

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Infection Control Practitioner

FINAL

December 22, 2021

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/retention pressures.

The committee reviewed and made its decision on January 13, 2022. **The annual review date was December 22, 2021.**

OVERVIEW

The Market Supplement Review Committee (MSRC) reviewed updated documentation submitted in the annual review process regarding the market supplement for the Infection Control Practitioner classification. The first market supplement report was released by the Market Supplement Review Committee on December 19, 2002. The MSRC has recommended in each annual review to maintain the existing market supplement, and continues to follow the SUN level B rates of pay until the next review. 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 Program.

There were eight locations included in this analysis of the Infection Control Practitioner classification. Infection Control Practitioners are members of the Health Sciences Association of Saskatchewan (HSAS).

Role of an Infection Control Practitioner:

Infection Control Practitioners are responsible for effective co-ordination of the Infection Control program to ensure a high quality of patient care. Specifics of the job include: developing and maintaining a system of identifying and reporting infections; investigating outbreaks of infections; and developing and maintaining infection control policies and procedures, by consulting with various disciplines and departments on infection control matters.

Qualifications:

An Infection Control Practitioner must either be a Registered Nurse possessing a BScN degree, or have possession of another Bachelor's Degree in a related health discipline. Employees must have training and certification in hospital infection control.

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

Table I: Infection Control Practitioner (all levels) – Budgeted and Vacant Positions:

Number of Budgeted Positions (As of December 2021)		Number of Vacant Positions (As of December 2021)		% Vacancy	
Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
32	5	0	0	0%	0%

ANALYSIS

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

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.)*

There were eight locations that contributed to this review. Five of the locations reported no service delivery issues related to recruitment and retention while three locations reported moderate issues.

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 no vacancies reported for this review.

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 turnover is reported:

- Last 12 months – 3 (1 other employment, 1 retirement, 1 other reason)
- Previous 12 months – 4 (2 other employment, 2 retirement)

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).*

As reported previously, Infection Control Practitioners are in demand across Canada due to the increase in focus on this service nationally. Within the SHA the Infection Control Practitioner occupation pay more than some other health care occupations that are qualified for this work. Vacancies are usually filled by internal candidates.

One respondent covers the costs of required training, as well as travel and accommodation expenses for two courses and one examination. Generally, typical recruiting measures were undertaken (i.e. advertising online; attending career fairs; and other networking activities).

The average recruiting time reported was one to six months.

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.)*

Nurses belonging to the Saskatchewan Union of Nurses have historically been the main source of competition. Therefore, ensuring equity with comparable nursing positions is important in retaining these professionals.

The MSRC reports the following market conditions for Infection Control Practitioners:

- Saskatchewan Health Authority – minimum \$43.029/hour, maximum \$51.58/hour, 5 steps. Effective April 1, 2021. Nurse B rates are a minimum of \$40.41/hour, maximum \$50.40/hour.
- Alberta Health Services – minimum \$41.58/hour, maximum \$55.25/hour, 9 steps. Effective April 1, 2019
- British Columbia Regional Health Authorities – minimum \$41.37/hour, maximum \$51.59/hour, 6 steps. Effective April 1, 2021
- Manitoba Regional Health Authorities – minimum \$41.655/hour, maximum \$52.186/hour, 7 steps. Effective April 1, 2020

CONCLUSIONS AND RECOMMENDATIONS:

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

- Five of the locations reported no service delivery issues related to recruitment and retention while three locations reported moderate issues. Three reported some moderate issues.
- There were no vacancies reported.
- No significant recruitment and retention activities were reported during this annual review.

Having reviewed the information as provided by respondents, and considering the labour market criteria, the Market Supplement Review Committee had determined that the current market supplement for the Infection Control Practitioner classification should be **maintained**.