

**CITY OF HAMILTON  
INTERNAL AUDIT REPORT 2014-07  
COMMUNITY & EMERGENCY SERVICES  
HAMILTON PARAMEDIC SERVICE (HPS) – SCHEDULING & PAYROLL**

#	OBSERVATIONS OF EXISTING SYSTEM	RECOMMENDATION FOR STRENGTHENING SYSTEM	MANAGEMENT ACTION PLAN
1.	<p><u>Manual Payroll &amp; Scheduling - Inefficiencies and Risks</u></p> <p>A review of scheduling and payroll processes identified manual processes that contribute to the following inefficiencies and risks for the City, including manual processes within Time Manager, the timekeeping application. The inefficiencies include:</p> <ul style="list-style-type: none"> <li>• Time Manager can only handle one set of constraints but there are multiple union agreements with varying requirements;</li> <li>• Supervisors' statutory holiday pay is not correctly calculated in Time Manager;</li> <li>• Schedulers must manually assign staff on float rotations to station openings each week;</li> <li>• Staff swiping in late or not swiping their card for a shift are automatically paid based on the scheduled hours unless manually adjusted;</li> <li>• Statutory holiday pay does not correctly interface between Time Manager and PeopleSoft HR and must be manually reviewed and corrected for all staff;</li> <li>• Requests for ad hoc time off (outside of that provided by the Ontario Public Service Employees Union (OPSEU) 256) must be manually reviewed each month; and</li> <li>• Part-Time Paramedics have the opportunity to use shift exchanges to circumvent the Collective Agreement.</li> </ul>	<p>That management review the feasibility of implementing a scheduling and payroll computer application with multiple programmable constraints (i.e. Collective Agreements, Employment Standards Act) to reduce the amount of manual review and input required. Such an application needs to have the capability to effectively interface with PeopleSoft HR for payroll purposes.</p>	<p>Agreed. Kronos is being reviewed to determine if it will fully meet the scheduling and the payroll and financial needs. Capital funding has been allocated and preliminary task meetings have occurred. Upon confirmation that Kronos will fully meet our requirements, implementation will proceed conditional upon the allocated funding being adequate to complete the project. Anticipated implementation by quarter 2, 2015.</p> <p>In the event the Kronos solution does not fulfill the requirements, an RFP will be developed to facilitate the evaluation of other options. Expected completion by quarter 2, 2015.</p>

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	<p><u>Manual Payroll &amp; Scheduling - Inefficiencies and Risks (cont'd)</u>                      The following outcomes were observed as a result of manual processes:</p> <ul style="list-style-type: none"> <li>• Supervisor vacation time not entered into PeopleSoft HR in a timely manner, due to the manual entries being missed;</li> <li>• One Supervisor being paid twice for a shift, as a result of a manual input error onto the upload file, corrected upon notification by the Supervisor;</li> <li>• Payroll upload rejections due to manual input errors; and</li> <li>• Employment Standards Act (ESA) and Collective Agreement violations, as further described below.</li> </ul> <p>A number of additional spreadsheets, calculations and checks must be performed weekly to transfer payroll information from Time Manager to PeopleSoft HR. In addition, the risk of Collective Agreement violations, potential grievances and settlement costs is increased.</p> <p>The manual system in place is causing inefficiencies and errors that may result in excess costs, employees not being appropriately paid for time worked and additional time being required for payroll processing, resulting in lost productivity.</p>		

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2.	<p><u>Maximum Hours of Work</u> The City has approval from the Ministry of Labour for Paramedics to work to a weekly maximum of 60 hours. Paramedics are being scheduled to ensure they do not exceed 60 hours <u>within five consecutive days</u> as they work a rotating shift schedule. This is not in accordance with the ESA which defines a <u>work week as a period of seven consecutive days</u> (Sunday – Saturday). In the testing, two Paramedics were identified as working in excess of 60 hours in a work week. One was scheduled in excess of 60 hours and the other exceeded the maximum as a result of shift overruns.</p> <p>Actual hours worked are not being monitored. One Paramedic worked in excess of 60 hours in five consecutive days on two occasions in a one month period. The excess hours were a result of shift overruns, commonly incurred by Paramedics.</p> <p>When Paramedics exceed maximum hours of work, it is a violation of the Employment Standards Act. In addition, health and safety concerns may arise when an employee is working in excess of 60 hours per week.</p>	<p>That Paramedics be scheduled to a maximum of 60 hours in a work week.</p> <p>That compliance with the maximum hours of work per the Employment Standards Act be proactively monitored by management. Particular attention should be paid to overruns and remaining shifts should be adjusted, as necessary, to ensure the 60 hour maximum per work week is not exceeded.</p>	<p>Disagreed. Staff are already normally scheduled on alternating 48 hour and 36 hour work weeks with approval being in place to work up to the normal weekly maximum of 60 hours as noted. Ministry guidelines provide for the working of hours over and above the weekly maximum hours in exceptional circumstances. Responding to ambulance calls is considered exceptional. Therefore, we do not consider the performance of overtime in excess of the 60 hours as a violation of the ESA.</p> <p>Agreed. While disagreeing that there is any violation of the ESA, management will determine whether an automated report can be generated within the existing or contemplated scheduling system to flag occurrences for tracking purposes. As this capability is dependent on the computer application chosen in #1, implementation is expected by quarter 2, 2015.</p>

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3.	<p><u>Overtime Scheduling</u> Schedulers perform call outs to Paramedics to fill overtime shifts. Overtime call outs are not consistently performed in accordance with the OPSEU 256 Collective Agreement.</p> <p>During audit testing, the following was observed:</p> <ul style="list-style-type: none"> <li>• Seven instances where the Scheduler did not wait the required two minutes after leaving a message for an overtime shift before proceeding to call the next Paramedic;</li> <li>• Two Paramedics were not called in order of seniority for an overtime shift; and</li> <li>• One Paramedic was missed on an overtime call out.</li> </ul> <p>Such Collective Agreement violations could increase payroll-related grievances and settlement costs incurred by the City.</p>	<p>That Supervisors regularly review a sample of overtime call outs to ensure that they are in accordance with the Collective Agreement. Discrepancies should be documented and followed up with the Schedulers.</p>	<p>Agreed. The Manager responsible for scheduling will work with the Operations Manager to initiate a sample audit of at least one callout of OPSEU 256 employees per week to confirm compliance with the Collective Agreement requirements and report on these in writing monthly to the senior management team. This practice will commence November 1, 2014.</p>

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4.	<p><u>Shift Overruns</u> Shift overruns are paid in quarter hour increments at overtime rates. A review of all shift overruns from January 1 to April 30, 2014 identified 1,278 (31%) of 4,072 total overruns were paid to staff working one to two minutes of the quarter hour. For example, staff are scheduled until 7:00 p.m., clock out with an overrun at 7:31 p.m. and are paid a 0.75 hour shift overrun.</p> <p>A review of individual employees contributing to these types of "minute" overruns identified:</p> <ul style="list-style-type: none"> <li>• 39 (19%) of 211 employees with these overruns are responsible for 572 (45%) of the 1,278 instances; and</li> <li>• Four employees had 20 or more of these overruns. This represented 59 to 77% of their total shift overruns.</li> </ul> <p>Overruns are not being monitored and management is not following up on staff with frequent one to two minute overages.</p> <p>When overrun payments are rounded up to the next quarter hour increment, staff have incentive to delay clocking out in order to be paid for the full quarter hour not worked. This increases overtime costs paid by the City.</p>	<p>That management identify staff consistently swiping out with shift overruns within a determined threshold of the quarter hour.</p> <p>That management verify with dispatch the actual time staff arrive back at the station from a call for those identified as having frequent overruns. Follow up with staff should be required to eliminate any inappropriate staff behaviour.</p>	<p>Not practical. While not agreeing with the practice of rounding up to the next quarter hour, a change in CA language would be required to modify such a requirement. In addition, it would take an significant amount of supervisory time (in excess of the possible hours recovered) to review the 572 incidents indicated.</p> <p>Alternative to be considered. Once confirming that appropriate reports are possible to generate, a quarterly report will be provided through front line supervisors to paramedics who have a high incidence of "minute" overruns. Any potential action from this review will be determined on an individual basis in accordance with the CA requirements and in consideration of the risk that overtime costs may actually increase.</p>

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5.	<p><u>Schedule Openings</u> Paramedic schedules are prepared by assigning the required number of Paramedics to shift openings at each station, per the Master Schedule. A review of two weekly schedules for all stations identified:</p> <ul style="list-style-type: none"> <li>• 11 instances of specific station shift openings not filled and Hamilton Paramedic Services (HPS) operating short staffed; and</li> <li>• Further review of six of the 11 instances above identified three instances with no call out performed to attempt filling the shift.</li> </ul> <p>When station assignments are not filled, HPS does not operate with the minimum number of Paramedics on hand to provide an optimum level of service. This may result in longer patient wait times and health and safety concerns.</p>	<p>That management review staffing levels regularly to ensure the appropriate number of Paramedics have been scheduled to allow for station assignments to be filled. Functionality that is developed as part of a payroll and scheduling application that is part of recommendation #1 could address the significant amount of time required to manually schedule and fill shifts.</p> <p>That management communicate to Schedulers that priority be given to performing call outs to fill open shifts. Management should monitor the attempts to fill shifts.</p>	<p>Agreed. Mechanisms are already in place (and were in place at the time of the audit) to perform the activities noted in the recommendation. Management has investigated the instances noted in the audit and provided reasonable explanations as to the causes of the non-filled shift openings.</p> <p>Agreed. There is an ongoing management awareness and review of the scheduling and activities to mitigate against downtime. The schedulers are clearly aware of the priority in getting shifts covered.</p>

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6.	<p><u>Clock Alerts</u> When Paramedics do not swipe individual cards as expected for a scheduled shift, a clock alert appears in Time Manager. Alerts are reviewed by a Scheduler to ensure any adjustments to time worked have been appropriately reflected in Time Manager.</p> <p>Seven alerts were identified, in a one week period, for which review is required (in late, out early, no swipe in or out). Two of these seven clock alerts were not cleared, showing no evidence of review to ensure staff actually worked or time was appropriately adjusted.</p> <p>Schedulers do not consistently follow up when staff do not swipe in or out to ensure they actually worked.</p> <p>Paramedics are automatically paid as scheduled unless a manual adjustment is made in Time Manager to record the absence. When clock alerts are not cleared, there is no evidence of review or follow up of discrepancies between scheduled time and actual time worked. The risk of employees being paid incorrectly is increased.</p>	<p>That all clock alerts be cleared in Time Manager as evidence of review. Additional follow up with Supervisors should be performed and documented if alerts cannot be cleared by the Scheduler.</p> <p>That a Supervisor review all Paramedics clock alerts weekly to ensure they have been appropriately cleared and time adjusted, as necessary.</p>	<p>Agreed. The Scheduling Errors and Omissions Report provides a summary of all clock alerts requiring investigation and resolution by Supervisors.</p> <p>The Operations Manager will review the requirements with all Supervisors no later than December 15, 2014.</p> <p>Beginning January 31, 2015, the Operations Manager will provide a monthly report to the Deputy Chief Operations outlining any non-compliant adjustments and action taken in follow up.</p> <p>Agreed. See above response.</p>

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7.	<p><u>Overtime – Late Arrivals</u> Full-Time Paramedics that are late for overtime shifts scheduled in advance are not consistently deducted pay. These employees are automatically paid for 84 regular hours bi-weekly and overtime is separately added to the payroll from information reported in the Time Manager system. The scheduled hours in Time Manager are not always updated to reflect the actual hours worked and Payroll is instructed not to offset late absences from overtime shifts.</p> <p>When the overtime hours worked in Time Manager are not updated to reflect the actual time worked (in particular, late arrivals), Paramedics can be overpaid for these shifts. This results in financial loss to the City.</p>	<p>That all Full-Time Paramedics' overtime shifts in Time Manager be adjusted to reflect the actual hours worked, especially taking into account late arrivals.</p>	<p>Agreed. Late arrivals are easily identifiable in Time Manager and Supervisors should review and adjust hours as required in a timely manner.</p> <p>The Operations Manager will review these requirements with all Supervisors no later than December 15, 2014.</p> <p>The Operations Manager will provide a monthly report to the Deputy Chief Operations outlining any non-compliant adjustments and action taken in follow up.</p>
8.	<p><u>Payroll Adjustments</u> Prior period adjustments do not require management approval. Adjustments are being made by the Scheduler and forwarded to the Financial Assistant II to be processed through Payroll. Audit Services identified adjustments being made by the Scheduler to Paramedics' time entries in Time Manager that had previously been approved by a Supervisor. The Supervisor was not required to approve the final entry for the adjustment and no follow up was performed with the staff that incorrectly approved the time. When management is not aware of adjustments made to payroll and incorrectly approved time, the risk of inappropriate modifications increases.</p>	<p>That all prior period payroll adjustments be approved by the appropriate level of management (i.e. Supervisors for Paramedics and Commanders for Supervisors) in Time Manager before being forwarded to the Financial Assistant II.</p>	<p>Agreed. Supervisory review of prior period adjustments is required with management performing the review and approval when Supervisors are not available.</p> <p>The Financial Assistant II has already been directed to return any non-compliant adjustments to the respective supervisor or manager or to that person's supervisor or manager for completion prior to entry.</p>



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9.	<p><u>Time-Off</u> The Union (OPSEU 256) takes full responsibility for selection of their vacation time and time in lieu of designated holidays by its members and provides a Vacation Schedule to HPS. In the event that the Union has submitted the schedule to HPS and an employee has not exhausted all of his/her vacation time / time in lieu, the employee will use that time on an ad hoc basis or time in lieu will be paid out. Paramedics time off in these cases should be approved by a Supervisor.</p> <p>However, time off is being granted by a Scheduler and subsequently approved by a Supervisor after the date of the shift has past. One instance was observed of a Scheduler approving an unpaid vacation day for a Temporary Full-Time Paramedic which required coverage at overtime rates.</p> <p>When Supervisors are not aware of time off granted to Paramedics until after it occurs, they cannot ensure that unnecessary costs are avoided and that the time off is appropriate.</p>	<p>That all requests by Paramedics for time off be approved by the Supervisor at the time it is granted.</p> <p>That Temporary Full-Time Paramedics not be granted time off unless the shift can be filled without incurring additional costs (i.e. overtime).</p>	<p>Agreed. In general, Supervisor approval is obtained in advance for time-off requests. However, the approval process is largely manual and actions are based on the operational situation at the time. If the Supervisor omits the provision of an approval but the request is clearly within the limits of the CBA, the Scheduler will do the approval and arrange for backfill with Supervisor review occurring after the fact.</p> <p>Not practical. Temporary Full-Time (TFT) paramedics are placed in accordance with strict collective agreement language. The same CA does not provide for prescheduling of vacation and other time off entitlements for these staff. Following approval of time off, other additional vacancies can occur during a shift that may require coverage with overtime replacement staff based upon a mandated CA process which includes employee preference. This means that the single specific vacancy may be filled by overtime while another vacancy on the same shift is covered by part time staff at regular hourly rates.</p>

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10.	<p><u>Procedures</u> Procedures relating to scheduling are made available to staff through the HESNET. A number of documents reference an outdated Collective Agreement (ending March 31, 2009) and have not been recently updated. The last reviews of procedures date as far back as 2004. Although staff are provided a copy of the current Collective Agreement, conflicting policies may create confusion and all items may not be covered by the Collective Agreement.</p> <p>The Finance and Administration (F&amp;A) procedures for payroll processing have been recently revised but are in draft format and there is no evidence of management approval or review.</p> <p>When formal procedures are lacking, employees use personal understanding and experience to carry out processes which could result in incorrect, incomplete or inconsistent application. It would also be problematic and inefficient for a successor to commence his/her duties within a short period of time.</p>	<p>That procedures be updated. They should then be reviewed annually by management and updated as required and bear evidence of such review (sign-off).</p> <p>That management review and approve F&amp;A procedures for payroll processing. The procedures should be reviewed annually by management and bear evidence of such review (sign-off).</p>	<p>Agreed. A project has been initiated to review and update all Service Policies and Procedures. To be completed by quarter 3, 2015.</p> <p>Agreed. The above noted project (to be completed by quarter 3, 2015) will include a review of procedures for payroll processing.</p>

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**ADDENDUM**

The following items were noted during the course of the audit. Although they do not present an internal control deficiency, they are indicated in this Addendum so management is aware of the issues, risks and/or inefficiencies and can address them appropriately.

**Supervisor Swipes**

1. Supervisors are not required to swipe in and out for shifts. Their actual time worked is not reflected in Time Manager. When information about actual hours worked is not available for management review, it is difficult for management to monitor these employees to ensure Supervisors' workloads are comparable.

In addition, this may create a perception of disparity in treatment by Paramedics who must swipe for all shifts while their Supervisors do not have this requirement.

***It is recommended:***

***That Supervisors swipe in and out for all shifts using the time clocks.***

**Response:**

**Disagree. Supervisors' workload and working hours are effectively monitored and managed through regular personal contract, including on-call managers on evenings, nights, weekends and holidays. Waiving of the requirement to swipe attendance is an active demonstration of the trust that management places in front-line supervisors and, in the absence of any evidence of inadequacy or abuse, this is not considered to be a risk or inefficiency.**

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**Supervisor Shift Exchanges**

2. Supervisors are to obtain Commander approval for shift exchanges. This is done through email and the shift is then modified in Time Manager by the Supervisor. There is no record of the shift exchange or approval in Time Manager and it is unknown if Supervisors enter a shift exchange without corresponding approval from the Commander.

When shift exchanges are not tracked in Time Manager, it cannot be verified that all exchanges have been approved. The Commander may not be aware when Supervisors exchange shifts.

***It is recommended:***

***That all Supervisors' shift exchanges be entered into Time Manager, approved by the Commander and recorded directly in the system.***

**Response:**

**Disagreed. Supervisor working hours and shift exchanges are effectively monitored and managed by management through regular personal contact including on-call managers on evenings, nights, weekends and holidays. Notwithstanding that approvals are not documented in Time Manager, past experience and the close contact between managers and front-line Supervisors make it highly unlikely that the Commander or responsible manager will not be aware of shift exchanges, particularly as a report of Supervisors on duty is sent to the entire Management team prior to the start of each shift.**