

Newfoundland and Labrador
Health Human Resource Indicator Report 1999 to 2003
Part 2 - Full-Time Equivalents



**GOVERNMENT OF
NEWFOUNDLAND AND LABRADOR**
Department of Health and Community Services

The Health Human Resource Indicator Report 1999 to 2003 is comprised of the following separate documents to facilitate ease of distribution, verification, and update:

Executive Summary

Introduction

Part 1 – Who’s Who

Part 2 – Full-Time Equivalents

Part 3 – Overtime, Callback, and Relief

Part 4 – Workforce Wellness

Part 5 – Workforce Movement

Part 6 – Retirement Estimates

Part 7 – Definitions

This document is:

Part 2 – Full-Time Equivalents

This document provides an analysis and overview of workforce earned hours, including all worked and benefit hours, and calculates the full-time equivalents.

Health Human Resource Indicator Report 1999 to 2003 Part 2 – Full-Time Equivalents

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The Health and Community Services Human Resource Planning Unit represents a partnership agreement between the Government of Newfoundland and Labrador Department of Health and Community Services, and the Newfoundland and Labrador Health Boards Association. Please direct inquiries related to this report to the Newfoundland and Labrador Health Boards Association.

Summary

For the purposes of this report, a full-time equivalent (FTE) is defined as the total number of earned hours divided by the normal earned hours. The total number of FTEs in the health boards' workforce excluding physicians and students in fiscal year 2002/03 was 15,051. Fourteen occupational groups, numbering 125 FTEs or higher, made up more than 90 per cent of all the earned hours. The employee count for the same workforce as of March 31, 2003 was 17,814 individuals. Three functional centers collectively accounted for more than 25 per cent of all FTEs: Long Term Care Nursing/Resident Unit (14.3 per cent), Housekeeping (6.5 per cent), and Patient/Resident Food Services (5.8 per cent).

The percentage of earned hours coded as regular was highly variable. This depended strongly on the attributes of the health board workforce and patterns of leave. Illness, injury, and other leave (such as vacation, compassionate, jury duty, etc.) accounted for 3086 FTEs (20.5 per cent of all FTEs) while relief, overtime and callback combined accounted for 1761 FTEs (11.7 per cent of all FTEs).

Worked to earned ratios indicated the percentage of time employees were carrying out the assigned duties of a functional center. For the entire workforce in fiscal year 2002/03, excluding physicians and students, the ratio was 79.5 per cent (i.e. per cent of time at "work"). For the "average" full-time employee (52 weeks), this breaks down into about 35.3 weeks of regular time, 5.0 weeks of relief, 1.0 week of overtime and/or callback, 4.0 weeks of injury and/or illness leave, and 6.7 weeks of other leave such as vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. (One work week for the "average" full-time employee is 37.5 hours.)

In the primary occupations category, medical physicists had the highest percentage of all their earned hours (92.3 per cent) worked but they only accounted for a total of 3.6 FTEs in the entire health boards' workforce. Conversely, licensed practical nurses, which had 2325 FTEs, worked only 75.3 per cent of all their earned hours. There is significant variation at the health board and occupation level, with some ratios falling below 70 per cent. This equates to five weeks of leave per FTE more than the provincial average.

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1. Preamble

This document provides an analysis of earned hours, expressed as full-time equivalents (FTEs), of employees in health boards. Analysis of individual earning types including overtime, callback, sick leave, injury leave, and others are contained in the other parts that collectively make up the Human Resource Indicator Survey 1999 to 2003.

The reader is referred to the Executive Summary and Introduction sections for an overview of findings and detailed supporting notes including background, methodology, and limitations. Definitions are contained in Part 7 – Definitions. Calendar year 1999 data was not used for this report due to data quality issues for this statistic.

Note that the St. John's Nursing Home Board was unable to provide earned hours data for fiscal year 2001/02 and for this reason it is not possible to provide provincial figures at the occupational level for fiscal year 2001/02.

The Government of Newfoundland and Labrador's (NL) decision to transform 14 health boards into four regional integrated health authorities (RIHAs) was announced on September 10, 2004, and governance structures were established in early 2005. Data and analysis in this document can be regrouped to reflect new RIHA structures. Please direct inquiries to the Human Resource Planning Unit (HRPU). Contact information is shown at the beginning of this document.

2. Full-Time Equivalents

For the purposes of this document, FTEs are defined as the total earned hours divided by the normal earned hours, over a defined time period. Table 1 shows the number of FTEs for primary occupations, ancillary occupations – clinical, and ancillary occupations - system in the public sector health human resources in NL for the fiscal year 2002/03, sorted alphabetically by occupational groups.

Table 1. Public Sector Health Human Resources in Newfoundland and Labrador FTEs, Fiscal Year 2002/03.

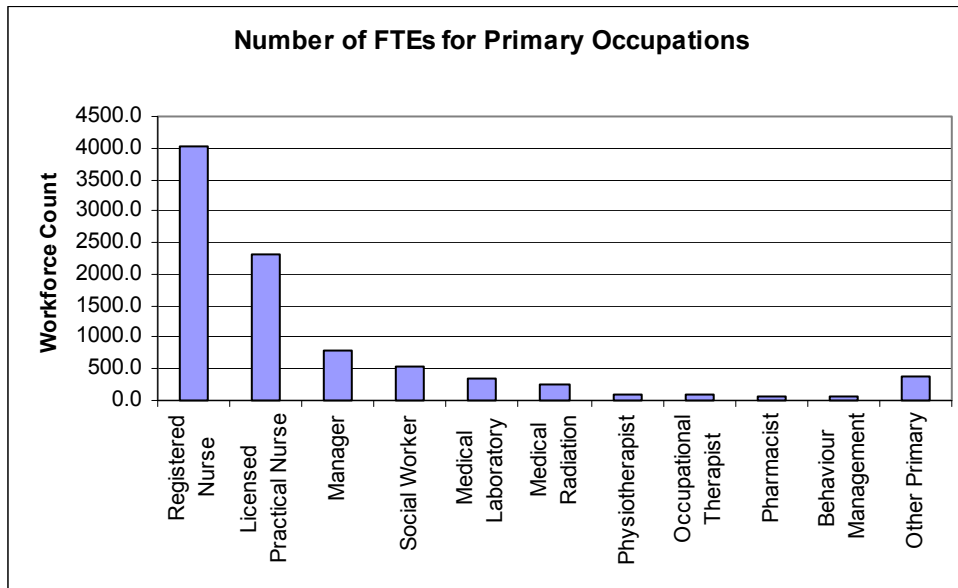
Primary Occupation¹	FTE	Ancillary Occupations - Clinical²	FTE
Audiologist	12.1	Audiology Technician	2.9
Behaviour Management Specialist	65.2	Cardiology Technician	4.4
Cardiology Technologist	31.3	Combined LX Technician	28.1
Cardio-Pulmonary Technologist	3.9	Community Service Worker	10.3
Combined LX Technologist ⁶	13.5	Dental Technicians	11.3
Dentist	6.7	Medical Laboratory Technician	124.6
Dietitian/Nutritionist	56.2	Medical Radiation Technician	14.2
Dosimetrist	3.0	Nuclear Medicine Technician	5.5
Electroneurophysiology Technologist	10.8	Occup. Therapy Support Worker	11.9
Genetic Counsellor	6.5	Paramedic	118.7
Licensed Practical Nurse	2325.1	Personal Care Attendant	244.7
Manager	805.9	Pharmacy Technician	82.6
Medical Laboratory Technologist	357.6	Physiotherapy Assistant	66.9
Medical Physicist	3.6	Prosthetist-Orthotist Technician	4.5
Medical Radiation Technologist	239.3	Psychology Assistant	5.7
Nuclear Medicine Technologist	13.6	Recreation Therapy Worker	80.4
Occupational Therapist	86.7	Social Service Worker	47.0
Orthopedic Technologist	7.6	Other (Ancillary Clinical)	35.4
Pharmacist	72.9	Subtotal (Ancillary Clinical)	899.3
Physiotherapist	89.5		
Prosthetist-Orthotist	13.0	Ancillary Occupations - System³	FTE
Psychologist (Clinical)	48.4	Administration ⁴	1948.7
Radiation Therapist	12.1	Biomedical Engineering	19.7
Recreation/Develop. Specialist	23.7	Dietary	881.3
Registered Nurse	4028.9	Facilities	418.0
Respiratory Therapist	62.9	Housekeeping	1061.4
Social Worker	538.0	Information systems	82.5
Speech Language Pathologist	33.2	Laundry	266.9
Other (Primary)	27.6	Materials	370.1
Subtotal (Primary)	8998.6	Records	86.8
		Other (Ancillary System)	17.8
		Subtotal (Ancillary System)	5153.1
Total			15,051.1

Notes:

1. Other (Primary) includes assistant clinical microbiologist, cardiovascular perfusion technologists, child care services consultants, clinical biochemists, management engineers, kinesiologists, music therapists, orthopists, and pastoral care clinicians.
2. Other (Ancillary Clinical) includes beauticians, cardiovascular perfusion technicians, researchers, electrocardiogram (EKG) technicians, family support workers, financial assistance officers, homemakers, ophthalmologist assistants, and health educators.
3. Other (Ancillary System) includes aircraft dispatchers, aircraft maintenance engineers, pilots and students.
4. Administrative/clerical support includes all clerks (admitting, ward, payroll, and others), secretaries, and other administrative staff excluding managers.
5. For a summary of FTEs by occupation and by health board contact the Human Resource Planning Unit.
6. Combined LX technologists are combined laboratory and x-ray technologists.

More than 90 per cent of all the earned hours were made up of 14 occupations above numbering 125 FTEs or higher. The highest numbers of FTEs within the primary occupations category included registered nurses, licensed practical nurses, and social workers. There were also a high number of FTEs within the ancillary occupations - system category. FTE figures for primary occupations are shown graphically in Figure 1 for fiscal year 2002/03.

Figure 1. FTEs for Primary Occupations, Fiscal Year 2002/03.



Note:

1. Other Primary includes all other primary occupations added together for a total number of FTEs.

3. Earning Categories

Table 2 shows the number of FTEs by earning type, categories of worked and benefit, for the fiscal year 2002/03.

Table 2. FTEs By Earning Category, Fiscal Year 2002/03.

Earning Type	Earning Category	Total FTEs	As a Per Cent of Total
Worked	Regular	10,203.6	67.8%
	Relief ¹	1460.3	9.7%
	Overtime and Callback ²	300.7	2.0%
Worked Total		11,964.5	79.5%
Benefit	Illness and Injury Leave ³	1151.3	7.7%
	Other Leave ⁴	1935.3	12.9%
Benefit Total		3086.6	20.5%
Total		15,051.1	100.0%

Note:

1. Relief includes sick leave relief, worker’s compensation leave relief, and all other relief as coded by health boards. It probably significantly understates relief due to coding practice with respect to overtime.
2. Overtime includes banked and paid overtime and callback.
3. Illness and Injury Leave includes both sick leave and worker’s compensation leave.
4. Other Leave includes vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. Unpaid leave is not included.

“Illness and Injury Leave” is discussed separately from “Other Leave” in Table 2 because the former is generally viewed as an area open to improvement. Conversely, “Other Leave” such as annual leave and compassionate leave are not usually areas requiring management focus, other than on any scheduling/replacement issues that may arise.

A total of 79.5 per cent of all FTEs were “worked” while the remaining 20.5 per cent was “benefit”. For the “average” full-time equivalent of 52 weeks, this breaks down into about 35.3 weeks of regular time, 5.0 weeks of relief, 1.0 week of overtime and/or callback, 4.0 weeks of injury and/or illness leave, and 6.7 weeks of other leave such as vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. (One work week for the “average” full-time employee is 37.5 hours.)

For more detailed analysis of overtime earnings in the system see [Part 3 – Overtime, Callback, and Relief](#). Similarly, for a more detailed analysis of illness and injury leave earnings see [Part 5 – Workforce Wellness](#).

Figure 2 shows the percentage of FTEs by earning type and category in fiscal year 2002/03.

Figure 2. Percentage of Health Board FTEs by Earning Type and Category, Fiscal Year 2002/03.

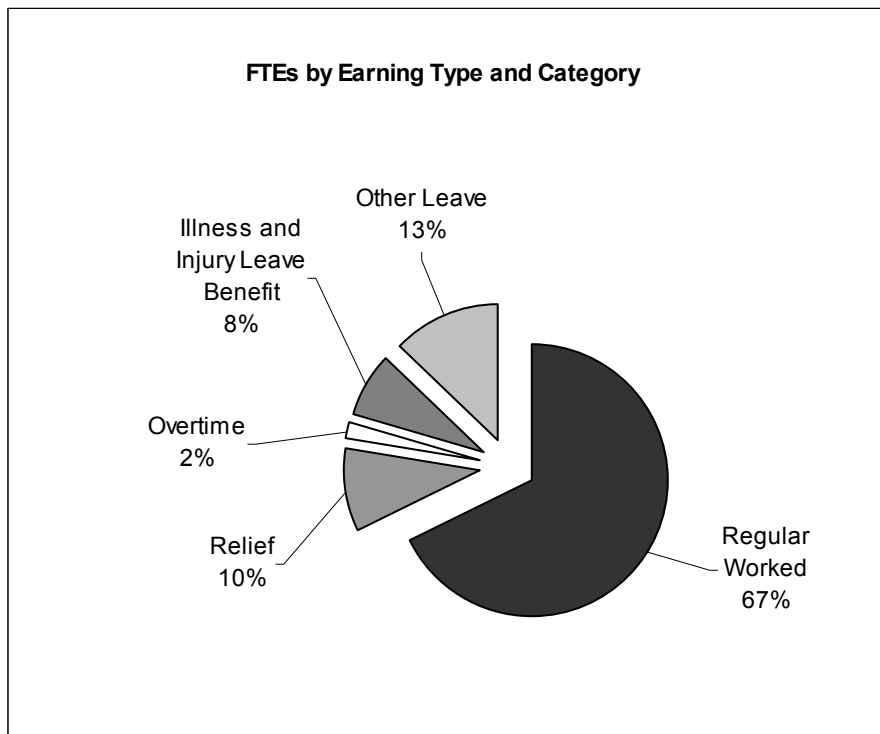


Table 3 shows the number of FTEs by earning type for the fiscal year 2002/03, sorted alphabetically by primary occupations.

Table 3. FTEs By Earning Type by Primary Occupations, Fiscal Year 2002/03.

Primary Occupation	Regular	Relief ¹	Overtime and Callback	Illness and Injury Leave ²	Other Leave ³
Audiologist	81.7%	0.0%	2.1%	2.7%	13.5%
Behaviour Management Specialist	79.9%	0.2%	1.7%	4.7%	13.5%
Cardiology Technologist	75.2%	5.4%	1.0%	3.3%	15.1%
Cardio-Pulmonary Technologist	75.7%	0.7%	5.6%	1.4%	16.7%
Combined LX Technologist	61.2%	6.3%	15.7%	4.4%	12.5%
Dentist	81.9%	0.0%	0.2%	0.0%	17.9%
Dietitian/Nutritionist	79.3%	4.3%	0.6%	2.0%	13.8%
Dosimetrist	80.7%	0.0%	2.9%	3.1%	13.3%
Electroneurophysiology Technol.	76.7%	2.5%	1.6%	4.0%	15.3%
Genetic Counsellor	82.4%	0.0%	0.4%	2.1%	15.1%
Licensed Practical Nurse	57.5%	16.3%	1.5%	12.0%	12.6%
Manager	81.2%	0.7%	0.9%	1.9%	15.3%
Medical Laboratory Technologist	73.4%	5.8%	2.9%	4.3%	13.7%
Medical Physicist	84.0%	0.0%	8.3%	1.3%	6.4%
Medical Radiation Technologist	69.0%	6.4%	7.4%	4.8%	12.5%
Nuclear Medicine Technologist	81.3%	0.2%	3.5%	2.8%	12.2%
Occupational Therapist	83.2%	0.9%	0.5%	2.9%	12.5%
Orthopedic Technologist	75.9%	1.4%	2.8%	7.9%	12.0%
Pharmacist	81.4%	0.2%	2.9%	2.3%	13.2%
Physiotherapist	82.7%	0.4%	1.4%	3.4%	12.1%
Prosthetist-Orthotist	79.1%	0.1%	0.4%	4.1%	16.4%
Psychologist (Clinical)	83.6%	0.0%	0.7%	3.1%	12.7%
Radiation Therapist	76.2%	0.0%	10.3%	2.6%	10.8%
Recreation/Develop. Specialist	81.3%	0.8%	1.1%	3.2%	13.5%
Registered Nurse	67.2%	9.3%	2.9%	7.7%	12.9%
Respiratory Therapist	70.4%	8.8%	4.7%	4.1%	11.9%
Social Worker	79.2%	0.7%	1.7%	5.1%	13.3%
Speech Language Pathologist	81.5%	0.0%	0.8%	4.4%	13.3%
Other (Primary)	82.2%	0.0%	3.6%	1.4%	12.9%
Total	67.9%	9.0%	2.4%	7.6%	13.1%

Note:

1. Relief includes sick leave relief, worker's compensation leave relief, and all other relief as coded by health boards. It probably significantly understates relief due to coding practice with respect to overtime.
2. Illness and Injury Leave includes both sick leave and worker's compensation leave.
3. Other Leave includes vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. Unpaid leave is not included.

The percentage of all earned hours coded as regular was highly variable from 57.5 per cent to 84.0 per cent, depending strongly on the attributes of the health board workforce and patterns of leave. Illness and injury leave varied from 0.0 per cent to 12.0 per cent and other leave varied from 6.4 per cent to 17.9 per cent but remained relatively close to the average of 13.1 per cent for most occupational groups. The percentage of all earned hours coded as relief varied from 0.0 per cent to 16.3 per cent and overtime and callback varied from 0.2 per cent to 15.7 per cent. Occupational groups working eight-hour, weekday shifts generally had low relief, overtime, and callback. Other services, where personnel are required for 24/7, tended to have higher relief, overtime, and callback rates. This generally held true in the ancillary occupations – clinical and ancillary occupations - system categories shown in Table 4 and Table 5 respectively.

Table 4 shows the number of FTEs by earning type for the fiscal year 2002/03, sorted alphabetically by ancillary occupations - clinical.

Table 4. FTEs By Earning Type by Ancillary Occupations - Clinical, Fiscal Year 2002/03.

Ancillary Occupations - Clinical	Regular	Relief¹	Overtime and Callback²	Illness and Injury Leave³	Other Leave⁴
Audiology Technician	73.5%	0.0%	2.9%	6.9%	16.8%
Cardiology Technician	64.8%	18.5%	0.4%	5.8%	10.4%
Combined LX Technician	58.2%	9.4%	16.1%	4.1%	12.2%
Community Service Worker	76.7%	0.0%	3.6%	5.8%	13.9%
Dental Technicians	84.8%	1.0%	1.2%	2.2%	10.8%
Medical Laboratory Technician	70.9%	9.3%	1.6%	5.7%	12.5%
Medical Radiation Technician	68.9%	4.9%	7.0%	7.8%	11.3%
Nuclear Medicine Technician	84.2%	0.3%	1.3%	2.5%	11.6%
Occup. Therapy Support Worker	79.3%	4.9%	0.1%	4.9%	10.8%
Paramedic	57.5%	13.4%	7.2%	10.4%	11.4%
Personal Care Attendant	61.2%	18.1%	1.7%	8.3%	10.7%
Pharmacy Technician	73.0%	9.1%	0.8%	5.1%	12.0%
Physiotherapy Assistant	73.4%	4.7%	0.2%	7.4%	14.4%
Prosthetist-Orthotist Technician	62.4%	0.0%	5.0%	22.3%	10.3%
Psychology Assistant	87.4%	0.0%	0.0%	0.8%	11.9%
Recreation Therapy Worker	74.2%	4.5%	0.8%	7.6%	12.9%
Social Service Worker	74.6%	6.2%	2.0%	4.6%	12.6%
Other (Ancillary Clinical)	68.9%	10.2%	2.3%	7.4%	11.3%
Total	67.3%	10.8%	2.7%	7.2%	11.9%

Note:

1. Relief includes sick leave relief, worker’s compensation leave relief, and all other relief as coded by health boards. It probably significantly understates relief due to coding practice with respect to overtime.
2. Overtime includes banked and paid overtime and callback.
3. Illness and Injury Leave includes both sick leave and worker’s compensation leave.
4. Other Leave includes vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. Unpaid leave is not included.

Table 5 shows the number of FTEs by earning type for the fiscal year 2002/03, sorted alphabetically by ancillary occupations - system.

Table 5. FTEs By Earning Type by Ancillary Occupations - System, Fiscal Year 2002/03.

Ancillary Occupations – System	Regular	Relief²	Overtime and Callback³	Illness and Injury Leave⁴	Other Leave⁵
Administration ¹	73.8%	6.2%	1.0%	6.0%	13.0%
Biomedical Engineering	78.4%	0.0%	7.5%	1.8%	12.4%
Dietary	60.0%	16.9%	0.9%	9.9%	12.3%
Facilities	71.0%	5.6%	4.4%	6.9%	12.2%
Housekeeping	60.3%	16.1%	0.7%	10.6%	12.2%
Information systems	82.8%	0.2%	3.7%	1.9%	11.4%
Laundry	63.4%	14.8%	0.8%	9.2%	11.8%
Materials	67.9%	11.5%	0.8%	7.2%	12.7%
Records	74.6%	1.2%	3.0%	5.5%	15.8%
Other (Ancillary System)	78.1%	6.6%	0.7%	3.6%	11.0%
Total	67.6%	10.7%	1.3%	7.9%	12.6%

Notes:

1. Administrative/Clerical Support includes all clerks (admitting, ward, payroll, and others), secretaries, and other administrative staff excluding managers).
2. Relief includes sick leave relief, worker's compensation leave relief, and all other relief as coded by health boards. It probably significantly understates relief due to coding practice with respect to overtime.
3. Overtime includes banked and paid overtime and callback.
4. Illness and Injury Leave includes both sick leave and worker's compensation leave.
5. Other Leave includes vacation, compassionate, jury duty, union, statutory holiday, education, and other miscellaneous paid leave. Unpaid leave is not included.

4. Functional Centres

Table 6 shows the number of FTEs within each functional centre for the fiscal year 2002/03, sorted by descending order.

Table 6. FTEs By Functional Centre, Fiscal Year 2002/03.

Functional Centre	FTEs	FTEs As a Per Cent of Total FTEs	Cumulative Total Per Cent
Long Term Care Nursing/Resident Unit	2159.3	14.3%	14.3%
Housekeeping	978.6	6.5%	20.8%
Patient/Resident Food Services	878.7	5.8%	26.7%
Medical Nursing Unit	849.7	5.7%	32.3%
Surgical Nursing Unit	653.9	4.3%	36.7%
Clinical Laboratory	565.2	3.8%	40.4%
Intensive Care Nursing Unit	522.6	3.5%	43.9%
Diagnostic Imaging	454.1	3.0%	46.9%
Specialty Day/Night Care	405.5	2.7%	49.6%
Psychiatry/Addiction Nursing/Resident Units	373.5	2.5%	52.1%
Health Records	370.9	2.5%	54.6%
Material Management	352.9	2.3%	56.9%
Plant Maintenance	352.3	2.3%	59.2%
Specialty Clinics	348.0	2.3%	61.6%
Administration	331.9	2.2%	63.8%
Emergency	287.7	1.9%	65.7%
Human Resources	286.3	1.9%	67.6%
Laundry and Linen	276.9	1.8%	69.4%
Combined Medical/Surgical Nursing Unit	264.0	1.8%	71.2%
Child, Youth & Family Services Program Area	250.4	1.7%	72.8%
Obstetrics Nursing Unit	242.9	1.6%	74.4%
Operating Room	209.3	1.4%	75.8%
Finance	203.7	1.4%	77.2%
Nursing Inpatient/Resident Administration (c)	198.8	1.3%	78.5%
Continuing Care Program area	192.9	1.3%	79.8%
Clinical Pharmacy and Drug Procurement and Distribution	171.0	1.1%	80.9%
Combined Emergency/Specialty Clinics	170.8	1.1%	82.1%
Family & Rehab Program Area	163.4	1.1%	83.2%
Health Promotion Program Area	153.1	1.0%	84.2%
Patient/Resident/Client Transport	131.6	0.9%	85.0%
All Other (56 other functional centres)	2251.3	15.0%	100.0%
Total	15,051.1	100.0%	100.0%

The highest number of FTEs in any one functional centre for the fiscal year 2002/03 is Long Term Care Nursing/Resident Unit with 2159.3 FTEs.

Health boards use the Canadian Institute for Health Information Management Information Guidelines (MIS) differently when assigning their workforce to functional centers. For example, at least six facilities in the province have long-term care beds but there is no functional center “long-term care” evident in the data for those facilities. This understates the earned hours attributable to the provincial “long-term care” sector and overstates statistics for other functional centres.

The MIS structure is fixed but there remains flexibility within that structure. Naming conventions vary throughout the province. Also, health boards use varying levels when subdividing functional centres, and caution must be used when benchmarking at the lower levels of detail. Due to the program management structure/model adopted by the Health Care Corporation of St. John's, workforce hours are attributed to functional centres within programs rather than functional centres formed for specific professional types. For instance, dietitian earned hours may be attributed to surgical or intensive care functional centres rather than the functional centre "Clinical Nutrition" which was specifically formed in the MIS framework for these employees.

5. Worked To Earned Ratios

Worked to earned ratios indicate the percentage of time employees are carrying out the assigned duties of the functional center i.e. per cent of their time worked. Table 7 indicates the worked to earned ratios for primary occupations, ancillary occupations - clinical, and ancillary occupations - system for the fiscal year 2002/03, sorted alphabetically by occupation groups.

Table 7. Worked to Earned Ratios, Fiscal Year 2002/03.

Primary Occupation ¹	Worked to Earned Ratio	Ancillary Occupations - Clinical ²	Worked to Earned Ratio
Audiologist	83.8%	Audiology Technician	76.4%
Behaviour Management Specialist	81.8%	Cardiology Technician	83.8%
Cardiology Technologist	81.6%	Combined LX Technician	83.8%
Cardio-Pulmonary Technologist	81.9%	Community Service Worker	80.3%
Combined LX Technologist	83.1%	Dental Technicians	87.0%
Dentist	82.1%	Medical Laboratory Technician	81.8%
Dietitian/Nutritionist	84.2%	Medical Radiation Technician	80.9%
Dosimetrist	83.6%	Nuclear Medicine Technician	85.9%
Electroneurophysiology Technol.	80.8%	Occup. Therapy Support Worker	84.4%
Genetic Counsellor	82.8%	Paramedic	78.2%
Licensed Practical Nurse	75.4%	Personal Care Attendant	81.0%
Manager	82.8%	Pharmacy Technician	82.9%
Medical Laboratory Technologist	82.0%	Physiotherapy Assistant	78.2%
Medical Physicist	92.3%	Prosthetist-Orthotist Technician	67.4%
Medical Radiation Technologist	82.7%	Psychology Assistant	87.4%
Nuclear Medicine Technologist	84.9%	Recreation Therapy Worker	79.5%
Occupational Therapist	84.6%	Social Service Worker	82.8%
Orthopedic Technologist	80.1%	Other (Ancillary Clinical)	81.3%
Pharmacist	84.5%	Subtotal (Ancillary Clinical)	80.9%
Physiotherapist	84.5%		
Prosthetist-Orthotist	79.5%	Ancillary Occupations - System³	
Psychologist (Clinical)	84.3%	Administration ⁴	80.9%
Radiation Therapist	86.5%	Biomedical Engineering	85.8%
Recreation/Develop. Specialist	83.3%	Dietary	77.8%
Registered Nurse	79.4%	Facilities	80.9%
Respiratory Therapist	84.0%	Housekeeping	77.2%
Social Worker	81.6%	Information systems	86.7%
Speech Language Pathologist	82.3%	Laundry	79.0%
Other (Primary)	85.8%	Materials	80.1%
Subtotal (Primary)	79.3%	Records	78.7%
		Other (Ancillary System)	85.4%
		Subtotal (Ancillary System)	79.5%
	Total		79.5%

Notes:

1. Other (Primary) includes assistant clinical microbiologist, cardiovascular perfusion technologists, child care services consultants, clinical biochemists, management engineers, kinesiologists, music therapists, orthopists, and pastoral care clinicians.
2. Other (Ancillary Clinical) includes beauticians, cardiovascular perfusion technicians, researchers, electrocardiogram (EKG) technicians, family support workers, financial assistance officers, homemakers, ophthalmologist assistants, and health educators.
3. Other (Ancillary System) includes aircraft dispatchers, aircraft maintenance engineers, pilots and students.
4. Administrative/clerical support includes all clerks (admitting, ward, payroll, and others), secretaries, and other administrative staff excluding managers).

In the primary occupations category, medical physicists had the highest percentage of all their earned hours (92.3 per cent) as worked but they only accounted for 3.6 FTEs of the entire health board workforce. Conversely, licensed practical nurses had 2325.1 FTEs as worked hours, or 75.3 per cent of all their earned hours. Of the primary occupations listed within Table 7, licensed practical nurses have the lowest worked to earned ratio.

There is considerable variation between health boards. Table 8 shows the worked to earned ratios by health board for fiscal years 2001/02 and 2002/03, sorted descending by worked to earned ratios for fiscal 2002/03.

Table 8. Worked to Earned Ratios by Health Board, Fiscal Year 2001/02 and 2002/03.

Health Board	Fiscal 2001/02	Fiscal 2002/03
	Worked to Earned Ratio	Worked to Earned Ratio
Newfoundland Cancer Treatment and Research Foundation	81.9%	84.3%
Health Labrador Corporation	83.8%	83.3%
Health and Community Services Central	83.1%	82.4%
Grenfell Regional Health Services Board	82.8%	81.9%
Health and Community Services Eastern	81.0%	81.9%
Health and Community Services Western	86.1%	81.9%
Health and Community Services St. John's	81.0%	80.8%
Central East Health Care Institutions Board	79.2%	79.9%
Health Care Corporation of St. John's	79.8%	79.9%
Peninsulas Health Care Corporation	79.6%	79.9%
Central West Health Corporation	79.6%	79.4%
St. John's Nursing Home Board ¹	Not available ¹	78.5%
Pentecostal Senior Citizen's Home	76.9%	78.1%
Western Health Care Corporation	77.5%	77.4%
Avalon Health Care Institutions Board	74.5%	75.8%
Total	79.5%	79.5%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.
2. For a summary of worked to earned ratios by occupation by health board contact the human Resource Planning Unit.

In 2002/03, Newfoundland Cancer Treatment and Research Foundation had the highest worked to earned ratio, at 84.3 per cent. Avalon Health Care Institutions Board had the lowest worked to earned ratio at 75.8 per cent.

Two occupations from each of the three occupational categories were examined to detail work to earned ratios by health board. Occupations with low worked to earned ratios and relatively large numbers of FTEs were chosen. They are registered nurses and licensed practical nurses from the primary occupations category, paramedics and personal care attendants from the ancillary occupations – clinical category, and dietary and housekeeping staff from the ancillary occupations – systems category. Note that similar data for other occupations is available upon request.

Table 9 provides registered nurses' worked to earned ratios by health board for fiscal year 2000/01 to 2002/03, sorted descending by worked to earn ratios for fiscal 2002/03.

Table 9. Registered Nurse Worked to Earned Ratios by Health Board, Fiscal Years 2000/01 to 2002/03.

Health Board	Fiscal 2000/01	Fiscal 2001/02	Fiscal 2002/03
Health Labrador Corporation	82.3%	85.3%	85.1%
Newfoundland Cancer Treatment and Research Foundation	84.7%	84.6%	84.7%
Pentecostal Senior Citizen's Home	86.3%	79.9%	82.5%
Grenfell Regional Health Services Board	78.7%	83.1%	82.5%
Health and Community Services Western	92.9%	91.9%	82.3%
Health and Community Services Central	81.1%	83.6%	81.7%
St. John's Nursing Home Board ¹	80.3%	Not available	81.1%
Peninsulas Health Care Corporation	76.4%	79.7%	81.0%
Health and Community Services St. John's	82.0%	81.0%	80.9%
Central East Health Care Institutions Board	77.4%	81.1%	80.6%
Central West Health Corporation	79.7%	80.0%	79.7%
Health and Community Services Eastern	79.3%	79.9%	79.1%
Health Care Corporation of St. John's	77.4%	79.1%	78.9%
Western Health Care Corporation	76.7%	78.4%	78.0%
Avalon Health Care Institutions Board	74.4%	74.8%	74.4%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.

In 2002/03, the range of worked to earned ratios for registered nurses was 74.4 per cent in Avalon Health Care Institutions Board to 85.1 per cent in Health Labrador Corporation.

Table 10 provides health board data for licensed practical nurses' worked to earned ratios by health board for fiscal year 2000/01 to 2002/03, sorted descending by worked to earn ratios for fiscal 2002/03.

Table 10. Licensed Practical Nurse Worked to Earned Ratios by Health Board, Fiscal Years 2000/01 to 2002/03.

Health Board	Fiscal 2000/01	Fiscal 2001/02	Fiscal 2002/03
Grenfell Regional Health Services Board	81.2%	82.2%	81.3%
Health Labrador Corporation	75.8%	76.7%	79.1%
Pentecostal Senior Citizen's Home	72.6%	68.7%	78.2%
Peninsulas Health Care Corporation	76.2%	77.2%	78.0%
Health Care Corporation of St. John's	76.9%	76.7%	77.5%
Central East Health Care Institutions Board	73.5%	74.5%	75.8%
Central West Health Corporation	75.4%	76.5%	75.0%
St. John's Nursing Home Board ¹	73.7%	Not available	74.7%
Western Health Care Corporation	72.6%	73.7%	73.5%
Avalon Health Care Institutions Board	67.8%	67.0%	71.2%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.
2. Data was suppressed for Health and Community Service Western and Health and Community Services St. John's to ensure confidentiality due to small sample size.

In 2002/03, the range of ratios for licensed practical nurses is 71.2 per cent in Avalon Health Care Institutions Board to 81.3 per cent in Grenfell Regional Health Services Board. Both the high and low figures for licensed practical nurses are less than the corresponding figures for registered nurses. This is consistent with higher rates of absenteeism for licensed practical nurses.

Table 11 provides health board data for paramedics' worked to earned ratios by health board for fiscal year 2001/02 to 2002/03, sorted descending by worked to earned ratios for fiscal 2002/03.

Table 11. Paramedic Worked to Earned Ratios by Health Board, Fiscal Years 2001/02 to 2002/03.

Health Board	Fiscal 2001/02	Fiscal 2002/03
Grenfell Regional Health Services Board	88.0%	85.7%
Western Health Care Corporation	77.6%	79.9%
Central East Health Care Institutions Board	77.1%	79.5%
Health Care Corporation of St. John's	81.6%	79.4%
Central West Health Corporation	80.7%	75.2%
Avalon Health Care Institutions Board	68.4%	70.3%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.
2. Data was suppressed for Health Labrador Corporation to ensure confidentiality due to small sample size.

In 2002/03, the range of ratios for paramedics is 70.3 per cent in Avalon Health Care Institutions Board to 85.7 per cent in Grenfell Regional Health Services Board. It is important to note that data in Table 11 only reflects statistics on paramedics working in health boards. Significant numbers of paramedics work outside of the health boards.

Table 12 provides health board data for personal care attendants' worked to earned ratios by health board for fiscal year 2001/02 to 2002/03, sorted descending by worked to earned ratios for fiscal 2002/03.

Table 12. Personal Care Attendant Worked to Earned Ratios by Health Board, Fiscal Years 2001/02 to 2002/03.

Health Board	Fiscal 2001/02	Fiscal 2002/03
Health Labrador Corporation	85.4%	85.8%
Central West Health Corporation	86.9%	85.4%
St. John's Nursing Home Board ¹	Not available	84.2%
Health Care Corporation of St. John's	83.2%	79.4%
Central East Health Care Institutions Board	82.9%	79.0%
Grenfell Regional Health Services Board	81.6%	75.9%
Pentecostal Senior Citizen's Home	72.0%	74.4%
Western Health Care Corporation	71.0%	72.6%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.
2. Data was suppressed for Health and Community Services Western, Avalon Health Care Institutions Board, Newfoundland Cancer Treatment and Research Foundation, and Peninsulas Health Care Corporation to ensure confidentiality due to small sample size.

In 2002/03, the range of ratios for personal care attendants is 72.6 per cent in Western Health Care Corporation to 85.8 per cent in Health Labrador Corporation.

Table 13 provides health board data for dietary staff worked to earned ratios by health board for fiscal year 2001/02 to 2002/03, sorted descending by worked to earn ratios for fiscal 2002/03.

Table 13. Dietary Staff Worked to Earned Ratios by Health Board, Fiscal Years 2001/02 to 2002/03.

Health Board	Fiscal 2001/02	Fiscal 2002/03
Central West Health Corporation	78.8%	80.9%
St. John's Nursing Home Board ¹	Not available	78.9%
Health Labrador Corporation	77.2%	78.5%
Central East Health Care Institutions Board	76.8%	78.2%
Avalon Health Care Institutions Board	74.2%	77.6%
Western Health Care Corporation	76.1%	77.5%
Health Care Corporation of St. John's	75.9%	76.4%
Pentecostal Senior Citizen's Home	79.1%	76.2%
Peninsulas Health Care Corporation	76.6%	75.4%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.
2. Data was suppressed for Health and Community Services St. John's and Grenfell Regional Health Services Board to ensure confidentiality due to small sample size.

In 2002/03, the range of ratios for dietary staff is 75.4 per cent in Peninsulas Health Care Corporation to 80.9 per cent in Central West Health Corporation.

Table 14 provides health board data for housekeeping staff worked to earned ratios by health board for fiscal year 2001/02 to 2002/03, sorted descending by worked to earn ratios for fiscal 2002/03.

Table 14. Housekeeping Staff Worked to Earned Ratios by Health Board, Fiscal Years 2001/02 to 2002/03.

Health Board	Fiscal 2001/02	Fiscal 2002/03
Grenfell Regional Health Services Board	80.2%	82.6%
Health Labrador Corporation	79.8%	79.8%
Central West Health Corporation	80.8%	79.5%
Health and Community Services St. John's	83.9%	78.9%
Central East Health Care Institutions Board	77.9%	78.8%
Peninsulas Health Care Corporation	78.3%	78.0%
Health Care Corporation of St. John's	78.1%	77.5%
St. John's Nursing Home Board ¹	Not available	77.0%
Avalon Health Care Institutions Board	72.8%	75.5%
Western Health Care Corporation	73.6%	73.7%
Pentecostal Senior Citizen's Home	80.8%	73.4%

Notes:

1. St. John's Nursing Home Board data was not available for fiscal year 2001/02.

In 2002/03, the range of ratios for housekeeping staff is 73.4 per cent in Pentecostal Senior Citizen's Home to 82.6 per cent in Grenfell Regional Health Services Board.

This concludes this Part of the Human Resource Indicator Report 1999 to 2003. For more detail on other earned hour types please read [Part 3 – Overtime, Callback, and Relief](#) and [Part 4 – Workforce Wellness](#).