MARKET SUPPLEMENT PROGRAM

Report of the Market Supplement Review Committee

Infection Control Practitioner

FINAL

Report Due Date: December 22, 2024
(Annual Review)
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OBJECTIVE

The objective of the Market Supplement Program is to ensure that the Saskatchewan healthcare 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 also designed to ensure that temporary market supplements respond to valid labour market criteria, to address recruitment/retention pressures.

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. Infection Control Practitioners are members of the Health Sciences Association of Saskatchewan (HSAS) The first market supplement report was released by the Market Supplement Review Committee on December 19, 2002.

HSAS and SAHO are parties to a collective bargaining agreement (CBA) with a term of April 1, 2018 – March 31, 2024. The Provincial Market Supplement Program language can be found in Letter of Understanding #12 – Provincial Market Supplement Program and Letter of Understanding #13 – Determination of Market Supplement Rates, on pages 168 and 170 of the SAHO/HSAS CBA.

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 a Health Sciences Degree (related to infection prevention and control) that is acceptable to the Employer. In addition, current certification in Infection Control and Epidemiology (CIC).

ANALYSIS

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

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.)

Information regarding vacancies is provided in the following table.

Table I - Infection Control Practitioner:

Number of Positions (As of December 2024)		Number of Vacant Positions (As of December 2024)		% Vacancy	
Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
42	7	7	0	16.67%	n/a

Note: Saskatoon just recently posted 7 new positions in this classification and they have recently recruited 2 individuals. Additional recruitment is underway.

There were eight geographic areas that contributed to this review. Seven areas noted no issues with vacancies and Saskatoon noted that vacancies may be vacant for an extended period of time given the fact that a number of new positions were recently posted.

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.)

Four geographic areas noted no concerns with service delivery, 2 indicated minor, meaning there is some impact to timing or quality or quantity of service and there may be inconveniences; 2 noted moderate concerns meaning that the department provides a level of service, some routine duties are not being performed and service problems may linger.

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.)

General trends noted for why employees are leaving this classification were due to retirements or individuals seeking management positions.

The following turnover is reported where known.

- Number of employees who retired from this classification 0
- Number of employees who failed their probation/trial period 0
- Number of employees who left due to family/domestic reasons − 2
- Number of employees who left the organization for reasons not wage related 1
- Number of employees who left the organization for increased salary 0

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).

There was varying experience across the province related to recruitment. Four areas indicated there were minor issues in recruitment and that in most cases, qualified professionals can be readily found. Three areas indicated moderate recruitment concerns in that new graduates and qualified professionals are difficult to recruit. Saskatoon indicated that it was significant in that qualified professionals and new graduates are in great demand. In addition, recruitment of nurses into the position can be difficult as they will lose their SUN seniority if they move into the position which is in the HSAS bargaining unit.

Other strategies to address recruitment include the following:

- Posting for positions at the U of S campus in addition to the Health Careers website.
- Participate in career fairs.
- Financial incentives and relocation incentives.
- Offering of practicum placements where possible.
- Word of mouth promotion.

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 Infection Control Practitioners:

Table 2 - Infection Control Practitioner – Salary Market Conditions

Province	Job Title	Effective Date	Maximum Rate of Pay (April 1, 2023)
British		April 1, 2023	\$57.13
Columbia	Infection Control Practitioner	April 1, 2023	Ş57.15
Alberta	Infection Control Practitioner	April 1, 2023	\$57.63
Saskatchewan	Infection Control Practitioner	April 1, 2023	\$53.200
Manitoba	Infection Control Nurse (MNU Nurse IV)	April 1, 2023	\$55.007
	\$55.742		

Saskatchewan Rate	\$ 53.200
Western Canadian Average	\$ 55.742
Sask compared to Average (\$)	\$ (2.54)
Sask compared to Average (%)	95.44%

Note: Saskatchewan rates are below the Western Canadian Average.

CONCLUSIONS AND RECOMMENDATIONS:

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

- There were eight locations that contributed to this review and Saskatoon noted that seven new positions were just created this past year with 5 still to be filled.
- There were no significant service disruption concerns noted.
- General trends noted for individuals leaving were not salary related.
- The Saskatchewan salary is below the western Canadian average but there seems to be an ability to recruit into this classification.

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 Infection Control Practitioner classification.