

## **New forms of employment**

### **Job sharing, Slovenia**

#### **Case study 38: University Medical Centre Ljubljana**

*At University Medical Centre Ljubljana (UMCL), job sharing provides a relatively efficient way to manage different employees working part time. This has proved a practical solution in the economic downturn, when new employment contracts are restricted and there is a continual lack of employees.*

#### **Introduction**

In legal terms, job sharing is a relatively new form of flexible work in Slovenian organisations. While the Employment Relationships Act has no specific provisions on job sharing, it does not impose any limitations on this form of employment. However, ‘unofficial’ job sharing has been used for a long time by Slovenian organisations, predominantly to adapt to different legal obligations that allow employees to work part time (for example, after maternity leave, parental leave, partial retirement or where a person has a certain degree of disability proven by the Invalidity Committee of the Institute for Pension and Disability Insurance).

Job sharing was officially introduced to Slovenian legislation in 2010 in the framework of the Labour Market Regulation Act, which came into force in January 2011. However, the definition of job sharing introduced has limited scope since the act stipulates that it shall be used to enable the partial replacement of an employee with an unemployed person (Article 31). Thus, it limits the ‘official’ usage of job sharing only to bringing unemployed people into the workforce. The act has no additional provisions on the form or the content of job sharing. The more widespread usage of job sharing is still not possible due to explicit opposition from the employers’ organisations. To a large extent, this opposition is because of the higher labour costs (at least double the costs for commuting, meals and so on) involved in employing more than one person to perform one job.

This case study looks at an example of job sharing at the University Medical Centre Ljubljana (UMCL). It is based on interviews with the head of human resources (HR), the head of the general service and the head of the cleaning service, as well as interviews with two workers from the cleaning service (hospital cleaners). UMCL documents were also consulted.

#### **General characteristics of UMCL**

UMCL is a public healthcare institution providing medical services at the secondary and tertiary level. It is the leading medical institution in Slovenia and one of the largest hospitals in central Europe. As the main training base for the Faculty of Medicine in Ljubljana, UMCL combines clinical work with education and research.

The main objective of UMCL is to provide quality care to patients from Slovenia and other European countries. The management of UMCL seeks to create a favourable working environment for employees and to provide quality professional care to patients. Activities of UMCL include healthcare services for

inpatients; specialist services and other healthcare activities for outpatients; education, research and experimental development in medicine and natural sciences; pharmacy services and wholesale trade in pharmaceutical products and other activities needed to support UMCL's basic functions.

UMCL is governed by a UMCL Council composed of 11 members: six are representatives of the founder of UMCL (the Slovenian government), three are representatives of UMCL's employees, one is delegated by the City of Ljubljana and one by the Health Insurance Institute of Slovenia (ZZZS). There is no works council at UMCL.

UMCL comprises 131 organisational units (clinics, clinical institutes and clinical departments, centres, services and sectors). The head of each unit is responsible for the unit's work organisation, work plans, professional development, balancing of financial resources and relations between the employees.

At the end of January 2014, UMCL had 7,652 employees (see Table 1 for breakdown of employee structure).

**Table 1: Breakdown of UMCL employee structure**

	<b>No. of employees</b>	<b>% of employees</b>
<b>Health professionals</b>	<b>4,861</b>	<b>63.5</b>
Physicians and dentists	1,162	15.2
Registered nurses, midwives, other healthcare personnel	3,699	48.3
<b>Other personnel</b>	<b>2,791</b>	<b>36.5</b>
Pharmaceutical workers	123	1.6
Other health workers (analyst, social worker, psychologist, radiologist, speech therapist)	746	9.7
Other workers from other wage groups (researchers, management)	31	0.4
Non-health workers (administrative workers, IT, HR, general service)	1,891	24.7
<b>Total employees</b>	<b>7,652</b>	<b>100</b>

*Source: Data provided by the head of HR department at UMCL*

The economic crisis had a negative impact on the performance of UMCL. ZZZS, which is responsible for the collection and distribution of public funds, imposed significant funding restrictions in 2009 and these continued in subsequent years. To mention a few funding cuts, the institute reduced prices of health services by 2.5% in 2009 and by another 3% in 2012, terminated payments for very good work performance, reduced salaries and cut administrative funding. All this reduced the income of UMCL and made its functioning more difficult. In 2012, the Fiscal Balance Act (ZUJF) was adopted by the Slovenian government. This act further reduced funds designated for annual leave, meals and wages, and cut the prices of health services by another 3%. These cuts caused significant problems for the management of UMCL. According to its annual report for 2012, any further tightening of financial conditions would affect the organisation's ability to carry out the current work programmes and maintain the same quality and scope.

Labour costs represented the most significant part of UMCL's expenditure, accounting for 50.3% in 2012. Salaries, in turn, made up the largest share of labour costs. In 2012, the average gross salary at UMCL was €1,925. In order to reduce labour costs, as well as the cost of materials and services, organisational units have implemented a number of austerity measures in recent years. One of the austerity measures sought a reduction in overtime work. Payment for overtime work was completely abolished at UMCL in December 2012. In addition, every new employment contract now has to be approved by the Ministry of Health. These measures could affect the overall performance of UMCL, since there is constant lack of personnel and the current employees are overburdened. The implementation of these austerity measures and the deterioration in working conditions have resulted in a reduction in employed persons in the majority of UMCL's units. The largest decline in employees was seen among non-healthcare workers, especially in administrative sections, but was noticeable across all sections, except among healthcare personnel.

As at January 2014, the majority of employed personnel had full-time contracts (see Table 2 for an overview of contract types).

**Table 2: UMCL employee structure by contract type**

	<b>Full-time contracts</b>	<b>Part-time contracts</b>	<b>Supplementary work</b>	<b>Total</b>
<b>Health professionals</b>	4,491 (92.4%)	367 (7.5%)	3 (0.06%)	<b>4,861 (100%)</b>
<b>Other personnel</b>	2,636 (94.4%)	154 (5.5%)	1 (0.04%)	<b>2,791 (100%)</b>
<b>General service</b>	410 (92.3%)	39 (9.7%)	0	<b>449 (100%)</b>

*Source: Data provided by the head of HR department at UMCL*

Of the employees that UMCL had on its payroll on 31 December 2013, about 79% were women. The age structure of UMCL's labour force is as follows: About 22% of the employees are aged 30 or younger, about 41% are between 31 and 45 and about 37% are older than 45.

One of the employees interviewed was a 51-year-old woman with a completed primary school education and 34 years of work experience as a hospital cleaner. The other employee was a 53-year-old woman, who also had a primary school education and 30 years' experience. Their main occupation was cleaning and they received minimum wages for their work.

## **Design and implementation process**

As in the majority of Slovenian organisations (both private and public), UMCL has been using job sharing for a long time. It was mostly used to fulfil employer's legal obligations in terms of allowing their employees to work part time (for example, supplementary work, maternity leave, parental leave, partial retirement or where an employee has certain degree of disability proven by the Invalidity Committee of the Institute for Pension and Disability Insurance). The share of employees performing less than 100% of the tasks required for one position is gradually increasing, mostly due to the increasing intensity of work, the ageing of the workforce and the increasing share of employees with different degrees of disabilities related to the aforementioned two factors.

Other reasons why employees want to switch to part-time work (such as parental leave or partial retirement) are less common. The need for job sharing is also increasing due to the budget cuts and restrictions on employing new staff. UMCL management is thus being forced to rely more on the existing workforce by using different work arrangements, including job sharing. In its latest financial report in 2014, UMCL has started counting its employees not only on an individual basis, but also in terms of the percentage of full-time work they actually perform at UMCL. This will give a much better picture of the

needs for fulfilling tasks defined by one position. While job sharing can be found in many organisational units, the supply services unit at UMCL has a higher share of this type of work arrangement. On the basis of the share of employees working part-time, it could be estimated that job sharing is used by approximately 5% to 6% of all employees at UMCL.

The annual plan determines the maximum number of employees for each unit and occupation. However, in practice, the designated number of employees is usually not sufficient to carry out all the tasks assigned for each unit. Consequently, the heads of units are forced to rearrange work organisation in such a way that all duties are completed on time. Here, job sharing practice has proved useful, making it possible for management to allocate several part-time workers to all the tasks assigned for a certain position.

Both of the employees interviewed were sharing their job (for one month at the time of the case study) due to disability or illness. One of the employees had already partly retired (for several years) due to illness and was still working four hours a day. The second employee was working four hours a day on a temporary basis (for one month), as suggested by her personal doctor. If her health condition improved, she would have returned to normal full-time hours (eight hours a day) after the one-month period. Thus, in both cases, the transition to part-time employment (in one case permanent and in the other temporary) was a solution to illness-related leave.

Job sharing was offered to both employees in line with the employer's obligation (and solution) to allow both employees to retain their employment at UMCL and as a work arrangement that enables UMCL to get the required work done. If the second employee was to return to the full-time job, the head of the unit would have to find another employee to share the job with the first employee. One of the employees interviewed has a permanent contract, while the other had a fixed-term contract for one month (for the duration of sick leave).

The difficulty of their tasks varies from day to day, but overall the work is hard and physically demanding (cleaning, which sometimes means lifting heavy objects). The daily tasks are usually assigned by the immediate supervisor, but in the case of extraordinary events (such as increased workload due to accidents or an increased number of operations), workers have to organise their work by themselves.

Job sharing is usually performed by two employees, each doing 50% of the tasks assigned for the job. However, there are exceptions and the share of tasks performed by one or another employee may vary depending on the type of work and workload during the day. In addition, changes can occur due to work intensity cycles. In medical institutions, most activity takes place from 8.00 to 12.00.

## **Working method, processes and procedures**

It should be pointed out that job sharing is used as a work arrangement to enable two (or, in rare cases, more) part-time workers to carry out tasks that would otherwise be done by one full-time employee. Thus, it is more a form of work organisation to cope with existing work than a specific form of employment with a specific employment contract.

At UMCL, job sharing arrangements are generally used in cases where one or more employees have to change their usual full-time employment to part-time employment for whatever reason – for example, to improve work–life balance, to make partial retirement possible or to adapt to a certain degree of disability proven by the Invalidity Committee of the Institute for Pension and Disability Insurance. The arrangement is usually at the request of the employee. These changes are implemented by the heads of units. The job sharing procedure is formalised and requires approval from various departments.

When a new requirement for job sharing occurs, the direct supervisor, who is usually the unit head, informs the HR department about the reasons for shorter working hours and the percentage of tasks the individual will be carrying out. The HR department then prepares documentation and a new contract for part-time employment or a new annex to the contract. For persons with disabilities, the entire procedure must be carried out according to the Pension and Disability Insurance Act and the Vocational Rehabilitation and Employment of Disabled Persons Act. Generally, it takes longer than a standard employment contract to implement.

The procedure for the assessment of work-related disability is usually initiated by a personal physician, who completes the appropriate forms and forwards them to the Invalidity Committee. The employer, together with an authorised physician, completes a working document in which the risk assessment and the opinion of an authorised physician about the employee's fitness to work are recorded. The HR department monitors monthly all changes in the number of employment contracts, including part-time contracts, as well as the number of employees in job sharing and the share of work performed.

The head of each of unit has the responsibility to allocate work by combining two employees to perform tasks assigned to one job. Such work rearrangements can be difficult at times due to the different types of employees, their varying levels of disability and the specific tasks that need doing. Consequently, the unit heads must be well informed about the employees' daily tasks and availability. Employees who are sharing jobs usually inform the unit head about any new tasks to be done once the assigned ones are completed, and the head allocates these new work tasks to the available employees. They also inform their job sharing partners about the status of the tasks during the mostly informal hand-over. This helps the whole procedure to run smoothly. According to the two employees interviewed, their work tasks are usually very similar and they communicate with their unit head and each other on a daily basis. The decision on what needs to be done and on the timing and distribution of tasks are hence done on a continuous basis in the form of agreements between the unit head and the job sharers.

When one of the job sharing employees drops out, the head of unit distributes the remaining work to healthy full-time employees, thus increasing their workload. Sometimes, this causes the need for overtime work (which is not paid due to the provisions of the Fiscal Balance Act). The working time of persons with a disability is limited to four hours a day and cannot be extended. The reallocation of tasks is a relatively simple procedure, especially when only one or a few employees drop out in a unit with almost 270 employees. It becomes more complicated in the long run, since the process of employing new staff is further limited by the provisions of the Fiscal Balance Act.

Job sharing employees have the same pro rata rights, salary, fringe benefits and opportunities for training as full-time employees, calculated on the basis of their working time. Their social protection level is regulated on the same basis. They get bonuses for working in the afternoon, on Sunday and during holidays. They also receive a lot of education and training opportunities (although less than the medical staff). In general, all the social rights are proportional to the number of hours worked. The job sharing employees feel that they are part of the team regardless of their status.

Higher workload and low wages in a time of economic crisis were the main factors accounting for the relatively higher number of conflicts between employees in recent years. The conflicts are usually resolved with the help of the direct supervisor, but if this does not work, the case goes for mediation to the higher level of supervisors in the organisational hierarchy. The UMCL structure offers many different systemic options for conflict resolution through mediation, assistance on different levels, education and training, and even therapy. All of these measures are also available to the job sharers.

According to the interviewed job sharers, the intensity of work has increased significantly over the last five to 10 years. The nature of work and cleaning materials has also changed. The employees have regular training about new cleaning materials and procedures.

## **External support**

External support is mostly needed when employing persons with disabilities (including job sharers), particularly when adapting the work environment and equipment for their specific needs. UMCL receives financial assistance and appropriate equipment from the Institute for Pension and Disability Insurance of Slovenia. Since UMCL exceeds the quota for employing persons with disabilities, the Fund for the promotion of employment of persons with disabilities allocates additional funding to UMCL for adaptation of job posts. Nonetheless, these resources are limited and insufficient; as a result, the medical centre is in need of additional funding in this area. Furthermore, UMCL would like to have more autonomy (which was reduced by the Fiscal Balance Act) over its future employment decisions.

## **Outcomes and effects**

In the current situation – which is defined by the economic crisis, austerity measures and longer and more difficult employment procedures for new employees – job sharing is an important form of employment which enables the employer (UMCL) to use its workforce effectively in a time of restricted recruitment. Instead of employing new full-time employees, UMCL has to manage the existing workforce. One of the ways it can do this is to transform full-time to part-time employment for those employees who have developed disabilities.

As already stated, job sharing is one of the forms of part-time work predominantly used by UMCL and other Slovenian organisations to adapt to different legal obligations that allow employees to work part-time. In the case of employees with disabilities, this obligation is designed to reintegrate them into the working environment and to give them (in)direct protection against dismissal. At the same time, it allows UMCL to present itself as an ‘employee-friendly employer’, helping disabled employees to retain their jobs and to more effectively balance their working and family lives. Job sharing also helps to transfer experience between older and younger employees through the counselling and mentorship offered by the more experienced employees. This, ultimately, has a positive effect on the quality of service provided to the public.

Managers treat all employees equally, regardless of whether they are full-time employees or part-time employees working under job sharing contracts. Even though the managers and direct superiors provide assistance to workers transferred from full-time to part-time job sharing arrangements, it is mostly the workers’ own responsibility to cope with the changes. Some workers are able to adapt quickly to the changes, while others need more time. According to the interviewed heads of units, the workers all remain loyal to the organisation, since they were full-time employees in the past. They feel that if they were to employ new part-time staff, their loyalty to UMCL would be lower.

For a majority of employees, job sharing allows them to maintain self-confidence and to feel useful to the organisation. Both of the employees interviewed felt autonomous and equal to full-time workers. In general, they were satisfied with their job sharing arrangements. While one of the employees would have preferred a full-time job if she was in full health, she was happy to have the chance to work part time. Part-time work was easier and she had enough spare time to recover after work. The second employee said she would also like to work full time again if her health improved, although the part-time job seemed to be easier for her as well. Both interviewees were pleased to remain a part of the organisation and feel that they are still needed at UMCL.

However, some employees with disabilities working under job sharing arrangements considered themselves to be a burden to their colleagues. Consequently, at the beginning of the new (part-time) employment contract, some reported that they tried to do more than expected of them and more than they were able to do. They also felt more stressed, not only due to the increased intensity of their own work, but also because other (more stressed) employees felt overloaded with work. The part-time workers were under stress because often they could do all the work required in four hours, and yet they could not leave the rooms dirty.

Of course, reduced working hours mean smaller salaries (minimum wages), which is a significant drawback.

## **Strengths and weaknesses**

Due to increasing workload, UMCL is in constant need of additional workers. From this perspective, job sharing is not the ideal form of employment for UMCL as an employer. Furthermore, UMCL as well as all other organisations in the public sector are under constant pressure (accentuated by the Fiscal Balance Act) to reduce the number of employees. Thus, transforming existing full-time employment contracts into part-time employment contracts, and therefore increasing the share of part-time workers in the existing workforce instead of hiring new full-time employees, does not help to meet such requirements.

Nonetheless, UMCL is proud to be able to provide flexible employment to its employees who have different needs and disabilities.

From the employees' perspective, the positive consequences of job sharing outweigh the negative. One of the most important positive aspects of job sharing, mentioned by both interviewees, is improved work–life balance. Both noted that they felt better working part-time because they had more time to rest. As a result, they took fewer sick days and were more productive both at work and at home.

On the other hand, different forms of work organisation and requirements increase the stress faced by the heads of units. This is particularly the case when the heads of units are forced to combine employees with different levels of disabilities, resulting in various limitations in the tasks that they can perform. In some cases, employees with higher limitations are transferred to other units with easier tasks, but in other cases such transfers are not possible. Even bigger organisational problems occur when a full-time employee transfers to a part-time job sharing arrangement (due to disability) and there is no possibility of employing another person because of the requirements of the annual plan and the Fiscal Balance Act. In such circumstances, full-time employees have to cover the work no longer being done by their colleague, overloading them and increasing the number of sick leave days. As a result, more previously healthy employees face various disabilities and have to work less.

Another weakness of job sharing is related to the increase in labour costs it causes. UMCL, as with all other employers in the private or public sector, is obliged by the Employment Relationships Act to reimburse employees' costs for commuting and meals during working time. Job sharing also leads to less effective time utilisation because the need to handover tasks reduces productive time.

For employees with disabilities, one of the weaknesses of job sharing is that the employer cannot always provide the type of work tasks recommended by the Invalidity Committee of the Institute for Pension and Disability Insurance and in line with their level and type of disability.

## **Future plans**

Job sharing at UMCL is regarded as an exception to the normal type of employment – that is, full-time permanent employment. The requirements of the Employment Relationships Act says that employment contracts should be signed for an indefinite period and that all other (flexible) contracts should be exceptions to this rule. Thus, job sharing is accepted as a form of employment to be used in exceptional circumstances, but not promoted as a form of flexible employment desired by the employer. In the future, UMCL would prefer to employ people on a full-time rather than part-time basis.

## **Commentary**

Job sharing at UMCL has a relatively important role for those employees who are unable to perform their duties in full or who wish to balance their work and family lives more efficiently. For them, job sharing allows the worker to keep their job but reduces their number of working hours either temporarily or permanently, as reflected in the circumstances of the interviewed job sharers. For the employer (UMCL), job sharing is a relatively efficient way to combine the part-time work of different employees, ensuring that the complete job is done. This is particularly important during the economic downturn, when various restrictions on new employment contracts are in place and the units are constantly understaffed.

The current situation at UMCL – involving a lack of employees, an increased workload and new employment restrictions – produces a vicious circle. Healthy full-time employees are overloaded with work and some develop temporary or permanent disabilities. As a result, even more tasks are transferred to other healthy employees, who in turn are also becoming sick. If these circumstances prevail, the importance of and demand for job sharing will increase regardless of UMCL's preference for full-time employees.

## Websites

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Miroljub Ignjatović, Faculty of Social Sciences, University of Ljubljana