



DATE: May 5, 2009
TO: Alberta Health Services Executive Committee
FROM: Dr. Stephen Duckett, President and Chief Executive Officer
COPIES: Rob Armstrong
Angie Harwood
SUBJECT: Vacancy Management Process

As we progress in developing our budget for 2009/10 it is clear that we need to manage our recruitment/staffing closely. While we do not yet fully know the extent of our budget challenge we do know that we will not be able to address it without some impact on staffing. It is important therefore to take actions that minimize the direct impact on our current staff.

Effective immediately:

- Only positions that were filled in the last quarter of 2008/09 should be approved for recruitment unless approved by me (i.e. no new positions or positions that have gone unfilled for an extended period of time). This constraint applies to any proposed commissioning of new facilities ie. any new commissioning is, unless approved by me, to occur by use of existing employees.
- No position is to be advertised externally without approval by a member of the AHS Executive Committee. (Vacancies can be listed on the Alberta Health Services external career site with notification that they are for internal candidates only.)

In addition I would appreciate if you could review all positions that are currently posted but not yet filled and determine if the position must be filled at this time. In considering whether or not a position should be filled you should consider whether or not the position is necessary in meeting the minimum core responsibilities for your area (i.e. bed side nursing care, meeting payroll requirements, community service delivery or maintaining clinical systems), or they are integral to integration projects or key strategic initiatives. In assessing the need to fill the Executive member should also consider if there are alternatives such as transferring staff from other, lower priority, areas.

Before filling vacancies opportunities to combine vacant FTEs to create full-time or closer to full-time positions must also be considered. Opportunities to adjust the staff mix by employing lower cost replacement resources should also be considered i.e. replacing RNs with LPNs.

To ensure consistency across AHS I have asked Human Resources to review all requests to staff positions and to discuss directly with you positions where it appears there may be opportunities to either not staff, defer staffing or staff in a different manner.



Rob Armstrong or Angie Harwood will contact each of you to discuss how Human Resources can assist you in this effort, as well as to discuss if there are other related HR policies or practices you think could be adjusted to make it easier to function with fewer staff.

I appreciate that these will not be easy decisions and that most areas will have already determined that they believe each position that is posted or becomes vacant needs to be filled to meet the mandate for the area. However, decisions to not fill vacant positions are easier than decisions to eliminate positions that already have incumbents.

We are examining other options such as a voluntary severance program that may assist in managing the size of the workforce as we go forward and I will update you as more is known.

S. J. Duckett