

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Paramedic

March 26, 2015

OBJECTIVE

The objective of the Market Supplement Program is to ensure that Saskatchewan health care employers can attract and retain the employees required to provide appropriate health care services to the people of Saskatchewan.

This program is designed to address specific skill shortages by use of a market supplement to attract and/or retain qualified employees. The program is designed to ensure that temporary market supplements respond to valid labour market criteria to address recruitment/retention pressures.

OVERVIEW

The Market Supplement Review Committee (MSRC) reviewed updated documentation submitted in the annual review process regarding the market supplement for the Paramedic classification. The initial market supplement report was released by the Market Supplement Review Committee on August 6, 2002, and implemented on October 16, 2002. The market supplement rate of pay for Paramedics was increased in February 2006 through the adjudication process, as outlined in the Market Supplement Letters of Understanding between SAHO and Health Sciences Association of Saskatchewan (HSAS).

This latest report is to be considered as part of the ongoing review of the market supplement process for this classification.

There were six health regions that reported to this analysis on Paramedics. Paramedics are members of HSAS.

Role of a Paramedic:

Paramedics provide intervention services to those clients requiring Emergency Medical Services (EMS). These interventions have been demonstrated to be life saving and significantly impact patient comfort and outcome. Paramedics are able to provide the following:

- *Pain control through the administration of narcotics.*
- *Stabilization of severe respiratory distress.*
- *Diuresis of Congestive Heart Failure patients.*
- *Full ACLS resuscitation equivalent to that performed in the Emergency Department.*
- *Twelve lead ECG interpretation.*
- *Cardiac pacing.*

A number of health regions in Saskatchewan utilize private ambulance services. This report does not include information from those employers.

Qualifications:

There are multiple levels of EMS practitioners in Saskatchewan. To apply to the Paramedic program, these practitioners must have two years experience as an EMT. The Paramedic training program consists of thirteen weeks of training.

The most comprehensive EMS practitioner in Saskatchewan is the Paramedic.

Information regarding budgeted positions and vacancies is provided in the following table:

Table 1 – Paramedics – Budgeted and Vacant Positions (March, 2015)

Health Regions	Number of Budgeted Positions (As of March, 2015)		Number of Vacant Budgeted Positions (As of March, 2015)		% Vacancy	
	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time
Cypress	1	0	0	0	0	0
Heartland	0	1	0	0	0	0
Prairie North	2	2	0	1	0	50%
Regina Qu'Appelle	39	0	2	0	5%	0
Sun Country	6	0	0	0	0	0
Sunrise	2	2	0	0	0	0
TOTAL	50	5	2	1	4%	20%

ANALYSIS

The MSRC discussed the Labour Market Criteria as guided by the Market Supplement Program framework.

SERVICE DELIVERY IMPACTS: *(Employers were asked to provide information that addresses current service delivery impacts resulting from staff shortages, potential staff short term service delivery impacts, potential long term service delivery impacts, and options for alternative service delivery models.)*

Participating employers reported either no service delivery issues, or minor issues related to recruitment and retention. To meet service demands, two employers reported incurring some overtime costs related to after-hours calls and shift coverage, or having Registered Nurses replace Advanced Care Paramedics when required.

VACANCY RATE ANALYSIS: *(Employers were requested to provide information about the frequency and timing of vacancy occurrences {i.e. seasonal vacancies; do the vacancies always follow an event, etc.} and to identify trends that may affect recruitment/retention efforts.)*

Two full-time vacancies and one part-time vacancy were reported for this review.

Employers report a sufficient supply of Paramedics when required to recruit and do not experience significant recruitment challenges.

Table 2 – Paramedics – Budgeted and Vacant Position Comparisons (2002 to 2015)

Paramedic Classification	Number of Budgeted Positions		Number of Vacant Budgeted Positions		% Vacancy	
	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time
2002 Totals	34	0	6	0	17.6%	0%
2003 Totals	37	0	11	0	29.7%	0%
2004 Totals	34	0	7	0	20.5%	0%
2007 Totals	35	0	3	0	8.5%	0%
2008 Totals	37	0	0	0	0%	0%
2009 Totals	40	2	0	0	0%	0%
2010 Totals	42	3	0	0	0%	0%
2011 Totals	45	3	0	0	0%	0%
2012 Totals	53	2	0	0	0%	0%
2013 Totals	62	2	3	0	4.8%	0%
2014 Totals	63	3	5	1	7.9%	33.3%
2015 Totals	50	5	2	1	4%	20%

*Disclaimer: Data reported in Table 1 and/or Table 2 may be as a result of different employers reporting year to year.

TURNOVER RATES: *(Employers were asked to provide local analysis of reasons for leaving and trends that may be emerging. They were also asked to provide annual turnover {loss of employees to other competitor employers} ratio to the existing staff complement {budgeted positions} in the given occupation.)*

Of the regions that track and report turnover, the following data was reported:

- Last 12 months – 3 [2 FT/1 PT] (1 other employment; 1 other reasons; 1 change of occupation).
- Previous 12 months – 3 [2 FT/1 PT] (2 other employment; 1 change of occupation).

RECRUITMENT ISSUE ANALYSIS: *(Employers were asked to provide information such as length of recruitment times, training investments, licensing issues, supply and demand issues, etc., as well as information that would identify trends that may affect recruitment and/or retention efforts.)*

Two regions reported recruiting times of three months and 15 months respectively.

Recruitment and retention initiatives among reporting regions included interest-free loans and tuition/educational allowances to attend Paramedic Program training; as well as offering practicum placements for Paramedic students and Emergency Medical Technicians.

SALARY MARKET CONDITIONS: *(Employers were asked to identify situations where their salary levels are lower than other employers that they would expect to recruit employees from, or other employers that recruit their employees. This may be local, provincial, regional, national or international, depending on the occupation group and traditional recruitment relationships. Cost of living considerations may or may not be appropriate to factor into market salary comparisons.)*

The MSRC reports the following market conditions for Paramedics:

- Saskatchewan health regions – Minimum \$30.800/hour, maximum \$37.626/hour; 5 steps. Effective April 1, 2012.
- Alberta health regions – minimum \$32.92/hour, maximum \$43.33/hour; 9 steps. Effective April 1, 2014.
- British Columbia health regions – minimum \$33.55, maximum \$38.69/hour; 7 steps. Effective April 1, 2013.
- Manitoba health regions – minimum \$32.68, maximum 39.85/hour; 5 steps. Effective April 1, 2013.

The SAHO/HSAS collective agreement expired March 31, 2013 and the parties are currently involved in negotiating a new collective agreement.

CONCLUSIONS & RECOMMENDATIONS:

Considering the labour market criteria under the provincial framework, the Market Supplement Review Committee makes the following conclusions:

- Regions reported either minor or no service delivery issues related to recruitment and retention.
- Two full-time vacancies and one part-time vacancy were reported by regions.
- For this classification, respondents rated turnover as being minimal for the past two years.
- Employers reported minimal recruiting challenges for this classification.

Having reviewed the employer information, and considering the labour market criteria defined by the market supplement framework, the Market Supplement Review Committee recommends maintaining the current market supplement for the Paramedic classification.

APPENDIX A

Market Supplement Consideration Request – Paramedics

Respondents

1. Cypress Health Region
2. Heartland Health Region
3. Prairie North Health Region
4. Regina Qu'Appelle Health Region
5. Sun Country Health Region
6. Sunrise Health Region