

Mapping the Pharmacy Workforce in Intestinal Failure: A National Scoping Analysis of Integrated and HPN Centres

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Background

Considerations

Intestinal Failure (IF) is a complex condition requiring multidisciplinary management, where pharmacy plays a vital role in ensuring safe and effective nutrition and medicines optimisation.

Pharmacists are key to the safe provision of Parenteral Nutrition (PN) and Home Parenteral Nutrition (HPN), supporting both inpatients and patients at home.

Within the NHSE service specification, access to specialist pharmacist services is an essential requirement for the provision of severe IF care.¹

Despite the complexity of care, there is limited national data describing the structure, staffing, and scope of pharmacy services within IF pathways.



This national scoping analysis was conducted to:

1. Evaluate current pharmacy workforce provision in IF and HPN centres across England.
2. Identify variations and disparities in service provision.
3. Inform future workforce standards to support consistent, high-quality care.

Aim

To evaluate the current pharmacy workforce supporting patients with severe intestinal failure across integrated IF and HPN centres in England, with a focus on staffing levels, roles, and service provision.

Method

1

- A structured data collection tool was distributed to all 25 NHSE commissioned IF and HPN centres

2

- Quantitative data were collected on patient numbers, staffing levels (by Agenda for Change banding), and the presence of dedicated pharmacy services.

3

- Qualitative thematic analysis was conducted on reported roles and responsibilities of pharmacy staff. Descriptive statistics were used to summarise workforce distribution and patient load.

Word cloud generated from reported pharmacy clinical activities



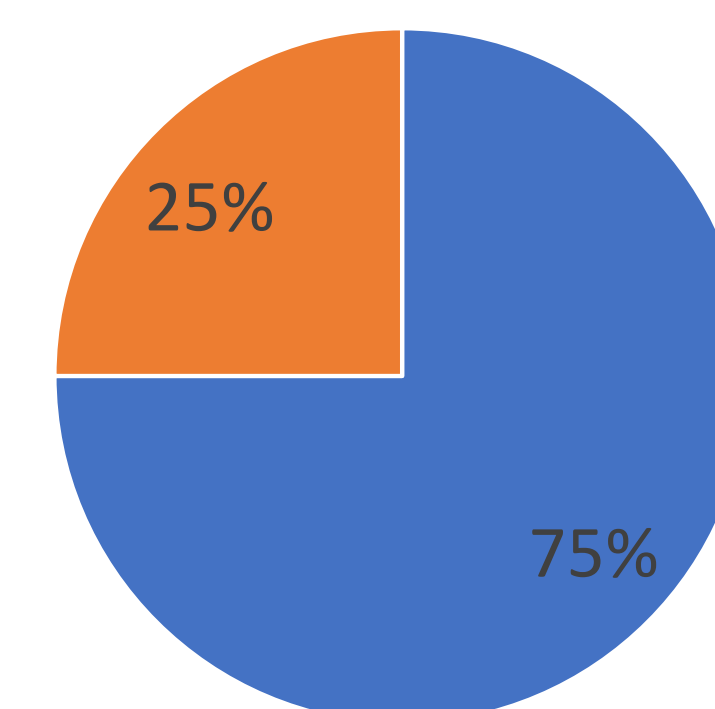
Results

Thematic analysis revealed that pharmacy professionals were primarily engaged in patient-facing clinical activities, including PN prescribing, discharge planning, and outpatient HPN management. Fewer centres reported involvement in research or service development.

- Of the 24 responding centres, 18 (75%) had a dedicated pharmacy service for IF.
- These centres collectively managed approximately 2,300 HPN patients and 260 inpatients with type 2/3 IF. Staffing levels varied significantly, with only 3 centres employing dedicated pharmacy technicians.
- Centres without a dedicated IF pharmacy service were reliant on dietitians and generalist pharmacists to provide additional support and highlighted disparities in workforce allocation.

Figure 1: Percentage of IF and HPN centres with a dedicated pharmacy service

Do you have a dedicated pharmacy service for Intestinal failure within your centre?



■ Yes ■ No

Figure 2: For centres with a dedicated IF pharmacy service (n=18), an overview of current pharmacy professional within these services by Afc banding. Band 8c-7 (Pharmacists) and Band 6-5 (technicians)

	8c	8b	8a	7	6	5
Total staff no. (WTE)	4.8	4	23.45	4.1	2	3.2
Per 100 HPN patient (n=2277)	0.21	0.18	1.03	0.18	0.09	0.14
Per 10 inpatients with type 2/3 IF (n=264)	0.181	0.151	0.882	0.155	0.076	0.121



Conclusions

This national scoping analysis reveals significant variability in pharmacy workforce provision. While many centres benefit from dedicated pharmacy services, others rely on ad hoc support. These findings support the development of national workforce standards to ensure equitable, high-quality care for patients with IF and guide future service development. Increasing opportunities for pharmacy professionals to engage in research and service development are required in line with the key clusters/domains for advanced and consultant pharmacist frameworks. Further work may be required to understand the full MDT workforce currently looking after patients with Intestinal failure.

References

- 1) The Royal Pharmaceutical Society, Consultant Pharmacist Curriculum RPS Consultant Pharmacist Curriculum 2020_FINAL.pdf (rpharms.com), 2) The Royal Pharmaceutical Society, Core Advanced Pharmacist Curriculum RPS - Core Advanced curriculumFINAL.pdf (rpharms.com)

Special thanks to all participants we greatly appreciate your valuable input