



BULLETIN

Hospital pharmacists face wage rollbacks

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Hospital pharmacists are worried patient health could be at risk as a result of wage rollbacks of up to 14 per cent, by creating more vacancies and heavier workloads.

A wage increase initiated in 2006 will be eliminated March 31 when the contract expires between the Health Employers Association of B.C. and the Health Sciences Association of B.C., which represents about 915 hospital pharmacists.

To address recruitment and retention issues, the HEABC, which co-ordinates labour relations under the Public Sector Employers Act in the province's six health authorities and other health employers, established a temporary increase of up to 14 per cent.

Increases of 8.75 per cent were given to pharmacists in supervisory roles and 13.95 per cent for staff pharmacists and clinical pharmacists, because they were deemed to most likely to seek work in the private sector.

"The adjustment is no longer required for pharmacists in health authorities because the recruitment and retention issues have eased and our overall compensation package, including benefits, is competitive with the private sector," said Michael Marchbank, president and CEO of the HEABC, in an e-mail.

Reid Johnson, HSA president, said eliminating the increase will put the province back into the same situation as in 2006 - pharmacists could leave the hospitals and find positions in the private sector.

There are pharmacists already retiring or resigning over the issue, Johnson said.

"There is going to be a risk to patients," he said.

Hospital pharmacists are already overworked and a rollback will create more shortages and heavier workloads, which could produce unsafe situations for patients, because of an increased risk of errors, Johnson said.

Suzanne Germain, a Vancouver Island Health Authority spokeswoman, said as the workforce ages and retires, finding and keeping the right people in many of health care's key professions is challenging. It's a situation that healthcare employers across B.C. and around the world face, she said.

Over the past several years the health authorities have implemented innovative practices to support quality, productivity and efficiency to address those challenges,

added Germain.

Hospital pharmacists undergo extra training, many have an additional doctorate degree and residency experience to perform the clinical duties required in health authorities.

They are responsible for a number of tasks in health care including clinical care and treatment of patients, advising doctors on medication, preparing chemotherapy drugs and collaborating with other health professionals in educating and caring for patients.

"They are the watchdogs to make sure in this incredibly complex world of pharmacology we aren't making mistakes," said Johnson. "You need people that have expertise."

The Health Employers Association says without the temporary wage increase, entry-level hospital pharmacists can still make up to \$41.56 an hour and the average compensation for a hospital pharmacist is \$104,000.

Marchbank said the union has the option of raising the issue during 2012 negotiations.

To bring public awareness to the issue, the Health Sciences Association has started a petition and created the website, www.pharmacistsmatter.ca, where people can send letters to the B.C. ministry representative and health authorities.

The Health Employers Association indicates vacancy rates for pharmacists in 2006 was 4.9 per cent and in 2011 that dropped to 2.4 per cent. The Health Sciences Association says vacancies in 2006 were about 21.7 per cent and dropped to 10.6 per cent by 2011. VIHA currently has postings for 14 pharmacists, which includes two temporary, one special project, six regular and five casual positions.

The HEABC says in 2006 there were about 630 pharmacists employed by health authorities, There are currently about 780. VIHA currently employs 63.37 full- time equivalent pharmacists, 9.63 of those FTE pharmacists work at Nanaimo Regional Hospital.

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