

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Occupational Therapist

March 1, 2018

OBJECTIVE

The objective of the Market Supplement Program is to ensure that the Saskatchewan Health Authority (SHA) 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 also 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 Occupational 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. The market supplement for the Occupational Therapist classification was last increased in May 2008, through the market supplement adjudication process.

There were ten locations included in this analysis on Occupational Therapists. Occupational Therapists are members of the Health Sciences Association of Saskatchewan (HSAS).

Role of an Occupational Therapist:

Occupational Therapists work collaboratively to enhance clients'/patients' abilities within environments and communities in which they live and work. Using a holistic and client centered approach, they facilitate improved functional outcomes in areas of self care, productivity and leisure for persons with physical, mental, social or developmental impairments. They may also participate in research, education, evaluation and consultation.

Qualifications:

Occupational Therapists require a Masters degree in Science in Occupational Therapy.

There are 12 universities in Canada that offer Occupational Therapy programs. In western Canada, there are Occupational Therapy programs at the University of British Columbia, the University of Alberta and the University of Manitoba. There is no program in Saskatchewan.

Saskatchewan Health has included Occupational Therapy students as eligible for its bursary program.

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

Table I: Occupational Therapists (all levels) – Budgeted and Vacant Positions:

| Number of Budgeted Positions (As of February 2018) | | Number of Vacant Positions (As of February 2018) | | % Vacancy | |
|---|-----------|---|-----------|-----------|-----------|
| Full-Time | Part-Time | Full-Time | Part-Time | Full-Time | Part-Time |
| 156 | 53 | 10 | 8 | 6% | 15% |

ANALYSIS

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

SERVICE DELIVERY IMPACTS: *(Respondents 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.)*

Of the ten locations reporting to this review, eight reported minor to no service delivery issues related to recruitment and retention, while two experienced moderate issues. Several indicated that recruiting to temporary positions is challenging. Two locations also reported experiencing difficulties retaining staff in this classification for an extended period of time.

Several respondents reported that the demand for service can exceed the availability of budgeted resources, and any vacancy can result in disruption to service. Some reported using staff from other communities or classifications, where appropriate and possible, to assist with service delivery.

VACANCY RATE ANALYSIS: *(Respondents 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.)*

There were 10 full-time and eight part-time vacancies reported in this review, for vacancy rates of 6% and 15% respectively.

Several respondents – particularly those with vacancies – reported there were occasions when patients were referred to private service providers in order to meet demands and lessen wait times.

Table 2 – Occupational Therapist – Budgeted and Vacant Position Comparison (2002 – 2018)

| Occupational 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 | 111 | 32 | 20 | 2 | 18% | 6% |
| 2003 Totals | 104 | 39 | 3 | 3 | 2.8% | 7.6% |
| 2004 Totals | 101 | 37 | 0 | 1 | 0 | 2.7% |
| 2005 Totals | 97 | 39 | 2 | 2 | 2% | 5.1% |
| 2006 Totals | 98 | 46 | 6 | 4 | 6.1% | 8.6% |
| 2007 Totals | 106 | 44 | 9 | 4 | 8.4% | 9.0% |
| 2009 Totals | 118 | 52 | 7 | 2 | 5.9% | 3.8% |
| 2010 Totals | 127 | 66 | 7 | 8 | 5.5% | 12.1% |
| 2011 Totals | 135 | 53 | 10 | 9 | 7.4% | 16.9% |
| 2012 Totals | 121 | 47 | 4 | 1 | 3.3% | 2.1% |
| 2013 Totals | 150 | 44 | 5 | 1 | 3.3% | 2.2% |
| 2014 Totals | 159 | 41 | 4 | 1 | 2.5% | 2.4% |
| 2015 Totals | 169 | 55 | 17 | 4 | 10% | 7% |
| 2016 Totals | 168 | 55 | 4 | 2 | 2.4% | 3.6% |
| 2017 Totals | 156 | 59 | 5 | 1 | 3.2% | .6% |
| 2018 Totals | 156 | 53 | 10 | 8 | 6% | 15% |

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

TURNOVER RATES: *(Respondents 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.)*

The following data is reported:

- Last 12 months – 9 (6 other employment; 2 family/domestic reasons; 1 other reason).
- Previous 12 months – 12 (6 family/domestic reasons; 3 not specified; 2 other employment; 1 other reason).

RECRUITMENT ISSUE ANALYSIS: *(Respondents 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.)*

Respondents reported recruiting times ranging from one month to a year, and undertake the following recruitment and retention initiatives on an ongoing basis:

- advertising;
- attending career fairs;
- recruitment and relocation incentives;
- educational allowances;
- summer jobs for students interested in occupational therapist careers;
- offering occupational therapist student placements and internships for new graduates; and
- pre-emptive hiring of new graduates, wherein they are absorbed into regular staffing through temporary positions.

SALARY MARKET CONDITIONS: *(Respondents 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 Occupational Therapists (Degree):

- Saskatchewan Health Authority – minimum \$34.168/hour, maximum \$41.780/hour; five steps. Effective April 1, 2017.
- Alberta Health Services – minimum \$37.30/hour, maximum \$49.65/hour; nine steps. Effective April 1, 2016.
- British Columbia Regional Health Authorities – minimum \$31.83/hour, maximum \$39.70/hour; six steps. Effective April 1, 2017.
- Manitoba Regional Health Authorities – minimum \$33.289/hour, maximum \$38.589/hour; six steps. Effective April 1, 2017.

The SAHO/HSAS collective agreement expires on March 31, 2018.

CONCLUSIONS AND RECOMMENDATIONS

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

- Most respondents reported either moderate or no service delivery issues related to recruitment and retention.
- There were 10 full-time and eight part-time vacancies reported in this review.
- Several locations indicated that recruiting challenges are primarily related to staffing temporary positions.

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