

Community Pharmacy Workforce Survey 2021



Survey report – January 2022

Executive summary

Health Education England commissioned the Centre for Pharmacy Workforce Studies¹ at the University of Manchester to enable the delivery of the Community Pharmacy Workforce Survey 2021 (CPWS2021) to provide information about the current numbers and skill mix in the community pharmacy workforce and to inform future planning and investment. The report was written by Dr Liz Seston.

Two data collection tools (an online survey and an Excel data collection sheet) were used to collect data from all community pharmacies in England, with a comprehensive communications plan deployed to raise awareness of the CPWS2021, with the cooperation of key pharmacy stakeholders. The data presented in this report were collected in May and June 2021.

Key findings

The survey process obtained data from 47% of England's community pharmacies using two data collection tools. In order to take into account those pharmacies who did not respond to the survey, probability weights, based on response rate by Sustainability and Transformation Plan² (STP) areas, were calculated, with raw data from the two data collection tools weighted separately.

After weighting the raw data, England's community pharmacy workforce was found to contain **101,108** people, filling **74,493** full-time equivalent (FTE) posts. These totals are comprised of the following number of workers by type of role, with the percentage figures based on FTE:

- **27,406** pharmacists, filling **20,489** full-time equivalent posts – **28%** of the FTE workforce
- **1,592** pre-registration trainee pharmacists³, filling **1,573** full-time equivalent posts – approximately **2%** of the FTE workforce
- **7,768** pharmacy technicians, filling **6,327** full-time equivalent posts – approximately **9%** of the FTE workforce
- **31%** of these pharmacy technicians had an accuracy checking role – approximately **3%** of the FTE workforce
- **1,166** accuracy checkers (other than pharmacy technicians), filling **1,002** full-time equivalent posts - approximately **1%** of the FTE workforce

¹ Centre for Pharmacy Workforce Studies: <https://sites.manchester.ac.uk/cpws/>

² Since the survey has taken place, STPs have transitioned to become Integrated care systems (ICSs). ICS are partnerships that bring together providers and commissioners of NHS services across a geographical area with local authorities and other local partners to collectively plan health and care services to meet the needs of their population. All parts of England are now covered by one of 42 ICSs. As these organisations were STPs at the time of these survey, we have retained this terminology for the purposes of the report.

³ At the time of the survey, this was the correct terminology for trainee pharmacists. In July 2021, the pre-registration training year was replaced by a foundation training year, with pre-registration trainee pharmacists henceforth known as trainee pharmacists. As the survey took place before this change (and the term pre-registration trainee pharmacists was used in the data collection tools), we have retained it for the purposes of the report.

- **968** pre-registration trainee pharmacy technicians, filling **892** full-time equivalent posts – approximately **1%** of the FTE workforce
- **31,665** trained dispensing assistants, filling **23,010** full-time equivalent posts – approximately **31%** of the FTE workforce
- **7,414** trainee dispensing assistants, filling **5,495** full-time equivalent posts – approximately **7%** of the FTE workforce
- **10,223** trained medicine counter assistants, filling **7,387** full-time equivalent posts – approximately **10%** of the FTE workforce
- **3,372** trainee medicine counter assistants, filling **2,367** full-time equivalent posts – approximately **3%** of the FTE workforce
- **9,534** delivery drivers, filling **5,951** full-time equivalent posts, approximately **8%** of the FTE workforce

The trainee workforce constituted 14% of the overall FTE workforce (pre-registration trainee pharmacists, pre-registration trainee pharmacy technicians, trainee dispensing assistants and trainee medicines counter assistants).

The survey identified **1,154** independent prescriber pharmacists, filling **933** FTE roles, which equates to approximately one independent prescriber per 10 community pharmacies, the same proportion as in 2017.

The profile of the workforce varied across regions, with notable differences particularly between London and other regions. Pharmacists constituted 33% of the FTE workforce in London, but between 25-27% in other NHS regions. Pharmacy technicians represented just 5% of the pharmacy workforce in London, compared to 8-10% nationally. Trained dispensing assistants constituted between 29-36% of the workforce in most NHS regions, but just 20% in the London region. Conversely, trained medicines counter assistants made up 15% of the workforce in London, but between 7-11% for other regions.

All respondents were asked about vacancies for eight of the 10 roles (vacancy data was not collected for pre-registration trainee pharmacists or pre-registration trainee pharmacy technicians). The percentage vacancy rate was calculated by dividing the number of FTE or HC vacancies by the sum of the number of FTE or headcount (HC) filled posts and the number of FTE and HC vacancies. This is the same approach used to calculate vacancies in the CPWS2017.⁽¹⁾

The highest FTE vacancy rate reported was for accuracy checkers⁴ at 20%. Across the other roles for which this data were collected, the highest figures for vacancy rates were reported for trainee MCAs (18%), trainee dispensing assistants (13%), and trained MCAs (11%). The FTE vacancy rate for both pharmacists and delivery drivers was 8%. The lowest FTE vacancy rates were for trained dispensing assistants and pharmacy technicians (both 7%).

There was some variation in vacancy rates by NHSE/I region. With the exception of FTE vacancy rates for pharmacists, community pharmacies in the London region recorded higher vacancy rates for all roles than the national rate. Similarly, FTE vacancy rates were generally

⁴ This figure is for accuracy checkers only, and does not include pharmacy technicians with an accuracy checking role

higher than national rates in the East of England, with the exception of vacancy rates for delivery drivers. For some NHSE/I regions, the vacancy rates were higher for particular roles only, such as the South West region, where FTE vacancy rates were higher for pharmacists and trained and trainee dispensing assistants, but lower for other roles.

Respondents who completed the survey online were asked to rate eight of the ten roles in terms of how easy or difficult it was to fill vacancies. A greater proportion of online respondents found the pharmacy technician role 'fairly' or 'very' difficult to fill than any other role (60%). Other roles considered difficult to fill included accuracy checkers and trained dispensing assistants (both 58%) and pharmacists (56%). The roles easiest to fill were trainee medicines counter assistants and delivery drivers (both 24%).

There were some regional variations in reported difficulties of filling vacancies, with online respondents in the South West and North East & Yorkshire regions reporting higher than national rates for recruiting pharmacists (81% and 65% respectively). Respondents in the South West region also reported greater difficulty in filling vacancies for pharmacy technicians, accuracy checkers, trained dispensing assistants, trained and trainee MCAs. Respondents in the East of England also reported greater difficulty in recruiting for all of the roles for which this data was collected. In the Midlands, respondents reported greater difficulty filling pharmacy technician roles. In the North West, fewer difficulties recruiting pharmacy staff were reported for all of the roles. With the exception of pharmacists and delivery drivers, respondents in the South East region recorded higher rates of difficulties filling vacancies for the other job roles.

Conclusion

The 2021 Community Pharmacy Workforce survey has identified the size and profile of the workforce in England's community pharmacies, and vacancy rates within the sector.

This report has identified some notable variations across regions, particularly around vacancy rates and roles considered difficult to fill.

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Acknowledgements

This report was commissioned by Health Education England and written by Dr Liz Seston, Professor Ellen Schafheutle and Dr Sarah Willis, Centre for Pharmacy Workforce Studies, Division of Pharmacy & Optometry, Faculty of Biology, Medicine and Health, University of Manchester.

Health Education England would like to thank the membership of the HEE Community Pharmacy Steering Group, whose insight and commitment enabled the survey to take place and provide a meaningful data set during the shifting requirements of the Covid-19 pandemic. HEE would also like to acknowledge the expertise of the NHSBSA team. HEE also acknowledges the contribution of ICF, an international advisory and policy research organisation, who built the survey, thus enabling anonymity of responses provided for analysis to UoM.

The aim of the survey is to profile the community pharmacy workforce and gain a better understanding of skill mix and vacancy rates and to understand patterns at regional level. The commitment of pharmacy organisations and individuals who participated in the survey, with many demands on their time is recognised, and appreciated.

The University of Manchester team would like to thank Selma Stearns and Colin Howat at ICF for their contribution to the survey and to Dr Mark Hann, Senior Research Fellow, Division of Population Health, Health Services Research & Primary Care for methodological advice.

1. Introduction

Health Education England needs to plan for future investment in education, and consequently requires good information on the community pharmacy workforce.

Although the NHS in England has good data on the make-up of its directly employed workforce, its knowledge of the workforce in community pharmacies has been based on previous regional pilot surveys and the 2017 Community Pharmacy Workforce survey, which aimed to scope the community pharmacy workforce in England, to reveal its size and shape.

1.1 Health Education England and the profile of community pharmacies

HEE is part of the NHS in England and works with system partners to plan, recruit, educate and train the workforce. This includes ensuring an effective system is in place for education and training in the NHS so that the NHS has the right workforce, with the right skills, is in the right place to deliver high-quality care.

There are seven geographical NHS regions in England. These are described in the table below, which explains the geographical area covered by each, and the number of community pharmacies in each area, whether or not they contributed data towards this survey. NHS regional changes since 2017 are also indicated in the table below.

Table 1: Number of pharmacies per NHS regions in England in 2021 survey

NHS region in 2021	Areas covered	NHS region in 2017
East of England Containing 1,177 community pharmacies in total	Bedfordshire, Luton & Milton Keynes, Cambridgeshire & Peterborough, Hertfordshire & West Essex, Mid & South Essex, Norfolk & Waveney, Suffolk & North East Essex	In 2017 was part of the Midlands and East of England region
London Containing 1,808 community pharmacies in total	Central London, East London, North West London, South East London, South West London	In 2017, was part of the London and South East region
Midlands Containing 2,136 community pharmacies in total	Birmingham & Solihull, Coventry & Warwickshire, Herefordshire & Worcestershire, Derbyshire, Leicester, Leicestershire & Rutland, Lincolnshire, Northamptonshire, Nottingham & Nottinghamshire, Shropshire, Telford & Wrekin, Staffordshire & Stoke-on-Trent, the Black Country & West Birmingham	In 2017 was part of the Midlands and East of England region
North East and Yorkshire Containing 1,870 community pharmacies in total	Cumbria & the North East, West Yorkshire & Harrogate, Humber, Coast & Vale, South Yorkshire & Bassetlaw	In 2017 was part of the North of England region
North West Containing 1,679 community pharmacies in total	Lancashire and South Cumbria, Greater Manchester, Cheshire and Merseyside	In 2017 was part of the North of England region

NHS region in 2021	Areas covered	NHS region in 2017
<p>South East Containing 1,531 community pharmacies in total</p>	<p>Kent & Medway, Sussex & East Surrey, Frimley Health and Care, Surrey Heartlands, Buckinghamshire, Oxfordshire & Berkshire West, Hampshire & Isle of Wight</p>	<p>In 2017, some areas formed part of the London and South East region. Berks, Buckinghamshire (excluding Milton Keynes) and Oxfordshire were part of the South of England region</p>
<p>South West Containing 1,003 community pharmacies in total</p>	<p>Cornwall and the Isles of Scilly, Devon, Somerset, Bristol, North Somerset and South Gloucestershire, Bath and North East Somerset, Swindon and Wiltshire, Dorset, Gloucestershire.</p>	<p>In 2017, was part of the South of England region</p>

*75 pharmacies did not have an STP or NHS region recorded

NB: The number of pharmacies in the NHS regions will fluctuate, so the numbers in the table above represent a snapshot of the numbers at the time of the survey (May/June 2021)

2. Research design

The 2021 Community Pharmacy Workforce Survey was conducted by the Centre for Pharmacy Workforce Studies at the University of Manchester and their research partner, ICF.^v

The lead researcher was Dr Liz Seston, who completed data analysis and drafted the report. The survey was based on the 2017 CPWS.⁽¹⁾ This was itself based on the first Community Pharmacy Workforce Survey questionnaire used in the Kent, Surrey, Sussex (KSS) region in 2014, which was further modified for a pilot survey of London community pharmacies in 2015.^(2, 3)

The template used to collect data for the 2021 CPWS was consistent, where possible, with the previous workforce survey undertaken in 2017 and the preceding pilot in 2015. The advantage of retaining questions was to maintain a consistent approach and allow for comparisons between datasets.

Data collection for the survey took place between early May and mid-June 2021, having been delayed from the planned distribution in Autumn 2020 due to the Covid-19 pandemic.

The survey focused on the community pharmacy workforce. It is recognised that there are pharmacy roles across primary care which are not part of this workforce survey, which include: those employed by GP practices, Primary Care Networks (PCNs), urgent care settings, Clinical Commissioning Groups (CCGs), Commissioning Support Units (CSUs) or working in Health and Justice.

2.1 Data collection

There were two modes for completing the survey: an online questionnaire and an Excel spreadsheet. The aim throughout the CPWS was to conduct a survey that captured accurate, reliable data, in a short timeframe, recognising the climate of numerous demands on individuals to deliver community pharmacy services with a pandemic ongoing. The spreadsheet and the online questionnaire both included the same core questions relating to community pharmacy staffing, including questions about Full Time Equivalent (FTE) and headcount (HC) numbers. FTE vacancies and HC vacancies data were collected for eight of the 10 staff roles (vacancy data were not collected for pre-registration trainee pharmacists or pre-registration trainee pharmacy technicians).

In addition, the data collection tools included questions about the number of independent prescribers in the pharmacy (FTE and HC), and whether these prescribers were prescribing in the community pharmacy (including private prescribing). A series of questions on the ease or difficulty of filling staff vacancies were asked only of those completing the online questionnaire. Data on vacancies were not collected for pre-registration trainee pharmacists and pre-registration trainee pharmacy technicians.

^v [Centre for Pharmacy Workforce Studies at the University of Manchester](#); [ICF](#)

The 2021 survey was modified from the 2017 survey in several ways, although the core questions on staffing were retained to allow for comparability (see Table 2). Questions on training needs were removed and replaced by a question asking whether the pharmacy had any FTE pharmacists who were working outside the pharmacy as part of their role (for example, in a vaccination clinic, or GP practice). Respondents were advised to only include those who were employed by the community pharmacy to perform this role and not those who had alternative contracts to work elsewhere. Therefore, a pharmacist who worked part-time in a community pharmacy, but was also employed separately to work in a GP practice, would not be included in the response. For a copy of the online questionnaire, see Appendix A. For both data collection tools, a 'crib sheet' was provided, offering clarifying information about how to complete each question.

Table 2: Comparison of the content of the 2017 and 2021 CPWS

Questions	Collected in 2017	Collected in 2021
FTE and headcount data	Yes	Yes. Data also collected on delivery drivers in 2021
Vacancy data	Yes	Data not collected for pre-registration trainee pharmacists or pre-registration trainee pharmacy technicians
Independent prescribers (FTE and headcount)	Collected only for non-CCA pharmacies in 2017	Asked of all respondents in 2021. Respondents also asked if IPs prescribing in the pharmacy in 2021 survey
Difficulty of filling vacancies	Collected only for non-CCA pharmacies in 2017	Asked only of online survey respondents in 2021 (not of those who completed the Excel data collection sheet)
Training needs analysis	Yes	No
Pharmacists working outside the pharmacy	No	Yes
Demographic data (sex, age, ethnic group, disability status)	No	Yes

2.2 Detailed method

The survey was developed and conducted across several stages, which are summarised here and described in more detail below:

1. Development of the questionnaire
2. Preparation of the survey sample
3. Main fieldwork
4. Processing of data and analysis

Stage 1: Development of the questionnaire

The survey was based on the 2017 CPWS,⁽¹⁾ which was itself based on the first Community Pharmacy Workforce Survey questionnaire used in the Kent, Surrey, Sussex (KSS) region in 2014, which was further modified for a pilot survey of London community pharmacies in 2015.^(2, 3) Modifications were minor in order to allow for comparability between the 2017 and 2021 surveys.

As with the 2017 survey, definitions were provided at the start of the questionnaire, explaining the basis on which questions should be answered. For example, it specified the following:

- That those responding should consider only staff for whom that particular workplace was a “normal and regular place of work”, and the 2021 questionnaire specified that this should exclude any corporate head office / regional staff based at the pharmacy who did not provide direct service to members of the public.
- Respondents were asked to only include locum or relief pharmacists who worked regularly at the community pharmacy, which was defined, for example, as once a week or twice a month. Respondents were asked not to include staff who worked there on an exceptional basis, such as covering for unexpected sickness amongst the regular staff.
- Respondents were asked to include pharmacists working in the pharmacy, dispensary, care home dispensing units, and those who may only provide essential advanced or locally commissioned services.
- It explained that the figures provided should be correct for the week in which the questionnaire was completed (or, if necessary, the most recent week for which the necessary information was available), including any “normal and regular” staff off sick or on holiday that week
- It instructed respondents to focus only on staff working on the medicines counter or in the dispensary, excluding those working only on cosmetics, etc.
- In order to identify staff who were employed in role but training for a higher role (for example, a trained dispensing assistant training to be a pharmacy technician), respondents were asked to record the staff members for the role in which they worked and were then asked a supplementary question asking if any of these staff were training for a higher role. This question was asked only of trained dispensing assistants and trained medicines counter assistants.

Respondents were asked to use the definition of full-time equivalent of 40 hours per week, unless they had their own definition of full-time equivalent. If this was the case, they were asked to indicate this in the survey. In practice, most respondents (93%) used the 40-hour definition.

Stage 2: Preparation of the survey sample

Communication of the survey to community pharmacies was co-ordinated through the HEE chaired CPWS steering group.^{vi} The engagement was promoted through routes which were tailored to the method pharmacies/contractors had identified for completing the survey, e.g. this included NHSBSA emails and established routes across the membership of the steering group

^{vi} Membership of the CPWS2021 Steering Group included representatives of HEE, DHSC, NHSE/I, CCA, NPA, AIMp, PSNC, APTUK, RPS, GPhC and UoM.

members. The HEE pharmacy team provided content for regular messages and used existing engagement events where timing aligned.

This approach recognised the previous experience with the 2017 survey, using existing distribution lists and stakeholders to encourage, whilst maintaining good governance principles.

A HEE communications plan was drawn up, which identified clear stages pre, during and post-survey, as well as specific activities. This communications plan was updated throughout, in response to emerging trends.

Additional promotion work was conducted alongside the NHSBSA channel, this included but was not limited to, direct mailings, social media and regional engagement events. Where appropriate the aim was more personalised than the NHSBSA emails and included, announcing the launch, the survey deadline extensions and a thank you to stakeholders when the survey was closed.

Stage 3: Main fieldwork

Community pharmacies were sent an “advance notice email” by NHSBSA in April 2021, alerting them to the fact that they would be receiving survey invitations, and notifying that they had the right to opt out if they so wished. Only a small number (N=32) opted to drop out at this stage. Data collection began with the sending of email invitations from 7 May and ended on 25 June 2021.

The survey invitation email contained a link to the online questionnaire, with appropriate measures in place to prevent more than one questionnaire being completed for an individual community pharmacy. Reminders were sent by NHSBSA to non-participating pharmacies who had received the online survey link.

HEE and the UoM research team liaised with representatives from relevant community pharmacy organisations to distribute the spreadsheet to relevant pharmacy representatives and to publicise the CPWS 2021. See Stage 2 above for further details.

Stage 4: Processing of data and analysis

Working to an agreed analysis specification, the [Centre for Pharmacy Workforce Studies](#) at the University of Manchester (UoM), with their research partner [ICF](#), processed and analysed the data. ICF processed, cleaned and merged the data from the two data collection tools, before creating an integrated dataset in Excel. This separation between ICF and CPWS was designed to reassure stakeholders and community pharmacy contractors that no data (particularly commercially sensitive) identifiable at the level of an individual community pharmacy would be available to the UoM team.

Researchers at UoM then imported the data into the statistical package SPSS (v.27, IBM). The unit of analysis was the individual community pharmacy. Summaries of the FTE and headcount variables for each of the employee groups were reported for all respondents and for each of the seven NHSE/I regions. The dataset was weighted to account for non-response (see section 3.4 for details of the weighting strategy). Percentages were reported for categorical variables such as difficulty of filling vacancies, age and ethnicity.

2.3 Response rate

At the time of the 2017 survey there were 11,832 community pharmacies operating in England. In comparison, at the time of the CPWS in May 2021 there were 11,279 (a reduction of 553).

Initially a total of 5,606 responses were received from both the data collection tools. Unfortunately, some of the submissions had been completed incorrectly and the survey team were unable to verify these responses. In total, 335 submissions were therefore excluded, giving a final sample of 5,271 and an overall response rate of 47%, representing just under half of all community pharmacies in England.

2.4 Data weighting

As with the 2017 survey, a decision was made to apply probability weights to the data in order to account for community pharmacies who did not respond to the survey. Probability weighting is a method commonly used to reduce response bias resulting from non-response and ensure the sample is more 'reflective' of the population that it is representing. Probability weighting has previously been used in pharmacy-based research.⁽⁴⁾ The weights were calculated in Excel using the inverse of the response rate to the survey from individual Sustainability and Transformation plan (STP) areas. For example, if there were 200 pharmacies in an STP and 100 responded, the weighting factor would be $200/100=2$. Data were then analysed in SPSS. With the exception of questions on the difficulties of filling vacancies and the demographic data (sex, age, ethnicity and disability status), all data presented in the report is weighted.

STPs are place-based, multi-year plans built around the needs of local populations. The decision to weight by STP, rather than NHSE/I region, as in 2017, was made as these groupings are likely to be more area-specific than the larger regional areas. For the purposes of the weighting, the two data collection tools were treated separately. Therefore, the method minimises the data weighting process creating a data artefact where one type of survey response method dominates.

For responses where it was known that some community pharmacies had been unable to provide information (for example, locum pharmacists, delivery drivers), the probability weights were adjusted to take this into account. As some pharmacies were unable to provide vacancy data, the denominators used to calculate the vacancy rates were adjusted to take this into account.

2.5 Important caveats

There are a number of important caveats that the reader should be aware of when considering the findings in this report:

- Some of the community pharmacies who responded to the survey were unable to provide vacancy data. This has been addressed in the probability weighting and also when determine the denominators used to calculate percentage vacancy rates
- Similarly, some community pharmacies were unable to provide data on independent prescribers, locum and relief pharmacists, and delivery drivers. This has been taken into account when weighting the data.

- Some community pharmacies advised that they had included trained dispensing assistants who were in training to become a registered pharmacy technician in the category for pre-registration trainee pharmacy technicians. This is reported in the relevant section.
- In addition, in some community pharmacies, the trainee medicines counter assistant role was a combined role, so had been recorded under the trainee dispensing assistant category.

Some organisations noted that both ethnicity and disability were self-reported, so information may not have been fully available or accurate. This should be taken into account when considering demographic data.

3. Findings

This chapter provides a summary of the responses received from community pharmacies across England, as well as detailed findings.

Responses were received from community pharmacies across England, with a total of **5,271** pharmacies supplying data, which was then weighted used the method described in section 2.4 to the total population of **11,279** community pharmacies in England. The detailed findings are set out in the remainder of this report, starting with the overall composition of the community pharmacy workforce, then sections on each of the 10 workforce roles, the ease or difficulty filling vacancies for eight of the 10 roles and details of pharmacists working outside the pharmacy (e.g., in vaccination clinics).

3.1 The composition of the community pharmacy workforce

The chart and tables below show the proportions made up by each role within the overall community pharmacy workforce in England, on both full-time equivalent (FTE) and headcount bases, as well as the average FTE staff per community pharmacy. The workforce comprised a headcount figure of **101,108**, with **74,493** FTE roles.

Figure 1: Profile of the community pharmacy workforce across the ten roles by FTE

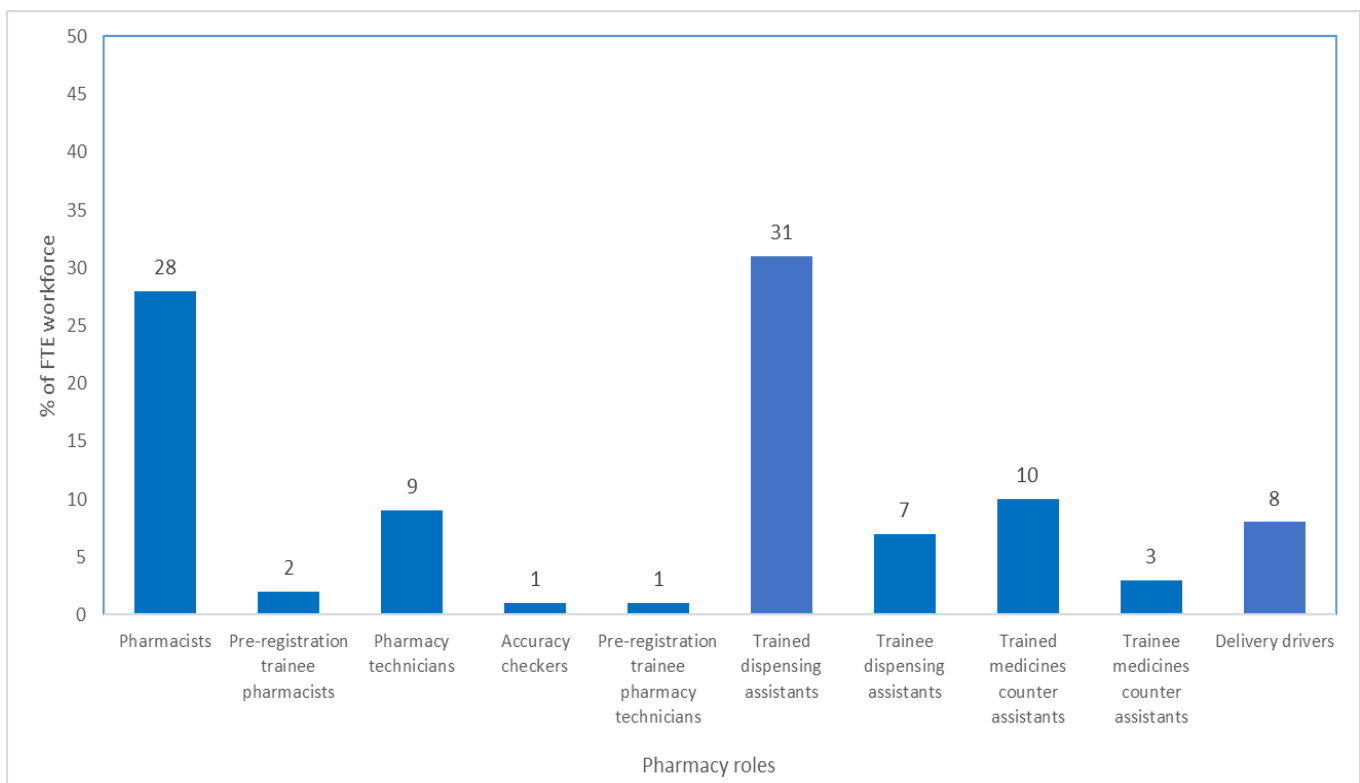
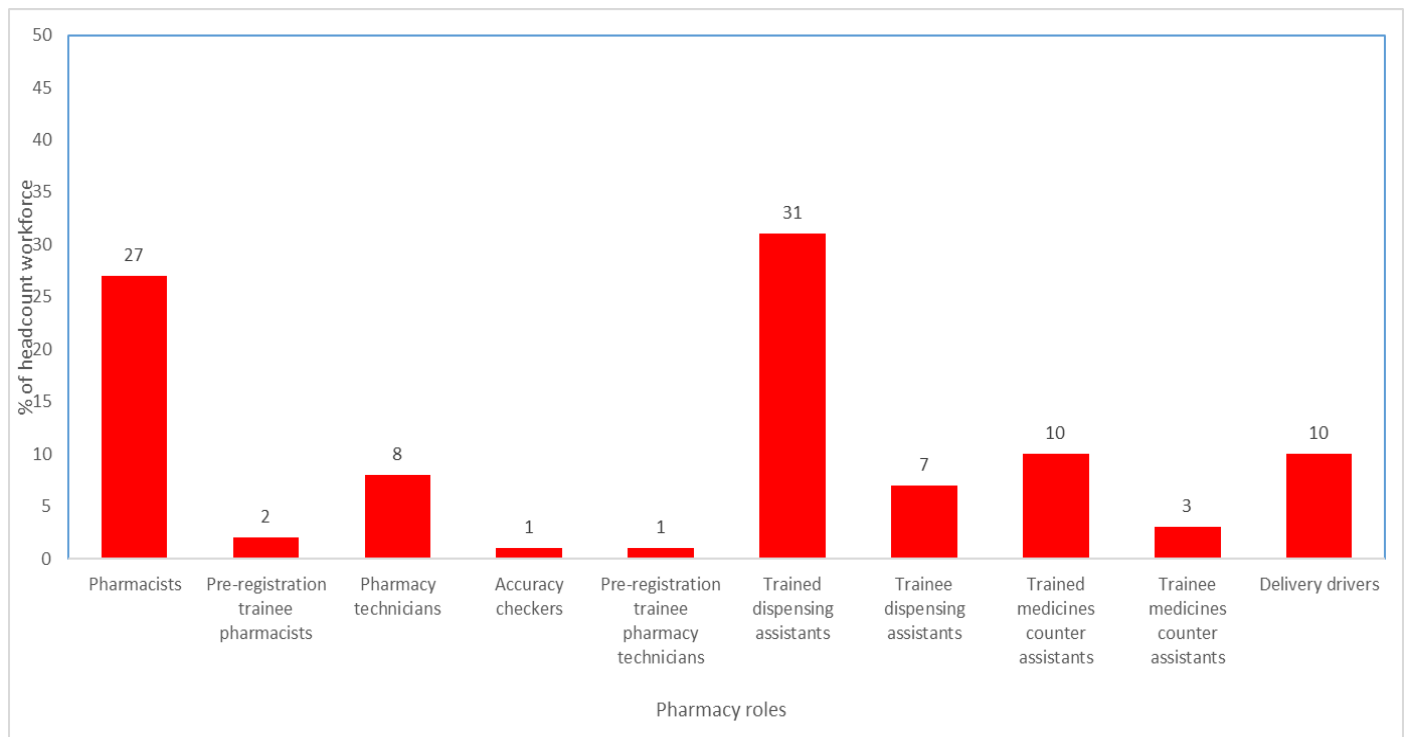


Figure 2: Profile of the community pharmacy workforce across the ten roles, by headcount



From Figure 1 and Figure 2 it can be seen that the single most populous role was that of trained dispensing assistant, who represented 31% of the total community pharmacy FTE and headcount workforce. Pharmacists represented 28% of the FTE workforce. Trained medicines counter assistants (MCAs) represented 10% of the community pharmacy workforce and pharmacy technicians represented 9% of the FTE workforce and 8% of the headcount workforce. There was minimal difference between the proportions across the roles, whether measured on a headcount or FTE basis.

The graph in Figure 3 shows a comparison of the proportions of the workforce in 2017 and 2021. As delivery drivers were not included in the workforce data collection exercise in 2017, the proportions have been calculated for 2021 to exclude this group. As can be seen, there were proportionally more pharmacists and trained dispensing assistants in 2021, when compared to 2017. There were also proportionally fewer trained and trainee medicines counter assistants (MCAs) in 2021.

Figure 3: Comparison of 2017 & 2021 community pharmacy workforce data: by FTE

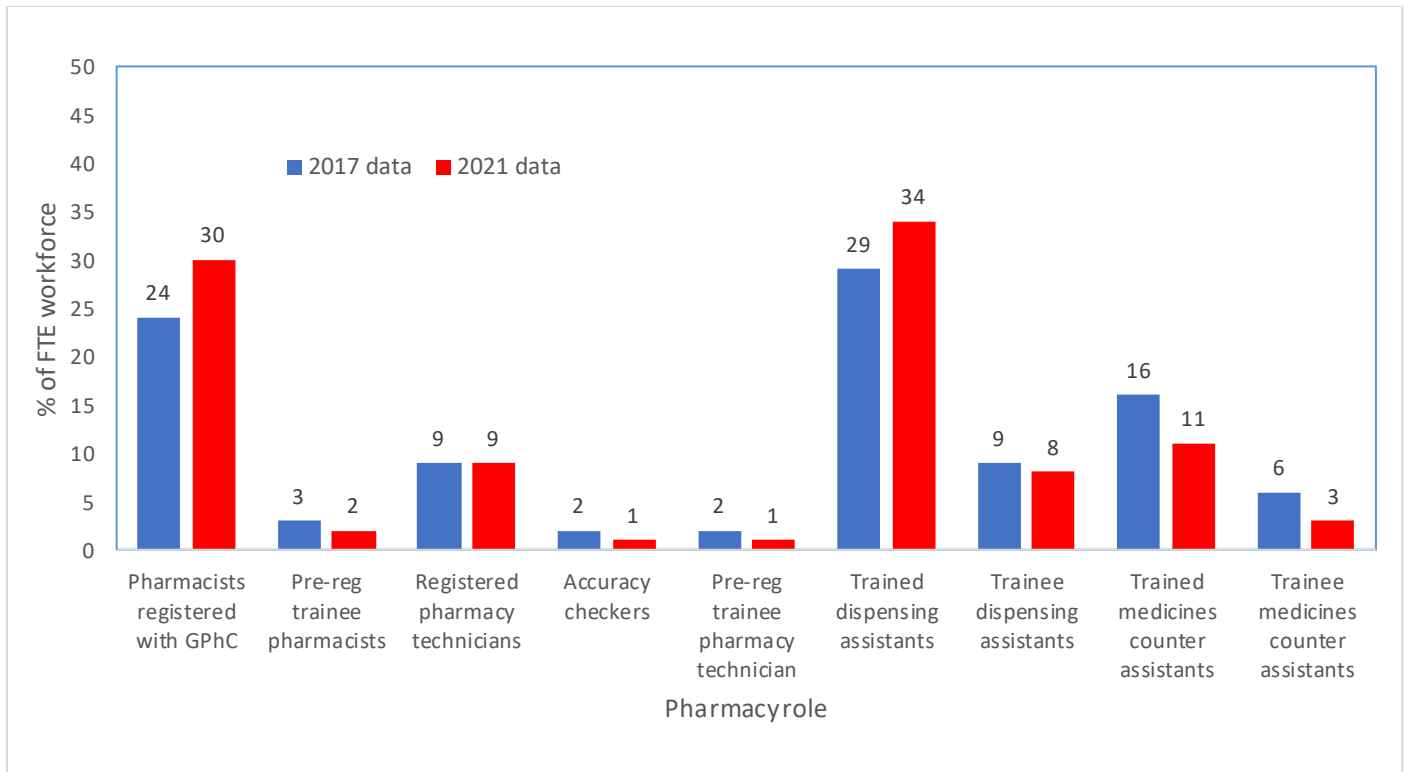


Table 3 shows the breakdown of the FTE workforce across the regions, and Table 4 shows the breakdown of the headcount workforce across the seven NHSE/I regions, with the figures in brackets adding to 100% vertically, in order to show the proportion of each role in each region/nationally. Note also that these numbers have been calculated by weighting the datasets from the two collection tools and, as such, total numbers will sometimes not add perfectly from the regional figures, due to rounding. As noted previously, the largest employee groups were trained dispensing assistants, pharmacists and trained medicines counter assistants.

There was variation in the proportion of different employee groups by NHSE/I region. Whilst across the whole of England, pharmacists represented 28% of the FTE community pharmacy workforce, pharmacists in the London region represented 33% of the workforce there. Pharmacy technicians also represented a smaller proportion of the workforce in London (5%). The headcount data also showed a similar pattern. See Table 4 for details.

Similarly, trained dispensing assistants (DAs) comprised 31% of the FTE workforce in England, compared with just 20% in the London region. Trained DAs represented a greater proportion of the pharmacy workforce in the South West region. Trained and trainee medicines counter assistants in London represented a greater proportion of the workforce compared with the national data (16% and 5% respectively).

Table 3: Composition of Full-Time Equivalent workforce by type of role and NHSE/I region

FTE N (%)	East of England (1,177 ^a)	London (1,808 ^a)	Midlands (2,136 ^a)	North East/ Yorkshire (1,870 ^a)	North West (1,679 ^a)	South East (1,531 ^a)	South West (1,003 ^a)	All regions (11,279 ^a)
Pharmacists	2,239 (27)	3,626 (33)	3,795 (27)	3,262 (25)	2,863 (26)	2,852 (27)	1,617 (27)	20,489 (28)
Pre-registration trainee pharmacists	144 (2)	445 (4)	305 (2)	204 (2)	228 (2)	172 (2)	53 (1)	1,573 (2)
Pharmacy technicians	714 (9)	585 (5)	1,279 (9)	1,251 (10)	1,034 (9)	833 (8)	589 (10)	6,327 (9)
Accuracy checkers	123 (2)	81 (1)	276 (2)	119 (1)	186 (2)	178 (2)	30 (1)	1,002 (1)
Pre-registration trainee pharmacy technician	90 (1)	140 (1)	136 (1)	165 (1)	97 (1)	157 (1)	82 (1)	892 (1)
Trained dispensing assistants	2,421 (29)	2,186 (20)	4,514 (31)	4,556 (35)	3,743 (34)	3,213 (31)	2,202 (36)	23,010 (31)
Trainee dispensing assistants	766 (9)	872 (8)	868 (7)	871 (7)	728 (7)	892 (8)	456 (8)	5,495 (7)
Trained medicines counter assistants	844 (10)	1,729 (15)	1393 (10)	883 (7)	856 (8)	1,114 (11)	507 (8)	7,387 (10)
Trainee medicines counter assistants	278 (3)	626 (6)	353 (2)	417 (3)	227 (2)	341 (3)	118 (2)	2,367 (3)
Delivery drivers	677 (8)	804 (7)	1,241 (9)	1,122 (9)	975 (9)	702 (7)	387 (6)	5,951 (8)

^a Number of pharmacies in each NHSE/I region

*75 pharmacies did not have a STP or NHSE/I region record

Table 4: Composition of headcount workforce by type of role and NHSE/I region

Headcount N (%)	East of England (1,177 ^a)	London (1,808 ^a)	Midlands (2,136 ^a)	North East/ Yorkshire (1,870 ^a)	North West (1,679 ^a)	South East (1,531 ^a)	South West (1,003 ^a)	All regions (11,279 ^a)
Pharmacists	2,823 (26)	4,518 (33)	5,363 (27)	4,586 (25)	3,862 (26)	3,777 (26)	2,238 (26)	27,406 (27)
Pre-registration trainee pharmacists	144 (1)	460 (3)	307 (1)	204 (1)	239 (2)	179 (1)	53 (1)	1,592 (2)
Pharmacy technicians	897 (9)	670 (5)	1,590 (8)	1,546 (9)	1,231 (8)	1,036 (7)	751 (9)	7,768 (8)
Accuracy checkers	139 (1)	81 (1)	308 (2)	134 (1)	217 (1)	240 (2)	43 (1)	1,166 (1)
Pre-registration trainee pharmacy technician	93 (1)	147 (1)	160 (1)	189 (1)	102 (1)	172 (1)	96 (1)	968 (1)
Trained dispensing assistants	3,195 (30)	2,896 (21)	6,266 (32)	6,596 (36)	5,014 (34)	4,437 (30)	3,054 (36)	31,665 (31)
Trainee dispensing assistants	992 (9)	1,150 (8)	1,209 (6)	1,164 (6)	963 (7)	1,243 (9)	655 (8)	7,414 (7)
Trained medicines counter assistants	1,183 (11)	2,209 (16)	1,978 (10)	1,227 (7)	1,258 (8)	1,611 (11)	689 (8)	10,223 (10)
Trainee medicines counter assistants	387 (4)	783 (5)	580 (3)	584 (3)	306 (2)	552 (4)	175 (2)	3,372 (3)
Delivery drivers	896 (8)	944 (7)	2,063 (10)	1,974 (11)	1,585 (11)	1,290 (9)	714 (8)	9,534 (10)

^a Number of pharmacies in each NHSE/I region

*75 pharmacies did not have an STP or NHSE/I region record

3.1.1 Average number of workers per pharmacy, by role

When considering the numbers of people employed in each role, it can be useful to see this expressed as an average per community pharmacy, as shown in Table 5 below. This data has been calculated, as in the 2017 survey, by dividing the total number of FTE or headcount employees by the number of community pharmacies in each region and for England as a whole. The data reveals that the only roles with an average of one or more FTE worker per pharmacy are the roles of pharmacist and trained dispensing assistant. All other roles are, on average, filled by less than one full-time worker per community pharmacy.

Although the average number of FTE pharmacists per pharmacy was 1.82 for most regions, there was some regional variation. The average FTE was highest in London (2.01) and lowest in the South West (1.61). The average headcount was 2.43, with less obvious variation between the regions for this measure. The average number of FTE trained dispensing assistants was 2.04 for England as a whole, but there was some regional variation, with community pharmacies in the London region recording an average of 1.21 FTE.

Data on average FTE per community pharmacy were also collected in 2017, although it is not possible to compare regional data due to changes to NHSE/I regions. The average FTE per community pharmacy was lower in 2017 for the following roles: pre-registration trainee pharmacists, accuracy checkers, pre-registration trainee pharmacy technicians and trained and trainee medicines counter assistants. The figures for pharmacists and trained dispensing assistants were higher in 2021 and the figure for pharmacy technicians was largely consistent with 2017.

Table 5: Average number of FTE / headcount workers per pharmacy by role

Average number of workers by pharmacy, by role (FTE/headcount)	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Pharmacists	1.90/ 2.40	2.01/ 2.50	1.78/ 2.51	1.74/ 2.45	1.71/ 2.30	1.86/ 2.47	1.61/ 2.23	1.82/ 2.43
Pre-registration trainee pharmacists	0.12/ 0.12	0.25 / 0.25	0.14/ 0.14	0.11/ 0.11	0.14/ 0.142	0.11/ 0.12	0.05/ 0.05	0.14/ 0.14
Pharmacy technicians	0.61/ 0.76	0.32/ 0.37	0.60 / 0.74	0.67/ 0.83	0.62 / 0.73	0.54/ 0.68	0.59/ 0.75	0.56/ 0.69
Accuracy checkers	0.08 / 0.08	0.08/ 0.08	0.07/ 0.08	0.09 / 0.10	0.06/ 0.06	0.10 / 0.11	0.08 / 0.10	0.08 / 0.09
Pre-registration trainee pharmacy technicians	0.11 / 0.12	0.05/ 0.04	0.13/ 0.14	0.06/ 0.07	0.11/ 0.13	0.12/ 0.16	0.03/ 0.04	0.09/ 0.10
Trained dispensing assistants	2.06/ 2.70	1.21/ 1.60	2.11/ 2.93	2.44/ 3.53	2.23/ 2.99	2.10/ 2.90	2.20/ 3.05	2.04/ 2.81
Trainee Dispensing assistants	0.65/ 0.84	0.48/ 0.64	0.41/ 0.57	0.47/ 0.62	0.43/ 0.57	0.58/ 0.81	0.45 / 0.65	0.49/ 0.66

Average number of workers by pharmacy, by role (FTE/headcount)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Trained MCAs	0.72/ 1.01	0.96/ 1.22	0.65/ 0.93	0.47/ 0.66	0.51/ 0.75	0.73/ 1.05	0.51/ 0.69	0.65/ 0.91
Trainee MCAs	0.24/ 0.33	0.35/ 0.43	0.17/ 0.27	0.22/ 0.31	0.14/ 0.18	0.22/ 0.36	0.12/ 0.17	0.21/ 0.30
Delivery drivers	0.58/ 0.76	0.45/ 0.52	0.58/ 0.97	0.60/ 1.06	0.58/ 0.94	0.46 / 0.84	0.39/ 0.71	0.53/ 0.85

3.2 Pharmacists

Pharmacists made up 28% of the FTE community pharmacy workforce in England, and this proportion was quite consistent across regions, except for the London region, where pharmacists constituted 33% of the workforce. Pharmacist represented 27% of the headcount workforce. In the 2017 CPWS, pharmacists constituted almost a quarter (24%) of the community pharmacy workforce in England, although it should be noted that the 2021 workforce figures include delivery drivers, who were not included in the 2017 CPWS. When a like-for-like comparison is made, excluding delivery drivers, pharmacists comprised 30% of the FTE community pharmacy workforce in 2021. Due to significant changes to NHSE/I regions since the 2017 CPWS, it has not been possible to make comparisons of the data at regional level.

Table 6: FTE and headcount pharmacists by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions*
FTE (weighted data)	2,239	3,626	3,795	3,262	2,863	2,852	1,617	20,489
Headcount (weighted data)	2,823	4,518	5,363	4,586	3,862	3,777	2,238	27,406
Average FTE pharmacists per pharmacy	1.90	2.01	1.78	1.74	1.71	1.86	1.61	1.82

* 75 pharmacies did not have a region recorded in the dataset

There were an average of 1.82 pharmacists per community pharmacy in 2021 in England, with some regional variation, with higher average number of pharmacists FTEs per pharmacy in the London (2.01) and East of England (1.90) regions, as seen in Table 6 above. The average FTE per pharmacy was higher than that in the 2017 CPWS, where the corresponding figure was 1.50. Due to changes to NHSE/I regions, it was not possible to compare the regional data, although it should be noted that the figure for London was also highest in 2017. At this point, however, the London region also included parts of the South East, which are now part of the South East region. See Table 1 for details.

3.2.1 Pharmacist vacancies and recruitment

The FTE vacancy rate for pharmacists (the number of FTE vacancies as a percentage of FTE filled positions plus FTE vacancies) was 8% across England (see Table 7 for details). The headcount vacancy rate was also 8%. At the national level the pharmacist vacancy rates for FTE and headcount were towards the lower end of the rates observed across the eight roles. Comparisons with the 2017 data indicated however, that the vacancy rate had increased from the CPWS2017, when FTE and headcount vacancy rates for this role were 4% for FTE and headcount respectively.

Table 7: FTE and headcount vacancies for pharmacists by NHSE/I region

Vacancies N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	184 (11)	208 (8)	240 (9)	167 (7)	142 (8)	128 (7)	115 (14)	1,200 (8)
Headcount	246 (9)	354 (9)	370 (9)	281 (8)	208 (7)	212 (7)	187 (9)	1,867 (8)

There was some regional variation in vacancy rates, with vacancy rates highest in the South West and East of England (14% and 11% respectively). FTE Vacancy rates were lower than the national rate in North East & Yorkshire and the South East (both 7%). See Table 7 for details.

For headcount vacancies, the highest rates were again found in the South West and East of England, but the rate was also slightly higher in London and the Midlands (all 9%). The lowest headcount vacancy rates were found in the North West and South East (both 7%). It was not possible to compare regional vacancy rates with data from the 2017 CPWS, due to changes to the NHSE/I regions.

In contrast to 2017, when only 21% of respondents considered the pharmacist role fairly or very difficult to fill, in 2021, over half of respondents (56%) considered the role fairly or very difficult to fill. See Table 8 for details.

Table 8: Ease or difficulty of filling vacancies for pharmacists

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	5	14	18	27	29	8

It should be noted, however, that the level of difficulty perceived was much greater in the South West region, where 81% considered such vacancies 'fairly' or 'very difficult' to fill. Respondents in the North East & Yorkshire and East of England regions also reported greater difficulties in recruiting pharmacists. See Table 9 for details.

Table 9: Ease or difficulty of filling vacancies for pharmacists by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Pharmacists	61	45	55	65	46	55	81	55

3.2.2 Independent prescribers

The 2021 CPWS questionnaire asked about the number of FTE independent prescribers, and the corresponding headcount figure. These questions were asked of all community pharmacies in 2021, whereas in 2017, this question was asked of only some pharmacies (as per Table 2). However, some community pharmacies reported that they did not hold information on the prescribing status of their employees. Whilst this has been accounted for in the weighting analysis, it is possible that the figures on independent prescribers may represent an underestimate of numbers.

Responses to this question in the 2021 CPWS produced weighted estimates of 933 FTE independent prescriber pharmacists, and a corresponding headcount figure of 1,154. This indicates that pharmacists with an independent prescribing qualification represent 5% of the weighted FTE pharmacist workforce identified in the survey and 4% of the weighted headcount workforce. This equates to approximately one independent prescriber pharmacist per 10 community pharmacies. (1,154/11,279), the same proportion as in 2017.

There was some variation by region in the proportion of independent prescribers, with the highest proportions in the London region for both FTE and headcount (8% and 7% respectively). See Table 10 for details.

Table 10: FTE and headcount independent prescribers by NHSE/I region

N (%)	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
FTE	89 (4)	288 (8)	164 (4)	103 (3)	120 (4)	108 (4)	61 (4)	933 (5)
Headcount	94 (3)	301 (7)	243 (5)	159 (3)	139 (4)	137 (4)	81 (4)	1,154 (4)

A question was added to the 2021 survey to determine if any independent prescriber pharmacists were using their prescribing skills in community pharmacy (this could include private prescribing or commissioned services). Analysis indicated that approximately a quarter of those with an independent prescribing qualification (n=290) were using their prescribing skills.

3.2.3 Pharmacist roles

The 2021 survey asked respondents to provide FTE and headcount data for the following groups:

- Employed pharmacists
- Self-employed locum pharmacists^g
- Relief pharmacists
- Provisionally registered pharmacists^h

The results shown in Table 11 below indicate that, overall employed pharmacists made up 63% of the FTE pharmacist workforce and 55% of the headcount pharmacist workforce. This proportion of FTE employed pharmacists varied at a regional level from 58% in London to 65% in North East and Yorkshire and the East of England. Self-employed locum pharmacists represented 21% of the FTE and 27% of the headcount pharmacist workforce in England, with the proportion of FTE locums ranging from 19% in the South West to 25% in the London region. Relief pharmacists represented 13% of the FTE and 16% of the headcount pharmacist workforce in England. Provisionally registered pharmacists represented 3% of the FTE and 2% of the headcount pharmacist workforce in England. The figures for headcount data broadly followed the pattern for FTE data, although there was less regional variation. See Table 11 and Table 12 for details.

Table 11: FTE pharmacist roles by NHSE/I regions

FTE - Pharmacist roles N (%)	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Employed pharmacists	1,461 (65)	2,114 (58)	2,403 (63)	2,135 (65)	1,787 (62)	1,837 (64)	1,036 (64)	12,892 (63)
Self-employed locum pharmacists	438 (20)	915 (25)	814 (21)	642 (20)	602 (21)	579 (20)	307 (19)	4,363 (21)
Relief pharmacists	275 (12)	458 (13)	513 (14)	422 (13)	422 (15)	366 (13)	235 (15)	2,721 (13)
Provisionally-registered pharmacists	65 (3)	139 (4)	65 (2)	63 (2)	52 (2)	70 (3)	39 (2)	513 (3)
Total	2,239	3,626	3,795	3,262	2,863	2,852	1,617	20,489

^g When reporting locums or relief pharmacists, it should be noted that respondents were asked to indicate only those who worked regularly in the pharmacy

^h The results of the March 2021 GPhC registration assessment would have been released just before the survey date, so the provisionally registered pharmacists were likely to be those who deferred to the next sitting.

Table 12: Headcount pharmacist roles by NHSE/I regions

Headcount - Pharmacist roles N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Employed pharmacists	1,697 (60)	2,511 (56)	2,847 (53)	2,522 (55)	2,033 (53)	2,084 (55)	1,224 (55)	15,045 (55)
Self-employed locum pharmacists	639 (23)	1,200 (27)	1,550 (29)	1,362 (30)	1,084 (28)	1,002 (27)	614 (27)	7,516 (27)
Relief pharmacists	409 (14)	651 (14)	892 (17)	631 (14)	669 (17)	621 (16)	359 (16)	4,279 (16)
Provisionally-registered pharmacists	78 (3)	156 (3)	74 (1)	71 (1)	76 (2)	70 (2)	41 (2)	566 (2)
Total	2,823	4,518	5,363	4,586	3,862	3,777	2,238	27,406

On average, there were 0.63 FTE employed pharmacists per pharmacy nationally. Figures for the NHSE/I regions are shown in Table 13. There were an average of 0.21 FTE self-employed locum pharmacists per pharmacy nationally, with minimal variation across NHSE/I regions. On average, there were 0.13 relief pharmacists per pharmacy, with minimal variation regionally. There were on average 0.03 FTE provisionally-registered pharmacists per pharmacy. There was some regional variation, ranging from 0.02 FTE in the North West to 0.04 FTE in London. See Table 13 for details.

Table 13: Average FTE pharmacist per pharmacy by role and by NHSE/I region

Average FTE pharmacists per pharmacy	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Employed pharmacists	0.65	0.58	0.63	0.66	0.62	0.64	0.64	0.63
Self-employed locum pharmacists	0.20	0.25	0.21	0.20	0.21	0.20	0.19	0.21
Relief pharmacists	0.12	0.12	0.14	0.13	0.15	0.13	0.15	0.13
Provisionally-registered pharmacists	0.03	0.04	0.02	0.02	0.02	0.03	0.02	0.03

The FTE and headcount vacancy rates for employed pharmacists were 9% for FTE and headcount. See Table 14 for details. There was regional variation in FTE vacancy rates, with rates above the national rate in the South West (14%) and East of England (13%). For headcount

vacancies, pharmacies in the South West and East of England also reported higher vacancy rates (12%) and (13% respectively).

Table 14: FTE and headcount vacancies for employed & self-employed locum pharmacists by NHSE/I region

Vacancies N (%)	East of England	London	Midlands	North East/Yorkshire	North West	South East	South West	All regions
Employed pharmacist FTE vacancies	125 (13)	111 (8)	132 (8)	114 (8)	102 (9)	83 (8)	83 (14)	766 (9)
Employed pharmacist HC vacancies	180 (13)	223 (11)	179 (9)	173 (9)	152 (10)	154 (10)	127 (12)	1,211 (9)
Self-employed locum FTE vacancies	59 (8)	97 (7)	108 (8)	53 (5)	40 (5)	45 (6)	32 (14)	434 (7)
Self-employed locum HC vacancies	66 (8)	131 (12)	191 (14)	83 (9)	56 (6)	58 (7)	60 (10)	656 (10)

3.2.4 FTE Pharmacists employed to work outside the community pharmacy

There were 793 FTE pharmacists (4% of the weighted pharmacist FTE workforce) who were employed by the community pharmacy to work outside the setting. The most common settings were Covid-19 vaccination clinics and General Practice or primary care networks. See Table 15 for details.

Table 15: FTE pharmacists employed to work outside the community pharmacy

Pharmacists employed to work outside the pharmacy	FTE (weighted data)	% of all FTE pharmacists (20,489)
Care homes	74	<1
Covid-19 vaccination clinic	378	2
General practice/Primary Care Network	238	1
Health in Justice pharmacy	19	<1
Hospice	11	<1
Hospital pharmacy outpatients	16	<1
Other	56	<1
TOTAL working outside pharmacy	793	4

3.3 Pre-registration trainee pharmacists

Pre-registration trainee pharmacists comprised 2% of the FTE community pharmacy workforce in England. Table 16 shows both the average number of FTE pre-registration trainee pharmacists per pharmacy in each region (as a proportion of all community pharmacies) and the average FTE worked by pre-registration trainee pharmacists. Pre-registration trainee pharmacists represented 3% of the FTE workforce in the 2017 CPWS, compared with 2% in the 2021 dataset, when delivery drivers have been removed from the calculation, as data on this role was not collected in 2017.

Table 16: FTE and headcount pre-registration trainee pharmacists by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	144	445	305	204	228	172	53	1,573
Headcount (weighted data)	144	460	307	204	239	179	53	1,592
Average FTE per pharmacy	0.12	0.25	0.14	0.11	0.14	0.11	0.05	0.14

There were on average 0.14 pre-registration trainee pharmacists per community pharmacy in England. There was some regional variation, ranging from 0.05 in the South West region to 0.25 in London. The majority of pre-registration trainee pharmacists worked full-time.

Community pharmacies that employed pre-registration trainee pharmacists were asked if any of their trainees were multi-sector trainees. Data weighting indicated that approximately 1476 pharmacies employed a pre-registration trainee pharmacist and that 158 (11%) reported that their trainee was a multi-sector trainee.

3.4 Pharmacy technicians

Pharmacy technicians made up 9% of the FTE community pharmacy workforce in England. Table 17 below shows the estimated numbers of pharmacy technicians in each NHSE/I region, and the average number per community pharmacy. Pharmacy technicians represented the same proportion of the FTE community pharmacy workforce (9%) in 2021 as in 2017, once the workforce figures have been adjusted to remove delivery drivers from the calculation, as data on this role was not collected in the 2017 CPWS.

The average number of pharmacy technicians 'per pharmacy' was 0.56 FTE, with the highest number per pharmacy in the North East & Yorkshire region (0.67 FTE). London reported the lowest number 'per pharmacy for pharmacy technicians (0.32 FTE). See Table 17 for details.

Table 17: FTE and headcount pharmacy technicians by NHSE/I region

Base: all respondents	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
FTE (weighted data)	714	585	1,279	1,251	1,034	833	589	6,327
Headcount (weighted data)	897	670	1,590	1,546	1,231	1,036	751	7,768
Average FTE per pharmacy	0.61	0.32	0.60	0.67	0.62	0.54	0.59	0.56

3.4.1 Pharmacy technician vacancies and recruitment

The vacancy rate among pharmacy technicians was 7% for FTE and 6% on a headcount basis. This FTE vacancy rate was the lowest for the eight roles for which vacancy data was collected. Nonetheless, both the FTE and headcount vacancy rates showed an increase from vacancy rates of 4% and 3% respectively in 2017. See Table 18 for details.

Table 18: Pharmacy technician FTE and headcount vacancies

Pharmacy technician vacancies N (%)	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
FTE	59 (11)	86 (19)	35 (4)	32 (4)	45 (6)	26 (5)	18 (4)	306 (7)
Headcount	59 (8)	105 (19)	62 (5)	39 (4)	55 (6)	34 (4)	34 (5)	396 (6)

There was some regional variation in both FTE and headcount vacancy rates for pharmacy technicians, with rates consistently higher in the London region (both 19%).

Despite having the lowest vacancy rate for the eight roles, 60% of respondents reported that it was ‘fairly’ or ‘very difficult’ to fill such a role. See Table 19 for details. The figure of 60% represents an increase from the 2017 CPWS, when 42% of respondents reported it was ‘fairly or ‘very difficult’ to fill these roles.

Table 19: Ease or difficulty of filling vacancies for pharmacy technicians

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	2	4	16	30	30	17

The regions who reported the greatest perceived difficulty (reporting 'fairly' or 'very difficult' to fill) in filling pharmacy technician vacancies were the East of England, the South East (66% and the Midlands (both 65%), although pharmacies in the South West also reported difficulties. The lowest difficulty rate was found in the North West (48%). See Table 20 for details.

Table 20: Ease or difficulty of filling vacancies for pharmacy technicians by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
Pharmacy technicians	66	60	65	59	48	65	64	60

3.4.2 Pharmacy technician roles

In the 2021 survey, community pharmacies were asked to provide FTE and headcount data for four different types of role within the pharmacy technician staff role. These were:

- Employed pharmacy technician
- Self-employed locum pharmacy technician
- Relief pharmacy technician
- Pharmacy technician with accuracy checking role.

The majority of pharmacy technicians in the FTE community pharmacy workforce were employed (66%), although there was some variation regionally, with employed pharmacy technicians representing a greater proportion of the workforce in London (75%) and the North West (71%). Self-employed locum pharmacy technicians and relief pharmacy technicians represented only a very small percentage of the pharmacy technician workforce (2% and 1% respectively). As with the pharmacist role, respondents were asked only to identify locum pharmacy technicians and relief pharmacy technicians who worked regularly at the pharmacy.

Pharmacy technicians with an accuracy checking role represented just under a third (31%) of the FTE pharmacy technician workforce, and 3% of the whole community pharmacy workforce. Again, regional variations were noted, with pharmacy technicians with this role representing a greater proportion of the pharmacy technician workforce in the South West and North East & Yorkshire region (both 40%). Pharmacy technicians with an accuracy checking role represented only 19% of the pharmacy technician workforce in the London region. The proportions of the different types of technician were mirrored in the headcount data. Self-employed locum pharmacy technicians represented just 2% of the FTE pharmacy technician workforce and 1% on the headcount measure (N=94 for FTE and 111 for HC). Relief pharmacy technicians represented just 1% of the pharmacy technician workforce on both FTE and headcount measures (N=60 and 106 respectively). As numbers for these groups are so small, the data is not presented by NHSE/I region in the tables below. See Table 21 and Table 22 for details.

Table 21: Pharmacy technician roles – FTE by NHSE/I region

FTE -Pharmacy technician roles N (%)	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
Employed pharmacy technician FTE	473 (66)	438 (75)	861 (67)	749 (60)	736 (71)	548 (66)	346 (59)	4,180 (66)
1 Pharmacy technician with accuracy checking role FTE	221 (30)	114 (19)	392 (31)	499 (40)	251 (24)	267 (32)	237 (40)	1,993 (31)

Table 22: Pharmacy technician roles – headcount by NHSE/I region

Headcount - Pharmacy technician roles N (%)	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
Employed pharmacy technician headcount	596 (66)	506 (76)	1085 (68)	916 (59)	868 (71)	710 (69)	453 (60)	5,169 (67)
Pharmacy technician with accuracy checking role HC	273 (30)	126 (19)	449 (28)	624 (40)	299 (24)	306 (30)	290 (39)	2,382 (31)

Vacancy data were only reported for employed pharmacy technicians and self-employed locums. As the locums only represented a very small proportion of the FTE and headcount vacancy data (22 of the 306 FTE vacancies, for example, were self-employed locums), vacancy rates for pharmacy technician roles are not reported here.

3.5 Accuracy checkers

In the 2021 CPWS, respondents were asked to record the number of accuracy checkers (not pharmacy technicians) working in the pharmacy. This was the terminology used in the data collection tools. This role is differentiated from a pharmacy technician who has an accuracy checking role: respondents were asked to record this latter group under the pharmacy technician group.

Although the instructions were to include accuracy checkers who were not pharmacy technicians in this category, it is, of course, possible that some staff working as accuracy checker may have been included by mistake in the pharmacy technician category (pharmacy technician with accuracy checking role).

Accuracy checkers made up one of the smallest components of the community pharmacy workforce, at just 1% of total workers in community pharmacies in England. See Table 23 for details. When the workforce figures have been adjusted to remove delivery drivers from the calculation, as data on this role was not collected in the 2017 CPWS, accuracy checkers again represented 1% of the workforce. This represents a reduction from the figures in the 2017 CPWS when accuracy checkers represented 2% of the FTE workforce.

There were, on average, 0.08 FTE accuracy checkers per community pharmacy in England. This varied from 0.06 FTE in the North West to 0.10 in the South East.

Table 23: FTE and headcount accuracy checkers by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	123	81	276	119	186	178	30	1,002
Headcount (weighted data)	139	81	308	134	217	240	43	1,166
Average FTE per pharmacy	0.08	0.08	0.07	0.09	0.06	0.10	0.08	0.08

3.5.1 Accuracy checker vacancies and recruitment

The vacancy rate for accuracy checkers was 20% FTE and 19% on a headcount basis and was the highest for the pharmacy roles. See Table 24 for details. This represents an increase from 2017 when the FTE and headcount rates were both 6%. Accuracy checkers had the second highest vacancy rates in 2017.

Table 24: FTE and headcount vacancies for accuracy checkers by NHSE/I region

Accuracy checkers N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	53 (35)	20 (27)	34 (14)	30 (21)	26 (15)	32 (17)	7 (19)	204 (20)
Headcount	53 (32)	20 (27)	49 (16)	38 (24)	37 (18)	38 (15)	7 (14)	248 (19)

There was regional variation in FTE and headcount vacancies, with community pharmacies in the East of England and London reporting high FTE vacancy rates (35% and 27% respectively). London also reported rates higher than the national rate for headcount vacancies, as did the North East & Yorkshire region (27% and 24% respectively). FTE vacancy rates were lowest in the Midlands and the North West. Headcount vacancies were lowest in the South East and South West regions (15% and 14% respectively). See Table 24 for details.

Overall, 58% of respondents to the online survey agreed that the role of accuracy checker was 'fairly' or 'very' difficult to fill. This is higher than the 39% of respondents in the 2017 CPWS who found this type of vacancy difficult to fill. Almost a quarter of respondents indicated that they did not know how difficult it was to fill a vacancy for such a role, which may indicate that the respondent lacked experience of filling such vacancies. See Table 25 for details.

Table 25: Ease or difficulty of filling vacancies for accuracy checkers

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	2	3	13	25	33	24

The NHSE/I regions reporting the greatest difficulties with filling vacancies for accuracy checkers were the South West (68%), South East (64%) and the East of England (62%). The North West recorded the lowest percentage reporting difficulties (45%). See Table 26 for details.

Table 26: Ease or difficulty of filling vacancies for accuracy checkers by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Accuracy checkers	62	57	57	52	45	64	68	58

3.6 Pre-registration trainee pharmacy technicians

Pre-registration trainee pharmacy technicians made up just 1% of the community pharmacy workforce in England, on both FTE and headcount bases. When the FTE data were adjusted to remove delivery drivers from the analysis, pre-registration trainee pharmacy technicians comprised 1% of the FTE pharmacy workforce in 2021, compared with 2% in 2017.

There were an average of 0.09 FTE pre-registration trainee pharmacy technicians per community pharmacy in England, with some regional variation, ranging from a high of 0.12 FTE in the South East to a low of 0.03 FTE in the South West. The majority of pre-registration trainee pharmacy technicians worked full-time. See Table 27 for details.

Table 27: FTE and headcount pre-registration trainee pharmacy technicians by NHSE/I region

Base: all respondents	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
FTE (weighted data)	90	140	136	165	97	157	82	892
Headcount (weighted data)	93	147	160	189	102	172	96	968
Average FTE per pharmacy	0.11	0.05	0.13	0.06	0.11	0.12	0.03	0.09

It should be noted that some community pharmacies advised that they had included trained dispensing assistants who were in training to become a registered pharmacy technician in the category for pre-registration trainee pharmacy technicians: this accounted for the equivalent of 57 FTE and 65 headcount pre-registration pharmacy trainee technicians.

3.7 Trained dispensing assistants

This was the most common role in the community pharmacy workforce in England, making up 31% of all workers on both FTE and headcount bases. When the FTE data were adjusted to remove delivery drivers from the dataset, trained dispensing assistants comprised 34% of the FTE pharmacy workforce in 2021, compared with 29% in 2017.

There were an average of 2.04 FTE trained dispensing assistants per community pharmacy in England. There was some regional variation, ranging from a high of 2.44 FTE in the North East & Yorkshire region to a low of 1.21 FTE in the London region. See Table 28 for details.

Table 28: FTE and headcount trained dispensing assistants by NHSE/I region

Base: all respondents	East of England	London	Mid-lands	North East & York-shire	North West	South East	South West	All regions
FTE (weighted data)	2,421	2,186	4,514	4,556	3,743	3,213	2,202	23,010
Headcount (weighted data)	3,195	2,896	6,266	6,596	5,014	4,437	3,054	31,665
Average FTE per pharmacy	2.06	1.21	2.11	2.44	2.23	2.10	2.20	2.04

3.7.1 Trained dispensing assistant vacancies and recruitment

The vacancy rate for trained dispensing assistants were 7% for both FTE and headcount basis, indicating an increase in vacancies from the 2017 CPWS, when the rates were 4% on both FTE and headcount. See Table 29 for details. The vacancy rate for trained dispensing assistants was towards the lower end of vacancy rates across the eight roles. There was some regional variation, with FTE vacancy rates highest in the East of England and London regions (10% and 11% respectively). Headcount vacancy rates were also higher than the rate for England in these two regions (8% and 11%).

Table 29: FTE and headcount vacancy rates for trained dispensing assistants by NHSE/I region

Trained dispensing assistants N (%)	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
FTE	150 (10)	162 (11)	170 (6)	160 (6)	182 (7)	128 (6)	112 (8)	1,078 (7)
Headcount	198 (8)	269 (11)	262 (6)	271 (6)	264 (7)	209 (6)	191 (8))	1,679 (7)

Despite being a common role in community pharmacy, 58% of respondents reported that it was 'fairly' or 'very difficult' to fill vacancies. In 2017, 45% of respondents found this role 'fairly' or 'very difficult' to fill. There was considerable regional variation, with a higher proportion of respondents reporting difficulties in the East of England and the South East. (both 66%) and South West (60%). Rates were lowest in the Midlands (48%). See Table 30 and Table 31 for details.

Table 30: Ease or difficulty of filling vacancies for trained dispensing assistants

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	2	11	21	34	24	8

Table 31: Ease or difficulty of filling vacancies for trained dispensing assistants by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Trained dispensing assistants	66	57	48	54	53	66	60	58

3.8 Trainee dispensing assistants

Trainee dispensing assistants made up 7% of the community pharmacy workforce in England, on both the FTE and headcount measures. When the FTE data were adjusted to remove delivery drivers from the analysis, trainee dispensing assistants comprised 8% of the FTE pharmacy workforce in 2021, compared with 9% in 2017.

There were on average 0.49 FTE trainee dispensing assistants per pharmacy in England, ranging from 0.41 FTE in the Midlands region to 0.65 FTE in the East of England. See Table 32 for details.

Table 32: FTE and headcount trainee dispensing assistants by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	766	872	868	871	728	892	456	5,495
Headcount (weighted data)	992	1,150	1,209	1,164	963	1,243	655	7,414
Average FTE per pharmacy	0.65	0.48	0.41	0.47	0.43	0.58	0.46	0.49

In some community pharmacies, the trainee MCA role was a combined role, so these respondents indicated that these roles had been recorded under the trainee dispensing assistant category: this accounts for 460 FTE and 917 headcount trainee dispensing assistants.

3.8.1 Trainee dispensing assistant vacancies and recruitment

The vacancy rate for trainee dispensing assistants was 13% on both the FTE and headcount measure. This was one of the higher vacancy rates for the eight roles and indicates a rise in vacancies in this employee group, when compared with the 2017 CPWS, when the figures were 5% for FTE and headcount. There was some regional variation, with FTE vacancy rates slightly higher than the national rate for London (15%), East of England, Midlands and South West regions (all 14%). FTE vacancies were lowest in the South East (7%). Headcount vacancies were highest in the Midlands (16%) and lowest in the North West (11%) and South East (9%). See Table 33.

Table 33: FTE and headcount vacancy rates for trainee dispensing assistants by NHSE/I region

Trainee dispensing assistants N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	90 (14)	106 (15)	93 (14)	72 (11)	73 (13)	46 (7)	44 (14)	526 (13)
Headcount	119 (13)	152 (15)	152 (16)	149 (15)	86 (11)	90 (9)	79 (14)	825 (13)

In terms of the difficulty of filling vacancies, it appeared that this was one of the easier job roles to fill, with 29% reporting a neutral response (neither easy nor difficult) and the same proportion reporting that it was 'fairly' or 'very difficult' to fill. In 2017, 32% of respondents reported that this role was 'fairly' or 'very' difficult to fill. See Table 34 for details.

Table 34: Ease or difficulty of filling vacancies for trainee dispensing assistants

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very	Don't know
% respondents	5	26	29	19	10	11

Respondents in the London region reported the greatest difficulty in filling these roles (39%), with rates above the national rate for the East of England and South East regions (34% and 33% respectively). See Table 35 for details.

Table 35: Ease or difficulty of filling vacancies for trainee dispensing assistants by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Trainee dispensing assistants	34	39	23	21	24	33	28	29

3.9 Trained medicines counter assistants

Trained medicines counter assistants (trained MCAs) made up 10% of the FTE and headcount workforce in community pharmacies in England. It was therefore the third-largest role, after trained dispensing assistants and pharmacists. When the FTE data were adjusted to remove delivery drivers from the analysis, trained medicines counter assistants comprised 11% of the FTE pharmacy workforce in 2021, compared with 16% in 2017.

There were an average of 0.66 FTE trained MCAs per community pharmacy in England. There was some regional variation, ranging from 0.47 FTE in the North East & Yorkshire to 0.96 FTE in the London region. See Table 36 for details.

Table 36: FTE and headcount trained medicines counter assistants by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	844	1,729	1,393	883	856	1,114	507	7,397
Headcount (weighted data)	1,183	2,209	1,978	1,227	1,258	1,611	689	10,223
Average FTE per pharmacy	0.72	0.96	0.65	0.47	0.51	0.73	0.51	0.66

3.9.1 Trained medicines counter assistant vacancies and recruitment

The vacancy rate for trained medicines counter assistants was 11% on the FTE measure, and 12% on the headcount measure, an increase from the figures in 2017 when FTE and headcount vacancy rates for this role were 3% for both measures. See Table 37 for details. Regionally, FTE vacancy rates for this role were highest in the East of England and London regions (15% and 13% respectively) and lowest in the North East & Yorkshire, South East and South West regions (8% and 9% respectively). Headcount vacancies were highest in the East of England, London and Midland regions.

Table 37: FTE and headcount vacancy rates for trained medicines counter assistants by NHSE/I region

Trained MCAs N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	95 (15)	184 (13)	143 (11)	63 (8)	73 (11)	82 (9)	38 (9)	678 (11)
Headcount	150 (15)	285 (14)	227 (14)	103 (10)	103 (10)	161 (11)	87 (13)	1,118 (12)

Overall, 46% of respondents reported that it was ‘fairly’ or ‘very difficult’ to fill trained medicines counter assistant roles. See Table 38. In the 2017 CPWS, 41% of respondents found vacancies for this role ‘fairly’ or ‘very difficult’ to fill. Regions reporting the greatest difficulty in recruiting for trained MCAs were the South East (57%), the East of England (53%) and London regions (51%), with the North West reporting the lowest rate (33%). See Table 38 and Table 39 for details.

Table 38: Ease or difficulty of filling vacancies for trained medicines counter assistants

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	2	17	24	28	18	11

Table 39: Ease or difficulty of filling vacancies for trained medicines counter assistants by NHSE/region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Trained MCAs	53	51	37	36	33	57	48	46

3.9.2 Trained dispensing assistants and medicines counter assistants in training

Respondents were asked to indicate whether any of their trained dispensing assistants or medicines counter assistants were currently training to become pharmacy technicians. The percentage of such trainees in each region and for the two job roles was calculated by using the total of trained dispensing assistants and trained medicines counter assistants (MCAs) in each region as a denominator.

The results shown in Table 40 indicate that 6% (headcount) of the trained dispensing assistant population identified in the survey were currently in training to be a pharmacy technician. The corresponding figure for FTE was 8%. The percentage of trained medicines counter assistants who were currently in training to become a pharmacy technician was 12% (headcount) and 14% (FTE).

There was some regional variation, with a greater proportion of dispensing assistants in training in the East of England, London and South East regions. See Table 40 for details. There was also some regional variation with regard to the medicines counter assistants in training, with a greater proportion of such trainees identified in the East of England and London regions.

Table 40: FTE and headcount trained dispensing assistants and trained medicines counter assistants in training by NHSE/I region

N (%)	East of England	London	Mid-lands	North East & Yorkshire	North West	South East	South West	All regions
Dispensing assistants in training - FTE	227 (9)	319 (15)	285 (6)	295 (6)	194 (5)	309 (10)	98 (4)	1,752 (8)
Dispensing assistants in training - HC	247 (8)	333 (11)	317 (5)	308 (5)	223 (4)	327 (7)	116 (4)	1,897 (6)
MCAs in training - FTE	204 (24)	376 (22)	142 (10)	101 (11)	82 (10)	86 (8)	48 (10)	1,060 (14)
MCAs in training - HC	253 (21)	408 (18)	165 (8)	106 (9)	105 (8)	108 (7)	50 (7)	1,216 (12)

3.10 Trainee medicines counter assistants

Trainee medicines counter assistants made up 3% of the community pharmacy workforce in England, on both FTE and headcount measures. When the FTE data were adjusted to remove delivery drivers from the analysis, trainee medicines counter assistants comprised 3% of the FTE pharmacy workforce in 2021, compared with 6% in 2017.

There were, on average, 0.21 FTE trainee medicines counter assistants per community pharmacy in England, ranging from 0.12 FTE in the South West to 0.35 FTE in the London region. See Table 41 for details.

Table 41: FTE and headcount trainee medicines counter assistants by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	278	626	353	417	227	341	118	2,367
Headcount (weighted data)	387	783	580	584	306	552	175	3,372
Average FTE per pharmacy	0.24	0.35	0.17	0.22	0.14	0.22	0.12	0.21

NB: in some community pharmacies, the trainee MCA role was a combined role, so had been recorded under the trainee dispensing assistant category.

3.10.1 Trainee medicines counter assistant vacancies and recruitment

The vacancy rate among trainee MCAs was 18% FTE and 17% on a headcount basis. The only role with a higher vacancy rate was that of accuracy checker. The vacancy rates were higher than in the 2017 CPWS, when the respective FTE and headcount vacancy rates for this role were 8% and 7%. It should be noted that this role had the highest vacancy rate in 2017. Regionally, the highest FTE and headcount vacancy rates for this role were found in the East of England (24% FTE and 22% HC) and the North West regions (25% FTE and 26% HC). See Table 42 for details.

Table 42: FTE and headcount vacancy rates for trainee medicines counter assistants by NHSE/I region

Trainee MCAs N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	65 (24)	111 (19)	47 (19)	32 (10)	62 (25)	47 (17)	10 (12)	374 (18)
Headcount	75 (22)	169 (21)	54 (14)	32 (7)	73 (26)	69 (16)	13 (9)	484 (17)

Despite the relatively high vacancy rate, this role was considered one of the easiest to fill, as shown in the table below, with 40% rating it fairly or very easy, a similar proportion to 2017. Only 24% reported that it was 'fairly' or 'very difficult' to fill, with higher rates in London (35%) and the South East (27%). In the 2017 CPW, the same proportion of respondents (24%) found filling vacancies for this role 'fairly' or 'very difficult.' See Table 43 and Table 44 for details.

Table 43: Ease or difficulty of filling vacancies for trainee medicines counter assistants

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very	Don't know
% respondents	9	31	24	15	9	12

Table 44: Ease or difficulty of filling vacancies for trainee medicines counter assistants by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Mid- lands	North East & York- shire	North West	South East	South West	All regions
Trainee MCAs	26	35	20	16	15	27	26	24

3.11 Delivery drivers

Delivery drivers represented 8% of the FTE community pharmacy workforce in England and 10% on the HC measure. Data on delivery drivers was not collected as part of the 2017 CPWS.

There were on average 0.53 FTE delivery drivers per community pharmacy in England. This varied from 0.45 FTE in the London region to 0.60 FTE in the North East & Yorkshire region. See Table 45 for details.

Table 45: FTE and headcount delivery drivers by NHSE/I region

Base: all respondents	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE (weighted data)	677	804	1,241	1,122	975	702	387	5,951
Headcount (weighted data)	896	944	2,063	1,974	1,585	1,290	714	9,534
Average FTE per pharmacy	0.58	0.45	0.58	0.60	0.58	0.46	0.39	0.53

3.11.1 Delivery driver vacancies and recruitment

The vacancy rate among delivery drivers was 8% FTE and 7% on a headcount basis. See Table 46 for details. There was some regional variation in vacancy rates, with the highest FTE vacancy rates in London and the South East (both 10%). The headcount vacancy rates were higher than the rate for England in the London (12%) and the South East regions (9%).

Table 46: FTE and headcount vacancy rates for delivery drivers by NHSE/I region

Delivery drivers N (%)	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
FTE	38 (7)	71 (10)	62 (6)	72 (8)	51 (7)	58 (10)	18 (6)	370 (8)
Headcount	47 (6)	106 (12)	102 (6)	81 (5)	58 (5)	92 (9)	30 (5)	516 (7)

This role seemed to be fairly easy to fill, with 42% of respondents reporting that this role was 'very easy' or 'fairly easy' to fill. Only 24% reported that this role was 'fairly' or 'very difficult' to fill. In terms of regional variation, regions reporting greater difficulty in filling delivery driver vacancies included London (39%) and the East of England (27%). See Table 47 and Table 48 for details.

Table 47: Ease or difficulty of filling vacancies for delivery drivers

Online respondents only	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know
% respondents	13	29	23	16	8	10

Table 48: Ease or difficulty of filling vacancies for delivery drivers by NHSE/I region

% reporting 'fairly or very difficult' to fill vacancies	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West	All regions
Delivery drivers	27	39	18	14	20	23	23	24

3.12 Characteristics of the community pharmacy workforce

For the first time in the 2021 CPWS, respondents were asked to provide information on the sex, age, ethnicity and disability status of their community pharmacy workforce. As there was variation in the completion of this data, a decision was taken to present this data as percentages rather than weighting to produce numbers.

From Table 49 it is possible to see that women represented the majority of employees in all employee groups, with the exception of delivery drivers.

Table 49: Employee characteristics – sex (%)

Sex	% Male	% Female
Pharmacist	38	62
Pre-registration trainee pharmacist	31	69
Pharmacy technician	8	92
Accuracy checker	5	95
Pre-registration trainee pharmacy technician	15	85
Trained dispensing assistants	9	91
Trainee dispensing assistants	14	86
Trained medicines counter assistants	12	88
Trainee medicines counter assistants	19	81
Delivery Drivers	78	22

When looking at the age breakdown of the community pharmacy workforce, it is perhaps unsurprising that those in trainee roles were younger, while delivery drivers appeared to have more staff members in the older age groups (including 60-69 years). See Table 50 for details.

Table 50: Employee characteristics – age groups (%)

Age groups	<20 years	20-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70 years +
Pharmacist	n/a	22	35	23	15	5	0
Pre-registration trainee pharmacist	n/a	90	5	4	1	0	0
Pharmacy technician	0	8	24	23	33	11	1
Accuracy checker	0	6	25	27	31	11	0
Pre-reg trainee pharmacy technician	14	45	15	9	9	7	0
Trained dispensing assistants	1	24	24	18	23	10	1
Trainee dispensing assistants	11	39	19	13	13	5	0
Trained medicines counter assistants	6	20	13	15	25	19	2
Trainee medicines counter assistants	27	31	12	13	11	5	0
Delivery Drivers	0	4	7	10	25	43	11

Overall, where ethnicity was known, the most populous group was white, but there was considerable variation between employee groups, with the pharmacist roles (pharmacist, , pre-registration trainee pharmacist) more ethnically diverse. The pre-registration pharmacy technician trainees were also more diverse than registered pharmacy technicians. Ethnicity was recorded as unknown for between 8% and 80% of employee groups and it is noted that ethnicity and disability status data is provided on a self-report basis, which may account for the large amount of unknown data for some of these roles. See Table 51 for details.

Table 51: Employee characteristics – ethnicity (%)

	Asian or Asian British ^a	Black, African, Caribbean and/or Black British ^b	Mixed or multiple ethnic groups ^c	White ^d	Any other Ethnic Group ^e
Pharmacist	40	7	1	49	3
Pre-registration trainee pharmacist	57	8	5	29	1
Pharmacy technician	12	2	1	84	<1
Accuracy checker	9	1	<1	89	<1
Pre-reg trainee pharmacy technician	48	8	0	42	2
Trained dispensing assistants	9	2	1	88	<1
Trainee dispensing assistants	21	4	2	72	<1
Trained MCAs	16	2	1	80	1
Trainee MCAs	25	4	1	67	2
Delivery drivers	13	1	0	86	0

^a This category includes staff from Indian, Pakistani, Bangladeshi, Chinese or any other Asian background

^b This category includes staff from African, Caribbean and any other Black, African or Caribbean background

^c This category includes staff from White and Black Caribbean, White and Black African, White and Asian or any other mixed or multiple ethnic background

^d This category includes staff from English, Welsh, Scottish, Northern Irish or British, Irish, Gypsy or Irish Traveller or any other White background

^e This category includes staff from Arab or any other ethnic background.

Source: List of ethnic groups. Gov.Uk (ethnicity-facts-figures.service.gov.uk)

The proportion of employees with a known disability was very low (range 0% to 3%), however, given the high levels of unknown data for this question, it is possible that the proportion of the community pharmacy workforce with a disability is higher. It is possible that some employees may have hidden disabilities which their employer is unaware of. These figures, as the ethnicity data, should therefore be treated with caution. See Table 52 for details.

Table 52: Disability status (%)

	% Disability	% No disability	% Disability status unknown
Pharmacist	1	68	31
Pre-registration trainee pharmacist	0	60	40
Pharmacy technician	2	75	23
Accuracy checker	1	52	47
Pre-reg trainee pharmacy technician	3	81	16
Trained dispensing assistants	2	37	61
Trainee dispensing assistants	2	62	36
Trained MCAs	3	79	18
Trainee MCAs	1	89	10
Delivery drivers	1	40	59
Delivery Drivers	78	22	

4. Limitations and summary of key findings

This chapter explores the limitations of the survey and provides a summary of the key findings.

4.1 Limitations

As with any piece of research, when considering the findings of the 2021 CPWS, it is important to consider potential limitations to the findings. Although the response rate for the CPWS in 2021 was 47%, a figure considered acceptable in pharmacy practice research,⁽⁵⁾ it was lower than the response rate achieved by the 2017 CPWS. An overarching strategy was used to publicise the 2021 CPWS through a number of different media and making use of many pharmacy organisations, who shared information about the survey with their members in order to maximise response.

It should be noted that the timing of the survey was significantly delayed by the Covid-19 pandemic, which was still ongoing at the point of survey distribution. Originally planned to take place in autumn 2020, the survey eventually ran in May/June 2021. Although it is not possible to determine if the pandemic had any impact on the response to the CPWS, community pharmacies have been under unprecedented pressure during the pandemic.⁽⁶⁾

As in 2017, probability weighting was used as a method to reduce response bias (resulting from non-response to the survey) and ensure the sample is more 'reflective' of the population that it is representing. Although probability weighting is a method that is commonly used to overcome issues of non-response, it must be acknowledged that in doing so, certain assumptions are being made that the non-respondents are similar to respondents. The data collected as part of the CPWS2021 should therefore be considered as illustrative of the workforce in community pharmacy, rather than a definitive set of figures. While weighting was also used to "gross up" the data in the CPWS2017, the response rate was higher, so less of the data was weighted, which should be considered when making comparisons.

Significant changes to the structure of NHS regions, which have taken place since the 2017 CPWS, in particular the restructuring of four main NHS regions to seven regions by 2021, has meant that the ability to compare the 2017 CPWS and the 2021 CPWS at a regional level was severely limited. More frequent data collection will mitigate this.

For the first time, the Community Pharmacy Workforce Survey asked responding community pharmacies to provide information on the sex, age, ethnicity and disability status of their employees. This provides some overview of the characteristics of the community pharmacy workforce, but the significant variability in the number of pharmacies responding to these questions introduces considerable uncertainty with regards to completeness and accuracy. This was particularly the case for the questions on ethnicity and disability status, as this information is self-reported and therefore reliant on employees sharing this information with their employer. The information on disability status was particularly limited, with a significant majority of responses indicating that they did not know if employees had a disability. It is possible that some employees,

particularly those with 'invisible' disabilities do not wish to share their disability status with their employer.

4.2 Summary of key findings

The CPWS2021 has provided a snapshot of the community pharmacy workforce in spring 2021. The findings indicate that trained dispensing assistants and pharmacists were the two most populous employee groups in 2021, which is in line with the findings from the CPWS2017.⁽¹⁾ The profile of the workforce was largely consistent across NHSE/I regions, although London was an outlier in this respect: pharmacists, pre-registration trainee pharmacists and trained/trainee medicines counter assistants represented a great proportion of the workforce in London than in other regions. Pharmacy technicians and trained dispensing assistants represented a lesser proportion of the community pharmacy workforce in London than other NHSE/I regions.

Overall, there was a 5% reduction in the relative size of the headcount workforce when compared with the 2017 survey data. Except for pharmacists and trained dispensing assistants, where headcount numbers had increased, all employee groups experienced a reduction in headcount numbers. The greatest reduction in headcount numbers were noted in trained and trainee medicines counter assistants, pre-registration trainee pharmacy technicians and accuracy checkers. In terms of changes to the FTE numbers in 2021, there was a 7% reduction overall, with the same pattern of changes as noted for the headcount data. It is interesting to note that the headcount number of pharmacists increased by just over 4,000 since the last survey, while the number of community pharmacies reduced slightly. The FTE figure for pharmacists also increased by 2,798 since the last survey.

The average numbers of staff employed in each job role per community pharmacy were lower in 2021 for the following roles: pre-registration trainee pharmacists, accuracy checkers, pre-registration trainee pharmacy technicians and trained and trainee medicines counter assistants. The figures for pharmacists and trained dispensing assistants were higher in 2021, which ties in with FTE and headcount increases in numbers in these groups. The figure for pharmacy technicians was largely consistent with 2017. There was some variation regionally, with community pharmacies in London recording a higher average FTE per pharmacy for pharmacists but a lower average for trained dispensing assistants.

FTE vacancy rates for the eight job roles for which data were collected in 2021 ranged from 7% for pharmacy technicians and trained dispensing assistants to 20% for accuracy checkers. A similar pattern of vacancies was identified for the headcount vacancy rates. Vacancy rates were above 10% for FTE and headcount for trained and trainee medicines counter assistants and trainee dispensing assistants. Percentage FTE and headcount vacancy rates increased for all eight roles compared to vacancy rates in 2017 and there was regional variation in vacancy rates for both FTE and headcount data.

In the CPWS2021, community pharmacies in the London area consistently reported higher vacancy rates than those for England as a whole for seven of the eight roles; the exception being vacancy rates for pharmacists. Vacancy rates were also higher in the East of England for all the roles, with the exception of delivery drivers. Other NHS regions experienced higher vacancy rates

for certain roles; in the Midlands region, the FTE vacancy rates for pharmacists, trainee dispensing assistants and trainee medicines counter assistants were higher than the national rate. In the North West rates were above the national FTE vacancy rate for trainee medicines counter assistants and in the South East, the FTE vacancy rate for deliver drivers was higher than the national rate. FTE vacancy rates were higher than the national rate for pharmacists and trained and trainee dispensing assistants in the South West region.

Respondents who completed the online survey recorded the ease or difficulty of filling vacancies for eight job roles. The role considered the most difficult to fill vacancies for in 2021 was that of pharmacy technician. Other roles considered difficult to fill included accuracy checkers, trained dispensing assistants and pharmacists. For these difficult to fill roles, the proportion of community pharmacies reporting difficulties had increased since the question was asked in 2017, with a large rise in the proportion of community pharmacies reporting that it was 'fairly' or 'very' difficult to recruit pharmacists in 2021. This has been documented more broadly.⁽⁷⁾ The percentage of pharmacies reporting difficulties recruiting trainee dispensing assistants, trained and trainee medicines counter assistants remained largely stable. There were also some regional variations reported. It should be noted that not all pharmacies were asked this question in 2021, so the findings may not be fully reflective of the community pharmacy workforce.

The proportion of independent prescriber pharmacists per community pharmacy remained the same in 2021 as in the CPWS2017, representing, on average one independent prescriber per every 10 community pharmacies. Responses indicated that approximately a quarter of these pharmacists were using their independent prescribing skills within the pharmacy.

A small proportion of the pharmacist FTE workforce were reported to be employed by their employer (the community pharmacy) to work outside the setting. The most common setting for this type of work outside pharmacy was a Covid-19 vaccination clinic and pharmacists were also reported to be working for General Practices and Primary Care Networks.

Overall, 14% of the community pharmacy workforce was a trainee, whether training to be a pharmacist, pharmacy technician, dispensing assistant or medicines counter assistant. Six percent of trained dispensing assistants (headcount) were in training to be a pharmacy technician and 11% of trained medicines counter assistants were also in training.

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4. Jacobs S, Bradley F, Elvely R, et al. Investigating the organisational factors associated with variation in clinical productivity in community pharmacies: a mixed-methods study. NIHR Journals Library; 2017;Oct (Health Services and Delivery Research, No.527).
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Glossary of terms

APTUK	Association of Pharmacy Technicians UK
AIMp	Association of Independent Multiples
CCA	Company Chemists Association
CCG	Clinical Commissioning Group
CPWS	Community Pharmacy Workforce Survey
CSU	Commissioning Support Units
HEE	Health Education England
ICS	Integrated Care System
NHSBSA	NHS Business Services Authority
NHSE/I	NHS England and NHS Improvement
NPA	National Pharmacy Association
PCN	Primary Care Network
PSNC	Pharmaceutical Services Negotiating Committee
RPS	Royal Pharmaceutical Society
STP	Sustainability and Transformation Plan
UoM	University of Manchester

Appendix A: Online Survey

The online survey questionnaire is reproduced in this report for reference.

Community Pharmacy workforce Survey 2021

GUIDANCE NOTES

Please read the notes below before completing the questionnaire:

Please note the survey will **time out after inactivity of 1 hour**, but all pages you have previously completed should be saved.

The questionnaire asks only about the following types of staff:

- **pharmacists** (both those working in the dispensary, and those providing NHS and public health services within the pharmacy such as essential, advanced or locally commissioned services)
- staff who work on the **medicines counter**
- **Staff who work in the dispensary**

With the exception of delivery drivers, other staff *not* working on the medicines counter or in the dispensary (such as those selling cosmetics) are **not** relevant to this questionnaire.

When answering the questionnaire please consider **only staff for whom this community pharmacy is a normal and regular place of work**, including locum or relief pharmacists who work regularly, such as once a week or twice a month.

Please **do not include** the following types of staff:

- those who work here only on an exceptional basis, such as covering for unexpected sickness amongst the regular staff
- corporate managers/administrators who are based at the pharmacy but do only corporate work, and do not provide direct service to members of the public

This survey asks you for the number of people and the number of full-time equivalents (FTE) at each pharmacy, in each of ten staff categories. Please use your organisation's definition of FTE if you have one and please state what this is at the end of the survey. **If your organisation does not have a definition, please use our definition of FTE of 40 hours per week**. Some staff work part time, so please express hours worked as a proportion of FTE. For example, if there is one full-time and one half time member of staff, please express this as 1.50 FTE (rounding as necessary, to 2 decimal places).

Please provide information on **staffing levels this week**, i.e. the week in which you are completing the questionnaire, or, if appropriate, the most recent complete **7-day period** for which you have the necessary figures. **Please include the normal hours of any staff on leave or off sick on a short-term basis** during the period, but **do not count any temporary staff covering for that leave/sickness on a short-term basis** (or temporarily increased hours of other staff). Please **do not count any staff who are currently absent long-term**, whether through long-term sickness, maternity/paternity/adoption leave, etc.

Community Pharmacy Workforce Survey 2021

Raising visibility of the community pharmacy workforce in England



HOW TO COMPLETE THE SURVEY

We would like to fill in a record for your pharmacy. Use the **pharmacy ODS code** to identify your pharmacy. Please include the F number at the start of your ODS code. If you do not have your ODS code to hand, you can find it here: <https://odsportal.digital.nhs.uk/Organisation/Search>

Please provide information on the **FTE (up to two decimal places)** and **headcount** (number) of different staff groups. If you have no staff in a particular staff group, you can leave the data entry field blank.

Pharmacy staffing

For this question, please indicate if you have staff in each group by ticking the box. Please answer the question about pharmacy staffing carefully. We will only ask subsequent questions about the **roles for which you indicate that you have staff or vacancies**. These specific questions will ask about your full-time equivalent (FTE), headcount, FTE vacancies, and headcount vacancies. If you mistakenly do not select a role, you will be able to navigate back to this page to correct the error. Please include self-employed, regular* locum or relief staff, as well as directly employed staff. NB: If you are the owner of the pharmacy, please ensure that you include yourself in the relevant staff numbers. *By regular, we mean locums who work once a week or twice a month.

Role	YES, I have staff in this role
Pharmacists registered with the GPhC (Please include both directly employed staff, self-employed locums and reliefs)	
Pharmacists provisionally registered with the GPhC	
Pre-registration trainee pharmacists for whom this pharmacy is their normal place of work	
Pharmacy technicians ; (registered with the GPhC), including those that are also known as accuracy checking pharmacy technicians (Please include both employed, self-employed locums registered pharmacy technicians and reliefs)	
Accuracy checkers (Please do not include those that are registered pharmacy technicians)	
Pre-registration trainee pharmacy technicians enrolled upon (or completed and awaiting registration on) a GPhC recognised course. Please include apprentices. Those who have completed the course but have chosen not to register with the GPhC should be included under dispensing assistants	
Trained dispensing assistants , who have completed a course to provide NVQ level 2, BTEC level 2, City & Guilds level 2 (please also include those who have completed NVQ level 3 but have chosen not to register with the GPhC)	
Trainee dispensing assistants , enrolled on a course to provide NVQ level 2, BTEC level 2, City & Guilds level 2	
Trained medicines counter assistants (MCA) , also known as Health Care Assistants (HCAs) in some organisations	
Trainee medicines counter assistants , also known as Trainee Health Care Assistants (HCAs) in some organisations. Enrolled on a GPhC accredited course (Please include apprentices)	
Pharmacy delivery drivers	



Vacancies

Please indicate by ticking a box whether you have vacancies in any of the staff roles. Please include self-employed locum vacancies, as well as directly employed vacancies. Please define a vacancy as a position that is **not currently filled**, and for which you are **either actively recruiting or intending to actively recruit** in the near future. **Do not include** any position to which you have made an appointment, even if you are waiting for them to start work.

Role	YES, I have vacancies in this role
Pharmacists registered with the GPhC (Please include both directly employed staff, self-employed locums and reliefs)	
Pharmacy technicians ; (registered with the GPhC), including those that are also known as accuracy checking technicians. (Please include both employed, self-employed locums registered pharmacy technicians and reliefs)	
Accuracy checkers (Please do not include those that are registered pharmacy technicians)	
Trained dispensing assistants , who have completed a course to provide NVQ level 2, BTEC level 2, City & Guilds level 2 (please also include those who have completed NVQ level 3 but have chosen not to register with the GPhC)	
Trainee dispensing assistants , enrolled on a course to provide NVQ level 2, BTEC level 2, City & Guilds level 2	
Trained medicines counter assistants (MCA) , also known as Health Care Assistants (HCAs) in some organisations	
Trainee medicines counter assistants , also known as Trainee Health Care Assistants (HCAs) in some organisations. Enrolled on a GPhC accredited course. (Please include apprentices)	
Pharmacy delivery drivers	

Section 1: Pharmacists (registered with GPhC and currently working as a pharmacist)

For this section please complete the form, indicating the FTE and headcount of employed pharmacists self-employed locum pharmacists, regular relief pharmacists and provisionally registered pharmacists work in each pharmacy. Please also indicate the FTE vacancies and headcount vacancies for each job role. For a definition of self-employed locum pharmacist please see the following [definition](#).

Please include pharmacists working in the pharmacy, dispensary, care home dispensing units, & those who may only provide essential advanced or locally commissioned services.

Please ensure that you use either your **organisation's definition of Full Time Equivalent (FTE) or 40 hours per week** (if you do not have your own definition). If you have used your organisation's definition, please ensure that you provide this information in the box at the end of the survey. Some staff work part time, so please express hours worked as a proportion of FTE. For example, if there is one full-time and one half time member of staff please express this as 1.50 FTE (rounding as necessary, to 2 decimal places).

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Employed pharmacists				
Self-employed locum * pharmacists				
Relief* pharmacists				
Provisionally registered pharmacists				

* Please include locum or relief pharmacists who work regularly in the pharmacy, such as once a week or twice a month

Independent prescribing

Please indicate whether any of the pharmacists at the pharmacy hold an independent prescribing qualification, Please note that they do not need to be currently prescribing (either within or outside the community pharmacy) to be included here. Please record the FTE and headcount.

Role	Total FTE	Total headcount
Independent prescribers		

In addition, please indicate if any of the independent prescribers doing any prescribing* at the pharmacy. Please note that this could include private prescribing. Please do not indicate YES if the prescriber has a contract with an external organisation to prescribe there (e.g. works in general practice).

Are any of the independent prescribers doing any prescribing at the pharmacy?
<input type="radio"/> Yes
<input type="radio"/> No

Section 2: Pre-registration trainee pharmacists

Please indicate the FTE and headcount for pre-registration trainee pharmacist at the pharmacy. Please also indicate if any of the trainees are multi-sector trainees by selecting YES or No in the box. Multi sector refers to a programme with a training rotation of 12 weeks or longer in another setting e.g. hospital or GP surgery.

Role	Total FTE	Total headcount	Are any of the trainees multi-sector trainees
Pre-registration trainee pharmacists			<input type="radio"/> Yes <input type="radio"/> No

Section 2: Pre-registration trainee pharmacists (cont.)

In addition, Health Education England may be able to target support for pre-registration pharmacist tutors. In order to do this, please indicate if your organisation is willing for the pharmacy to be identified as employing a pre-registration trainee pharmacist by selecting YES or NO.

Please tick a box below to show whether you do or do not want your pharmacy to be identified as a pharmacy employing a pre-registration trainee pharmacist.
<input type="radio"/> Yes – I am willing for this pharmacy to be identified as employing a pre-registration trainee pharmacist
<input type="radio"/> No – I do not want this pharmacy to be identified as employing a pre-registration trainee pharmacist

Section 3: Pharmacy technicians (registered with the GPhC)

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for the following roles: employed pharmacy technicians; self-employed locum pharmacy technicians; regular relief pharmacy technicians and pharmacy technician role (with accuracy checking). **Please include here those that are also referred to as accuracy checking pharmacy technicians.**

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Employed pharmacy technicians				
Self-employed locum* pharmacy technicians				
Relief* pharmacy technicians				
Pharmacy technician role with accuracy checking				

* Please include locum or relief pharmacy technicians who work regularly in the pharmacy, such as once a week or twice a month.

Section 4: Accuracy checkers

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for accuracy checkers. Please **do not include** those that are registered pharmacy technicians. These should be included in section 3 above.

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Accuracy checker				

Section 5: Pre-registration trainee pharmacy technicians

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for pre-registration trainee pharmacy technicians. These are defined as trainee pharmacy technicians who are enrolled upon (or completed and awaiting registration) a GPhC recognised course. Those who have completed the course but have chosen not to register with GPhC should be included under dispensing assistants. Please do **not** include any trained dispensing assistants or trained medicines counter assistants who are currently undertaking training to become a registered pharmacy technician in this section.

Role	Total FTE	Total headcount
Pre-registration trainee pharmacy technicians		

Section 6: Trained dispensing assistants

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for trained dispensing assistants. This category includes those who have completed NVQ level 3 (but not GPhC registered), NVQ Level 2, BTEC level 2, City & Guilds level 2.

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Trained dispensing assistants				

In addition, please indicate whether any of the trained dispensing assistants are undertaking training to become a registered pharmacy technician (FTE and headcount)

Role	Total FTE	Total headcount
Trained dispensing assistants who are undertaking training to become a registered pharmacy technician		

Section 7: Trainee dispensing assistants

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for trainee dispensing assistants. This category includes those who are enrolled on a course to provide NVQ level 2, BTEC level 2, City & Guilds level 2. **If trainees are on dual dispensing assistant/medicines counter assistant training programmes, they should be recorded in the category for the highest qualification they are training to.**

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Trainee dispensing assistants				



Section 8: Trained medicines counter assistants (MCA)

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for trained medicines counter assistants (also known as Health Care Assistants (HCAs) in some organisations). This category includes those who have completed a General Pharmaceutical Council accredited course.

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Trained medicines counter assistants				

In addition please indicate whether any of the trained medicines counter assistants (MCAs) are undertaking training to become a registered pharmacy technician. Please indicate the FTE and headcount.

Role	Total FTE	Total headcount
Trained medicines counter assistants (HCAs) who are undertaking training to become a registered pharmacy technician		

Section 9: Trainee medicines counter assistants

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for trainee medicines counter assistants (also known as trainee Health Care Assistants (HCAs) in some organisations). This category includes those who are enrolled on a GPhC accredited course. **If trainees are on dual dispensing assistant/medicines counter assistant training programmes, they should be recorded in the category for the highest qualification they are training to.**

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Trainee medicines counter assistants				

Section 10: Pharmacy delivery drivers

Please indicate the FTE and headcount and FTE vacancies and headcount vacancies for pharmacy delivery drivers.

Role	Total FTE	Total headcount	Total FTE vacancies	Total headcount vacancies
Pharmacy delivery drivers				

Difficulty of filling vacancies

This questions is interested in understanding which types of staff vacancies are difficult to fill. For each staff role, please indicate by ticking the appropriate box how easy or difficult it is to fill a vacancy for that role. If you are unsure or a particular role is not applicable to your pharmacy, please tick the appropriate box.

Vacancy	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Don't know	Not applicable
Pharmacists							
Pharmacy technicians							
Accuracy checkers							
Trained dispensing assistants							
Trainee dispensing assistants							
Trained medicines counter assistants (MCA)							
Trainee medicines counter assistants							
Pharmacy delivery drivers							

Question about community pharmacy-funded staff who work in other settings

Please indicate here whether you have any FTE staff who are employed by the pharmacy but are commissioned to provide services elsewhere. Please only include staff who are employed by the pharmacy to work in other settings. Do not include pharmacists or other staff who also have a separate job in another setting. For example, if you have a pharmacist working 0.5FTE in the pharmacy, who is also employed 0.5FTE by a local General Practice, you would not include them in this section. Only include them if they are funded by the community pharmacy to provide services elsewhere.

If you do have staff funded to provide services elsewhere, please indicate the FTE of staff working in each of the settings. If you do not have any staff commissioned to provide services elsewhere, you can leave the data entry field blank.

Role	FTE of staff working in other settings
Care home	
General practice/primary care network	
Health and justice pharmacy	
Hospital pharmacy outpatients	
Hospice	
COVID vaccination clinic	
Other settings (please add text here)	

Full Time Equivalent definition

Please indicate whether you have used your organisation's definition of FTE or our suggested definition of 40 hours a week. If you have a different definition for FTE for your pharmacist staff, please indicate here.

In the present survey, what definition of FTE did you use?
<input type="radio"/> 40 hours
<input type="radio"/> Another definition (your own organisation's definition)

If you did not use 40 hours to indicate FTE, please indicate your organisation's definition below:

Demographics

We really appreciate your continued support to gather meaningful data to understand the make-up of the community pharmacy workforce and how the workforce reflect the diversity of the communities served, as part of informing the plans for inclusive pharmacy practice. If you do not have this information, please note down the number of staff in each category this information is missing for in the "prefer not to say/ not known" row or column.

Role	Male	Female	Prefer not to say/not known
Pharmacists registered with the GPhC (owners, employees, locums and reliefs)			
Pharmacists provisionally registered with the GPhC			
Pre-registration trainee pharmacists			
Pharmacy technicians registered with the GPhC			
Accuracy checkers			
Pre-registration trainee pharmacy technicians			
Trained dispensing assistants			
Trainee dispensing assistants			
Trained medicines counter assistants			
Trainee medicines counter assistants			
Delivery Drivers			

Health Education England

Age group	Pharmacists registered with the GPhC (owners, employees, locums and reliefs)	Pharmacists provisionally registered with the GPhC	Pre-registration trainee pharmacists	Pharmacy technicians registered with the GPhC	Accuracy checkers	Pre-registration trainee pharmacy technicians	Trained dispensing assistants	Trainee dispensing assistants	Trained medicines counter assistants	Trainee medicines counter assistants	Delivery Drivers
16-19 years											
20-29 years											
30-39 years											
40-49 years											
50-59 years											
60-69 years											
70 years or above											
Prefer not to say / age not known											

Community Pharmacy Workforce Survey 2021



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Ethnic group	Pharmacists registered with the GPhC (owners, employees, locums and reliefs)	Pharmacists provisionally registered with the GPhC	Pre-registration trainee pharmacists	Pharmacy technicians registered with the GPhC	Accuracy checkers	Pre-registration trainee pharmacy technicians	Trained dispensing assistants	Trainee dispensing assistants	Trained medicines counter assistants	Trainee medicines counter assistants	Delivery Drivers
Asian or Asian British – Bangladeshi											
Asian or Asian British – Indian											
Asian or Asian British – Pakistani											
Any other Asian background											
Black or Black British – African											



Health Education England

Ethnic group	Pharmacists registered with the GPhC (owners, employees, locums and reliefs)	Pharmacists provisionally registered with the GPhC	Pre-registration trainee pharmacists	Pharmacy technicians registered with the GPhC	Accuracy checkers	Pre-registration trainee pharmacy technicians	Trained dispensing assistants	Trainee dispensing assistants	Trained medicines counter assistants	Trainee medicines counter assistants	Delivery Drivers
Black or Black British – Caribbean											
Any other Black background											
Chinese											
Mixed White and Asian											
Mixed White and Black Caribbean											
Mixed White and Black African											
Any other mixed background											



Health Education England

Ethnic group	Pharmacists registered with the GPhC (owners, employees, locums and reliefs)	Pharmacists provisionally registered with the GPhC	Pre-registration trainee pharmacists	Pharmacy technicians registered with the GPhC	Accuracy checkers	Pre-registration trainee pharmacy technicians	Trained dispensing assistants	Trainee dispensing assistants	Trained medicines counter assistants	Trainee medicines counter assistants	Delivery Drivers
White – British											
White Irish											
Any other white background											
Any other Ethnic Group											
Prefer not to say / Ethnicity not known											



Under the Equality Act 2010 the definition of disability is if a physical or mental impairment that has a 'substantial' and 'long-term' adverse effect on the ability to carry out normal day to day activities. Further information regarding the definition of disability can be found at: www.gov.uk/definition-of-disability-under-equality-act-2010

Role	Yes, has a disability	No disability	Prefer not to say / Not known if staff member has a disability
Pharmacists registered with the GPhC (owners, employees, locums, reliefs)			
Pharmacists provisionally registered with the GPhC			
Pre-registration trainee pharmacists			
Pharmacy technicians registered with the GPhC			
Accuracy checkers			
Pre-registration trainee pharmacy technicians			
Trained dispensing assistants			
Trainee dispensing assistants			
Trained medicines counter assistants			
Trainee medicines counter assistants			
Delivery Drivers			

Questions?

If you have any questions about completing the data collection forms, please email CPWS2021-queries@manchester.ac.uk

