

This document is intended as guidance only, for:

- Service directors approached by trainees seeking a job share arrangement; and
- Trainees seeking a job share arrangement.

1. Pre-employment: Negotiation of Arrangements

VPMT

- Identify services that have positions that can accommodate job share or any 0.5 FTE positions. Consider for 6- or 12-month positions/terms (need 12 months total to count as one training term).

Service Director

- Identify which training positions within your service would be suitable for job sharing. Inpatient, community and consult roles have all been successfully job shared in the past. There may be factors relating to certain roles that would make this difficult, but this would be the exception. Continuity of care **can** be maintained with job-sharing trainees.
- Meet both trainees together – have they met prior?
- Get a sense for what they're looking for, have they worked together before?
- Explore and ask about working styles.
- If they have children, explore what childcare arrangements might be like, eg, fixed or flexible – ideally you may want them to swap around to attend meetings during their term, but this may not be possible if childcare does not allow.
- Annual Leave planning (covered leave) – trainees need to consider taking leave at the same time, so the service can arrange full time leave cover. Although, a community role may allow some flexibility with this. Other leave, ie conference, courses could be considered on an individual basis
- Training time – in the fortnight, they should both have training time for VPMT education sessions (fortnightly Wednesday afternoons).
- Trainee schedules:
 - The trainees may have already considered and have a plan that works for them. Consider a swap ½ way through a term.
 - Examples could be Week 1: Mon-Wed/Thurs-Fri, Week 2: Mon-Tues/Wed-Fri or Week 1&2: Mon Tues, alt Wednesday, Thurs/Fri
 - Week 1 – trainee 1, Week 2 trainee 2.
- On-call roster – see them as one person – they are rostered 50% of the time (alternating trainees).
- Negotiation between the two trainees – they may prefer to flip their work schedule halfway through the term so they both have experience of work throughout the week. This may not be practicable if childcare arrangements do not allow.
- Provide trainees with the usual timetable so that they may be able to propose a schedule that works for them.

- Discuss with another Service Director who has had prior success with job share arrangements.

Trainee

- Please see and consider guidance in above section in particular how your working week might look.
- Discuss with other trainees who have previously job shared about what has worked well (and what has not).

2. Applications & Interview

VPMT

- VPMT will connect any new applicants to existing job share trainees by email, where suitable, even if they have not met.
- Both trainees need to successfully complete an Entry Interview and be suitable to be placed by VPMT.
- Each trainee will be considered on their own merits.
- If one trainee is not successful at interview, the other trainee may be considered for supernumerary funding 0.5FTE (note – there are limited services and positions that can support this 0.5FTE position).
- Limited supernumerary funding is available to support flexible training and can help part time trainees complete the program. This is allocated by the VPMT following annual interviews.

Service Director

- Contact VPMT Medical Co-ordinator with any reservations or concerns for the job share position being considered, or any unique negotiable challenges for rostering, leave or the individual workplace.

Trainee

- Where possible, identify a job-share partnership before interview.
- Indicate on application that job share partnership has been established.
- Contact VPMT Medical Coordinator **before** application.

3. During Employment

VPMT

- Contact VPMT Medical Coordinator with any concerns as they arise that can be worked through, discussed or put in contact with other service directors who have employed job share.

Service Director

- Supervisors – same two supervisors for the two trainees. It could be primary and secondary for one then opposite for the other.
- Communications – handover is key. Service can guide what this could look like.
- Guide trainees to provide consistency throughout the week – set this from orientation.
- Ask trainees to attend the first team meeting of the year or to attend regular team meetings if schedules enable this.
- Orientation – ensure other team members are aware of the job share and how the timetable will work. Ask other staff to ensure both trainees are aware of any issues arising and notify supervisor and/or service director as needed.
- Make contact with both trainees to ensure they are both settling in and provide them the opportunity to raise questions.
- Discuss with other registrars and/or consultants to be mindful of any external stress points from the trainee’s perspectives (eg, children’s health, childcare) and troubleshoot that to support them through.
- Inpatient Term - there may be more frequent/ongoing care across the week, so consistency is important for these positions.
- Community Term – more likely to have one-off contact with patients. Request feedback from other team members to alert you to any workflow issues or differences in handling situations.

Trainee

- Communication– handover is key. Trainees should consider how this is managed. This arrangement works best when handover is more detailed than a usual clinical handover (eg. for after-hours cover). This can take time and trainees should consider the extra time involved.
- Any variation to weekly timetable and job shared structure needs to be raised with Term supervisors, and /or Service Director to consider as soon as possible.