

**MARKET SUPPLEMENT PROGRAM**

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**Report of the Market Supplement Review  
Committee**

**Emergency Medical Technician  
(including Advanced level)**

**July 15, 2014**

**(Revised September 19, 2014)**

## **OBJECTIVE**

The objective of the 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 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 review process regarding the market supplement for the Emergency Medical Technician (EMT) and EMT - A classification. The request for a market supplement review was made by Health Sciences Association of Saskatchewan (HSAS). This classification does not currently have a market supplement.

There were nine health regions that reported to this analysis on EMTs. EMTs are members of HSAS. A number of health regions in Saskatchewan utilize private ambulance services. This report does not include that information from those employers.

Role of an EMT and EMT - A:

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

Qualifications:

Changes to the Emergency Medical Services professions are coming to Saskatchewan as determined by the Saskatchewan College of Paramedics that will affect all current and future EMTs and Primary Care Paramedics (PCPs). Current members at the PCP level have until June 2019 to fulfill the requirements needed to meet this increased scope. Members not upgrading at that time will be re-licensed at the Emergency Medical Responder (EMR) level. Members at the EMT level will also need to choose to upgrade to the PCP level or be re-licensed at the EMR level.

In Saskatchewan, PCPs can obtain their training at the Saskatchewan Institute of Applied Science and Technology (SIAST).

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

**Table 1 – EMT’s and EMT – A’s – Budgeted and Vacant Positions (July, 2014)**

Health Regions	Number of Budgeted Positions (As of July, 2014)		Number of Vacant Budgeted Positions (As of July, 2014)		% Vacancy	
	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time
Cypress	2	10	1	4	50%	40%
Heartland	8	22	0	2	0	9.0%
Kelsey Trail	1	0	0	0	0	0
Keewatin Yatthe	10	2	0	1	0	50%
Prairie North	8	18	0	3	0	16.6%
Regina Qu’Appelle	23	1	0	0	0	0
Saskatoon	4	7	0	0	0	0
Sun Country	18	12	0	0	0	0
Sunrise	7	7	0	1	0	14.2%
<b>TOTAL</b>	<b>73</b>	<b>79</b>	<b>1</b>	<b>11</b>	<b>1.3%</b>	<b>13.9%</b>

## ANALYSIS

The MSRC discussed the Labour Market Criteria as guided 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).*

No service delivery issues related to recruitment and retention were reported by the participating employers.

**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).*

One permanent full time vacancy was reported from this review. A total of eleven part time vacancies were reported. Many health regions reported that recruiting part time or casual EMT’s can be difficult especially in rural Saskatchewan.

**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 data is reported:

- Last 12 months – 7 (1 change in occupation, 1 other employment, 3 domestic, 2 unknown reasons)
- Previous 12 months – 5 (2 domestic, 3 unknown)

**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).*

Most employers report either no recruiting efforts or minimal recruiting efforts due to lack of vacancies. Some rural health regions report that attracting and retaining part time or casual employees is difficult due to the lack of full time hours that they are able to offer.

**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 EMT's:

- Saskatchewan health regions – Minimum \$25.169/hour, maximum \$30.775/hour, 5 steps effective April 1, 2012.
- Alberta health regions – Minimum \$26.12/hour, maximum \$32.98/hour, 9 steps effective April 1, 2013.
- British Columbia health regions – Minimum \$24.680/hour, maximum \$31.21/hour, effective April 1, 2013.
- Manitoba – Minimum \$24.418/hour, maximum \$34.658/hour, effective April 1, 2013

The current collective agreement expired March 31, 2013 and SAHO and HSAS have started negotiations working towards a new collective agreement.

## **CONCLUSIONS & RECOMMENDATIONS:**

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

- No service delivery issues related to recruitment and retention were reported by the health regions.
- One permanent full time vacancy was reported by Saskatchewan health regions.
- Minimal turnover was reported by the health regions from this review.
- Casual and part time recruiting can be difficult in the rural areas of Saskatchewan.

Having reviewed the employer information and considering the labour market criteria defined by the market supplement framework, the Market Supplement Review Committee recommends that a market supplement is not required for the EMT and EMT A classification at this time.

## **APPENDIX A**

### **Market Supplement Consideration Request – EMT’s and EMT – A’s**

#### **Employer Respondents**

1. Cypress Health Region
2. Heartland Health Region
3. Kelsey Trail Health Region
4. Keewatin Yatthe Health Region
5. Prairie North Health Region
6. Regina Qu’Appelle Health Region
7. Saskatoon Health Region
8. Sun Country Health Region
9. Sunrise Health Region