MARKET SUPPLEMENT PROGRAM

Report of the Market Supplement Review Committee

EMTA/Intermediate Care Paramedic (ICP)

FINAL

Report Due Date: December 1, 2025
(Annual Review)
Report Distribution Date: January 29, 2026

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 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 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.

OVERVIEW

The Market Supplement Review Committee (MSRC) reviewed updated documentation submitted in the review process regarding the market supplement for the EMTA/Intermediate Care Paramedic (ICP).

Employees in this classification are members of the Health Sciences Association of Saskatchewan (HSAS). 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 EMTA/Intermediate Care Paramedic (ICP):

> *The role of this classification is to provide pre-hospital services in emergency medical situations, including emergency centres and community settings.*

Qualifications:

- *Primary Care Paramedic Certificate*
- *Licensed as an EMT/PCP with the Saskatchewan College of Paramedics.*
- *Current certification in Basic Life Support – Cardiopulmonary Resuscitation (BLS-CPR) and International Trauma Life Support (ITLS)*

Note: Training for the EMTA/ICP classification has been discontinued, with all new graduates entering the workforce as Primary Care Paramedics

ANALYSIS

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

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.)*

Table 1 - EMTA/ICP – Vacant Permanent Positions including Coordinator as of October 2025

Number of Permanent Positions		Number of Vacant Permanent Positions		% Vacancy	
Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-time
10	2	0	0	0%	0%

As of October 2025, there are no full-time or part-time vacancies in the province.

As positions become vacant, a review is conducted to determine whether the role should remain classified as EMTA/ICP, be converted to EMT/PCP, or be abolished.

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.)*

Service delivery impacts relate to models of care or to the EMT/PCP classification as there are no current staff shortages in this classification. In the northern area of the province service delivery impacts are noted as minor meaning that there is some impact to timing or quality or quantity of service; there may be inconveniences to patients; service problems only temporary or only for a short period.

In Regina there were no noted services impacts and in the rural areas of the Health Authority, service delivery impacts were noted as moderate meaning the department provides a level of service, some routine duties are not being performed (these duties have been prioritized); quality of service is maintained; service problems may linger as timelines to recruit or secure alternate arrangements are beyond expectation.

Measures to address service delivery impacts include:

- Use of overtime.
- Use of different classifications.
- Reallocating resources within the geographic area if possible.

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 their annual turnover ratio {loss of employees to other competitor employers} to the existing staff complement {budgeted positions} in the given occupation.)*

Where it was known over the past 12 months, the following turnover was reported:

- Number of employees who retired from this classification – 3
- Number of employees who failed their probation or trial period – 0
- Number of employees who left due to family/domestic reasons – 2
- Number of employes who left the organization for reasons not wage related – 0
- Number of employees who left the organization for increased salary – 1

Turnover trends noted were related to employees retiring from their position.

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.)*

All areas within the Saskatchewan Health Authority indicated that recruitment issues were minor. However, this characterization is nuanced, as there are no longer active recruitment efforts for this classification. Instead, Primary Care Paramedic postings are typically used to backfill vacancies created when an incumbent vacates an Intermediate Care Paramedic position.

The recruitment efforts reported below are related to the EMT/PCP classification as there are no longer EMTA/ICPs being recruited as their education program has been discontinued.

- Providing accommodations when able to do so.
- Attending career fairs at colleges and also speaking directly with practicum students and high school students.
- Attending Saskatchewan Polytechnic twice a year to meet with students.
- Recruiting via word of mouth by managers and staff.
- Advertising internally and externally online and on Health Careers Sask.
- Advertising on out of province sites.
- Advertising on Saskatchewan College of Paramedics.
- Offering of relocation support.
- Creating new practicum sites where possible.
- Improving master rotations and increasing part time hours where possible.
- Providing mentorship for new staff.
- Bursaries are available to eligible classifications to support educational advancement to the Primary Care Paramedic level.

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.)*

Table 2: Primary Care paramedic EMTA/ICP – Salary Market Conditions

Province	Job Title	Effective Date	Maximum Rate of Pay (April 1, 2023)
British Columbia	Primary Care Paramedic	April 1, 2023	$ 42.21
Alberta	Primary Care Paramedic	April 1, 2023	$ 35.87
Saskatchewan	EMTA/ICP	April 1, 2023	$ 39.497
Manitoba	Intermediate Care Paramedic (MAHCP)	April 1, 2023	$ 46.26
Western Canadian Average (2023)			$ 40.959

Saskatchewan Rate (2023)	$ 39.497
Western Canadian Average (2023)	$ 40.959
Sask compared to Average ($)	$ (1.46)
Sask compared to Average (%)	96.43%

Notes:

- Saskatchewan rates are below the Western Canadian Average.
- The Western Canadian average changed from 2024, as Manitoba's lower rate was used last year, while the higher rate was used this year.

ADDITIONAL INFORMATION:

- SAHO and HSAS are currently negotiating a new collective agreement as their previous agreement expired on March 31, 2024.

CONCLUSIONS AND RECOMMENDATIONS

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

- There are no vacancies in this classification.
- Training for this classification has been discontinued and is now included in the Primary Care Paramedic education.
- Turnover trends noted were related to retirements.
- Recruitment strategies noted were predominately for the Primary Care Paramedic classification. It was noted that as incumbents leave these positions, a review is conducted to determine whether the role should remain classified as EMTA/ICP, be converted to EMT/PCP, or be abolished.
- The salary market conditions are below the Western Canadian Average.

Having reviewed the employer information and considering the labour market criteria defined by the market supplement framework, the decision of the Market Supplement Review Committee is **to maintain** the current market supplement.