

PROVINCIAL MARKET SUPPLEMENT PROGRAM

Report

Market Supplement Review Committee

RESPIRATORY THERAPISTS

March 6, 2002

OBJECTIVE OF THE PROVINCIAL MARKET SUPPLEMENT PROGRAM

The objective of the Provincial 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 Respiratory Therapists.

RESPIRATORY THERAPISTS

OVERVIEW

The Market Supplement Review Committee met on January 20, 2002, at which time they reviewed documentation included in the request for consideration of a market supplement for Respiratory Therapists. Six employers were identified as employing Respiratory Therapists, all of which contributed the following information to the analysis.

District	Number of Budgeted Positions		Number of Vacant Budgeted Positions		% Vacancy	
	F/T	P/T	F/T	P/T	F/T	P/T
Battlefords	1	0	0	0	0.0	0.0
East Central	2	0	1	0	50.0	0.0
Moose Jaw/Thunder Creek	1	0	0	0	0.0	0.0
Prince Albert	3	0	1	0	33.3	0.0
Regina	27	3	5	2	18.5	66.0
Saskatoon	26	4	9	1	34.6	25.0
TOTAL	60	7	16	3	27.0	43.0

Note: Vacancies include both permanent and temporary positions.

There are 60 full-time and seven part-time Respiratory Therapist positions reported in Saskatchewan. Of those positions, vacancies are currently at 16 full-time and three part-time.

The Canadian Society of Respiratory Therapists (CSRT) estimates there are 200 vacancies nationally. The marketplace for recruitment of Respiratory Therapists is a national market.

Currently there is no Respiratory Therapist training program in Saskatchewan.

Saskatchewan wages for Respiratory Therapist are significantly behind jurisdictions competing for Respiratory Therapists.

In the tertiary centres of Saskatoon and Regina, overtime has become a major factor in maintaining current levels of service.

ANALYSIS

The following criterion was utilized by the Market Supplement Review Committee (MSRC) in analyzing the request for a market supplement for Respiratory Therapists.

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 impacts are reported by respondents include:

Reduced critical care services and **increased** numbers of **transfers** to larger centres. This increased frequency of transfer to larger centres puts additional workload pressures on Regina's and Saskatoon's already strained respiratory therapy services.

Waiting lists for Respiratory Therapy and related services (i.e., surgery, sleep lab testing, pulmonary function testing) have increased. In the long term, Respiratory Therapist services will no longer be available outside the Intensive Care units.

With further vacancies, one employer has stated that **they may not be able to continue receiving ventilated patients** from other districts.

Jeopardizing the Pediatric transport program: For the first time in 20 years the district is at times unable to provide Respiratory Therapists to transport critically ill children and neonates. Moving Respiratory Therapists to the transport team **reduces in-hospital services in Emergency, NICU, PICU, ICU and Surgery**. In the long term, other disciplines will be affected. Physicians, RNs and Paramedics will have to be trained to support the transport team.

One employer reported that due to current vacancy levels, services to all but one critical care unit are below standards as recommended by the Canadian Critical Care Society.

Workload increases are causing strains on the existing Respiratory Therapist staff. Retention of existing staff will be difficult with any further workload increases or reductions in services, which in turn reduces the scope of practice of Respiratory Therapists.

Respiratory Therapy Services department was \$120,000 over budget due to overtime and callback to provide relief.

In the tertiary centres, overtime has become a major factor in maintaining current levels of service.

New programs, such as Ventilator-dependent Transition Unit, cannot be implemented without increased recruitment of Respiratory Therapy staff.

One employer has been successful in recruiting enough Pediatricians to start a new NICU service but reports that one of the main factors in being unable to go ahead is their inability to recruit adequate numbers of Respiratory Therapists to support the area.

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 Canadian Society of Respiratory Therapists (CSRT) estimates there are 200 vacancies out of approximately 3800 positions (5.3%) nationally. Saskatchewan's current full-time vacancy rate is 16 out of 63 positions (25.4%). The marketplace for recruitment of Respiratory Therapists is a national market.

Due to reorganizations in the training programs, in the last two years there has been a decrease in the number of RTs graduates from Alberta schools. The provinces with the training programs (Alberta, British Columbia, Manitoba and Ontario) have a distinct advantage in recruitment in that they have access to students prior to graduation. Many of the students are from the province they are trained in, which also makes recruitment to Saskatchewan very difficult.

One employer reported five full-time vacancies and two part-time vacancies. This employer's exit interviews have indicated that the number one reason Respiratory Therapists leave is wage disparities with other provinces. The majority of RTs have left for Alberta, British Columbia and Ontario. There is a trend that they leave once collective agreements are signed here (insufficient wages) or in other provinces (considerably higher wages).

A second employer reported seven permanent full-time vacancies, one part-time vacancy and two temporary full-time vacancies. Current new program needs would require an additional 10.2 FTEs to provide new/improved services. This employer's exit interviews have indicated that 14 of 19 Respiratory Therapists left for higher paying jobs. Nine of those 14 left Saskatchewan. Eight of nine went to Alberta or British Columbia. The remainder of the 14 left for higher paying health care professions or private home care companies offering profit sharing and leased vehicles.

A third employer has a vacancy rate of 50% (one of two full-time positions vacant). Their experience has shown them that when they can bring a new Respiratory Therapist (always a new grad), they soon lose them to larger Saskatchewan centres or other provinces with bigger programs/opportunities.

A fourth employer reported a vacancy rate of 33% (one of three full-time positions vacant). They have advertised extensively but have no applications on file for the position. RTs are not trained in Saskatchewan, therefore there are never any “local” applicants.

Employee interviews indicate that, “full-time jobs”, “limited career ladders” and “limited clinical-practice roles” have been replaced by “non-competitive salaries” as the main reason Respiratory Therapists leave Saskatchewan.

TURNOVER RATES - *Employers were asked to provide local analysis of reasons for leaving the 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.*

There are 60 full-time and seven part-time Respiratory Therapist positions reported in Saskatchewan. Of those positions, vacancies are currently at 16 full-time and three part-time.

One employer recently filled one of two vacant full-time positions. The other full-time position has been vacant for two years. The employer holds little hope in filling the position.

One employer reported a 100% turnover rate in the last five years (three FTE out of three FTE). Although they have been able to fill two positions over this period, one full-time position has remained vacant for almost two years. Their services have been reduced and they increasingly transfer patients to larger centres.

One employer has experienced a 44% turnover rate since 1999 (18/41 FTEs). The cost of this turnover related to recruitment and training issues is known to be two times annual salary per position. They currently have seven full-time vacancies and one part-time vacancy.

One employer has experienced a 63% turnover rate since 1999 (19/30 FTEs). They currently have seven permanent full-time vacancies, one permanent part-time vacancy and two temporary full-time vacancies.

Two employers have reported having one Respiratory Therapist position and no turnover in the last few years. Both pointed out however, that if they were to suffer a vacancy they would have to shut down their respiratory therapy services until such time as they could successfully recruit another RT, which they feel would be extremely difficult.

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.*

Initiatives reported by the respondent employers included:

Converting part-time positions into full-time positions to make jobs more attractive and lucrative. It was pointed out however, that most competing employers in other jurisdictions have also converted positions thus rendering this practice less effective as a recruitment tool.

Revision of schedules/work rotations to accommodate time off. When vacancies are present, coverage for time off, without revised schedules, is almost impossible. This results in extraordinary amounts of overtime and callback. One employer reports that for one weekend in three, there is no coverage in Respiratory Therapy due to vacancies they are unable to fill. Workloads have been reduced, prioritization of workload guidelines introduced. Work is offloaded to physicians, RNs and Paramedical staff. Relief is provided at premium rates of pay. Created multi-site positions to cover relief and at the same time provide full-time work.

Job Design: Guidelines and protocols have been created to streamline the RT role. Employers have attempted to improve the role and increase the responsibilities of RTs in specific areas. All non-patient tasks that could be downloaded to non-medical staff have been.

Recruitment initiatives increased: Advertising has increased by way of mailouts, Internet, newspapers, journals, etc. Nation-wide job fairs and regularly scheduled visits/contacts with training schools are practiced. Bursary programs have been implemented and/or enhanced.

Proposed training agreement with SAIT: Currently Respiratory Therapists are trained in Alberta, British Columbia, Manitoba and Ontario. There are discussions ongoing between Saskatchewan Health, Post-Secondary Education and Skills Training, Sask. Employers and the Southern Alberta Institute of Technology to train Saskatchewan residents as Respiratory Therapists with their third year internship being completed in Saskatchewan.

Employers have tried to ensure they purchase state of the art high-tech equipment to enhance recruitment and retention of Respiratory Therapists.

Premium paid for transport responsibilities: \$1.25 per hour is paid to Respiratory Therapist involved in the pediatric transport program.

Signing bonuses: Most employers have provided signing bonuses to hire RTs.

Relocation expenses: relocation expenses up to \$3,000 have been paid for a one-year return in service commitment.

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/retention efforts.*

Two employers reported having no current recruitment needs. Both have one Respiratory Therapist position that is filled.

Another employer reports that they have been continuously recruiting for two vacant Respiratory Therapist positions for up to two years.

A fourth employer reported that they continually advertise on the Internet. Their Employment Officers are in regular contact with training institutions. This employer accepts RTs for employment immediately after they finish their training and prior to writing their registration exams. While this may be somewhat risky for the employer it is a calculated risk as the RTs have three attempts to pass their registration exams. This employer has no applications for the one full-time vacancy.

A fifth employer reports that the length of their vacancies is about six months. New graduates are the only Respiratory Therapists they can hire. This employer reports that the bursary programs are successful in recruiting new graduates however, there have been experiences where a competing employer pays out the return in service commitment of the RT to recruit them to their service.

The last employer reported having six permanent full-time positions posted since June, 2001, that have gone unfilled. They have also had a temporary full-time (16 months) vacancy since February, 2001. This employer also hires unregistered therapists prior to writing their exams. They are also pursuing foreign-trained workers.

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 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.*

All employers indicate that Alberta and British Columbia are their largest competitors. Wages in those two jurisdictions far exceed Saskatchewan wages.

Some Respiratory Therapists have also been lost to Ontario. Much of this is attributed to wage differentials as well as the fact that many of the Respiratory Therapists are originally from Ontario.

Four employers reported having lost Respiratory Therapists to private sector employers who pay higher wages and/or have profit sharing plans, vehicles, Monday to Friday, day shift schedules, etc.

AVAILABILITY OF RESOURCES - *The magnitude and timing of any market adjustment will be subject to the availability of existing resources. Employers were asked to make any comments as to the impact of addressing staff shortages if resources are not available in the short term.*

Three employers did not answer this section. One employer indicated that this is not currently an issue for them.

However, one employer is fearful of losing their existing staff due to increased workloads. The current staff can only deal with the most critical issues. There are no opportunities to introduce new initiatives.

Another employer predicts more vacancies and a corresponding reduction in services. Duties will be further off-loaded to Physicians, RNs and Paramedics or, patients will not receive certain therapies.

CONCLUSIONS & RECOMMENDATIONS

Having reviewed the employer information and considered all the labour market criteria, as a whole, it is the finding of the Market Supplement Review Committee that a serious staff shortage exists in the Respiratory Therapist occupational group in Saskatchewan. Furthermore, a temporary market supplement would improve the competitiveness of Saskatchewan employer's wage rates for this occupational group and improve the ability of employers to attract and/or retain Respiratory Therapists.

The Market Supplement Review Committee therefore recommends:

- 1) that a temporary market supplement be negotiated for the position of Respiratory Therapist.
- 2) that the market pressures in the occupational group of Respiratory Therapist be reviewed annually, as per the Annual Market Supplement Review Process outlined in the program framework.