

Executive Summary

National Pharmacist Workforce Study

2024 National Pharmacist Workforce Study

EXECUTIVE SUMMARY

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PROJECT COMMISSION

This current investigation was commissioned by the Pharmacy Workforce Center, Inc. (PWC). The PWC Board of Directors is comprised of American Association of Colleges of Pharmacy (AACP), American College of Clinical Pharmacy (ACCP), American Pharmacists Association (APhA), American Society of Health-System Pharmacists (ASHP), Board of Pharmacy Specialties (BPS), Hematology/Oncology Pharmacy Association (HOPA), National Alliance of State Pharmacy Associations (NASPA), National Community Pharmacists Association (NCPA) and Pharmacy Technician Certification Board (PTCB). PWC Observer organizations include Health Resources & Services Administration (HRSA) Bureau of Health Workforce (BHW).

REPOSITORY FOR PROJECT MATERIALS AND DATA

Project materials and data are stored at the University of Wisconsin-Madison School of Pharmacy, Rennebohm Hall, 777 Highland Ave, Madison, WI 53705.

ACKNOWLEDGMENTS

We first thank the pharmacists who received and responded to this survey. We greatly appreciate their time and effort in providing the requested information. Without their participation, this study and report would not be possible.

Second, we would like to acknowledge the contributions of the Pharmacy Workforce Center (PWC), Inc. and several people who helped this project be completed. We thank Brian Lawson (PWC President), Lynette Bradley-Baker (PWC Vice-President), and Thomas Maggio (PWC Secretary/Treasurer) for their support, guidance, and leadership of this project. We greatly appreciate their input and advice as we developed, conducted, and reported on the national survey. We also acknowledge PWC members that provided support and feedback throughout the project, as well as opportunities to disseminate this important work, including Doug Scheckelhoff (ASHP) and Keith Marciniak (APhA). We also thank Renae Chesnut (AACP) for her marketing and communications expertise helping us to further disseminate and share this important work through multiple venues and platforms, including social media.

Finally, several people were vital to conducting the survey, managing the data, and analyzing the results of this study. We thank Larissa Doucette, Laura McInally, and Al Carter of the National Association of Boards of Pharmacy for supporting this project and disseminating the survey.

CITATION

Mott DA, Bakken BK, Nadi S, Arya V, Doucette WR, Gaither CA, Kreling DH, Schommer JC. Executive Summary of The 2024 National Pharmacist Workforce Survey. Pharmacy Workforce Center; Washington, DC, USA: 2024. Available online: https://www.aacp.org/article/national-pharmacist-workforce-studies

EXECUTIVE SUMMARY

BACKGROUND

Recent reports document the impact of the COVID-19 pandemic on the health care workforce in general, and pharmacists in particular. Areas of concern for the pharmacist workforce include how work systems can be improved to better work-life outcomes for pharmacists and help employers retain pharmacists. Additionally, there is a need to learn more about the activities in which pharmacists are engaging, and the resources pharmacists need to stay healthy (i.e., mentally, physically, and emotionally) and to maintain a viable career inside or outside of pharmacy. Additionally, the expansion of pharmacists' roles in community, inpatient, ambulatory care, and other fast growing practice settings (i.e., specialty pharmacy, managed care/PBM, industry) create the need to understand the types of work activities in which pharmacists are engaging in various practice settings.

This 2024 National Pharmacist Workforce Study (NPWS) provides an update on the pharmacist workforce and examines changes since previous studies done in 2019 and 2014. In addition, the 2024 NPWS examines newer topics affecting pharmacists including organizational factors and worker wellbeing, expanding pharmacist roles and activities, employment status changes, unemployment, retirement, and pharmacists' career perceptions and professional involvement.

STUDY OBJECTIVES

The primary purpose of this project was to collect reliable information on demographic characteristics, work contributions and the quality of work-life of the pharmacist workforce in the United States during 2024. The results support analyses and trends from previous NPWS surveys conducted in 2009, 2014, and 2019. The project obtained information from a random sample of licensed pharmacists. Specific objectives included:

- Describe demographic and employment characteristics of the pharmacist workforce in the United States
- 2. Describe the employer and organizational factors that contribute to a safe and positive work environment for pharmacists in the United States
- 3. Describe the workload and work activities of the pharmacist workforce in the United States
- 4. Characterize the quality and perceptions of United States pharmacists' work-life, including their health, well-being, and career management

METHODS

To meet the project objectives, a cross-sectional, descriptive survey design was used for collecting and analyzing data. Data were collected using an online survey hosted at the University of Wisconsin-Madison. The institutional review board classified the study as minimal risk and exempt from review.

<u>Survey Questionnaire</u>: The 2024 NPWS consisted of a 'Core Survey' provided to all sampled pharmacists to collect demographic and employment information to facilitate comparisons with data collected in previous NPWS iterations. In addition to the 'Core Survey', sampled pharmacists also received one of three 'Supplements'. Each survey 'Supplement' included survey items focused on a specific topic area.

The 'Core Survey' included 5 topic areas: (1) Employment Status, (2) Demographics, (3) Current Work, (4) NIOSH WellBQ, and (5) Education and Student Loan Debt. The three topic areas covered by the 'Supplements' were: (1) Employment Status Changes and Turnover Intentions, (2) Work Activities, (3) Career Management and Decisions. Questions comprising each section of the survey were taken primarily from previous workforce surveys conducted by members of the project team or from other published research.

<u>Sampling Strategy</u>: The National Association of Boards of Pharmacy Foundation (NABPF) drew a systematic random sample of 198,000 licensed pharmacists from its unduplicated list of licensed pharmacists in the US. The 198,000 sampled licensed pharmacists were assigned randomly to one of the three supplement groups. Each supplement group consisted of 96,000 licensed pharmacists.

<u>Survey Administration</u>: Data collection included sending sampled pharmacists four emails that contained a link to an online survey (Qualtrics). The emails were sent by the NABPF to sampled pharmacists. Pharmacists were asked to click on the survey link to access the survey. Unlike 2019, subjects who clicked the survey link did not receive additional emails that were scheduled to be sent after they clicked the survey link. A pilot test of the email distribution and the survey questionnaire was conducted prior to the main survey to determine the feasibility of the proposed methods. The initial email for the pilot test was sent on October 16, 2024 and one reminder email was sent on October 24, 2024. No changes were made to the survey questionnaire as a result of the pilot test. The main survey emails were sent on November 6, 2024, November 13, 2024, November 20, 2024 and December 4, 2024. The main survey was closed on December 15, 2024.

<u>Data Analysis</u>: Submitted surveys were available to researchers at the University of Wisconsin-Madison through their Qualtrics account. On December 16, 2024 the survey data files were downloaded from Qualtrics for analysis by the research team. Data are presented in this report in a manner that allows comparison to data from previous NPWSs. Some data presented in the report were new to the 2024 NPWS and did not have comparison data.

RESULTS

Response Rate

A total of 5,110 usable responses were received. A usable response was defined as responses which contained responses (i.e. no missing data) for each of four key variables: work status, gender, age, and practice setting. The maximum number of emails delivered was 192,523. This resulted in a traditional usable response rate of 2.7%. A total of 5,697 pharmacists clicked on the survey link. Using the number of pharmacists who clicked on the survey link as a denominator, 89.7% of pharmacists provided a usable response.

Demographics

In 2024, 73.5% of licensed pharmacists submitting usable responses were actively practicing as pharmacists. A total of 6.3% of responding licensed pharmacists were working, but not as a pharmacist, a total of 17.4% of responding licensed pharmacists were retired, and 2.8% were unemployed. Compared to results from the 2014 survey, there was a smaller proportion of responding licensed pharmacists who were retired and unemployed in 2024. Of licensed pharmacists who reported being retired, 39.5% were female in 2024 compared to 24.8% in 2014. There was a greater proportion of responding licensed pharmacists who were working, but not as a pharmacist in 2024 at 6.3%. Overall, 80.6% of responding licensed pharmacists were white in 2024 compared to 85.1% in 2014. A total of 34.9% of responding licensed pharmacists were between the ages of 41-55 in 2024 compared to 35.0% in 2014. In 2024, 47.5% of licensed pharmacists earned a PharmD degree as their highest degree compared to 37.8% in 2014. Of respondents who reported actively practicing pharmacy, 68.1% were female in 2024 compared to 58.9% in 2014. Actively practicing pharmacists responding in 2024 were 78.9% white, 11.1% Asian, 4.4% Black, and 5.6% "other". The number of non-white practicing pharmacists increased from 16.5% in 2014 to 21.1% in 2024.

A total of 59.1% of responding actively practicing pharmacists reported their primary place of employment was community-based practice settings (e.g., independent, chain, supermarket), 21.7% reported primary place of employment as hospital/health-system practice settings (e.g., government and non-government hospitals), and 5.1% reported primary place of employment as ambulatory care practice settings (e.g. outpatient clinics, primary care clinics). Reported primary place of employment as community pharmacy settings and ambulatory care increased from 2014 to 2024 and primary place of employment as hospital/health-system practice settings decreased between 2014 and 2024.

A total of 25.9% of responding actively practicing female pharmacists were in management positions in 2024 compared to 28.5% in 2014. However, among actively practicing respondents in management positions in 2024, 67.6% were female compared to 55.2% in 2014.

Work Contribution, Work Shifts, and Secondary Employment

In 2024, a total of 17.7% of actively practicing pharmacists reported working part-time (less than or equal to 30 hours per week), which was the same proportion as 2014. In 2014 and 2024, working part-time was most common among respondents who were more than 60 years old.

In 2024, males working full-time as a pharmacist worked 1.4 hours more than females. The difference in weekly hours worked between male and female full-time pharmacists was 1.6 hours in 2014. Overall, pharmacists working full-time worked an average of 42.2 hours per week in 2024, compared to 44.4 hours per week in 2014. Consistent with previous years, for respondents working full-time as practicing pharmacists, pharmacists in management positions worked more hours per week (43.7 hours/week) than pharmacists in staff positions (41.1 hours/week).

A slightly lower proportion of respondents working in hospital/health-system settings (81.1%) reported often or consistently working a shift during the day (i.e., 6am to 6pm) compared to respondents working in community (87.1%), ambulatory care (94.6%), and other settings (91.3%). Working an evening shift (i.e., noon-midnight) often or consistently was more likely among respondents working in community settings (47.9%) relative to the other three setting categories. Working weekends often or consistently was more likely among respondents working in community settings (60.4%) relative to the other three setting categories.

In 2024, overall, 10.7% of respondents had secondary pharmacy jobs, an increase from 7.8% in 2014. In 2024, a larger proportion of male respondents (14.0%) reported any secondary employment compared to female respondents (8.9%). In 2014, 8.7% of male respondents and 7.0% of female respondents reported any secondary employment. On average, respondents reporting any secondary employment worked 18.9 hours per month, a decrease from 2014 (25.3 hours per month). In 2024, male respondents reporting any secondary employment worked more hours annually compared to female respondents reporting any secondary employment, consistent with 2014.

Workload

Overall, 73% of pharmacists working full-time in 2024 rated their workload level at their place of practice as "high" or "excessively high", compared to 66% in 2014. Across practice settings, the highest proportions of pharmacists rating their workload as "high" or "extremely high" were in chain (91%) and mass merchandiser (88%) pharmacy settings. The lowest proportions of pharmacists rating their workload as "high" or "extremely high" were in independent community (55%) and other: patient care (57%) pharmacy settings. The proportion of pharmacists working full-time who reported their workload as "high" or "extremely high" increased or stayed the same in 2024 relative to 2014 for every practice setting except other: non-patient care. In 2024 a greater proportion of females rated their workload as "high" or 'extremely high" compared to males, which is consistent with 2014.

Work Activities

Overall, 42.6% of respondents who reported actively practicing pharmacy reported that "some of the time" the time that is spent in work activities is in alignment with what they would like to be doing. A total of 5.4% reported "none of the time" as the time that is spent in work activities aligned with what they would like to be doing. A larger proportion of actively practicing pharmacist respondents less than 30 years old reported that the time that they spend in work activities is in alignment with what they would like to be doing both "none of the time" and "some of the time" compared to older respondents.

Compensation and Student Loan Debt

In 2024 compared to 2019, larger proportions of pharmacists reported increases in their base pay during the past year and there were fewer pharmacists noting a decrease in their base pay. Approximately 55% of pharmacists reported increased annual pay in 2024 compared to 44.2% in 2019. Across practice settings, a larger proportion of pharmacists in each of the community settings reported increased annual base pay in 2024 relative to 2019. Also, a higher proportion of hospital (69.5%) and ambulatory care (70.1%) pharmacists reported a base pay increase in the past year compared to their colleagues in other practice settings. The overall trend for more pharmacists with positive pay increments in the past year between 2024 and 2019 may reflect a labor market that is experiencing a shortage of pharmacists, likely due to the recent drop in applicants to schools of pharmacy, movement of licensed pharmacists out of active practice following COVID and concerns about work environments in chain community settings.

Overall, one-half of usable respondents who were actively practicing pharmacy reported that they were paid hourly compared to being salaried employees. For respondents reporting working full-time (greater than 30 hours/week), the average reported hourly wage rate was \$70.54 compared to \$66.51 for respondents reporting working part-time (less than or equal to 30 hours/week). The average hourly wage rate for respondents working full-time (i.e., 2,080 hours/year) translates to an annual salary of approximately \$147,000. Overall, there was a negligible difference in reported hourly wage rates for males and females working full-time. For respondents working part-time, on average females earned \$3.00 more per hour compared to males. Respondents working full-time in hospital/health-systems, ambulatory care, and managed care/PBM reported higher average hourly wage rates compared to respondents working in community settings as a whole. Respondents working in health-system retail settings reported the highest average wage rate among respondents working in community settings. The highest average wage rate reported by respondents working part-time was for those working in ambulatory care settings (\$75.58). Respondents actively practicing pharmacy full-time reported an average annual salary of approximately \$145,000. Overall, female respondents reported a lower annual salary (\$143,675) compared to males (\$147,662). By practice setting, respondents working in hospital/health-systems reported the highest annual salary (\$167,829).

Student loan debt at the time of graduation for all licensed pharmacists has increased over time. Student loan debt at the time of graduation more than doubled for respondents graduating between 1991-2000 (\$42,121) compared to the preceding decade (\$21,216). Further, student loan debt at the time of graduation more than doubled for respondents graduating between 2001-2010 (\$94,522) compared to the preceding decade (\$42,121). Student loan debt at the time of graduation nearly doubled for respondents graduating between 2011-2020 (\$170,079) compared to the preceding decade (\$94,522). Female pharmacists are graduating with somewhat higher levels of student loan debt compared to males. The difference in student loan debt at the time of graduation between males and females was greater in 2024 compared to 2014.

Overall, approximately 13% of actively practicing pharmacists participated in the Public Service Loan Forgiveness (PSLF) program. Over one-half (53.8%) of responding actively practicing pharmacists report being moderately or very worried about having enough income to pay off student loans in a desirable time frame. On average, it took 7.4 years for actively practicing pharmacists to pay off their student loan debt.

Pharmacist Well-Being and Work Environments

In terms of overall job satisfaction, 69.1% of actively practicing pharmacists reported being either somewhat (44.6%) or very satisfied (24.5%) compared to 30.5% who reported being dissatisfied. Overall, actively practicing pharmacists reported higher levels of satisfaction (either somewhat or very satisfied) with regards to their benefits (69.7%) and compensation (69.4%) compared to their chances for advancement or promotion (57.6%). Dissatisfaction (either not at all or not too satisfied) with chances of advancement or promotion was highest among pharmacists in hospital/health-system settings (44.3%). Lower levels of satisfaction were reported in community pharmacy settings compared to other settings for job, compensation, and benefits satisfaction.

In terms of workplace culture specific to employee health and well-being, overall, 51.2% of actively practicing pharmacists somewhat or strongly agree that their organization is committed to employee health and well-being and 58.7% somewhat or strongly agree their organization encourages them and provides them with opportunities to engage in healthy behaviors. By practice setting, the majority of pharmacists in ambulatory care (67.3%) and hospital/health-systems (57.6%) somewhat or strongly agree their organization is committed to employee health and well-being. Conversely, 56.3% of pharmacists in community settings somewhat or strongly disagree that their organization is committed to employee health and well-being.

Actively practicing pharmacists reported experiences of workplace harassment, physical violence, and bullying in the past 12 months. Overall, the most common situations experienced by respondents included being bullied, threatened, or harassed while working (26%) and situations where superiors or coworkers put them down, were condescending, made demeaning remarks, or addressed them in unprofessional terms (25.4%). Situations where pharmacists were bullied, threatened, or harassed at work were most commonly reported by pharmacists in community settings (33.2%), followed by hospital/health-systems (17.2%), ambulatory care (16.1%), and "other" (14.2%) settings.

In terms of reported overall health ratings, the majority of actively practicing pharmacists reported their general health was either 'good' (35.3%) or 'very good' (34.3%). The average number of poor physical health days in a 30-day period reported by actively practicing pharmacists was 4.3 days, the equivalent of one poor physical health day every 7 days. The average number of poor mental health days in a 30-day period reported by actively practicing pharmacists was 8.1 days, the equivalent of one poor mental health day every 3-4 days.

In terms of life satisfaction, overall, the majority of actively practicing pharmacists (86.4%) reported they were somewhat or very satisfied with their life in general. When asked how worried they were about not being able to maintain the standard of living they enjoy, the majority of pharmacists reported they were not too worried (34.1%) or moderately worried (34.0%). Overall, 68.6% of pharmacists were not too worried or not worried at all about having enough money to pay their monthly bills.

Perceptions of Pharmacy

Generally, licensed pharmacist respondents had positive perceptions about pharmacy as a career. Over 75% of respondents in each of the four employment status categories reported that they were proud to be a pharmacist. Approximately one-half of practicing pharmacists reported that they would recommend pharmacy as a good career/profession and would choose to be a pharmacist again.

Career Progression and Professional Engagement

When asked about their career progression, 13.6% of actively practicing pharmacist respondents reported they were "ahead" of where they wanted to be, 32.1% reported they were "behind" where they wanted to be, and more than half (54.4%) reported they were "just right" with where they wanted to be. A higher proportion of respondents aged less than 30, and between 41-50 years, reported feeling behind in their career (almost 40%) as compared with the total average of 32%. Among those respondents between 61-70 years of age, almost double (20%) responded feeling they were ahead of where they wanted to be in their career. In terms of gender, male and female respondents were similar.

When asked about membership and professional involvement in associations and networks on a local/state level, nationally, or outside of pharmacy, 25.3% of actively practicing pharmacist respondents reported they were not a member of any professional associations or networks. Among actively practicing pharmacists, 15.5% reported membership in local/state pharmacy associations or networks, 16.2% in national pharmacy associations or networks, and 7.2% in association or networks outside of pharmacy. Membership in local/state pharmacy associations or networks was higher among those 30 years or younger and those 51-60 years of age at approximately 19% compared to the average of 16%. Membership in national pharmacy associations or networks was highest among those age 30 years or younger at 36% compared to the average of 16%.

Employment Status Changes and Job Turnover Intentions

A total of 31.2% of respondents who were actively practicing pharmacy reported experiencing at least one employment status change between 2022 and 2024. This was somewhat less than in a 2022 survey in which 34.2% of actively practicing pharmacists reported a change in employment status between 2020 and 2022. Of those that reported a change in employment status, 63.5% were working in a community pharmacy setting prior to the change and 16.1% were working in hospital/health-system prior to the change.

Almost all (91.3%) of respondents actively practicing pharmacy reported being likely or very likely to be working as a pharmacist in the next year. A total of 36.1% reported they were likely or very likely to search for other employment in the next year. A smaller proportion (25.5%) reported being likely or very likely to actually leave their current job in the next year. A total of 8.8% reported being likely or very likely to be retired within the next year.

Unemployed Pharmacists

In 2024, a total of 149 (2.8%) of responding licensed pharmacists reported being unemployed compared to 5% in 2019. Approximately one-half of them (44.6%) were seeking a job as a pharmacist compared to 76.3% in 2019, and approximately one-third of them (36.3%) reported that their unemployment was not voluntary, compared to 61.1% in 2019. The mean age of unemployed responding pharmacists was 53.0 in 2024 and 48.6 years in 2019.

Retired Pharmacists

In 2024, a total of 887 (17.4%) respondents reported their employment status as retired and the most common age to retire was 65 years old. In 2024, approximately 40% of responding retired pharmacists were female (39.5%), which increased from 34.6% in 2019. In 2024, 34.7% of retired male pharmacists reported retiring before age 65 compared to 60.9% of retired female pharmacists. In 2019, 42% of retired male pharmacists reported retiring before age 65 compared to 60.9% of retired female pharmacists.

In 2024, approximately one quarter of retired pharmacists continued to work in some capacity after they retired and approximately three-fourths of those retired pharmacists engaged in pharmacy-related work. For those working, the most common factors for working were desire (to keep busy, something to do) or wanting to do meaningful work (contribute my talents, knowledge).

Overall, in 2024, slightly fewer retired female pharmacists reported that their decision to retire was completely voluntary relative to male pharmacists. In 2019, similar proportions of male and female pharmacists reported that their decision to retire was completely voluntary. In 2024, the proportion of retired female pharmacists who reported that their decision to retire was not voluntary or somewhat voluntary decreased compared to 2019. In addition to having established financial security and desire for more personal or family time, demands of the job and culture or philosophy at work were more often rated as important in the decision to retire among the respondents in 2024 and in 2019. For retired female pharmacist respondents, demands of the job and overall dissatisfaction with pharmacy were more often rated as very important in the decision to retire among the respondents in 2024 compared to 2019.

LIMITATIONS

The findings of this study should be considered in light of the survey limitations. The results are based on respondents' self-reports, which could be influenced by intent to make socially desirable responses or simple misinterpretations of questions. We tried to limit such errors by piloting the survey prior to the main data collection. Because the 2019 NPWS and 2024 NPWS used a different survey mode (i.e., online) compared to previous NPWS surveys (i.e., mail), comparisons of these findings with those previous results should be done with caution.

Although the response rate for this online survey met or exceeded standards for electronically administered surveys, the response rate was lower than previous National Pharmacist Workforce Studies that were electronically administered and raises concerns about non-response bias. Our analyses of survey responses showed some differences in the respondents compared to the random sample selected by the NABPF from their population of licensed pharmacists. As a group, the 2024 NPWS licensed pharmacist respondents had a significantly higher percentage of female pharmacists, were significantly older and had a significantly higher percentage of pharmacists living in the Midwest and significantly lower percentages of pharmacists living in the Northeast and West regions of the US compared to the population of licensed pharmacists. We compared characteristics of actively practicing respondents to the 2024 NPWS to characteristics of actively practicing pharmacists extracted from the 2023 American Community Survey. The results showed that the 2024 NPWS respondents were significantly more likely to be female, to be older, and to be living in the Midwest compared to the US population of actively practicing pharmacists. The over-and under-representativeness of the 2024 NPWS respondent sample relative to population-level characteristics and how the differences may be associated with the survey results, should be kept in mind when interpreting the findings.

CONCLUSIONS

The pharmacist workforce continues to change in 2024. A larger proportion of licensed pharmacist respondents were working outside of pharmacy and were retired, possibly in response to the COVID-19 pandemic leading to licensed pharmacists leaving the pharmacist workforce. Additionally, a smaller proportion of licensed pharmacist respondents were unemployed relative to 2019, reflective of the projected current and future shortage of pharmacists in the US. Trends in pharmacists leaving the workforce and how the COVID-19 pandemic influences the pharmacist workforce will be important to monitor, particularly with changing demographics of the profession.

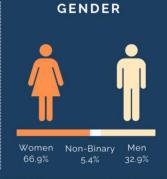
The impact of rising student loan debt at time of graduation also will be important to monitor as debt load continues to increase. At the same time, average reported annual pharmacist compensation is over \$140,000, potentially allowing pharmacists with student loan debt to pay back that debt in a reasonable amount of time. General satisfaction with life is high among respondents, which is consistent with a majority of respondents reporting that they are proud to be a pharmacist and the value of pharmacy as a career.

Overall, the quality of pharmacist work-life was positive, but the number of poor physical and mental health days each month suggests that additional focus on how pharmacist work environments impact them is needed. Also, it is clear that responding to discrimination and harassment should receive attention to improve pharmacist employers' ability to positively respond to such incidents to maintain a healthy workplace.

LICENSED PHARMACISTS

These data are based on responses to the 2024 National Pharmacist Workforce Study (funded by the Pharmacy Workforce Center) and are not considered representative of the entire population. To view the 2024 NPWS full report visit https://www.aacp.org/article/national-pharmacist-workforce-studies

RACE Other 4.5%





WORK SETTINGS

















Long-Term

53.0 %

23.7 %

5.0 %

3.3 %

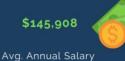
2.7 %

2.3 %

2.0 %

7.9 %

COMPENSATION



(US dollars)

\$84.03

Avg. Hourly Wage (US dollars)

JOB SATISFACTION



70.8% of pharmacists reported being 'somewhat or very satisfied'

PROFESSIONAL PRIDE

87.3% of pharmacists reported they are 'proud to be a pharmacist'



WILLINGNESS TO RECOMMEND



pharmacy as a good profession/career'



Citation: Bakken BK. 2024 National Pharmacist Workforce Study Licensed Pharmacists Infographic. April 2025

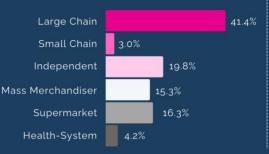
COMMUNITY + PHARMACISTS



n=2,115 (practicing as RPh)

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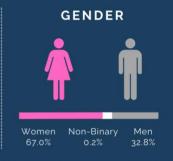
COMMUNITY SUBSETTINGS

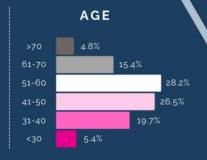


WORKLOAD RATING



RACE Other 6.1% Asian 10.5% White 78.7%





WORK SCHEDULING



66.4% Consistently working days (6 AM to 6 PM)

31.1% Consistently working evenings (Noon to Midnight)

3.1% Consistently working overnights (6 PM to 6 AM)

34.2% Consistently working weekends (Saturdays or Sundays)

COMPENSATION

\$123,499

Staff RPh

Avg. Annual Salary

(US dollars)

S

\$141,731

Management
Avg. Annual Salary
(US dollars)

JOB SATISFACTION



59.5% of community pharmacists reported being 'somewhat or very satisfied' compared to 70.8% for all licensed pharmacists

Citation: Bakken BK. 2024 National Pharmacist Workforce Study Community Pharmacists Infographic. April 2025

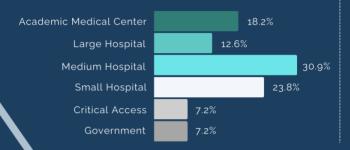
HOSPITAL PHARMACIST



n=918 (practicing as RPh)

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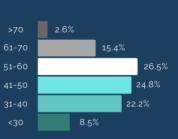
HOSPITAL SUBSETTINGS



TOP 10 SPECIALTIES

- 1. Critical Care / ICU
- 2. Anticoagulation
- 3. General Medicine
- Infectious Diseases
- Cardiology
- **Emergency Medicine**
- Surgery
- 10. Nephrology

RACE AGE **GENDER** 61-70 51-60 41-50 31-40 White Non-Binary Men 66.9%



WORK SCHEDULING



64.1% Consistently working days (6 AM to 6 PM)

10.7% Consistently working evenings (Noon to Midnight)

7.3% Consistently working overnights (6 PM to 6 AM)

18.2% Consistently working **weekends** (Saturdays or Sundays)

WORKLOAD RATING



COMPENSATION

\$157,303

Staff RPh Avg. Annual Salary (US dollars)

\$171,414 Management

Avg. Annual Salary (US dollars)

JOB SATISFACTION



79.9% of hospital pharmacists reported being 'somewhat or very satisfied' compared to 70.8% for all licensed pharmacists

Citation: Bakken BK. 2024 National Pharmacist Workforce Study Hospital Pharmacists Infographic. April 2025

AMBULATORY CARE PHARMACISTS

n=193 (practicing as RPh

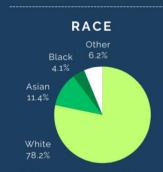
These data are based on responses to the 2024 National Pharmacist Workforce Study (funded by the Pharmacy Workforce Center) and are not considered representative of the entire population. To view the 2024 NPWS full report visit https://www.aacp.org/article/national-pharmacist-workforce-studies

Indian Health Service 6.0% VA 12.1% Health-System 47.7% Academic Medical Center 12.8%

PRACTICE SUBSETTINGS

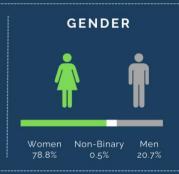
TOP 10 SPECIALTIES

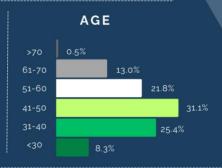
- 1. Primary Care
- 2. Anticoagulation
- 3. Geriatric
- 4. Cardiology/Cardiovascular
- 5. Endocrinology
- 6. General Medicine
- 7. Oncology
- 8. Neurology
- 9. Gastroenterology
- 10. Pain Management



ACO/PCMH

Community-Based Clinic





WORK SCHEDULING



- 92.8% Consistently working days (6 AM to 6 PM)
- 9.9% Consistently working evenings (Noon to Midnight)
 - 0% Consistently working overnights (6 PM to 6 AM)
- 2.5% Consistently working weekends (Saturdays or Sundays)

COMPENSATION

\$143,996

Staff RPh Avg. Annual Salary (US dollars) \$152,782

Management Avg. Annual Salary (US dollars)

JOB SATISFACTION



81.8% of amb care pharmacists reported being 'somewhat or very satisfied' compared to **70.8%** for all licensed pharmacists

Citation: Bakken BK. 2024 National Pharmacist Workforce Study Ambulatory Care Pharmacists Infographic. April 2025

MANAGED CARE & + INDUSTRY PHARMACISTS



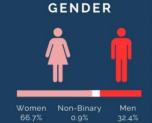
These data are based on responses to the 2024 National Pharmacist Workforce Study (funded by the Pharmacy Workforce Center) and are not considered representative of the entire population. To view the 2024 NPWS full report visit https://www.aacp.org/article/national-pharmacist-workforce-studies



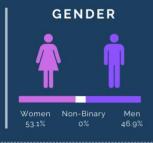
MANAGED CARE

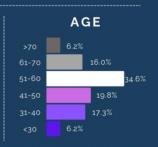


INDUSTRY









WORK SCHEDULING & HOURS



90% Consistently working days (6 AM to 6 PM)6.7% Consistently working evenings32.7 Avg. Hrs Worked From Home Per Week

87% Consistently working days (6 AM to 6 PM)7.4% Consistently working evenings

28.1 Avg. Hrs Worked From Home Per Week

WORK SCHEDULING & HOURS

WORKLOAD RATING



WORKLOAD RATING



COMPENSATION



COMPENSATION



JOB SATISFACTION



82.4% of pharmacists reported being somewhat or very satisfied compared to **70.8%** for all licensed pharmacists

JOB SATISFACTION



95.9% of pharmacists reported being 'somewhat or very satisfied' compared to 70.8% for all licensed pharmacists

 $Citation: Bakken \ BK.\ 2024\ National\ Pharmacist\ Workforce\ Study\ Managed\ Care\ \&\ Industry\ Pharmacists\ Infographic.\ April\ 2025$