Pharmacy Workforce Planning

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Key Findings

In December 2007 a study of the pharmacy workforce, both professional (e.g. pharmacists) and non professional (e.g. dispensary technicians, pharmacy assistants) was initiated at a critical time in the evolution of pharmacy services. Broadly, an understanding of the impact on labour demand of different pharmacy services directions, and the capacity of labour supply to support (or limit) achievement of these service ambitions, was sought. Significant effort has been expended over the last two years to model the pharmacy workforce, first by identifying all the variables that impact on supply and demand and second by generating the best possible estimates and predictions for these variables.

The outcomes of this project include:

1. The development of a flexible model (the Pharmacy Workforce Planning Model referred to throughout the rest of this document as 'the model') that enables the testing and therefore comprehension of the labour implications of theoretically any number of different service scenarios utilising 35 different variables of supply and demand in the areas of community pharmacy, hospital pharmacy and cognitive (and other) pharmaceutical services.

2. The identification from focus groups, stakeholder consultation and a search conference of three specific and plausible pharmacist labour market scenarios or hypotheses – a 'Best estimate', an Aspirational world' and a 'Left behind world' with differing values for each variable.

3. A 'Best estimate' scenario based on the most likely direction of each of the 35 variables results in a forecast future labour market where supply is projected to grow at a compound rate of 3.2% (adding, between 2009 and 2025, some 11,237 FTE pharmacists to the workforce), and total demand at a rate of 2.4% (adding 7,654 FTE pharmacists to the demand for pharmacist labour).

4. An 'Aspirational world' scenario which allows for high supply and high demand growth and delivers a balanced labour market but with many more pharmacists in 2025 than the 'Best estimate' scenario and a 'Left behind world' scenario which explores a low demand growth labour market scenario.

5. An awareness of the high sensitivity of the model to changes in several key variables principally on the demand side. The most sensitive variables are those associated with dispensing work in community pharmacy since this area of work accounts for a disproportionate amount of the total work performed by pharmacists. For example, labour market outcomes are highly sensitive to the productivity of pharmacist labour in both the community and hospital sectors (but particularly the community sector). Similarly, changes in the number of prescriptions per person per annum dramatically impact on pharmacist demand.

6. Significant growth in cognitive pharmaceutical services, especially in regard to growth in demand for directly unfunded primary health care activity, has been allowed for in the model. Higher growth rates make a significant different to labour market outcomes.

The real value in the model that this project delivers is the opportunity it provides to explore many scenarios within a feasible range of possibilities and thus assist the pharmacy profession policy makers to shape the future and influence factors that would most likely deliver a preferred future labour market vision.

KEY FINDINGS