

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

Pharmacist

March 1, 2015

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 market supplement to attract and/or retain qualified employees. The program is designed to ensure that market supplements respond to valid labour market criteria to address recruitment and/or retention pressures.

OVERVIEW

The Market Supplement Review Committee (MSRC) reviewed documentation submitted in the review process regarding the market supplement for the Pharmacist classification. The initial market supplement report was released by the Market Supplement Review Committee on August 6, 2002, and implemented on October 16, 2002. The first annual review was conducted by the MSRC in October 2003. Annual reviews were conducted in October 2004 and October 2005, when the MSRC recommended to maintain the existing market supplement. An additional market supplement amount was implemented in April 2007.

There were ten health regions that reported to this review on the Pharmacist classification. Pharmacists are members of the Health Sciences Association of Saskatchewan (HSAS).

Role of a Pharmacist:

Pharmacists are employed in hospitals and related health institutions. Their role is critical to ensuring that patients in hospitals, frequently on complicated and potentially toxic medications, receive safe and effective therapy. This practice area offers opportunities to interact with other health professionals; the potential for significant intervention in patient care; and the chance to be involved in research and education. Pharmacists who work in hospitals are effective members of the health care team, and are actively involved in upgrading their education and knowledge base. Many of them specialize in fields such as oncology, infectious disease, psychiatry, etc.

Qualifications:

In order to be licensed as a Pharmacist in Canada, candidates must obtain a Bachelor's Degree in Pharmacy from a Canadian university, and complete a national board examination through the Pharmacy Examining Board of Canada. One year pre-pharmacy is required prior to the Degree program. Pharmacy students must also have obtained practical experience through an apprenticeship/internship program.

According to the Canadian Pharmacists Association, there are nine universities in Canada that offer a Bachelor's Degree in Pharmacy, including the University of Saskatchewan.

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

Table 1 – Pharmacists – Budgeted and Vacant Positions (February 2015)

Health Regions	Number of Budgeted Positions (As of February 2015)		Number of Vacant Positions (As of February 2015)		% Vacancy	
	Full-Time	Part-Time	Full-Time	Part-Time	Full- Time	Part- Time
Cypress	3	2	0	0	0	0
Five Hills	2	2	0	0	0	0
Heartland	3	0	1	0	33%	0
Kelsey Trail	3	3	0	0	0	0
Prairie North	6	5	1	0	17%	0
Prince Albert Parkland	6	4	0	0	0	0
Regina Qu'Appelle	36	3	0	1	0	33%
Saskatoon	56	25	0	1	0	4%
Sun Country	3	0	1	0	33%	0
Sunrise	3	4	0	0	0	0
TOTAL:	121	48	3	2	2.5%	4%

ANALYSIS

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

A total of ten health regions reported data to the annual market supplement review. One region reported no service delivery issues related to recruitment and retention; six regions reported minor issues; two reported moderate issues; and one reported significant issues.

Several regions indicated they experienced difficulties recruiting casual and at times part-time staff. Five regions reported they had incurred overtime costs, contracted out some services, or referred to the private sector in short notice situations.

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.)*

Health regions reported three full-time vacancies and two part-time vacancies. One employer reported it previously had three vacancies, but those positions have all been staffed with an expected start date of June 2015.

Table 2 – Pharmacists (all levels) - Budgeted and vacant position comparisons (2002 – 2015)

Pharmacist Classification	Number of Budgeted Positions		Number of Vacant Budgeted Positions		% Vacancy	
	Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
2002 Totals	84	39	12	2	14%	5%
2003 Totals	82	35	8	3	9.7%	8.5%
2004 Totals	78	31	4	1	5.1%	3.2%
2005 Totals	80	20	1	1	1.2%	5%
2006 Totals	85	38	9	2	10.5%	5.2%
2008 Totals	109	40	4	2	3.6%	5.0%
2009 Totals	100	41	8	2	8.0%	4.8%
2010 Totals	94	37	8	1	8.5%	2.7%
2011 Totals	102	47	4	3	3.9%	6.3%
2012 Totals	107	45	3	2	2.8%	4.4%
2013 Totals	117	42	0	1	0%	2.3%
2014 Totals	120	46	6	1	5%	2.1%
2015 Totals	121	48	3	2	2.5%	4%

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.)*

Of the regions that track and report turnover, the following is reported:

- Last 12 months = 16 (7 other employment; 2 family/domestic reasons; 3 retirements; 2 failed probation/dismissal; 2 other reasons).
- Previous 12 months = 20 (5 other employment; 5 family/domestic reasons; 7 retirements; 2 other employment; 1 other reasons).

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.)*

The following recruitment and retention initiatives were reported by health regions:

- Higher initial pay rates;
- Using other classifications;
- Advertising;
- Offering residencies and practicums;
- Recruitment and retention allowances;
- Attending career fairs;
- Additional vacation based on previous experience; and
- Training allowances.

Regions reported recruiting times ranging from two months to a year, and some reported their recruitment efforts for this classification were ongoing regardless of whether they had vacancies.

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 MSRC reports the following market conditions for Pharmacists (Degree):

- Saskatchewan health regions – minimum \$43.422, maximum 50.217/hour; 5 steps. Effective April 1, 2012.
- Alberta health regions – minimum \$50.77, maximum \$58.38; 9 steps. Effective April 1, 2014.
- British Columbia health regions – minimum \$37.98, maximum \$47.36/hour; 6 steps. Effective April 1, 2014.
- Manitoba health regions – minimum \$41.179, maximum \$51.075/hour; 8 steps. Effective April 1, 2013.

The SAHO/HSAS collective agreement expired March 31, 2013 and the parties are currently involved in negotiating a new collective agreement.

CONCLUSIONS & RECOMMENDATIONS:

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

- The majority of regions reported either minor or moderate service delivery issues related to recruitment and retention.
- Health regions reported three full-time and two part-time vacancies.
- Due to the historical competitiveness of this occupation, some regions have maintained on-going recruitment efforts for the Pharmacist classification.

Having reviewed the information as provided by employers, and considering the labour market criteria, the Market Supplement Review Committee recommends maintaining the current market supplement for the Pharmacist classification.

APPENDIX A

Market Supplement Consideration Request – Pharmacist

Respondents

1. Cypress Health Region
2. Five Hills Health Region
3. Heartland Health Region
4. Kelsey Trail Health Region
5. Prairie North Health Region
6. Prince Albert Parkland Health Region
7. Regina Qu'Appelle Health Region
8. Saskatoon Health Region
9. Sun Country Health Region
10. Sunrise Health Region