Appendix A to Report No. 044-18 (in follow up to questions regarding Report No. 031-18FFC)

Division	Team	Position	Issue	Implications
Healthy Start	Best Beginnings	HBHC PHN	 It takes about 2 years to become sufficiently experienced in HBHC Very few experienced external candidates would leave a FT job for a temporary role Turnover among temporary employees who leave contracts before completion to accept longer term contracts and we are not able to fill the remaining few months of the original contract 	 A significant amount of time & money is dedicated to training and then temp. employees leave When temp. employees finish the assignment the employer ends up with a caseload/workload that has to be handed over/ absorbed PHN on team submitted a "Professional Responsibility" Workload form to ONA/Manager
Healthy Start	Early Years	PHN – lactation consultants	 2 PHNs are leaving the team and 4 PHNs are on leave Clinics and Health Connection require coverage, and breastfeeding home visiting is being implemented within the team 	 With all of the staff shortages, when there is a vacation or sick call, there are not enough resources to cover the required shifts PHN on team submitted a "Professional Responsibility" Workload form to ONA/Manager
Healthy Living	Child Health/Young Adult	Bilingual PHN	 Bilingual French language skills were required to fill a temporary position Two rounds of interviews were conducted and there were no qualified candidates Had to reassign another PHN from YAT 	 French Elementary schools did not receive service for 4 months MLHU not represented at Franco-London Community Coalition Group Materials not translated in French Inefficiencies (e.g. rebuilding relationships, relearning new schools)
EHID	IDC	PHN	• 3 PHNs have transferred from IDC team to VPD team and 1 request for job share in the past 6 months	 Infectious diseases and outbreak follow-up is an essential service and PHNs have not been able to transfer to their new roles

2017/18 Recruitment Issues Across Divisions