

MARKET SUPPLEMENT PROGRAM

**Report of the Market Supplement Review
Committee**

**Psychologist
(Ph.D. Level)**

January 22, 2007

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 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

This market supplement review of the Psychologist Ph.D. classification was requested by the Health Sciences Association of Saskatchewan (HSAS). The Market Supplement Review Committee (MSRC) reviewed documentation submitted by Saskatchewan health regions in the review process regarding the market supplement for the Psychologist Ph.D. classification.

The first market supplement review for the Ph.D. Psychologist classification was completed by the Market Supplement Review Committee in December, 2002 when the Committee recommended that a market supplement be implemented. The first annual review was conducted by the MSRC in December 2003 when the MSRC recommended to maintain the existing market supplement. The annual review in 2004 determined that the base rate of pay was higher than the market supplement rate and the market supplement was no longer required. The Ph.D. Psychologist classification currently does not have a market supplement.

There were seven health regions that reported to this analysis on Psychologist Ph.D.'s. Psychologist Ph.D.'s are members of HSAS.

Role of a Psychologist Ph.D. level:

Psychologists work in clinics, correction facilities, hospitals, rehabilitation centres, schools and universities. They diagnose and provide therapy for psychological and emotional disorders, help clients manage physical illnesses and disorders, consult with other health care professionals, plan and implement research and apply theory relating to behavior and mental process.

Qualifications:

The Saskatchewan Registered Psychologists Act was enacted in 1962. This stipulated that only those with a Doctorate in Psychology could call themselves Psychologists and engage in private practice. In this Act however, there was an exemption from this provision for individuals who were less qualified and who worked for the provincial government and school boards. In 1997, a new Act

regulating Psychologists was passed but not enacted until March 2002. In order to practice as a Psychologist in Saskatchewan, registration with the Saskatchewan College of Psychologists is required.

There are approximately 24 Doctoral programs at Canadian universities.

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

Table 1- Psychologist Ph.D. - Budgeted and Vacant Positions

Health Regions	Number of Budgeted Positions (As of Nov, 2006)		Number of Vacant Positions (As of Nov, 2006)		% Vacancy	
	Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
Cypress	3	0	0	0	0	0
Prairie North	6	0	2	0	33%	0
Prince Albert Parkland	5	0	3	0	60%	0
Regina Qu'Appelle	9	2	0	0	0	0
Saskatoon	25	5	6	2	24%	40%
Sun Country	1	0	0	0	0	0
Sunrise	1	0	0	0	0	0
TOTAL:	50	7	11	2	22.0%	28.5%

Note: The data in Table 1 and Table 2 may be incomplete as not all the same employers may have reported data for all years.

ANALYSIS

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

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).*

Seven regions responded to this survey: Three regions reported no service delivery issues with respect to the Ph.D. Psychologist, one region reported minor service delivery issues, two reported moderate issues such as waiting times, and one reported critical issues such as lengthy delay of service.

Vacancies to this classification will result in service delivery disruptions. Depending on the specialty area, health regions have attempted to utilize other classifications to help alleviate wait lists. The most commonly used classifications that are used include Masters level Psychologists and in some cases Psychometricians. Although utilizing these other classifications do help lessen waiting lists, they do not possess the qualifications of a Ph.D. Psychologist and are not qualified to do the same work as Ph.D. Psychologists.

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).*

There were eleven full time vacancies reported by the health regions. Although the vacancy rate is seemingly high, it has remained relatively the same since 2003, one year after the initial market supplement was initiated.

The following table provides comparative information from 2002 to the current information of 2006.

Psychologist Ph.D. Classification	Number of Budgeted Positions		Number of Vacant Budgeted Positions		% Vacancy	
	Full Time	Part Time	Full Time	Part Time	Full Time	Part Time
TOTALS: 2002	49	6	19	0	38.8%	0%
TOTALS: 2003	49	4	11	0	22.4%	0%
TOTALS: 2004	45	0	9	0	20%	0%
TOTALS: 2005	47	5	8	0	17.0%	0%
TOTALS: 2006	50	7	11	2	22%	28.5%

*Disclaimer: Data reported in Table 1 and above may be as a result of different employers reporting year to year.

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:

- 2006 – 4
- 2005 – 4
- 2004 – 5

The turnover reported above includes reasons such as leaving for private practices, dissatisfaction with job, spousal transfer, and others. Discrepancies in data may be as a result of different employers reporting year to year and/or different recording and reporting practices.

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).*

Regions have utilized the following recruitment and retention initiatives: Offering a higher initial pay rate (two regions), utilizing other classifications (four regions), advertising (five regions), career fairs (two regions), relocation expenses (three regions), changing/altering job responsibilities, and offering residency programs (one region).

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 Ph.D. Psychologists:

- Saskatchewan health regions – Minimum \$35.564/hour, maximum \$44.134/hour, 6 steps. Effective April 1, 2006.
- Alberta health regions – Minimum \$37.10/hour, maximum \$49.26/hour, 9 steps. Effective April 1, 2006.
- British Columbia health regions – Minimum \$36.14/hour, maximum \$45.08/hour, 6 steps. Effective April 1, 2006.
- Manitoba health regions – Minimum \$30.416/hour, maximum \$39.357/hour. Effective April 1, 2005 (negotiations are currently ongoing).

The SAHO/HSAS collective agreement is set to expire March 31, 2007.

CONCLUSIONS & RECOMMENDATIONS:

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

- Service delivery issues continue to be stable at most Saskatchewan health regions.
- There were eleven full time vacancies reported by Saskatchewan health regions.
- The SAHO/HSAS collective agreement is set to expire on March 31, 2007.

Having reviewed the information as provided by employers and considering the labour market criteria, the Market Supplement Review Committee recommends:

- That a market supplement not be implemented for the Ph.D. Psychologist classification at this time.

APPENDIX A

Market Supplement Consideration Request – Psychologist Ph.D.

Respondents

1. Cypress Health Region
2. Prairie North Health Region
3. Prince Albert Parkland Health Region
4. Regina Qu'Appelle Health Region
5. Saskatoon Health Region
6. Sun Country Health Region
7. Sunrise Health Region