service, we maintain a calendar (available from the authors) of all planned educational activities to ensure that there is equal division of the workload. Administering and grading an APPE student’s examination or evaluating their presentation is alternated or shared monthly. We communicate regularly throughout the APPE experience regarding each student’s assessment, knowledge level, and areas for improvement, as well as the final evaluation. The examination is prepared by both faculty members to ensure that all topics were thoroughly introduced and comprehended during topic discussion.

For the elective classes in advanced cardiology, all responsibilities are shared. We also serve as faculty advisors to the Cardiopulmonary Resuscitation (CPR) committee and the Project Heart committee of our local ASP chapter at the University of Tennessee. One faculty member takes the lead with 1 committee and co-advises the other and vice versa. While this is not mandatory, we find that this mutual support and assistance is beneficial especially when tasks become overwhelming. Similar to other full-time faculty members, we prepare and deliver therapeutics lectures. Although we lecture separately on our own areas of interest, collectively we contribute 28% of all cardiology therapeutics lecture hours.

Some might worry that having 2 preceptors would pose a challenge to students. To date, no student has complained or suggested that this arrangement is problematic. On the contrary, students have commented that interacting with 2 preceptors was beneficial, and complimented their overall learning experience. All of our preceptor evaluations have been favorable and none have expressed dissatisfaction. Our full-time colleagues also have been accepting of our job-share position.

**Advantage to Our College**

This arrangement has been advantageous to the college of pharmacy. An increase in class size created a need for more experiential sites and elective courses. Beginning in January of their third year, students now complete 10 patient care APPEs and 2 electives. In 2006, due to availability of preceptors, only 12 students completed clinical APPEs in cardiology in the Memphis area. In 2007, after our job share position was implemented, this number increased by 54%. Including the new electives mentioned previously, this translates to a 76% increase in student APPE placement.

Our job-share partnership has become a part of our career path rather than a career obstacle. Job sharing has allowed the multi-faceted aspects of our lives (academic achievements, home, career, child rearing, volunteering, etc) to work in unison rather than in conflict. Mutual support and encouragement received from each other has contributed greatly to our success as a team.

**DISCUSSION**

Job sharing allows organizations to employ individuals in a flexible manner that otherwise might not be possible. It is only 1 example of a flexible alternative work arrangement that can be successful for pharmacists with advanced clinical training who wish to continue their practice in a part-time capacity, even in academia. Benefits from job sharing not only benefit the employee by providing a more suitable work-life balance, but also extend to the employer with regards to a potential for greater productivity and loyalty, and often greater return. The contribution that a team makes can be richer than that made by 2 individual workers/faculty members, particularly if the talents of the partners are complimentary. Job sharing in any setting works best when common goals and compatible work styles are shared between partners. We attribute the success of our job share situation to cooperation, hard work, and commitment to the advancement of each other’s career, as well as support
from our administration. The success from our collaboration is important to share so that talented practitioners who might not have considered an academic career secondary to their life demands would consider this as an option. There are few examples nationwide of pharmacy academic job share arrangements; thus, our innovation with this teaching model brings value to our profession.

CONCLUSION
University administrators should consider the benefits of alternative work schedules when recruiting and retaining women in academic pharmacy. Clinical practitioners and educators seeking nontenure-track positions may be most suitable for job-sharing arrangements. Allowing women with advanced training both the opportunity to pursue careers in academia and the flexibility to raise a family may help colleges of pharmacy to address/resolve the faculty shortages they are facing. Additionally, this arrangement can be beneficial for faculty members close to retirement and other professionals who need more flexible work schedules.

REFERENCES