

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Respiratory Therapist

November 12, 2016

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 on August 6, 2002, and implemented on October 16, 2002. This latest report is to be considered as part of the on-going review of the market supplement process for this classification.

There were six health regions that reported to this review on Respiratory Therapists. Respiratory Therapists are members of the Health Sciences Association of Saskatchewan (HSAS).

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 graduates of a respiratory therapy training program approved by the Canadian Society of Respiratory Therapists (CSRT), and have successfully completed an exam approved by the Canadian Society of Respiratory Therapists. Membership in the C.S.R.T. and the Saskatchewan Association of Respiratory Therapists (SART) is mandatory.

In Canada, there are 23 accredited Respiratory Therapist schools that train Respiratory Therapists. In western Canada, there are four schools as follows: Northern Alberta Institute of Technology; Southern Alberta Institute of Technology; Thomson Rivers University (formerly University College of the Cariboo); and the University of Manitoba – School of Medical Rehabilitation. Respiratory Therapists may require up to six months of orientation and training.

Saskatchewan Health provides bursary assistance to Saskatchewan Respiratory Therapist students.

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

Table 1 – Respiratory Therapist – Budgeted and Vacant Positions (November 2016)

Health Regions	Number of Budgeted Positions (As of November 2016)		Number of Vacant Positions (As of November 2016)		% Vacancy	
	Full-Time	Part-Time	Full-Time	Part-Time	Full- Time	Part- Time
Five Hills	3	0	0	0	0	0
Prairie North	6	1	0	0	0	0
Prince Albert Parkland	4	0	0	0	0	0
Regina Qu’Appelle	50	6	0	0	0	0
Saskatoon	55	10	0	0	0	0
Sunrise	2	1	0	0	0	0
TOTAL:	120	18	0	0	0%	0%

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 impact; potential long-term service delivery impacts; and options for alternative service delivery models.)*

There were six health regions that reported to the market supplement review.

All regions reported experiencing no service delivery issues. Generally, employers reported manageable service delivery situations, whereby overtime and on-call situations are minimal. Two regions experienced some difficulty recruiting casual staff to cover short notice shifts and after-hours/weekend coverage.

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.)*

For the first time since the MSRC released its initial report in 2002, there were no permanent full-time or part-time vacancies reported for this classification.

Table 2 – Respiratory Therapist - Budgeted and Vacant Position Comparisons (2002 - 2016)

Respiratory Therapist 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	60	7	16	3	27%	43%
2003 Totals	73	6	4	0	5.4%	0%
2004 Totals	72	6	3	1	4.1%	16.6%
2005 Totals	74	4	4	1	5.4%	25%
2006 Totals	76	4	9	0	11.8%	0%
2009 Totals	94	3	5	1	5.3%	33.3%
2010 Totals	101	0	4	0	3.9%	0%
2011 Totals	105	2	3	1	2.8%	50%
2012 Totals	104	6	8	2	7.6%	33.3%
2014 Totals	127	8	7	1	5.5%	12.5%
2015 Totals	125	10	4	0	3.2%	0%
2016 Totals	120	18	0	0	0%	0%

There was no MSRC report in 2013. The MSRC recommendation in 2012 was referred to adjudication, and subsequently again later that year, before a final award with a new market supplement rate of pay was ultimately determined in November 2013.

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 resignation data was provided in this review:

- Last 12 months – 6 (4 – other employment; 2 – retirement).
- Previous 12 months – 7 (3 – other employment; 4 – unknown).

RECRUITMENT ISSUE ANALYSIS: *(Employers were asked to provide information such as length of recruitment time; 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.)*

The following recruitment and retention initiatives were reported by health regions:

- Increasing the number of FTE budget resources.
- Advertising, both on-line and in print, as well as ‘word of mouth’.
- Partnering and liaising with colleges and universities to provide student clinical placements/practicums and internships.
- Recruitment, relocation and educational allowances, including covering the cost of annual licensing registration fees.
- Providing new hires with extensive orientation, mentoring and support when assigned stand-by.

As reported in previous market supplement reports, Regina Qu'Appelle and Saskatoon Health Region continue to work with Ministry of Health and Alberta Learning in the delivery of a Respiratory Therapist training program. The program purchases seats at the Southern Alberta Institute of Technology (SAIT) in Calgary for Saskatchewan residents and allows them to perform their clinical training in Saskatchewan.

Several health regions report that they successfully hire at the entry wage rate for new grads and other new hires.

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 Respiratory Therapists (Diploma):

- Saskatchewan health regions – minimum \$32.005/hour, maximum \$39.034/hour. Effective April 1, 2016.
- Alberta health regions – minimum \$36.09/hour, maximum \$46.38/hour. Effective April 1, 2015.
- British Columbia health regions – minimum \$27.23/hour, maximum \$33.99/hour. Effective April 1, 2015.
- Manitoba health regions – minimum \$29.367/hour, maximum \$35.063/hour. Effective April 1, 2015.

CONCLUSIONS AND RECOMMENDATIONS:

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

- All reporting regions indicated they experienced no service delivery issues related to recruitment and retention.
- There were no permanent or part-time vacancies reported by regions.
- Most respondents indicated that recruitment/retention efforts for this classification are minimal.

Having reviewed the information as provided by employers, and considering the labour market criteria, the Market Supplement Review Committee recommends maintaining the current market supplement for the Respiratory Therapist classification.

APPENDIX A

Market Supplement Consideration Request – Respiratory Therapists

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