**Needs Assessment of a Pharmacy Technician Float Pool Within a Regional Health System**

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**Practice Site:** The Moses H. Cone Memorial Hospital, Greensboro, NC, USA

**Background:** According to the U.S. Bureau of Labor Statistics, 31,700 pharmacy technician openings per year are estimated. In a survey of 1,952 hospital and health system executives, turnover rates of at least 21% were noted and nearly 1 in 10 reported that they had lost ≥41% of their pharmacy technicians. This shortage can reduce productivity, increase bonus costs, and cause burnout. Float pools have been used since 1981 to sustainably support staffing variations, however, data for this practice within pharmacy is lacking.

**Objective:** This project was designed to evaluate the current staffing structure in respect to unfilled hours, productivity spread, pharmacy technician burnout, overtime hours, and the difference in scheduled versus optimal staffing hours within a health system of >20 FTEs of unfilled pharmacy technician positions.

**Methods:** Unfilled hours, overtime hours, productivity data, and scheduled hours was collected for 12 consecutive pay periods. A single-item burnout survey was sent via email to pharmacy technicians. The primary outcome is the percent of unfilled hours over 12 pay periods. Secondary outcomes are the number of overtime hours, productivity spread, and difference between scheduled and optimal staffing hours over 12 pay periods along with pharmacy technician burnout. Pharmacy cost centers that contain pharmacists have been excluded.

**Results:** From April 11th, 2021 to September 25th, 2021, there were 2,529.5 unfilled hours out of 15,700.42 hours (16.11%) scheduled. From the 13,170.92 hours worked, 1,735.32 hours (13.18%) were classified as overtime hours. In an optimal staffing scenario without callouts or positions vacancies, there would be 20,207 hours scheduled compared to the 15,700.42 hours scheduled. The analysis included two cost centers, with the productivity spread being 0.18 and 0.08, respectively. The single-item burnout survey had 20 individual responses, yielding a 52.63% response rate. Survey response options were on a 5-point scale, with 1 representing no burnout symptoms and 5 demonstrating complete burnout. The median response was 3, indicating ≥1 symptom of burnout.

**Conclusion:** With over >20 vacant FTEs and 16.11% of unfilled hours, there is decreased stability in the staffing model. Due to the inability to be fully staffed on a consistent basis, positions cannot be adequately backfilled. The lack of agility in meeting fluctuating staffing needs can negatively impact the pharmacy enterprise and delay patient care. Implementing a staffing float pool may be a reasonable solution to assist the health system in filling open shifts, reducing overtime, decreasing the productivity spread, and decreasing pharmacy technician burnout.