Agenda – Council – July 22, 2009

Report – Executive Policy Committee – July 15, 2009

Item No. 8 Winnipeg Fire Paramedic Overtime and Sick Leave Audit
eFile FA-2

EXECUTIVE POLICY COMMITTEE RECOMMENDATION:

On July 15, 2009, the Executive Policy Committee concurred in the recommendation of the Audit Committee and submits the following to Council:

1. That the Winnipeg Fire Paramedic Service Overtime Audit report dated June 2009, be received as information.

2. That the Proper Officers of the City be authorized to do all things necessary to implement the intent of the foregoing.

Agenda – Council – July 22, 2009

Report – Executive Policy Committee – July 15, 2009

DECISION MAKING HISTORY:

EXECUTIVE POLICY COMMITTEE RECOMMENDATION:

On July 15, 2009, the Executive Policy Committee concurred in the recommendation of the Audit Committee and submitted the matter to Council.

AUDIT COMMITTEE RECOMMENDATION:

On June 29, 2009, the Audit Committee received as information the Winnipeg Fire Paramedic Service Overtime Audit report dated June 2009, and submitted the matter to the Executive Policy Committee and Council.

ADMINISTRATIVE REPORT

ISSUE: Winnipeg Fire Paramedic Overtime and Sick Leave Audit

Critical Path: Audit Committee – Executive Policy Committee - Council

AUTHORIZATION

Author	Department Head	CFO	CAO
B. Mansky	B. Whiteside		

RECOMMENDATIONS

The Audit Report contains 10 recommendations to:

- improve the quality of information available for decision makers on overtime and sick leave
- improve management control over the use of overtime and the monitoring of sick leave
- improve the security and reporting capabilities of the information systems
- reduce duplication of effort in data entry

The report is attached as an Adobe PDF.



Winnipeg Fire
Paramedic Overtime a

IMPLICATIONS OF THE RECOMMENDATIONS

The responsibility for implementation of the recommendations contained within the Audit Report resides with the Winnipeg Fire Paramedic Service. When implemented the implications of the recommendations should be:

- reduced overtime and sick leave costs
- improved security of the information systems
- better information available to management

HISTORY

This audit was included in the City Auditor's 2007-2009 Audit Plan that was approved by Audit Committee.

FINANCIAL IMPACT

Financial Impact Statement — Date:

Project Name: — **First Year of Program**

Winnipeg Fire Paramedic Overtime and Sick Leave Audit

	0	1	2	3	4
Capital					
Capital Expenditures Required	$ -	$ -	$ -	$ -	$ -
Less: Existing Budgeted Costs	-	-	-	-	-
Additional Capital Budget Required	$ -	$ -	$ -	$ -	$ -
Funding Sources:					
Debt - Internal	$ -	$ -	$ -	$ -	$ -
Debt - External	-	-	-	-	-
Grants (Enter Description Here)	-	-	-	-	-
Reserves, Equity, Surplus	-	-	-	-	-
Other - Enter Description Here	-	-	-	-	-
Total Funding	$ -	$ -	$ -	$ -	$ -
Total Additional Capital Budget Required	$ -				
Total Additional Debt Required	$ -				
Current Expenditures/Revenues					
Direct Costs	$ -	$ -	$ -	$ -	$ -
Less: Incremental Revenue/Recovery	-	-	-	-	-
Net Cost/(Benefit)	$ -	$ -	$ -	$ -	$ -
Less: Existing Budget Amounts	-	-	-	-	-
Net Budget Adjustment Required	$ -	$ -	$ -	$ -	$ -

Additional Comments: The financial impact cannot be quantified at this time. Financial benefits should be realized as the Audit recommendations are implemented.

original signed by
Department Controller

CONSULTATION

In preparing this Report there was consultation with:

Management and staff of the Winnipeg Fire Paramedic Service and Corporate Support Services.

SUBMITTED BY

Department: Audit Department
Division
Prepared by: B. Mansky
Date: June 22, 2009
File No.

Winnipeg

Audit Department

Winnipeg Fire Paramedic Service Overtime and Sick Leave Audit

May 2009

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EXECUTIVE SUMMARY

The Winnipeg Fire Paramedic Service (WFPS) provides critical services to the citizens of this City. These services include the detection, suppression and extinguishment of fires, pre-hospital paramedic care and transport services. Regardless of the level of demand at any given point in time, a constant minimum staffing level is required to ensure that the desired service level to the public can be met.

An audit of overtime in the Emergency Services Departments was included in the City Auditor's 2007-2009 Audit Plan. This is the second of two audits; the first was a review of overtime incurred by the Winnipeg Police Service.

The objectives of this audit were

- to examine the causes of the trends in the WFPS overtime costs in the past five years, and
- to evaluate the governance and management frameworks and practices relative to the control of overtime.

The 2008 overtime expenditures of the WFPS totaled approximately $1.4 million, which represented about 11% of all overtime paid to City of Winnipeg employees. The 2007 overtime expenditure, in contrast, was nearly $3 million, representing 21% of all overtime payments to City employees.

The requirement for overtime is driven by two main staffing factors: (1) maintaining the minimum complement, and (2) the staffing ratio. The minimum complement is the minimum number of staff required to be on a shift at any given point in time. The staffing ratio is the number of employees that are required to maintain the minimum complement, taking into account absences arising from annual leave, training, maternity leave and sick leave. If the proper staffing ratio has not been determined, either overtime will consistently be required to fill the minimum complement or excessive salary costs will be incurred for staffing surplus positions.

The next section discusses the trends we observed through our statistical analysis of data provided by the WFPS. During the review, we encountered several information systems limitations where we were unable to obtain complete information to perform a complete analysis of the three main service branches staffing levels or of other performance indicators of the Department's operations. We have made recommendations in the report that should help to strengthen the quality and availability of information.

Trend Analysis: 2004 to 2008

We observed that there has been considerable fluctuation in the amount of overtime hours worked and resulting dollars paid. Overtime wages were $1.375 million in 2005 and then jumped to $2.999 million by 2007. In 2008, overtime wages dropped to $1.436 million.

We compared the level of overtime worked and sick leave taken by WFPS staff to national averages compiled by Statistics Canada. We observed that the average overtime worked for Communications Centre staff does exceed the average for Canada. We also found that the highest level of overtime worked by individual EMS staff members does exceed the national average and that the highest of overtime worked by Communications Centre staff is significantly higher. The average sick leave usage by the WFPS was consistently below the national rates,

with the exception of the Communications Centre in 2006. The high levels of overtime noted for some EMS and Communications Centre staff may be cause for concern and we have made a recommendation later in the report to address this issue.

We then examined the reasons for overtime in Fire, EMS and the Communications Centre separately. Overtime for Fire increased significantly in 2006 and 2007. We attempted to obtain information on staffing trends (platoon staff size, minimum complement, number of staff on duty, number of staff called-in, number of staff scheduled for annual leave and training); however, information system limitations prevented us from obtaining that information. Anecdotally, WFPS management believes that attempts to meet vacancy management and budget targets in Fire resulted in a shortage of staff during that time period. We do note, in 2008, overtime decreased to its lowest level in our period of review. Both EMS and the Communications Centre experienced modest fluctuations in overtime. The absence of supporting daily staffing trend information again limited our ability to perform a proper analysis.

Overall, the decrease in overtime in 2008 is a positive sign, but a lack of supporting information to explain the fluctuations in overtime leaves us unable to fully explain the trends. We do note that from the information we were able to review, the causes for overtime appeared reasonable with the main reason being to maintain the minimum complement. We did observe the opportunity to improve some supporting processes that should lead to a decline in overtime levels. We also believe that the WFPS has the ability to improve the availability of information regarding overtime. The next section highlights some of our key recommendations.

Key Recommendations

The WFPS has an opportunity to improve the quality of performance information gathered and reported. The WFPS does report on actual performance results such as response times; however, except for Fire, results are not reported against a target leaving one unable to evaluate whether the response times are meeting expectations for the service.

We have made recommendations to enhance performance information that will enable the WFPS to determine if the minimum complement and staffing ratio are appropriate in the current operating environment and in the future. These two issues are key drivers of overtime and the WFPS requires better staffing trend information to manage operations.

We evaluated a sample of staff that were off for an extended sick leave absence and determined that approximately 50% had inadequate medical documentation on file. This translated to over $371,000 in sick leave payments in 2007 alone. We made recommendations to improve the process to ensure sick leave absences are properly supported and to clarify the responsibilities between WFPS and the Occupational Safety and Health branch.

Further enhancement of WFPS information systems will greatly improve the quality of information and allow for proactive monitoring of overtime and sick leave. Changes will also free up internal resources to perform more value-added analyses.

The WFPS has the opportunity to improve control systems regarding the use of overtime and sick leave. Implementing our recommendations will help to ensure that all allocated resources are used effectively and efficiently.

MANDATE OF THE CITY AUDITOR

The City Auditor is a statutory officer appointed by City Council under the *City of Winnipeg Charter Act*. The City Auditor reports to Council through the Audit Committee (Executive Policy Committee) and is independent of the City's Public Service. The City Auditor conducts examinations of the operations of the City and its affiliated bodies to assist Council in its governance role of ensuring the Public Service's accountability for the quality of stewardship over public funds and for the achievement of value for money in City operations. Once an audit report has been communicated to Council, it becomes a public document.

AUDIT BACKGROUND

The mandate for the Winnipeg Fire Paramedic Service (WFPS) includes the detection, suppression and extinguishment of fires, pre-hospital paramedic care and transport services. A constant minimum staffing level is required to ensure that the desired service level to the public is met.

The 2008 overtime expenditures of the WFPS totaled approximately $1.4 million, which represented about 11% of all overtime paid to City of Winnipeg employees. The 2007 overtime expenditure, in contrast, was nearly $3 million, representing 21% of all overtime payments to City employees in that year. The prior level of overtime expense gave reason for concern on whether the WFPS was operating within the optimal range for overtime.

Due to the proportion of City spending for overtime in emergency services departments, an audit of Emergency Services Overtime was included in the 2007-2009 Audit Plan. This is the second of two audits; the first was an audit of overtime incurred by the Winnipeg Police Service.

AUDIT OBJECTIVES

The objectives of this audit were:

- To examine the causes of the trends in the WFPS overtime costs in the past five years.
- To evaluate the governance and management frameworks and practices relative to the control of overtime.

AUDIT APPROACH

We have conducted the audit in accordance with generally accepted auditing standards. **Appendix 1** provides a flowchart of the audit process.

- We conducted interviews with the Fire and Paramedic Chief, Deputy Chief of Operations, Manager of Finance and Administration and Human Resources Manager to gain an understanding of the WFPS, the policies and procedures in place relating to overtime and the overtime monitoring process.
- We obtained and reviewed data and statistical information from the WFPS Manager of Finance and Administration and the Human Resources Assistant.
- We obtained and reviewed statistical information from Corporate Support Services related to overtime costs and hours, sick leave costs and hours, and staffing levels.
- We gained an understanding the role of the nurse dedicated to WFPS

with the Occupational Health Branch.
- We reviewed related industry reports, policies, standards, procedures and other relevant background documentation relating to the WFPS in general.
- At the conclusion of the audit, we provided a report to the Chief of Fire and Paramedic Services, the Deputy Chief of Operations, the Chief Administrative Officer and Council.

The conclusions in our report are based upon information available at the time. In the event that significant information is brought to our attention after completion of the audit, we reserve the right to amend the conclusions reached.

AUDIT SCOPE

The scope of our audit covered the period January 1, 2004 to December 31, 2008, which is the five complete years before the date of our report. We believe that this scope affords us the ability to analyze trends in overtime without a pervasive risk of losing context in the examination of too short a period that may be affected by specific short-term circumstances.

We have undertaken appropriate procedures in an attempt to verify the accuracy of the information we were provided. At various times during the review, due to information system limitations, we were unable to obtain information to support our analyses.

The scope of the review was expanded to include a review of sick leave trends and management controls, due to the fact that sick leave is largely an uncontrollable factor that impacts overtime levels.

In the *Observations and Recommendations* section of the report, we have made recommendations to improve the management and quality of human resource related information available to WFPS management.

AUDIT CONCLUSIONS

The audit work performed led us to the following conclusions:

- The 2006 and 2007 operating years had abnormally high overtime costs for the WFPS. We believe that increases to the minimum complement coupled with an inadequate staffing ratio, for that time period, may have contributed to the increased overtime.
- Over the period of review the WFPS has improved the monitoring of overtime levels. However, the information systems require enhancement to provide management with enhanced information on staffing trends and retirements to effectively continue to control overtime. The WFPS must also improve the monitoring of sick leave as it is factor that contributes to overtime levels.

ACKNOWLEDGEMENT

The Audit Department wants to extend its appreciation to the Winnipeg Fire Paramedic Service, in particular, the Fire and Paramedic Chief, the Deputy Chief of Operations, the Manager of Finance and Administration and the human resources staff for their cooperation.

Members of the Audit Team
Bryan Mansky, MBA, CMA, CIA Audit Manager Micheal Giles, CA Auditor



Brian Whiteside, CA•CIA
Acting City Auditor

May 2009
Date

WINNIPEG FIRE PARAMEDIC SERVICE BACKGROUND

The service mandate for the Winnipeg Fire Paramedic Service (WFPS) includes but is not limited to the detection, suppression and extinguishment of fires, pre-hospital paramedic care and transport services. The major services provided by the WFPS can be segregated into activities involving fires (Fire), emergency medical treatment and transportation (EMS) and the communications and dispatch services related to each (Communications Centre).

Legislated authority for the Fire services for WFPS is derived from two provincial Acts, *The Fires Prevention and Emergency Response Act* and *The City of Winnipeg Act*. EMS services are regulated by the *Emergency Medical Response and Stretcher Transportation Act* and are provided under contract with the Winnipeg Regional Health Authority (WRHA). The Winnipeg Regional Health Authority operates under *The Regional Health Authorities Act*. The Communications Centre is also governed by the *Emergency Medical Response and Stretcher Transportation Act* and the *National Academy of Emergency Dispatch*. The resources that were available to accomplish these mandated activities in 2008 included a complement of 926 fire fighters, 223 paramedics, 40 Communications Centre employees and 68 administrative and support staff.

The Fire and Paramedic Chief reports to the Chief Administrative Officer. Politically, the WFPS reports to the Standing Policy Committee on Protection and Community Services.

Fire Paramedic Organizational Structure

The WFPS provides three services to the public that account for the majority of resources. These services are: Fire Services, EMS, and the Communications Centre. These three services will be referred to as WFPS operations in the remainder of the report. The other services (including public education, fire inspections, support services and administration) were not examined in this report due to the relatively small portion of overtime reported by these groups. (See Appendix 3 – Service Overtime Analysis.)

These emergency response services operate on a four-on-four-off platoon structure work week averaging 42 hours per week; EMS has a slightly modified platoon structure to provide more resources during peak call volume times. The remaining services typically work a standard 37 ½ to 40 hour daytime workweek, depending on the applicable collective agreement.

Overtime Drivers

The requirement for overtime is driven by two main staffing factors: (1) maintaining the minimum complement and (2) the staffing ratio. The minimum complement is the minimum number of staff required to be on a shift at any given point in time. This number is set by determining the level of service that is to be provided to the public, in conjunction with an analysis of available resources (stations and/or vehicular equipment) to meet that defined service level. The staffing ratio is the number of employees that are required to maintain the minimum complement, taking into account absences arising from annual leave, training, maternity leave and sick leave. If the proper staffing ratio has not been determined, either overtime will consistently be required to fill the minimum complement or excessive salary costs will be incurred for staffing surplus positions.

It is important to note that there is a trade off between regular salaries and overtime. Increasing staff numbers as a means of reducing overtime will at some point become inefficient because the salaries paid out will be much higher than the overtime that would have otherwise been paid under the circumstances.

Overtime Process

Virtually all of the operations overtime is due to call-ins to maintain the minimum complement; very little overtime is due to holdovers at the scene of an incident. EMS and Communications Centre employees have a small portion of weekly overtime (approximately 1.3 hours/bi-weekly/staff) per the terms of their collective agreement. We considered these hours to be unavoidable by management and have made appropriate references to them in our following analyses.

If a sufficient number of staff call-in sick so that the minimum complement falls below the defined threshold set by management, then the supervisor in charge of the platoon will call in replacements to replenish the minimum level. Each service has a call-in list which is based on seniority. The supervisor will sequentially call each employee on the list until the minimum complement has been met. The next time a call-in is required, the supervisor will begin calling from the last point that was left off in the list. This process ensures each employee receives an equal opportunity for overtime and reduces the possibility for allegations of favouritism. The division of overtime between employees is a requirement under the Professional Paramedic Association of Winnipeg (PPAW) and Canadian Union of Public Employees (CUPE) collective agreements and is an established business practice for members of United Fire Fighters of Winnipeg (UFFW). (We do note that the members of PPAW have since joined the Manitoba Government and General Employees Union (MGEU).)

KEY RISKS FOR OVERTIME

The *potential* key risks associated with the management of overtime include:

- lack of communication of policies concerning the appropriate uses of overtime;
- lack of proper training for determining when to authorize overtime;
- information systems that do not capture the appropriate data to be able to provide useful information to manage overtime;
- lack of the proper level of human resources to manage overtime;
- lack of monitoring of leave and compliance with leave management policies, providing the opportunity to abuse sick leave; and
- individuals working levels of overtime that impact their health and level of service to the public.

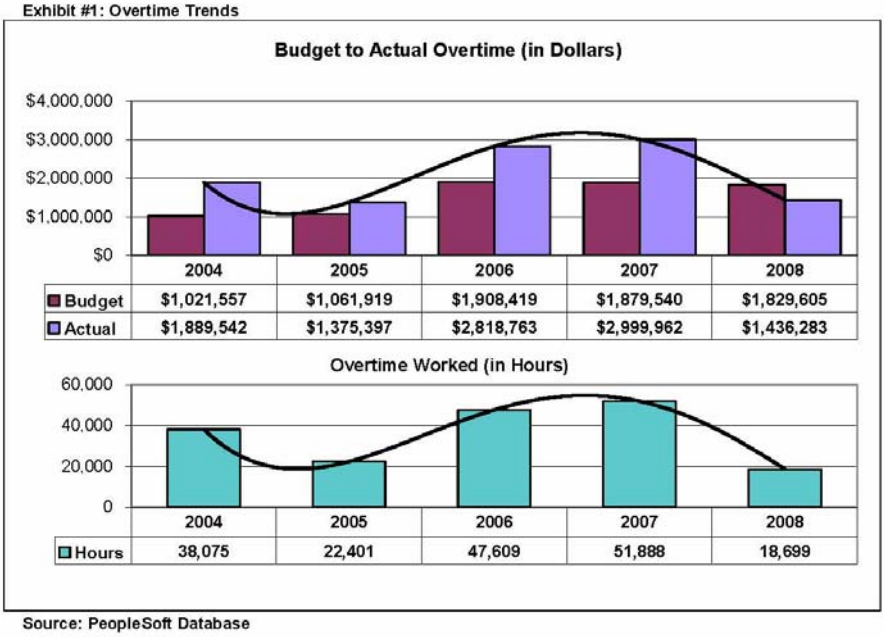
TREND ANALYSIS 2004-2008

The data and statistics that we have analyzed examine overtime based on hours worked and have been further segregated by service. All data was retrieved from both the City of Winnipeg's PeopleSoft System and the WFPS's Roster system.

Department Analysis

Exhibit #1 plots the trend in overtime over the last five years. The chart shows there has been considerable fluctuation in the amount of overtime hours worked and resulting dollars paid during the period under review. The hours included in the chart below are the actual overtime hours incurred and were not adjusted for compensation purposes.

Exhibit #1: Overtime Trends



Source: PeopleSoft Database

The relatively low levels of overtime in 2005 and 2008 and the large increase for 2006-2007 provide an interesting pattern. While we commend the WFPS on its ability to cut overtime expense in half from 2007 to 2008, we question why the levels in 2006 and 2007 were as high as they were? These sudden swings in the levels of overtime create an opportunity to examine the circumstances that lead to the past volatility in overtime, and to determine what can be done to better manage it in the future.

Given the trend observed in Exhibit #1, a key question that we were faced with is whether the levels of overtime worked by WFPS employees were unhealthy, thereby affecting their ability to

best serve the public? To answer this, we compared the highest amount and the average annual amount of overtime hours worked by a WFPS employee against the average overtime levels published by Statistics Canada.[1] The averages were calculated using the 2007 staff complement figures and was performed at the service level to provide a more comparable evaluation.

Exhibit #2: Overtime Hours Benchmarking

Annual Overtime (in hours)		*2006*	*2007*
Fire	WFPS - Highest	161	183
(staff complement = 926)	WFPS – Average (A)	40	44
	Canada – Average (B)	364	354
	Difference (A – B)	-324	-310
EMS	WFPS - Highest	549	512
(staff complement = 223)	WFPS – Average (A)	49	47
	Canada – Average (B)	494	494
	Difference (A – B)	-445	-447
Communications Centre	WFPS - Highest	278	346
(staff complement = 40)	WFPS – Average (A)	92	87
	Canada – Average (B)	52	52
	Difference (A – B)	+40	+35

Overtime incurred by Fire service staff is considerably less than the national averages, even the highest WFPS Fire levels are within the national norm. The average level of overtime for EMS staff is also well below the Statistics Canada figures; however, the highest level of overtime observed for EMS staff does exceed the national average. Finally, we did observe that the average overtime level for Communications Centre staff does exceed the average for Canada and that the highest level observed is significantly above that level. It is important to note that the groups defined by Statistics Canada for Communications Centres include numerous administrative type functions (see Appendix 2) which may limit the relevance to an emergency Communications Centre and dispatch operation.

These statistics show that the average overtime hours worked by WFPS employees are not likely at unhealthy levels. When we examine the highest levels of overtime noted for EMS and Communications Centre staff, then there may be cause for concern and we have made a recommendation later in the report to address this issue.

[1] While the national statistics were procured at the most granular level possible, it is important to note that they include groupings of job types that may skew the national averages away from each specific job type in the WFPS. For example, fire fighters are grouped with police officers in the national average, which may skew the national figure upwards due to large overtime demands on police officers. Also, emergency dispatch operators are grouped with employees from numerous administrative and dispatch industries, which may skew the national figure downwards. For a clearer picture of these occupation groupings, see Appendix #2. At the time of this audit, the 2008 statistics had not yet been released by Statistics Canada.

Similar to overtime levels for employees, we wanted to compare the number of sick hours incurred by WFPS staff. We compared the average sick leave hours to the Statistics Canada figures and observed the following results.

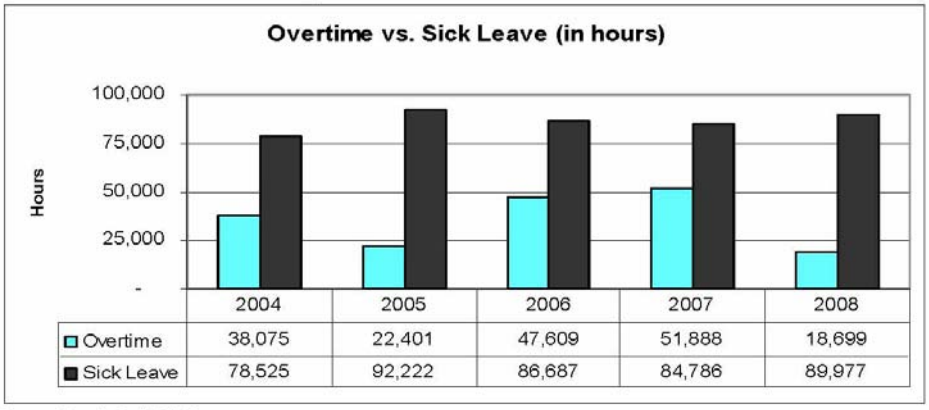
Exhibit #3: Sick leave Benchmarking

Average Annual Sick leave (in days)		*2006*	*2007*
Fire	WFPS	6.3	6.2
	Canada	7.6	7.9
EMS	WFPS	6.7	6.4
	Canada	9.5	10.6
Communications Centre	WFPS	12.3	8.2
	Canada	9.8	11.2

On average, we found that the sick leave usage by the WFPS was consistently below the national rates for similar industries, with the exception of the Communications Centre in 2006. These figures do not give any indication that average sick leave levels are a concern for the WFPS. However, we did find several issues when we examined sick leave for individual employees, which are discussed in a later section of the report.

Intuitively, one would believe that the more sick leave claimed for the year, the more overtime will be required to cover the absences created. When we compared the trend in sick leave hours with the trend in overtime hours, however, we found that this was not the case.

Exhibit #4: Overtime and Sick leave Comparison – WFPS



	2004	2005	2006	2007	2008
Overtime	38,075	22,401	47,609	51,888	18,699
Sick Leave	78,525	92,222	86,687	84,786	89,977

Source: PeopleSoft Database

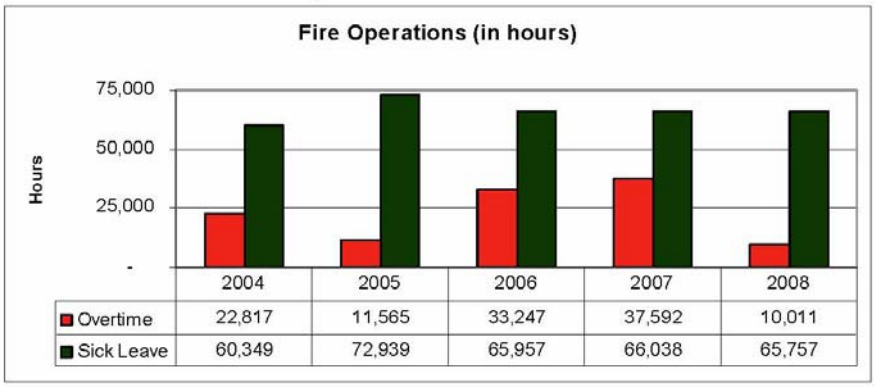
Counter to our intuition, we found that when the sick leave had increased, the overtime for the year had decreased, and vice versa, over the past five years. This exhibit illustrates that while sick leave may contribute to the overall level of overtime, there is not a direct relationship. To

examine further the reasons for overtime, we analyzed each of the three main operations of the WFPS (Fire, EMS and Communications Centre) separately.

Fire Services

On average, Fire accounts for more than half of all WFPS overtime, EMS accounts for one third, the Communications Centre makes up one tenth, and the remaining groups comprise less than five percent (for a departmental breakdown of the overtime hours, please refer to Appendix #3).The following graph shows the overtime and sick leave trends for the Fire operations.

Exhibit #5: Overtime and Sick leave Comparison – Fire



	2004	2005	2006	2007	2008
Overtime	22,817	11,565	33,247	37,592	10,011
Sick Leave	60,349	72,939	65,957	66,038	65,757

Source: PeopleSoft Database

From 2004 to 2005, the number of overtime hours dropped by 11,000 while the sick leave hours increased by over 12,500 hours – suggesting that the staffing ratio to fill the minimum complement was markedly higher in 2005, than in 2004. In fact, the 2005 drop in overtime would seem to be an anomalous incident in comparison to the 2004, 2006 and 2007 years, if it were not for a similar drop in overtime in 2008, while the sick leave level remained fairly constant. The patterns suggest that the staffing ratio had changed over the years but leaves the question of which year, if any, had an optimal staffing ratio?

The Deputy Chief of Operations informed us that the WFPS Fire operations were operating with one four-person unit less than the intended minimum staffing level in 2005. They had intended to raise the minimum staffing level from 154 per shift in 2004 to 158 per shift in 2005. (The minimum staffing level of 158 was recommended in a Tridata Corp. report issued in 2000.) The staffing ratio was increased by the WFPS at the start of the year, but the minimum complement increase was not approved by Council until September of 2005. This meant that each of the four platoons now had an additional four staff on hand for nine months of the year to fill for any sick leave, before having to call in staff on overtime. This explains why 2005 is the year in our period of examination with the highest recorded level of sick leave and yet one of the lowest recorded levels of overtime.

Overtime escalated quickly in 2006; so quickly, in fact, that the WFPS had to make a request that Council approve overtime over-expenditures of just over $800,000. This caused a review to be completed by what is now known as the Corporate Support Services Department (CSS) to

determine why the overtime expense was soaring; CSS believed that possible increases in sick leave were affecting the amount of overtime required. CSS found that, while the sick leave rates near statutory holidays had appeared to spike in recent years for Fire employees, the overall sick leave levels compared to national averages were normal, and the reason for the overtime level was not determined.

WFPS management believes that the Fire operations was short-staffed in 2006 and 2007 from attempting to meet vacancy management and budgeting targets; however, this resulted in much higher overtime costs than were expected. We attempted to obtain information on staffing trends (platoon staff size, minimum complement, number of staff on duty, number of staff called-in, number of staff scheduled for annual leave and training) for the last five years; however, information system limitations prevented us from obtaining that information. WFPS could provide quarterly staff counts, but these are point in time numbers and would not supply the additional information necessary to perform a complete analysis.

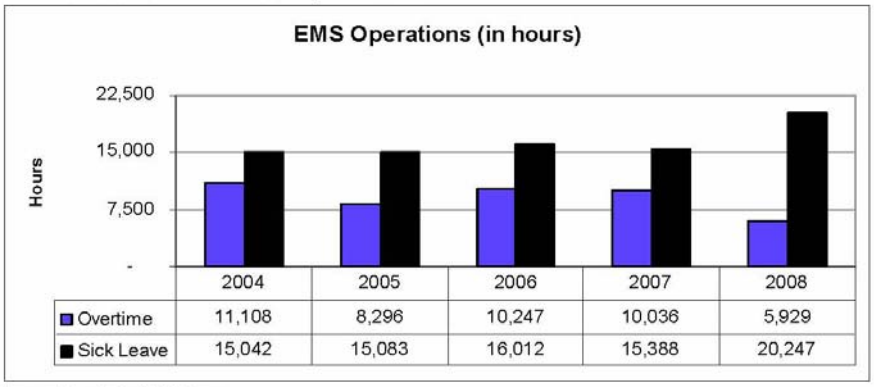
Near the end of 2007, an Assistant Chief was assigned to monitor and reduce sick leave and overtime. Through our audit work, we found that the number of staff incurring high levels of sick leave was cut in half in his first year. The issue of staff incurring high levels of sick leave will be discussed later in the report.

WFPS management believes that the large drop in the 2008 overtime levels is due, in part, to the more aggressive process to monitor sick leave usage and a new program where staff has the option to cash in one tour of vacation each year. In 2008, 172 staff cashed in one week of vacation time, which had the effect of increasing the amount of staff available for each platoon shift, thereby reducing the need for overtime to maintain the minimum complement. We also believe that an increase to the overall complement in 2008 that averaged 33 full time positions over the year also contributed to the decreased overtime levels.

EMS Services

As mentioned previously, EMS accounts for approximately one third of all WFPS overtime. The following graph shows the overtime and sick leave trends for the EMS operations.

Exhibit #6: Overtime and Sick leave Comparison – EMS



	2004	2005	2006	2007	2008
Overtime	11,108	8,296	10,247	10,036	5,929
Sick Leave	15,042	15,083	16,012	15,388	20,247

Source: PeopleSoft Database

The graph illustrates that from 2004 through to 2007, there was little fluctuation in the overtime and sick leave levels. The number of mandatory overtime hours for EMS from 2006 to 2008 was about 5,500 hours per year, on average; complete records for mandatory hours were not kept before 2006.

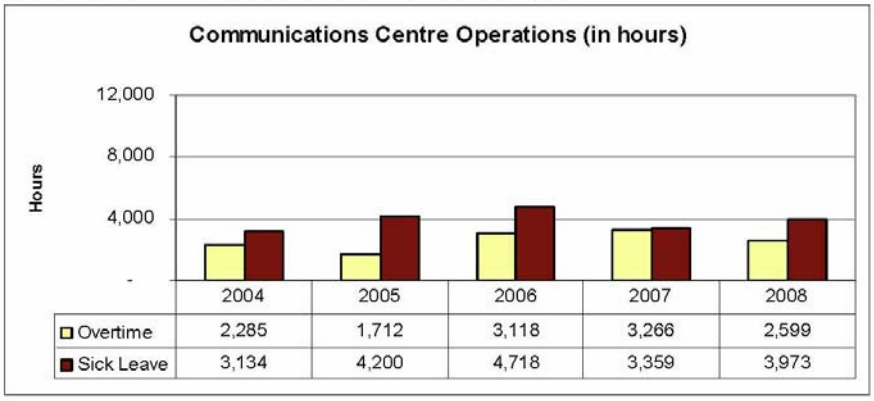
Very similar to the trend in Fire operations, the sick leave increased while the overtime decreased in 2008. In fact, over 90% of the overtime hours in 2008 were mandatory collective agreement hours. This suggests that any changes made in 2008 to the operating systems greatly affected the EMS operations, as well as the Fire operations. Some of the fluctuation in EMS overtime can occur from seasonal circumstances, such as an increase in calls due to an outbreak of certain types of illness; however, no specific figures could be created to quantify these effects.

We did note that there was an increase in full time equivalent EMS positions of 18 persons, which would contribute to lower levels of overtime. Apart from this, WFPS management was unable to provide any other anecdotal explanation for the decreased overtime levels. Further, we did request information on the staffing trends for the service, but due to information system limitations, we could not obtain the information. Management believes that the recent approval for hiring part-time staff will have a positive impact on the amount of overtime incurred in the EMS.

Communications Centre Services

Comparatively, the Communications Centre does not incur highly significant amounts of overtime as a percentage of WFPS overtime. The graph below illustrates that sick leave exceeds overtime and there is little fluctuation in those levels. Similar to the Fire and EMS operations, there was an increase in Communications Centre staff of 2 persons in 2008 which may have contributed to the reduction in overtime and to the corresponding increase in sick leave. The number of mandatory overtime hours for the Communications Centre averaged 700 hours between 2006 and 2008. The percentage of hours in 2008 that were mandatory was about 36%.

Exhibit #7: Overtime and Sick leave Comparison – Communications Centre



	2004	2005	2006	2007	2008
Overtime	2,285	1,712	3,118	3,266	2,599
Sick Leave	3,134	4,200	4,718	3,359	3,973

Source: PeopleSoft Database

Although on a department basis Communications Centre overtime is low, on a per employee basis, the amount of overtime worked by some staff may be cause for concern and this issue is addressed later in the report. We had also requested staffing trend information for the Communications Centre, but were not provided with it. Similar to the situation for EMS, management believes that the recent approval to hire part-time staff will have a positive effect on the overtime incurred in the Communications Centre.

These division analyses show that Fire operations incur the majority of overtime for WFPS and have the largest impact on the overall trends. They also illustrate that trends in overtime are more dependent on the day-to-day staffing ratio than they are on the level of sick leave.

OBSERVATIONS AND RECOMMENDATIONS

The remainder of this report deals with our recommendations. We believe that the issues identified are important and implementing the recommendations will assist management in better managing both overtime and sick leave. A complete summary of our recommendations is attached as Appendix 6.

Does the WFPS have an appropriate minimum staff complement?

To determine if the level of staff is appropriate, the level of service to be delivered must first be defined. The National Fire Protection Association (NFPA) publishes a number of standards that define levels of service to the public by identifying performance measures that assess service efficiency. NFPA standards 1221 and 1710 identify expected response times to incidents as one service level indicator (see Appendix 4 for an excerpt from these standards). The response time is an indication of how many resources are available to and how efficiently those resources respond to emergency calls. The standard contains minimum response times for Fire, EMS and Communications Centre services.

Once the service level has been defined, the WFPS must then determine how many and the type of units available to respond to incidents, as well as the best geographic location for stations. The NFPA standards also specify the number of persons required to operate each type of unit, thereby determining the minimum complement of staff to be available at any given point in time. Exhibit #8 highlights the changes in the minimum complement over the period of review. A Tridata Corp. consulting report issued in 2000 recommended a minimum complement of 158 for Fire. WFPS management advised us of the target minimum complement figures for EMS and the Communications Centre.

Exhibit #8: WFPS Staff Complement

	2005	2006	2007	2008
Fire	January – 154, September - 158	158	Increased to 162 in late 2007[1]	Increased to 166 in late 2008[2]
EMS[3]	35 min/47 max	35 min/47 max	35 min/ 47 max	35 min/ 47 max
Communications Centre	6	6	6	6

Note 1: minimum complement increased to maintain the desired response times from a Fort Garry Fire station.
Note 2: minimum complement increased to maintain a temporary unit dedicated to the recent floodway expansion project.
Note 3: EMS shift schedules have been set to place more resources on the street during daily peak call volume periods.

It is important to note that we were only able to confirm the 2008 Fire minimum complement figure through supporting daily staffing reports. All other minimum complement figures were anecdotally provided to us by the Deputy Chief of Operations; the WFPS was unable to provide the daily staffing reports to support the staffing complement for the period 2005-2007.

Exhibit #9 shows the response times provided to us by the WFPS for Fire, EMS and the Communications Centre.

Exhibit #9: WFPS Response Times

	NFPA Standard	WFPS Actuals 2005	2006	2007
Fire – 1st engine arrival	240 seconds 90% of time	- Avg. 178 seconds - 240 seconds 82.2% of time	- Avg. 172 seconds – 240 seconds 83.5% of time	- Avg. 152 seconds – 240 seconds 82.2% of time
EMS – arrival on scene	8 minutes 90% of time	Average 8.6 minutes	Average 8.6 minutes	Average 8.2 minutes
Communications Centre – call handling	95% of calls handled within 60 seconds and 99% within 90 seconds			Average 55 seconds for Fire and 83.7 seconds for EMS

Sources: NFPA 1710, 1221 and WFPS Service Based Budget

The exhibit illustrates for Fire that the average response times are favorable but there is room for improvement at the 90th percentile. In the case of EMS and the Communications Centre, the WFPS was only able to provide information on the average response time; information specific to the 90th percentile was not available. Although we were informed that the NFPA standard is only used as a guideline, it is the target selected for measuring service performance by the WFPS. In order to evaluate the minimum staffing complement, the WFPS must first enhance the quality of performance information to evaluate if the target level of performance is being achieved.

Recommendation 1:
The WFPS should report on the relevant performance target and WFPS actual response time for each applicable service (Fire, EMS, and Communications Centre).

Management Response
WFPS has recently filled the position of Quality Improvement and Planning Manager and is reviewing its performance targets as well as seeking comparison data. The first step in this commitment was to address the measurements identified for the City of Winnipeg service based budget process for the 2010 budget.

Because the NFPA standard is the only standard that contemplates fire service systems and is consistently referenced by North American departments, it should remain the reference standard of choice for fire related targets.

It should be noted that WFPS captures significant response information data but because very few Canadian departments benefit from a combined EMS / Fire dispatch center and utilize Fire based response to EMS incidents in a model similar to Winnipeg, relevant comparison data is very limited.

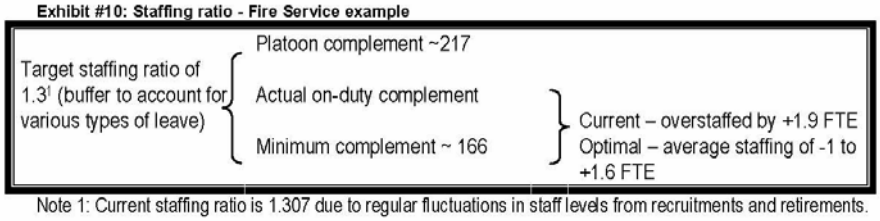
EMS performance measures are contemplated in the NFPA standard as well however a Canadian Committee has been tasked by the EMS Chiefs of Canada to review EMS performance targets and harmonize the benchmarks for the service. Unfortunately this information may only address EMS ambulance performance data.

WFPS anticipates the review and subsequent performance targets to be established for the 2010 reports.

Does the WFPS have an appropriate staffing ratio?

To ensure that the minimum complement is available at all times, the number of total staff available for each shift (platoon size or complement) must be sufficient to account for time off due to annual leave, training and sick leave. The difference between the minimum complement and platoon complement is determined by a staffing ratio. The goal of the staffing ratio is to meet the minimum complement consistently, without being over or under, while taking into account the various types of leave. The WFPS has set a staffing ratio of 1.3 full time equivalent (FTE) positions for every position that makes up the minimum complement (see exhibit #10). We were informed that the staffing ratio was arrived at through testing various staffing levels in past years. An internal study performed by what is now known as the Corporate Support Services Department in 1994 supported that level and ongoing trial and error adjustments since that time have continued to support that level. Currently, WFPS management is contemplating increasing the ratio to 1.35 to reduce overtime levels.

Exhibit #10: Staffing ratio - Fire Service example



Note 1: Current staffing ratio is 1.307 due to regular fluctuations in staff levels from recruitments and retirements.

The staffing ratio is optimal when the number of employees in attendance for the average shift is equal to the minimum complement amount. We had noted previously that there is a trade-off between incurring overtime to maintain the minimum complement and adding additional permanent salaries by increasing the platoon complement. This means that there is a point where consistently calling in overtime will become more expensive than hiring additional staff, or where hiring additional staff will cost more than the overtime that would have otherwise been required. Given the terms of the collective agreements, it will cost the same to consistently call in one person on overtime for each shift as it would to hire an additional 1.6 FTE positions in Fire, or 1.8 FTE positions in the EMS and Communications Centre. Therefore, the goal of the WFPS should be to maintain an average shift attendance rate within the range of -1 person under the minimum complement to +1.6 persons over the minimum complement on average, through the chosen staffing ratio[1]. Staffing within this narrow band, while difficult, would be the

[1] For the purposes of this analysis, shift attendance rates have been given the following values:
- an employee that calls in sick for a shift carries the value of -1
- an employee that is over and above the minimum complement amount carries the value of +1

most cost effective for the WFPS as operating outside of this range would result in increased salary costs.

Due to gaps in the information that Platoon Chiefs were supposed to provide WFPS senior management, we were only able to perform a partial analysis of the 2008 daily staffing level reports for the Fire service. We determined, given the reports on hand, that overtime was required for about 35% of all shifts in 2008, and that platoons had on average 1.98 staff more than minimum complement. This suggests that for 2008 the WFPS Fire operations were operating just over the optimal 1.6 benchmark. Based on this analysis, it would not be efficient to increase the staffing ratio given the current operating environment.

We were provided a copy of a staffing analysis that was performed for the Communications Centre. We believe that the WFPS' internal study is sufficient for determining the Communications Centre's staffing needs.

Recommendation 2:
We recommend that the WFPS identify the key measures including staff absences due to annual leave, training and sick leave that can be used to estimate the optimal staffing ratio for the Fire and EMS operations. We recommend that the staffing ratio be reviewed annually to determine if a change to the staff complement is required.

Management Response
WFPS concurs that that the staffing ratio should be reviewed annually. A pilot program addressing the recommendation to establish key measures for absence will be trialed 2010 and in place for 2011.

Does the WFPS have adequate processes in place to manage sick leave?

Sick leave usage is the single largest unpredictable factor affecting the day-to-day staffing level at the WFPS. The collective agreements for the UFFW and PPAW provide guidance to supervisors on when to request and collect medical documentation. Under the UFFW agreement, the supervisor must collect medical documentation if the absence exceeds three days. Under the PPAW agreement, it is at the discretion of the supervisor's judgment, with the guideline that it is appropriate after 3 days. The *City of Winnipeg Attendance Management Program* provides additional guidance on what information should be contained within the medical documentation (See Exhibit #11).

Exhibit #11: Agreement/Policy Documentation

The employee must submit [medical] documentation... if absence for which sick leave is claimed exceeds three (3) consecutive calendar days.
Source - UFFW 2001-2003 Collective Agreement Article 16.8

The Service may request an employee to produce proof of illness in order to obtain future benefits. Failure to produce this evidence will result in absence without pay for part, or all of the period of absence.
Source - PPAW 2004-2007 Collective Agreement Article 24.05

Medical certificates [proof of illness] must:

- Be from a medical practitioner (as per the applicable collective agreement)
- Certify that the employee was unable to carry out his or her duties due to illness
- Be dated the first day of absence
- Include each day of absence

Source - City of Winnipeg - Attendance Management Program Section 5

We reviewed the files of all high sick leave users[1] from WFPS staff in both 2007 and 2008, and took a representative sample of the remainder of the employees for 2007. The criterion for selection in the sample was a period of absence in excess of three days, thereby qualifying the period to be appropriate for medical documentation. In our 2007 sample, we found that adequate medical documentation, as prescribed above, was on file only 15% of the time. We found some written form of acknowledgement for the employee's absence about 35% of the time, and insufficient documentation for the absence was noted in approximately 50% of the cases. This translated to sick leave payments when there was insufficient medical documentation in our sample of approximately $371,000 in 2007. The sample was not extrapolated to the total sick leave payments made, Therefore, it is possible that total sick leave payments that are not supported by adequate medical documentation is higher.

At the end of 2007, an Assistant Chief was assigned to monitor both overtime and sick leave. Our 2008 sample was limited to just high occurrences of sick leave (we did not include a representative sample of the remainder of the population) and we found that the percentage of files that included appropriate documentation did not vary significantly from the prior year. We observed insufficient medical documentation in the files for staff who incurred high amounts of sick leave. The amount of sick leave paid associated with these files was just under $100,000. The Assistant Chief's increased monitoring may have contributed to the decline of staff with over 500 hours of sick leave from 21 employees in 2007, to 10 employees in 2008. We do note that despite the increased monitoring by the Assistant Chief, the total hours recorded as sick leave did increase in 2008.

The lack of an adequate follow-up process for employees on sick leave contributed to the high percentage of cases where medical documentation was limited or insufficient. Currently, if an employee is off sick, their name is placed on an "off-duty list" and the employee will be contacted when deemed necessary by a Platoon Chief or higher level. There is no mechanism to record the employee's expected return to work date or to prompt a follow-up action. We found in several cases where months had gone by before there was any documented follow-up action. We also found in several cases where a doctor had specified an expected date that the

[1] For the purposes of this report, a high sick leave user is defined as any employee with over 500 hours (about 3 months) of sick leave in a year

employee would return to work and a number of weeks or months could pass without the WFPS following up on why the employee had not returned to work.

A further complication in the follow-up process is the unclear relationship between WFPS staff and the Occupational Safety and Health Branch (OSH). The WFPS Human Resources Manager informed us that the OSH has one nurse solely devoted to WFPS. The NFPA standards do recommend that employees be assessed by occupational health before they return to duty, which creates a greater need for OSH services. The WFPS has letters of intent regarding the dedicated position to support the nurse's roles and responsibilities. The WFPS HR Manager believes that the nurse's responsibilities do include following up with employees to ensure that they are returning to work on a timely basis. This type of responsibility is outside the normal role for OSH staff and we note that these duties are not specified in the letters of intent for the position. We believe the funding arrangement is in place to ensure the immediate availability of an OSH nurse when required. This is supported by the City's *Return to Work Policy* which states that follow-up with employees to return to work is the responsibility of departmental staff.

Recommendation 3:
We recommend that the WFPS document a process and clarify responsibilities for ensuring employees provide adequate medical documentation for absences and to improve the monitoring of employees that are off sick for extended periods of time.

Management Response
WFPS has already improved the process for requesting medical documentation by having a records clerk mail updates to supervisory staff advising of employee status changes. After 3 days of absence, a form letter will be sent to the employee's supervisor requesting medical documentation be sought from the employee.

An automated tracking system will be explored and included in the 2011 budget if feasible.

Is maintenance of the minimum staff complement at risk due to retiring staff?

As of April 30th, 2009, the accumulated number of staff that was eligible to retire was 185 employees, which represents about 15% of the WFPS workforce; this is up from 138 that were eligible at the start of 2008, and the127 eligible in 2007. WFPS management informed us that the group eligible to retire should continue to grow in the forthcoming years, especially in Fire operations, which is comprised of an older workforce. As mentioned previously, the WFPS must maintain a minimum staff complement, so a sudden increase in the number of retirements can cause significant increases in overtime for the period it will take to fill the resulting vacancies. Since an employee is only required to provide one month's notice prior to retirement, the WFPS is not able to undertake a full recruitment effort in that timeframe.

The WFPS tracks the number of employees that are eligible to retire in the current year, the number of employees that have retired, and the number of eligible retirements in future years. Due to the large pool of eligible retirees, eligibility to retire may not be the best indicator of future retirements. Tracking the trends in the ages and years of service of retiring employees may provide better forecasting information. WFPS provided us with actual retiree information for the last 5 years and we calculated the average years of service at retirement to be 32 and that retirees average 56 years of age at retirement.

Of the current 185 employees that are eligible to retire, we determined that 44% are 56 years of age or older, and 29% have 32 years of service or more. We further determined that there are 49 employees that are 56 years of age or older and have at least 32 years of service. This translates to a potential retirement group of 49 up to 80 employees (185 employees x 44%) mainly in the Fire operations, which is considerably higher than recent retirement groups that averaged 33 employees over the last three years.

The WFPS believes that current staffing levels, and the levels of university-trained potential recruits, are sufficient to be able to absorb a large number of retirements in the short-term. At the same time, the WFPS also believes that a main reason for the increase in overtime in 2006 and 2007 was that the department was understaffed and was filling the temporary shortage in staff with overtime. The current large pool of staff eligible to retire compels the WFPS to analyze other sources of information to mitigate this risk. A sudden increase in retirements could once again result in the WFPS being short-staffed, that would necessitate higher levels of overtime during the recruitment period

Recommendation 4:
We recommend that the WFPS expand the information used to forecast potential retirements to include tracking the ages and years of service of potential retirees.

Management Response
WFPS agrees with this recommendation and utilize the process and formula utilized in this audit as the foundation for forecast of potential retirements. Other Canadian Departments will be surveyed to determine if other methodologies are being used that may be of assistance.

It is anticipated the survey and process will be completed and applied in the fall of 2009.

Is there a relationship between the occurrence of sick leave and retirements?

We previously reported the lack of an adequate monitoring process regarding sick leave. This control weakness is of even greater concern when long-term employees are coming closer to the time when they wish to retire. The UFFW and MGEU collective agreements stipulate that retiring employees can cash-out 100% of the sick leave that they have accumulated in the last five years of service (translating to a maximum of 900 hours). They may also cash-out 25% of sick leave before that, up to a cap of 4,638 *eligible* hours (translating to 1,092 hours of cash-out). Combined, UFFW members are eligible to be paid out for a total of 1,992 hours upon retirement. We do note that there is also a sick leave cash-out provision under the CUPE agreement; however, the amount of pay out entitlement is insignificant in comparison to the two aforementioned agreements, and will not be discussed here..

During an employee's service, usage of sick leave credits is based on the "first-in, first-out" principle. This means that as an employee incurs sick leave, those hours they are off sick will be taken from the oldest sick leave credits accumulated. If an employee incurred very little sick leave during his/her career, his/her sick leave balance could be sufficient to provide for hundreds or even thousands of hours of sick leave without affecting the credits they earn in the last five years. We observed that long-term employees typically have a large bank of sick leave built up (the retiring employees that we sampled had built up sick leave balances of between 2,500 and 5,000 hours). We also note that from a compensation standpoint, retiring employees

may be motivated to take sick leave, which is paid out at 100%, rather than to take the cash-out for hours accumulated prior to the last five years, which is paid at 25%. The lack of an adequate sick leave monitoring process provides the opportunity for employees to attempt to reduce these sick leave balances prior to retiring, with little or no consequence for this action.

We reviewed the medical documentation on file for all employees that had large sick leave balances beginning in 2007, and who subsequently retired without returning to duty. From our testing, we found that out of the five files we reviewed, four did not contain adequate medical documentation for the time off due to illness. This translated to approximately $381,000 of salaries paid out for sick leave to these four employees who eventually retired without returning to work. Some of these employee's sick leave absences dated back to 2006 and continued through to the end of 2008.

Due to the lack of documentation on file, we could not conclusively determine if there was abuse in the sick leave taken. We did note that in each instance when medical documentation was eventually demanded, the employees chose instead to retire without ever providing the requested medical documentation. With the current large pool of potential retirees, it would only take about 13 employees to attempt to use their sick leave to add an additional $1 million dollars in salaries per year, not including the additional costs to fill those positions through overtime, until a suitable permanent replacement could be scheduled.

Recommendation 5:
We recommend that the WFPS place greater emphasis on monitoring the sick leave of individuals who may be candidates to retire in the near future.

Management Response
This recommendation will be considered as part of Recommendations 3 and 4.
The current process will be revisited to consider the information resulting from the process in Recommendation 4

It is anticipated this will be in place in January 2010.

Are the Information systems secure and do they provide timely and relevant information on overtime to management?

This section addresses the limitations and risks of the information systems that we observed during the course of our review. The "Roster" system is a locally-designed, custom software package created specifically to fit the resource allocation needs of the WFPS. The system maintains some key personnel information, including ranks, special skills, training schedules, leave schedules and balances, and daily staffing information. At the time of this report, the WFPS is beginning the process of having the software updated to address changing operational requirements. We have identified several issues that should be addressed during the software upgrade and the following section contains those recommendations.

Compatibility with PeopleSoft

The Roster system maintains detailed information regarding employee holidays, sick leave, overtime and shift changes which is supposed to be updated by the appropriate supervisors. At present, Roster does not interface with PeopleSoft to transfer the sick leave or overtime

information. Manual forms are instead forwarded to a WFPS payroll clerk who will then enter the information into PeopleSoft and create a detailed payroll reconciliation to ensure that employees are receiving their correct pay. For the supervisor to enter into Roster and create a manual form and a payroll clerk to then enter the manual form into PeopleSoft is a clear duplication of work. The WFPS Human Resource Manager estimated that up to 40% of the fire payroll clerk's time is devoted to data entering and reconciling overtime payments. The Roster software should be enhanced to be able to interface directly with PeopleSoft, thereby streamlining the payroll process and allowing the payroll clerk's time to be applied to more value added functions. We were informed by the software programmer that this type of software change would be technically feasible.

Passwords

In discussions with the software developer for Roster, we were informed that the software is a transaction based system that could log any transactions made based on each authorized employee's unique user ID. WFPS management informed us that system access is based on the employee's user ID and an assigned password; however, the password for each employee is common knowledge in the department. This creates a significant risk for safeguarding the information and mitigating the risk of unauthorized access to the system. Strengthening password access to the system is a fundamental control to protect confidential information that must occur before any connection between Roster and PeopleSoft can be made.

System documentation

The WFPS does not currently have access to a user manual or other supporting documentation for the Roster system. Training for the software is presented during in-house sessions provided by the programmer. This relies on the memory and the note taking ability of the session attendees and leaves significant risk that the full functionality of the software will not be realized due to the technical comprehension of the attendees. This also leaves the risk that the software will be rendered obsolete if the programmer retires, moves, or becomes otherwise unavailable.

Reporting

The Roster software does not have the functionality to produce reports outlining the historical tracking of staff levels scheduled for a shift, the actual number in attendance, overtime call-in histories or sick leave histories to monitor trends between platoons or over several time periods. This information is essential in being able to monitor and manage the workforce in the most efficient manner possible and will also provide management with the information they need to perform a proper staffing analysis.

As we noted previously in the report, some EMS and Communications Centre staff are working overtime levels that exceed national averages. For staff that work high levels of overtime there is a risk that they may not be able to perform at the required level. WFPS management should have access to an exception report that identifies when staff exceed a specified threshold for overtime hours worked in a given time period.

In the case where information is maintained in both the Roster and PeopleSoft systems, WFPS management should evaluate which system is most suitable for reporting purposes prior to undertaking any software customization.

Staff Monitoring

The current Roster system does not allow for the input of a follow-up date when staff are away due to illness, nor does it automatically prompt supervisors to follow-up when staff has been away for an extended period of time. As we had observed, not having an automated follow-up system can contribute to supervisors not contacting employees that are away from work for extended periods beyond when the employee would reasonably have been expected to return to work.

Recommendation 6:
We recommend that the WFPS evaluate the option of enhancing the Roster system to be able to interface with PeopleSoft.

Recommendation 7:
We recommend that access to the Roster software be enhanced so that password security is consistent with the City of Winnipeg's standards.

Recommendation 8:
We recommend that the WFPS evaluate the option of obtaining physical software documentation from the program developer, or enhancing the Roster software to contain an in-program help function that would include query writing instructions and a user manual template.

Recommendation 9:
We recommend that the WFPS management review the current information systems and improve the reports available to management to include, at a minimum, historical tracking of staff levels scheduled for a shift, the actual number in attendance, overtime call-in histories and sick leave histories.

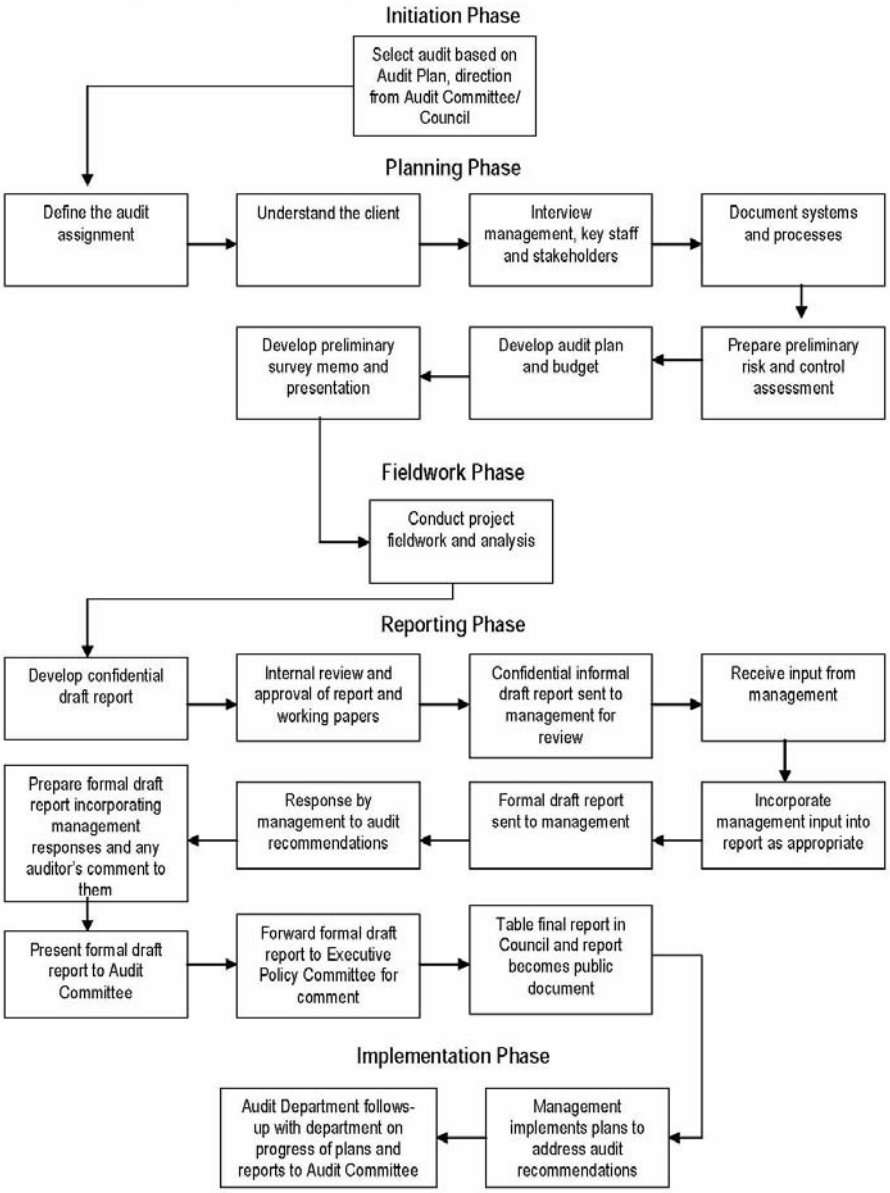
Recommendation 10:
We recommend that the Roster software be programmed with the ability to input follow-up dates when supervisors should contact absent employees. The system should also produce automated notifications when the dates occur.

Management Response to Recommendations 6, 7, 8, 9 & 10
The current roster program is an updated version of the program developed in 1994. It may not be practical to build on this original program to address all of the recommendations to enhance the roster program. A feasibility assessment has been requested of the program provider. As part of the process, WFPS will assess solutions available and determine if the recommendations identified in this report are achievable.

It should be noted that Corporate Services is in the process of providing the necessary connectivity to all WFPS locations to provide access to email and intranet to all WFPS staff. Once the network improvements have been completed, computers and system security will be required.

A cost estimate of the new or revised roster program to address the recommendations will be provided and budgeted for installation in 2011.

APPENDIX 1 - AUDIT PROCESS



APPENDIX 2 - STATISTICS CANADA NOC-S CLASSIFICATIONS

The highest level of detail was used to provide the comparative national analyses in this report; however, the statistics pulled from Statistics Canada are composed of groupings of job titles. These groupings are defined in the National Occupational Classification – Statistics (NOC-S) 2006 Index. The groupings used in this report are as follows:

Fire – Grouping G6 – occupations in protective services - which includes:

Fire Fighters
Police Officers
Other Occupations in Protective Services

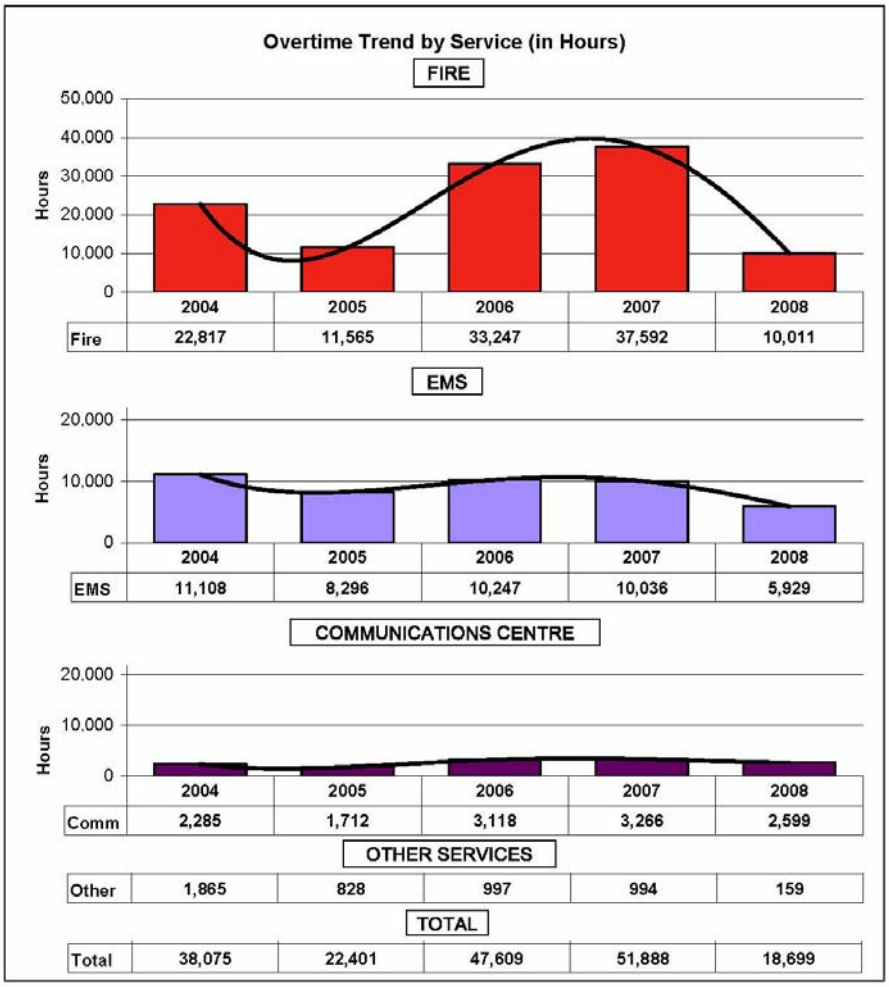
EMS – Grouping D2 – Technical and Related Occupations in Health – which includes:

Ambulance Attendants and Other Paramedical Occupations
Medical Laboratory Technicians
Veterinary Laboratory Technicians
Medical Radiation Technologists
Medical Sonographers
Dental Technologists
Midwives and Practitioners of Natural Healing
Licensed Practical Nurses

Communications Centre – Groupings B4 and B5 – Clerical Supervisors and Occupations:

Dispatchers and Radio Operators (including emergency service agencies)
General Office Clerks
Receptionists and Switchboard Operators
Data Entry Clerks
Telephone Operators
Finance and Insurance Clerks
Administrative Support Clerks
Library Clerks
Customer Service and Related Clerks

APPENDIX 3 – SERVICE OVERTIME ANALYSIS



APPENDIX 4 – NFPA STANDARDS

NFPA 1221 7.4.2
Ninety-five percent of emergency call processing and dispatching shall be completed within 60 seconds, and 99 percent of call processing and dispatching shall be completed within 90 seconds.

NFPA 1710 4.1.2.1
The Fire department shall establish the following time objectives:

(1) One minute (60 seconds) for turnout time
(2) Four minutes (240 seconds) or less for the arrival of the first arriving engine company at a Fire suppression incident and/or 8 minutes (480 seconds) or less for the deployment of a full first alarm assignment at a Fire suppression incident
(3) Four minute (240 seconds) or less for the arrival of a unit with first responder or higher level capability at an emergency medical incident
(4) Eight minutes (480 seconds) or less for the arrival of an advanced life support unit at an emergency medical incident, where this service is provided by the Fire department

NFPA 1710 4.1.2.2
The Fire department shall establish a performance objective of not less than 90 percent for the achievement of each response time objective specified in 4.1.2.1

NFPA 1710 A.4.1.2.1(2)
... While it is recognized that on some occasions (e.g., a company is out of service for training) the initial company response might not meet the 4-minute requirement, the 8-minute criterion must always be met.

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APPENDIX 5 – SUMMARY OF RECOMMENDATIONS

Recommendation 1:
The WFPS should report on the relevant performance target and WFPS actual response time for each applicable service (Fire, EMS, Communications Centre).

Recommendation 2:
We recommend that the WFPS identify the key measures including staff absences due to annual leave, training and sick leave that can be used to estimate the optimal staffing ratio for the Fire and EMS operations. We recommend that the staffing ratio be reviewed annually to determine if a change to the staff complement is required.

Recommendation 3:
We recommend that the WFPS document a process and clarify responsibilities for ensuring employees provide adequate medical documentation for absences and to improve the monitoring of employees that are off sick for extended periods of time.

Recommendation 4:
We recommend that the WFPS expand the information used to forecast potential retirements to include tracking the ages and years of service of potential retirees.

Recommendation 5:
We recommend that the WFPS place greater emphasis on monitoring the sick leave of individuals who may be candidates to retire in the near future.

Recommendation 6:
We recommend that the WFPS evaluate the option of enhancing the Roster system to be able to interface with PeopleSoft.

Recommendation 7:
We recommend that access to the Roster software be enhanced so that password security is consistent with the City of Winnipeg's standards.

Recommendation 8:
We recommend that the WFPS evaluate the option of obtaining physical software documentation from the program developer, or enhancing the Roster software to contain an in-program help function that would include query writing instructions and a user manual template.

Recommendation 9:
We recommend that the WFPS management review the current information systems and improve the reports available to management to include, at a minimum, historical tracking of staff levels scheduled for a shift, the actual number in attendance, overtime call-in histories and sick leave histories.

Recommendation 10:
We recommend that the Roster software be programmed with the ability to input follow-up dates when supervisors should contact absent employees. The system should also produce automated notifications when the dates occur.