

PROVINCIAL MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Emergency Medical Technician

Final Report

August 6, 2002

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/retention pressures.

A temporary market supplement will be an acceptable option only if:

- a) workplace initiatives have not addressed the skill shortage;
- b) labour market data supports a supplement; and,
- c) recruitment/retention is a problem, is affecting service delivery and is well documented.

This report deals with the Market Supplement Review Committee's analysis of the recruitment/retention pressures facing employers with respect to Emergency Medical Technicians.

OVERVIEW

The Market Supplement Review Committee reviewed documentation included in the request for consideration of a market supplement for Emergency Medical Technicians (EMT).

This report analyses and makes recommendation with respect to the Emergency Medical Technician (EMT) classification only and does not include EMT-A's nor any other EMT classification combinations.

Role of an Emergency Medical Technician:

The Emergency Medical Technician is responsible for responding to emergent and non-emergent calls for service and for providing initial assessment, treatment and transport of ill or injured persons at the Basic Life Support level. In addition, EMT's are expected to be able to recognize the need and be able to set up for Advanced Life Support procedures common in urban centres.

A number of Health Districts in Saskatchewan have contracted or use private ambulance services. This report does not include information from those employers.

A total of 10 employers reported that they employ Emergency Medical Technicians in their Health Districts for the purpose of this report. Of the 10 employers, 3 report vacancies.

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

Emergency Medical Technician – Table 1

Districts	Number of Budgeted Positions (April, 2002)			Number of Vacant Budgeted Positions (April, 2002)			% Vacancy**	
	Full-time	P/T	Casual	Full-time	P/T	Casual	Full-time	Part-time
Greenhead Health District	0	0	15	0	0	0		
Midwest District Health	2	0	16	0	0	0		
South Central Health District	2	0	35	0	0	0		
East Central Health District	0	3	1	0	1	1		
Central Plains Health District	0	3	20	0	0	0		33%
South East Health District	8	4	4	0	1	3		
Northwest Health District	8	0	6	0	0	0		25%
Twin Rivers Health District	1	3	0	0	0	0		
Moose Mountain Health District	0	0	9	0	0	0		
Regina Health District	15	0	7	*9	0	4	* 60%	
TOTAL	36	13	113	9	2	8	25%	15.4%

* There are 9 EMT's working in other shifts that normally would be staffed with Paramedics.

**The vacancy rate for Casual/relief positions is 7.0%.

ANALYSIS

The MSRC discussed the Labour Market Criteria as guided by the Provincial 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).*

Service delivery has been affected in 4 of the 10 Districts who submitted information for this report. Many EMT positions are casual/relief and have to wait to be called for work assignments. Typically, EMT's are also employed by other employers i.e. non health care, and may not always be available for call out. Staffing can be a problem and alternate arrangements may have to be made with other Districts for service.

Many employers report using overtime as a means to ensure continued service. Also, to cover standby, employers occasionally have had to bring staff in from other services i.e. Registered Nurses and/or Licensed Practical Nurses.

Rural communities report difficulty in attracting and retaining employees to their communities.

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).*

Of the 10 Districts reporting for this report, 3 report vacancies.

Over the past 2 years, a large employer has been able to fill their full-time vacancies as they occur. However, filling casual/relief positions has proven more difficult. They have noticed that peak turnover occurs when Police and Fire Departments are hiring. During the past 2 years, they have consistently been 3 to 4 FTE's short. The expectation is that the hiring trend of Fire and Police Departments will continue.

Other employers report that retaining casual/relief employees is a challenge because of the limited number of hours that are available. EMT professionals are reluctant to move to other locations because of the uncertain amount of available work as a casual/relief employee. These casual/relief workers typically work in other jobs for non health care employers therefore, scheduling of hours can prove difficult.

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.).*

Employers report that the most challenging turnover issue is the retention of relief/casual staff. Of the 10 reporting employers, 5 state that filling relief/casual is difficult. The other 5 employers report no problems filling their casual/relief positions. One employer stated that there is a 20% turnover rate of the relief/casual employees however, most are filled within a month.

Employers noted that they do not have significant problems hiring to full-time positions. However, most employers rely heavily on casual/relief employees.

One employer experienced a turnover of 9 EMT's in 2001 – 2002 (3 were full-time permanent employees). Of the 9 terminations, 4 went to Police services, 2 went to Fire services, 1 went to the Winnipeg Fire Department. During this same time, the employer was able to hire 4 EMT's. From exit interviews, this employer was able to determine that the major reason for leaving was because of the wage disparity with employers in these other jurisdictions.

WORKPLACE INITIATIVES: *(Employers were asked to identify workplace initiatives undertaken to address staff shortages, i.e., workload, job redesign, local joint union/management processes, health & safety, etc.).*

In order to retain and attract employees, employers have initiated the following practices:

- Offer skill development training including upgraded orientation program and, job shadowing i.e. rural EMT work with a urban EMT.
- Provide sleeping accommodation for out of town casual/relief workers.
- Combine positions to ensure that peak times are covered.
- Attempt to upgrade EMS facilities.
- Develop an employee recognition program.

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).*

Recruiting initiatives that employers have pursued include advertising in paramedic newspapers as well as Regina/Saskatoon newspapers, visits to SIAST to liaise with students, and high school career fairs.

One large employer reports an average recruiting time of 5 months. This employer recruits about 50% of their EMT hires from rural and smaller city ambulance services, and, about 50% as new grads. In April, 2002, this employer hired only 2 employees when their need was for 8.

Although some employers have been able to recruit new grads and other candidates, many EMT's go on to careers with Fire and Police Departments because of the pay difference.

SIAST is one educational institution that trains EMT's in Saskatchewan.. According to SIAST, 30% of new grads decide not to enter EMS after experiencing the working conditions and learning of EMT salaries in Saskatchewan. Many move on to other careers. One employer will pay for employee's EMT training with a return for a 1 year service commitment.

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 competitive salary market for EMT's is Alberta and British Columbia.

AVAILABILITY OF RESOURCES: *(The magnitude and timing of any market adjustment will be subject to the availability of existing resources. Please make any comments as to the impact of addressing this staff shortage if resources are not available in the short term).*

The issues experienced by employers include the ability to attract and retain the casual/relief EMT employees. The employers are able to recruit to full-time positions relatively well although the difference in pay with the Police and Fire Departments continue the risk of turnover to these employers.

CONCLUSIONS & RECOMMENDATIONS:

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

1. The Committee notes that 4 of the 10 reporting Districts have expressed service delivery issues. Although many of the Districts have relied on overtime to ensure that service is continuous, the EMT workforce is largely casual/relief and therefore not necessarily available because of other work commitments.
2. The vacancy rate for EMT's is 25% i.e. 9 of 36 positions, for permanent full-time and 15.4% for permanent part-time employees. Upon closer examination, the 9 vacant full-time positions are a result of the temporary placement of EMT's into shifts that would normally be staffed with Paramedics. Therefore, without this current practice, the vacancy rate for full-time EMT's is 0%. Also, the vacancy rate for casual/relief workers is 7.0% i.e. 8 of 113 positions.
3. The Committee has recognized that the employer has made effort in attempting to enhance the attractiveness of the EMS workplace. Examples include; improving the new employee orientation and in-servicing policies, improving the physical facilities to better meet the program needs, and, offering employee recognition programs, team building and communication plans.

Having reviewed the employer information and considering all the labour market criteria defined by the market supplement framework, the Market Supplement Review Committee recommends:

1. A temporary market supplement for the Emergency Medical Technician classification not be implemented at this time.
2. SAHO Labour Relations assess the current practices with respect to this classification, and work to standardize those practices.

Market Supplement Consideration Request – EMT

Employer Respondents

1. Greenhead Health District
2. Midwest District Health
3. South Central Health District
4. East Central Health District
5. Central Plains Health District
6. South East Health District
7. Northwest Health District
8. Twin Rivers Health District
9. Moose Mountain Health District
10. Regina Health District

