

Chapter 24

Saskatchewan Health Authority—Filling Hard-to-Recruit Healthcare Positions

1.0 MAIN POINTS

Hard-to-recruit healthcare positions include those jobs responsible for directly delivering healthcare services where the Saskatchewan Health Authority has trouble in recruiting and retaining staff with the required competencies for the role. Having staff shortages for a long period can contribute to work overload and staff burnout.

By August 2025, the Authority fully implemented three of the seven recommendations we first made in 2022 relating to filling hard-to-recruit healthcare positions.

The Authority implemented processes to determine whether student clinical placements and post-secondary training seats purchased out of province are successful recruitment strategies for hard-to-recruit positions—it hired almost 136 staff who completed clinical placements with the Authority and almost 80% of graduated students from training seats purchased out of province in 2024. Additionally, the Authority established targets and reported on performance measures (e.g., chronic vacancy rates) to evaluate the success of its recruitment and retention strategies for hard-to-recruit positions.¹

The Authority still needs to:

- Assess in which facility locations across the province it expects the most significant shortages of hard-to-recruit positions, and consider associated root causes—further analysis can assist the Authority in determining where it needs staff most and help it implement appropriate targeted plans
- Develop targets for performance measures in its First Nations and Métis recruitment and retention plan, which can help determine whether its actions increase Indigenous representation at the Authority
- Analyze the results of staff exit surveys to help inform its retention strategies—lack of analysis limits the Authority’s ability to adjust its strategies where necessary

Successful recruitment and retention of key staff is a significant factor toward providing quality healthcare service, and meeting staffing demand. Staffing deficiencies in healthcare can have serious consequences, including patient death.

¹ Chronic vacancies are positions that have been vacant for an extended period (i.e., more than three months).



2.0 INTRODUCTION

2.1 Background

The Saskatchewan Health Authority is responsible for planning, organizing, delivering, and evaluating healthcare services within the province. Under *The Provincial Health Authority Act*, the Authority is responsible for engaging the services of any person in order to carry out its work.²

The Authority's human resources department is responsible for recruiting the Authority's workforce (not including physicians), and for executing retention strategies. It routinely hires staff, as well as organizes orientations, provides training opportunities, and administers benefit plans for staff.

The province released a *Health Human Resources Action Plan* in September 2022 to accelerate efforts to attract and retain healthcare workers. The Plan outlines four pillars—recruitment, training, incentives, and retention—to guide health-sector actions for addressing challenges within the healthcare workforce.³

The Authority lists hard-to-recruit positions on its website. **Figure 1** lists 32 hard-to-recruit positions identified by the Authority as of April 2025, with seven positions designated for positions in rural or northern Saskatchewan.

Figure 1—Saskatchewan Health Authority Hard-to-Recruit List as of April 2025

Anesthesia Assistant	Medical Resonance Imaging Technologist
Audiologist	Nuclear Medicine Technologist
Cardiology Technologist	Nurse Practitioner
Cardiopulmonary Function Technologist	Occupational Therapist
Cardiovascular Technologist	Pathologist Assistant
Clinical Genetics Technologist	Perfusionist
Combined Laboratory and X-Ray Technologist	Pharmacist
Continuing Care Assistant (Rural and North positions only) ^A	Pharmacy Technician
Cook (Rural and North positions only) ^A	Physician Assistant
Diagnostic Cardiac Sonographer	Physical Therapist
Diagnostic Medical Sonographer	Public Health Inspector (Rural and North positions only) ^A
Electroneurophysiology Technologist	Speech Language Pathologist
Emergency Medical Technician (Primary Care and Advanced Care Paramedic) (Rural and North positions only) ^A	Psychologist (Masters and Doctorate)
Licensed Practical Nurse (Rural and North positions only) ^A	Registered Nurse (Rural and North positions and speciality areas only) ^A
Medical Laboratory Technologist	Registered Psychiatric Nurse (Rural and North positions only) ^A
Medical Radiation Technologist	Respiratory Therapist

Source: www.saskhealthauthority.ca/careers-volunteering/careers/hard-recruit-opportunities

^A The Saskatchewan Health Authority defines rural and north positions as those not located in either Regina or Saskatoon.

² *The Provincial Health Authority Act*, s. 4-3(2)(e).

³ Government of Saskatchewan, *Health Human Resources Action Plan—September 2022*, p. 3.

The Authority identifies positions as hard-to-recruit for a variety of reasons (e.g., certain educational programs only available outside of Saskatchewan, higher levels of education required), and the location of positions in rural or remote areas of the province.

2.2 Focus of Follow-Up Audit

This chapter describes our first follow-up audit of management's actions on the recommendations we made in 2022.

We concluded the Saskatchewan Health Authority had, for the 12-month period ended March 31, 2022, effective processes to fill hard-to-recruit healthcare positions, except for the areas reflected in our seven recommendations.⁴

To conduct this audit engagement, we followed the standards for assurance engagements published in the *CPA Canada Handbook—Assurance* (CSAE 3001). To evaluate the Authority's progress toward meeting our recommendations, we used the relevant criteria from the original audit. Authority management agreed with the criteria in the original audit.

To carry out our follow-up audit, we discussed with management the actions taken. We met with key staff responsible for filling hard-to-recruit positions, examined relevant documentation (e.g., work standards, meeting minutes, progress reports), and reviewed a sample of recruitment plans for hard-to-recruit positions.

3.0 STATUS OF RECOMMENDATIONS

This section sets out each recommendation including the date on which the Standing Committee on Public Accounts agreed to the recommendation, the status of the recommendation at August 31, 2025, and the Saskatchewan Health Authority's actions up to that date.

3.1 Staffing Gaps by Facility Needed to Inform Targeted Recruitment and Retention Plans

We recommended the Saskatchewan Health Authority determine in which facility locations across the province it expects to have the most significant shortages of hard-to-recruit positions. (2022 Report – Volume 2, p. 142, Recommendation 1; Public Accounts Committee agreement February 27, 2024)

Status—Partially Implemented

We recommended the Saskatchewan Health Authority implement targeted plans to address recruitment and retention for specific hard-to-recruit positions where it expects to have significant gaps. (2022 Report – Volume 2, p. 147, Recommendation 2; Public Accounts Committee agreement February 27, 2024)

Status—Partially Implemented

⁴ 2022 Report – Volume 2, Chapter 12, pp. 133–158.



The Saskatchewan Health Authority has yet to assess in which healthcare facility locations across the province it expects the most significant shortages of hard-to-recruit positions, or to consider associated root causes to help develop targeted recruitment and retention plans.

The Authority maintains a vacancy dashboard to track various information about existing vacancies for hard-to-recruit positions across the province, including the occupation, location, and facility. It also projected its five-year staffing gap (to 2027) for hard-to-recruit positions (e.g., forecasted gap of 66 respiratory therapists) across the province. While the dashboard provides the Authority with information about current staffing gaps for hard-to-recruit positions at specific facility locations (e.g., 10 continuing care assistant positions chronically vacant in Regina during September 2025), the Authority had yet to begin forecasting in which facility locations it expects to have the most significant shortages of hard-to-recruit positions.⁵ For example, an analysis of expected staffing gaps by facility location across the province can provide the Authority with information to help proactively prioritize and tailor its recruitment processes accordingly (e.g., consider community engagement, assess the need for accessible housing in the respective community)—reducing the risk of having to respond to staffing gaps as they occur.

We did find, on a pilot basis, the Authority forecasted future needs for certain hard-to-recruit positions for two significant capital projects under construction (i.e., new healthcare facilities in La Ronge and Grenfell). We reviewed the Authority's workplan for the project in La Ronge and found it forecasted its need for hard-to-recruit positions (e.g., four registered nurses, five licensed practical nurses). It planned to fill these positions in 2025–26.

The Authority has individual recruitment plans for the hard-to-recruit positions listed in **Figure 1**. It also set an overall chronic vacancy rate target of 5% for hard-to-recruit positions. Our testing of four plans for those chronically vacant positions found:

- Advertising plans (e.g., attending conferences, posting jobs with industry associations, presenting at post-secondary institutions)
- Consideration of different recruitment sources (e.g., out-of-province candidates, social media, post-secondary institutions, recruitment networks or industry associations)⁶
- Creation of working groups to monitor progress in hiring for each position

We found the plans did not include analysis of identified root causes to evaluate possible reasons for significant staffing gaps. Additionally, we found the plans similar in nature and not unique. Understanding where in the province it expects to experience the most significant shortages of hard-to-recruit positions, and why, can help the Authority toward developing more targeted recruitment and retention plans that address root causes (e.g., lack of housing, need for financial incentives) that may be unique to certain areas of the province.

⁵ The Saskatchewan Health Authority considers chronic vacancies as those positions vacant for more than 90 days.

⁶ The Authority indicated it also works with the Saskatchewan Healthcare Recruitment Agency to source potential applicants for classifications it deems to be the highest priority.

While the Authority had yet to develop unique recruitment and retention plans for specific hard-to-recruit positions with significant gaps, we found it considered unique circumstances for recruiting staff in La Ronge. In October 2023, the Authority formed a working group comprised of staff from its various departments (e.g., Organizational Culture, First Nations and Métis Health, Labour Relations) to consider and address recruitment challenges (e.g., housing availability) in La Ronge.

Analyzing expected staffing gaps by facility location across the province can assist the Authority in determining where it needs staff most and help it implement appropriate and targeted plans. Doing so should help the Authority minimize service disruptions to the public by addressing positions with chronic vacancies.

3.2 Student Clinical Placements Analyzed

We recommended the Saskatchewan Health Authority analyze whether clinical placements for students are a successful recruitment strategy for hard-to-recruit positions. (2022 Report – Volume 2, p. 148, Recommendation 3; Public

Accounts Committee agreement February 27, 2024)

Status—Implemented

The Saskatchewan Health Authority implemented a process to track information about student clinical placements and analyze whether placements are a successful recruitment strategy for hard-to-recruit positions.

Annually, the Authority creates clinical placement opportunities, including for hard-to-recruit positions, across the province for about 4,500 healthcare students enrolled at Saskatchewan post-secondary institutions. The Authority provides supervision and training (with experienced practitioners) for most clinical placement students.

We found the Authority maintains a spreadsheet to track (e.g., name, post-secondary institution, hiring status with the Authority) student clinical-placement information. It also developed a work standard to guide its analysis of whether clinical placements are a successful recruitment strategy and expects to analyze this each academic school year.

For example, in July 2025, the Authority assessed its hiring of students from 19 hard-to-recruit occupations requiring clinical placements (e.g., nuclear medicine technologist, nurse practitioner, physical therapist) following the 2023–24 academic year. The Authority found it hired 290 staff within those occupations, with 136 (47%) of those staff completing clinical placements with the Authority in their final year of study.

The Authority is also developing a survey to help further understand students' experiences during their clinical placements. We reviewed the draft survey and found it included relevant questions to help the Authority assess its clinical placements (e.g., workload, learning opportunities, inclusivity, willingness to work for the Authority in future, challenges faced). The Authority indicated it expects to implement its survey by March 2026.

Clinical placements are an important recruitment strategy that the Authority is uniquely positioned to use. Measuring the success of the strategy enables the Authority to make necessary adjustments and utilize clinical placements effectively.



3.3 Success of Out-of-Province Training Seats Assessed

We recommended the Saskatchewan Health Authority periodically determine whether post-secondary training seats purchased out of province are successful at addressing vacancies for hard-to-recruit positions. (2022 Report – Volume 2, p. 151, Recommendation 4; Public Accounts Committee agreement February 27, 2024)

Status—Implemented

The Saskatchewan Health Authority began to track its success in hiring students who use post-secondary training seats purchased out of province.

The Government of Saskatchewan, through the Ministry of Advanced Education, signs inter-provincial agreements to purchase training seats related to healthcare education at Canadian post-secondary institutions outside of Saskatchewan.⁷ This type of training is required for several hard-to-recruit positions (e.g., respiratory therapist, diagnostic medical sonographer). The Government purchases the training seats to allow students who are Saskatchewan residents that meet the post-secondary educational requirements to access specialized healthcare training outside of the province.

We found the Authority requests student consent to be contacted about future job opportunities in Saskatchewan. Upon receiving consent, Authority staff contact these students and inform them about available job opportunities upon graduation. Doing so provides the Authority with an opportunity to provide conditional offers to interested students to help address vacancies in hard-to-recruit positions.

The Authority maintains a spreadsheet to track the post-secondary training seats purchased out of province (by graduation year), along with the names of the students and whether they accepted an offer of employment. We found the Authority hires a significant number of students occupying post-secondary training seats purchased out of province—for the five hard-to-recruit occupations with students graduating in 2024, the Authority hired almost 80% (or 30) of those students.

Starting in 2026–27, some post-secondary institutions in Saskatchewan expect to offer seats for certain hard-to-recruit occupations that the Government previously had to purchase out of province. The Authority anticipates the following occupations to have training seats available in Saskatchewan (i.e., at the University of Saskatchewan or Saskatchewan Polytechnic) during 2026–27: occupational therapy (40 seats), speech language pathology (40 seats), and respiratory therapy (20 seats). Establishing and offering specific training in Saskatchewan for more hard-to-recruit positions can help increase the likelihood of students remaining and working in the province following graduation.

Monitoring whether students using government-purchased, out-of-province seats return to work at the Authority reduce the risk that public money is not well spent.

⁷ During 2024–25, the Ministry of Advanced Education spent about \$6.04 million securing training seats related to healthcare education at Canadian post-secondary institutions outside of Saskatchewan.

3.4 Targets Lacking for First Nations and Métis Recruitment and Retention Plan Measures

We recommended the Saskatchewan Health Authority implement a First Nations and Métis recruitment and retention plan to help fill hard-to-recruit positions. (2022 Report – Volume 2, p. 154, Recommendation 5; Public Accounts Committee agreement February 27, 2024)

Status—Partially Implemented

The Saskatchewan Health Authority implemented a First Nations and Métis recruitment and retention plan but has yet to develop targets for all associated performance measures.

The Authority included its First Nations and Métis recruitment and retention plan within its *Health Human Resources Operational Plan 2022–2026*.⁸ Our review of the plan found it highlighted key actions for increasing Indigenous representation within the Authority's workforce, such as:

- Developing partnerships with Indigenous post-secondary institutions and regional colleges to address staffing vacancies
- Modernizing current bursaries and incentives for hard-to-recruit positions that target First Nation and Métis recruits
- Creating a strategy to support Indigenous employees (e.g., talking circles, access to Elders)

We found the Authority identified performance measures to help assess whether its plan is successful but has yet to develop targets for each measure. **Figure 2** shows examples of some performance measures, along with associated targets and results where applicable from its First Nations and Métis Recruitment and Retention Plan. There is only one measure that has a target as of August 2025.

Figure 2—Examples of Performance Measures from the Saskatchewan Health Authority's First Nations and Métis Recruitment and Retention Plan

Performance Measure	Target	Actual (June 2025)
Indigenous staff working at the Authority (%)	15.2% ^A	5.15%
Indigenous staff working in north (%), rural (%), Saskatoon (%), and Regina (%)	No targets ^B	N/A ^C
Length of employment (in years) for Indigenous people working at the Authority	No target	N/A ^C

Source: Adapted from information provided by the Saskatchewan Health Authority.

^A The Authority's target for this measure represents the Saskatchewan working age population self-identifying as Indigenous (informed by Statistics Canada's 2021 census). We found the Authority's target consistent with guidance about employment equity targets provided by the Saskatchewan Human Rights Commission.

^B At August 2025, the Authority had yet to accumulate data to define a target for this measure. It expects to establish a target based on Indigenous representation from regional population demographics.

^C At June 2025, the Authority had started to accumulate actual results about these performance measures but had yet to internally communicate results with staff.

⁸ The Saskatchewan Health Authority's *Health Human Resources Operational Plan 2022–2026* supports the Government's *Health Human Resources Action Plan 2022–2026* to address current challenges and build a stronger, more sustainable workforce. *Health Human Resources Operational Plan 2022–2026*, p. 2.



Lack of targets for all performance measures limit the Authority's ability to assess whether their First Nations and Métis recruitment and retention plan successfully contributes toward a diverse workforce and ultimately helps to fill hard-to-recruit positions.

3.5 No Analysis of Centrally Collected Staff Exit Surveys

We recommended the Saskatchewan Health Authority centralize its analysis of staff exit surveys to inform retention strategies for hard-to-recruit positions. (2022 Report – Volume 2, p. 154, Recommendation 6; Public Accounts Committee agreement February 27, 2024)

Status—Partially Implemented

The Saskatchewan Health Authority centralized the collection of staff exit surveys but has yet to analyze the survey results to consider changes to its retention strategies.

In January 2024, the Authority began using a service provider to centrally administer and collect staff exit surveys. We found the Authority periodically (at least annually) shared the survey results with senior management. However, we found the Authority has yet to analyze the results to inform any adjustments to its retention strategies for hard-to-recruit positions.

Up to September 2025, the Authority indicated it concentrated on gathering sufficient exit survey data for analysis. Management expects to prioritize this data analysis in fall 2025 to help inform their retention strategies.

Staff exit surveys can provide an organization with valuable information about where it can improve. Lack of analysis of staff exit surveys limit the Authority's ability to assess the effectiveness of and adjust its recruitment and retention efforts for hard-to-recruit positions.

3.6 Measures for Recruitment and Retention Activities Established

We recommended the Saskatchewan Health Authority establish further measures to evaluate the success of its recruitment and retention activities for hard-to-recruit positions. (2022 Report – Volume 2, p. 158, Recommendation 7; Public Accounts Committee agreement February 27, 2024)

Status—Implemented

The Saskatchewan Health Authority established measures to evaluate the success of its recruitment and retention strategies for hard-to-recruit positions.

The Authority's *Health Human Resources Operational Plan 2022–2026* sets out specific strategies to address current and projected workforce needs.⁹ This includes strategies specific to hard-to-recruit positions, such as recruiting internationally-trained healthcare professionals, expanding training seats in the province, and offering bursaries and recruitment incentives.

⁹ *Health Human Resources Operational Plan 2022–2026*, p. 4.

The Authority provides the Ministry of Health with weekly updates about its achievements (i.e., actual results compared to targets) for strategies set out in its operational plan. The Ministry incorporates the Authority's information within weekly reports informing senior officials (e.g., senior management, Minister of Health) about the progress of strategies across health sector agencies (e.g., Saskatchewan Cancer Agency). We tested five weekly reports and found the Authority reported to the Ministry as expected. **Figure 3** sets out examples of achievements associated with strategies in the operational plan at June 2025.

Figure 3—Examples of Strategic Achievements from the Health Human Resources Operational Plan between September 2022 and June 2025

Strategy	Target	Actual Results (June 2025)
Recruitment of internationally trained healthcare professionals	Recruit hundreds of healthcare workers	Over 400 healthcare workers recruited
Recruitment of physician assistants	Recruit 12 physician assistants	Four physician assistants recruited
Training seat expansion	N/A ^A	Training seats added for four hard-to-recruit occupations ^A
Rural and Remote Recruitment Incentive ^B	180 incentive packages awarded	424 packages awarded (including staff filling eight hard-to-recruit positions)
Clinical placement bursaries ^C	300 bursaries awarded	128 applications received; 78 bursaries approved
Rural and Remote Stabilization Initiative (increased positions) ^D	Add 65 new or enhanced registered nurse positions to 30 rural and remote locations Add 20 nurse practitioner positions in rural communities	60 registered nurse positions filled 15 nurse practitioner positions filled

Source: Adapted from information provided by the Saskatchewan Health Authority.

^A No specific target for this strategy because expanding training seats in health human resources programs were intended to help meet broader labour needs of the province. At June 2025, post-secondary institutions in Saskatchewan added training seats for the following hard-to-recruit occupations: diagnostic medical sonography (underway), physician assistant (fall 2025), speech language pathology (fall 2026), and occupational therapy (fall 2026).

^B The Ministry of Health offers a one-time incentive of up to \$50,000 to healthcare workers in hard-to-recruit positions in rural and remote Saskatchewan. Recipients receive payment of the incentive over three years for a matching return-of-service agreement as new employees at the Authority (or affiliate) or the Saskatchewan Cancer Agency filling a permanent full-time position in specified hard-to-recruit positions (e.g., registered nurse, nurse practitioner, continuing care assistant).

^C The Ministry of Health provides \$2,000 to approved applicants to help support their final clinical placement requirements.

^D Intends to add new positions to help stabilize staffing in select rural and remote communities.

Additionally, we found the Authority reports to its Governance and Human Resources Committee quarterly about the information it reports to the Ministry weekly, along with its achievement of targets associated with performance measures for hard-to-recruit chronic vacancies. Our review of the reports the Authority provided to the Committee in May and September 2025 found the Authority reported about its strategies as expected. **Figure 4** shows the Authority made progress in reducing chronic vacancies in hard-to-recruit positions between June 2024 and 2025.

**Figure 4—Chronic Vacancies for Hard-to-Recruit Positions between June 2024 and 2025**

Performance Measure	Target	Results	
		June 2024	June 2025
Overall Chronic Vacancy Rate for Hard-To-Recruit Positions ^{A,B}	5%	4.9%	3.6%
Registered Nurse and Registered Psychiatric Nurse (Full-time and Part-Time) Chronic Vacancy Rate (overall)	5%	5.2%	3.2%
Chronic Vacancy Rate for Rural and Northern Nurses	5%	6.1%	4.1%

Source: Adapted from information provided by the Saskatchewan Health Authority.

^A See **Figure 1** for the list of 32 hard-to-recruit positions identified by the Authority as of April 2025.

^B At June 2025, the Authority had about 22,500 hard-to-recruit positions across the province, with over 750 positions chronically vacant.

We found the Authority's overall chronic vacancy rate for hard-to-recruit positions in June 2022, 2023, and 2024 was worse or very near its target of 5%. The Authority's reduction in chronic vacancies for hard-to-recruit positions at June 2025 help demonstrate the success of its recruitment and retention strategies.

Performance measures help the Authority assess achievement of its recruitment and retention strategies, and its ability to address vacancies in hard-to-recruit positions.