

Transition from the Pharmacy Aggregate Demand Index (ADI) to the Pharmacist Demand Indicator (PDI)

Background

The Pharmacy Aggregate Demand Index (ADI), sponsored by the Pharmacy Workforce Center (PWC), began in 2000 as a monthly investigation to collect and disseminate data on the demand for pharmacists in the United States. The ADI is based upon information provided by participating panelists of pharmacist employers each month.

The ADI panelists report the demand for pharmacists based on the following rating scale:

- 5 = high demand for pharmacists: difficult to fill open positions
- 4 = moderate demand for pharmacists: some difficulty filling open positions
- 3 = demand for pharmacists is in balance with supply
- 2 = demand for pharmacists is less than the pharmacist supply available
- 1 = demand for pharmacists is much less than the pharmacist supply available

While the methodology for the ADI has remained the same since its inception in 2000, there can be inconsistencies among the panelists. From month to month, the number of panelists who provide data can vary, and there is not always 100% reporting each month. In addition, periodically there can be changes in the composition of the ADI panelists, as the recruitment of new panelists and continuous retention of prior panelists ebbs and flows. Finally, the ADI panelists do not represent all of the employers of pharmacists.

Transition to PDI

Therefore, in 2015, the process for collecting and reporting ADI information was reassessed, and revised methods to better reflect current pharmacy practice workforce needs were approved by the PWC Board in May 2016. The Board also determined that a new name or labeling, Pharmacist Demand Indicator (PDI) would be useful for distinguishing the changed methods and information to be available. The Pharmacist Demand Indicator (PDI), will begin September 2016 (reporting to be available November 2016). The augmentations to be included in the PDI include:

1. Enhancement of the collected pharmacist demand data

The ADI has collected information from panelists regarding the difficulty in filling available pharmacist positions utilizing a rating scale from 1 to 5. There is no information provided regarding the number of pharmacist openings or the type of pharmacist position opening (e.g., staff pharmacist, pharmacist manager, specialized pharmacist). The Pharmacist Demand Indicator (PDI) will continue to collect the panelist rating scale information on the difficulty in filling pharmacist positions and will report ratings for various types of pharmacist positions. In addition, the PDI will begin to collect objective demand information such as numbers of pharmacist openings as periodic supplemental data queries. The addition of collecting objective data will provide more informational depth to accompany the pharmacist demand ratings traditionally collected with the ADI.

The PDI will continuously explore additional objective and other supportive measurements to collect in order to expand the information on the demand for pharmacists.

2. Evolution from manual reporting of data to electronic reporting of data

The ADI has collected the information from panelists via a form that is completed and either emailed or faxed to the Principal Investigator (PI) for the project. The PDI will collect information via a secure, online portal which will allow for more convenient and timely reporting and analysis. This reporting enhancement will facilitate recruiting new panelists as well as contribute to panelist retention. This reporting mechanism will also allow for enhanced flexibility in the collection or removal of data elements as the PDI continues to evolve.

3. Transition from monthly reporting to quarterly reporting

The ADI has collected data from panelists regarding the difficulty in filling pharmacist positions on a monthly basis. In order to reduce panelist reporting burden and to entice new panelist participation, the PDI will collect information on a quarterly basis. Reducing the number of reporting instances from twelve (12) to four (4) will reduce panelist workload and provide the PI with sufficient time for analysis and follow-up.

Overall, the changes of the ADI to the new Pharmacist Demand Indicator (PDI) will provide more detailed and relevant information regarding the demand for pharmacists in the United States. PWC welcomes feedback on additional ideas on how to continue to evolve the PDI to better reflect the demand regarding pharmacists in the evolving health care system.

FAQs

Why change the ADI when the pharmacy profession has been used to its current administration and reported outcomes for over 15 years?

The ADI has been the primary resource available to the profession regarding the demand for pharmacists since 2000. While the resource has been valuable, there are several elements that constrain its ability to provide a greater holistic framework for pharmacist demand. The ADI is based upon information supplied by participating panelists of pharmacist employers each month. The ADI reflects the views of employers and, as such it is an indicator of the demand and supply of pharmacists in the labor market, and is not an objective quantification of demand. From month to month, the number of panelists that provide data can vary and there is not always 100% reporting each month. In addition, periodically there can be changes in the composition of the ADI panelists, as recruitment of new panelists and retention of prior panelists ebbs and flows. Finally, the ADI does not include every pharmacist employer in the US.

The PWC anticipates that changes to the ADI, to be reflected in the PDI, will provide more information regarding the demand for the pharmacists. In addition, the change in data collection methodology including electronic submission of data and moving from a monthly to quarterly collection, will provide time-saving efficiency that will be beneficial for panelist recruitment and sustained retention. The evolving role of the pharmacist and the availability of data and technology has led to the need to develop the ADI into a tool to better assess and report pharmacist demand.

What will be the reporting process for the PDI?

The PDI will collect information from panelists quarterly (every three months) beginning September 2016. The results from each collection period will be reported approximately two months after the initiation of the collection period. The first PDI information is anticipated to be reported November 2016. Information will be reported on the PDI website, which will continue to house the historic information from the ADI.

Can the profession still feel comfortable assessing the previous ADI data for research and other reporting needs?

Yes, the profession and health workforce users can be confident in assessing and utilizing the previous ADI data for research and other reporting needs. The ADI was collected utilizing the same methodology and reported in the same manner from 2000 through August 2016.

The ADI has been administered in the same manner for 15 years and has a significant amount of trend data. Will the new reporting outcomes for the PDI be comparable to outcomes and trend data of the original ADI?

The changes being made are designed to provide as much consistency and comparability as possible between the PDI and ADI data. There will be elements of the PDI data that will not be comparable to original ADI data, but a goal of continuity with prior information and reports has been a priority and guiding principle of the revisions. Instances where PDI and ADI data can be compared will be communicated.