### MARKET SUPPLEMENT PROGRAM

# Report of the Market Supplement Review Committee

Respiratory Therapist

Second Annual Report

Final Report

#### **OBJECTIVE**

The objective of the Saskatchewan 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 temporary 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 and/or retention pressures.

#### **OVERVIEW**

The Market Supplement Review Committee (MSRC) reviewed updated documentation submitted in the annual review process regarding the market supplement for the Respiratory Therapist classification. The initial market supplement report was released by the Market Supplement Review Committee August 6, 2002 and implemented on October 16, 2002. The first annual review was conducted by the MSRC in October 2003. The MSRC recommended to maintain the existing market supplement at that time. This latest report is to be considered as part of the on-going review of the market supplement process for this classification as described in the SAHO/HSAS Letters of Understanding pertaining to the Market Supplement Process. This is the second annual review for the Respiratory Therapist classification.

There were six health regions that reported to this analysis on Respiratory Therapists. Respiratory Therapists are members of the <u>Health Sciences Association of Saskatchewan</u> (HSAS). HSAS was invited to submit any relevant information to this review.

#### Role of a Respiratory Therapist:

Respiratory Therapists are an essential part of the health care team providing such services as cardiopulmonary resuscitation ventilator management, oxygen and aerosol therapy, patient assessment and evaluation, and diagnostic services including pulmonary function testing and blood analysis.

#### Qualifications:

Respiratory Therapists must be a graduate of a Respiratory Therapy training program approved by the <u>Canadian Society of Respiratory Therapists</u> (C.S.R.T.) and, successful completion of an exam approved by the Canadian Society of Respiratory Therapists. Membership in the C.S.R.T. and the <u>Saskatchewan Association of Respiratory Therapists</u> (S.A.R.T.) is mandatory.

Respiratory Therapists may require up to six months of orientation and training.

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

Table 1 - Respiratory Therapist - Budgeted and vacant positions (August, 2004)

Health Regions	Number of Budgeted Positions (As of August, 2004)		Number of Vacant Positions (As of August, 2004)		% Vacancy	
	Full-Time	Part-Time	Full-Time	Part- Time	Full- Time	Part- Time
Five Hills	1	-	-	-	-	-
Prairie North	1	-	-	-	-	
Prince Albert Parkland	3	-	-	-	-	1
Regina Qu'Appelle	42	-	3	-	7.1%	-
*Saskatoon	23	5	-	-	-	-
Sunrise	2	1	-	1	_	100%
TOTAL:	72	6	3	1	4.1%	16.6%

<sup>\*</sup>Saskatoon has 1 temporary position.

#### **ANALYSIS**

The MSRC discussed the Labour Market Criteria as required 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).

Health Regions have reported that service delivery has again greatly improved over the past year. The MSRC Report of October 2003 reported an overall improvement to service delivery. That trend continued in this years review as four of the six reporting regions stated no service delivery issues at all while one region reported minor issues and another reported moderate difficulties. In 2003, two regions reported no service issues, two regions reported minor issues and two regions reported significant issues.

One region reported that they require additional budgeted FTE's to meet all of the demands in this service area. The workload for Respiratory Therapists in this region increased by approximately fifteen percent.

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).

The provincial vacancy rate continues to decline for Respiratory Therapists. Over the past two years, the provincial vacancy rate has decreased from 27% (2002) to 5.4% (2003) to 4.1% (2004) for full time positions.

One region reported that their ability to recruit and retain has significantly improved since the implementation of the market supplement in 2002.

Respiratory Therapist - Budgeted and vacant position comparisons (2002/2003/2004)

Respiratory Therapist Classification	1	Number of Budgeted Positions		Number of Vacant Budgeted Positions		% Vacancy	
5	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time	
2002 Totals	60	7	16	3	27%	43%	
2003 Totals	73	6	4	_	5.4%	0%	
2004 Totals	72	6	3	1	4.1%	16.6%	

<sup>\*</sup>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 report and track turnover, the following data is reported:

- 2004 (year to date) 4
- 2003 4
- 2002 7
- 2001 12

Turnover reported above includes reasons such as retirements, spousal transfer, wage rates, and others. Of those who moved out of province, Alberta, B.C. and Ontario were the identified destinations. Discrepancies in data may be as a result of different employers reporting year to year.

Two regions have again stated this year that prior to implementing market supplement wage rates that the primary reason for staff resignations was wages. The regions now indicated that turnover rates are less, and the primary reason for recent resignations was for personal or family reasons.

**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).

Regions have again utilized the following recruitment and retention initiatives:

- Offering higher initial pay rates (one regions),
- Increasing the number of FTE's (one region),
- Attending career fairs (three regions),
- Relocation (three regions),
- Recruitment allowance (three regions),
- Training allowances (one region) and,
- Implementing student practicum's (one region).

Regina Qu'Appelle and Saskatoon Health Region continue to work with Saskatchewan Health and Alberta Learning in the delivery of a Respiratory Therapist training program. The program purchases seats at the Southern Applied Institute of Technology in Calgary for Saskatchewan residents and allows them to perform their clinical training in Saskatchewan. The program sponsors

eight Respiratory Therapists per year for the province. This program has successfully recruited students to Saskatchewan health regions. Saskatchewan Health also provides bursary assistance to Saskatchewan respiratory therapist students.

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).

Market conditions in western Canada for Respiratory Therapists are similar to 2003 conditions. However, Alberta has implemented new rates of pay for this classification in 2004. Saskatchewan health regions currently pay \$27.00/hr at the top step for Respiratory Therapists.

#### **CONCLUSIONS & RECOMMENDATIONS:**

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

- Health regions report that service delivery issues have declined since the last report of October 2003.
- Vacancy rates have declined to 4.1% since the last Respiratory Therapist report by the Market Supplement Review Committee. The vacancy rate has decreased from 27% (2002) to 5.4% (2003) to 4.1% (2004) for full time positions.
- Regions report that the implementation of a market supplement has had a positive impact on recruitment and retention.

Having reviewed the information as provided by employers, and considering the labour market criteria, the Market Supplement Review Committee recommends:

• To maintain the current market supplement for the Respiratory Therapist classification.

#### APPENDIX A

# Market Supplement Consideration Request – Respiratory Therapists

## **Employer Respondents**

- 1. Five Hills Health Region
- 2. Prairie North Health Region
- 3. Prince Albert Parkland Health Region
- 4. Regina Qu'Appelle Health Region
- 5. Saskatoon Health Region
- 6. Sunrise Health Region