June 2026

CPE Briefing Note: Summary of Pressures Survey 2026 – Pharmacy Team Members

Community pharmacies across England are under unprecedented financial, operational, and workforce strain. Medicines shortages have become a routine challenge, while increasing numbers of patients are relying on pharmacies as access to General Practice remains difficult.

The findings from the Pharmacy Pressures Survey 2026 once again highlight a stark reality: without urgent and sustained financial and policy support from the Government, more pharmacies will be forced to cut back services or, in the most severe cases, shut down entirely. Immediate action is needed to protect community pharmacies before even more serious consequences are felt by patients, the wider public, and the NHS as a whole.

Key Findings

89%	of staff suggest medicines supply chain issues are affecting the pharmacy at least once a day
66%	report verbal abuse from patients related to shortages *7% report physical abuse as a result of medication shortages*
19%	say their pharmacy had to close due to staff shortages in the last three months
96%	of pharmacy staff report increasing requests for minor conditions advice
96%	report increasing requests from patients unable to access GPs
69%	of pharmacy team members suggest that work is having a negative impact on their mental health

Background

The Community Pharmacy England "Pharmacy Pressures Survey" is a recurring annual survey of pharmacy owners and pharmacy staff in England designed to monitor the operational, financial and workforce pressures facing the sector. Fieldwork for the 2026 survey was conducted between 12th February and 13th April 2026, capturing responses from 902 pharmacy team members (mostly pharmacists, but also some technicians, dispensers and assistants), therefore providing a comprehensive snapshot of current financial, operational and workforce challenges across the sector. The survey results highlight the scale of the pressures facing community pharmacy and the impact on patients and services.

Summary of the Key Findings

Medicines Supply Issues

88.9% of staff surveyed suggested that medicines supply chain issues are affecting the pharmacy on at least a daily basis

When asked about the impact of those medicines supply issues, 66.4% reported verbal abuse from patients related to shortages, and **6.5% reported physical abuse as a result of shortages.**

72.1% of respondents suggested that patients were affected daily by medicines shortages

Other Impacts of the Supply Chain

- 55.2% said that it was a daily occurrence to contact GP practices about supply chain issues (n=756).
- 80.7% said that it was a daily occurrence for out-of-stock items from wholesalers (n=752).
- 50.6% said that it was a daily occurrence for deliveries to arrive incomplete (n=751).
- 75.4% experience missed deliveries (n=744) at least once a week, with 20.4% reporting this as a daily occurrence.
- 60.4% said they were supplying medicines on a daily basis above Drug Tariff prices, (n=752). 94.2% of those that had awareness of this, were making supplies at a loss at least once a week.
- Regarding the Medicines Supply Tool, only half of the respondents had awareness of the tool and used it in their pharmacy.

Open Responses:

"Patients with mental health problems being impacted as quetiapine prices gone up significantly unavailability day to day, they went into crisis as couldn't get hold of the medication."

"Supply issues are meaning some patients are going without medication for days at a time."

"In my 21 years as a pharmacist I have never seen so many stock issues and over drug tariff prices. Trying to maintain all my essential services can be difficult. Getting a good team and delegating is a must. We have really tried to communicate with our local surgery and need to work together."

"Issues with medicine availability is challenging, constantly asking patients to come back on another day, sometimes up to 3 or 4 times. Patients get frustrated quite rightly, we either end up losing the patient to another pharmacy or they are verbally abusive."

Staffing

73.7% suggested that their pharmacy is consistently experiencing staff shortages.

19% of the staff reported that their pharmacy (n=674) has had to close due to staff shortages in the last 3 months.

"Minimal Staffing levels is the biggest issue for me as consultations must be carried out thoroughly and not rushed. Knowing that queues are building up because I'm carrying out a consultation in the consultation room puts pressure on the support staff who complain that I must hurry the service. My explanation to the team is that the service offered must be thorough not rushed. Having a second pharmacist would be the best."

Overall, these responses describe a sector caught in a workforce attrition spiral. Underfunding leads to understaffing which leads to increased workload and therefore burnout and staff loss, which further worsens staffing levels.

Workload

- **95.8% (n=720) reported an increase in requests for healthcare advice for minor conditions.**

- 93.4% (n=717) reported an increase in requests for more serious healthcare conditions.
- **96% (n=719) report an increase in requests from patients unable to access general practice.**
- 84% (n=717) report an increase in delays in prescriptions being issued by GP practices.
- 76.1% (n=714) report an increase in incorrect messaging from GP practices to patients.
- 97.8% (n=720) reported an increase in Medicines supply chain/wholesaler issues.
- 88.1% (n=714) reported an increase in informal referrals from general practitioners.
- 89.7% (n=718) reported an increase in patients visiting their pharmacy after having already visited other pharmacies.
- **80.1% (n=710) reported an increase in aggression and abuse from patients.**

Pressure Impacts on Patients

41.9% suggest pharmacy pressures are impacting patients, with 9.7% suggesting patients are severely impacted. 53.2% suggested they are struggling but mostly managing to protect patients, while **only 4.9% believe that patients are not being impacted by pharmacy pressures**.

In the open responses staff described the pressures of increasing demand for same day dispensing, the need to work through work breaks and that the phone goes unanswered.

- *"Patients not willing to wait for pharmacy 1st service-when pharmacist already in a consultation with someone else. Public want immediately to be seen!!!"*
- *"Demand on same day dispensing has increased. Having 3 people waiting for you to sign off their regular repeats plus two people waiting to speak to you for a pharmacy first is not an ideal scenario."*
- *"Patients come in requesting a pharmacy first consultation. We then have to ask them either to wait 30 minutes as the pharmacist is with someone else or to come back later at an agreed time. Patients either walk out and go elsewhere or return at the agreed time. This means they are suffering longer, treatment delayed."*
- *"Quite a lot of patients have walked out because there are 3-5 people waiting for a consultation before them and a mountain of prescriptions to process. I couldn't say what their outcome was, but I do know they have not been assessed for the condition they presented with."*

GP Relationships

When asked about GP relationships, 42.8% report it being harder, 49.5% the situation is similar, and on 7.7% suggesting it is better than in the past.

"Pharmacists should not have to take on ridiculous workloads due to patients not being able to get GP appointments."

Coping with Pressure

69.3% suggest that work is having a negative impact on their mental health, although 7.4% suggested work was having a positive impact on their mental health.

Most staff suggesting they are just about coping, or coping ok. **4.3% of individuals suggested they were not coping at all.**

"I am going to resign and leave pharmacy altogether, patient abuse and stress of work is too much."

In wider open responses, issues flagged included:

- Impact and workload from 111 referrals, especially at the weekend.
- Untrained counter staff, struggling to manage the demand.
- General Practice adding to the workload: "You *tell them what is available but they still issue the same thing on separate Rx. Recently we had sent 3 rxs for the same thing which was out ouf stock despite informing them about the available alternative."*
- Struggling to manage the demand for services and supply prescriptions: *"Pharmacy First has taken a lot of* time *off our hands in the dispensary now we don't have the pharmacist there checking scripts regularly which loses time each time we see a pharmacy first. We are currently 3 days behind with scripts. Currently dispense around 9500-10.500 items a month".*

General Feedback

Many respondents in their general feedback emphasise that *"all the pharmacy problems could be solved by increased funding,"* with repeated concern that new services are being introduced

"without any extra support… or adequate funding," forcing pharmacies to *"absorb all the costs"* while struggling to remain viable.

This financial pressure is compounded by supply issues, with medicines shortages described as *"a nightmare"* and requiring constant workarounds; as one response notes, staff spend significant time *"sourcing unavailable medicines… and managing patient expectations,"* often dispensing *"at a loss"* due to Drug Tariff mismatches.

These operational pressures are intensified by workforce challenges, where *"staffing shortages are significant"* and teams are expected to deliver *"more and more work and services for no more remuneration,"* leading to burnout, with individuals reporting they are *"constantly tired," "exhausted all the time,"* and even experiencing physical symptoms such as chest pain or migraines linked to stress.

Pharmacy First implementation is widely criticised, with *"inappropriate referrals"* common and training described as insufficient or poorly timed, such as when *"training [was] released just as children broke up for school holidays."*

Pharmacists report conflicting demands, being expected to deliver consultations while maintaining dispensing accuracy, creating safety concerns: *"giving more services… puts more pressure… and more chance of getting things wrong."*

At the same time, relationships with GP practices are often strained, with reports that *"GPs do not return phone calls,"* or that surgeries *"send people to pharmacies for things [that] are not even on the scheme,"* increasing patient frustration and redirecting system pressures onto pharmacies. Patients themselves are described as having rising expectations about service levels, treating pharmacies *"like Amazon"* or expecting *"instant treatment/service"* – which, combined with delays and shortages, can lead to frequent *"verbal abuse"* and even physical incidents.

A strong theme across responses is declining morale and a perceived loss of professional value. Many feel *"undervalued," "not treated with much respect,"* and inadequately paid despite increasing responsibility, with some noting that pharmacy staff earn *"less than someone working in a supermarket."*

There is also widespread frustration with target-driven cultures, where staff feel judged against *"league tables of performance,"* sometimes at the expense of patient care. The cumulative effect

has led many to consider leaving the profession, with striking statements such as *"I used to love my job, but now it is making me ill," "can't wait to leave the profession,"* and *"I want out… but I have a mortgage."*

Conclusion

In conclusion, the survey highlights a sector under severe and mounting pressure, with community pharmacies facing rapidly rising operating costs that are not matched by NHS reimbursement.

This financial mismatch is driving significant instability, with many pharmacies loss-making, some unable to meet basic financial obligations, and others relying on personal income sacrifices or external financing to survive.

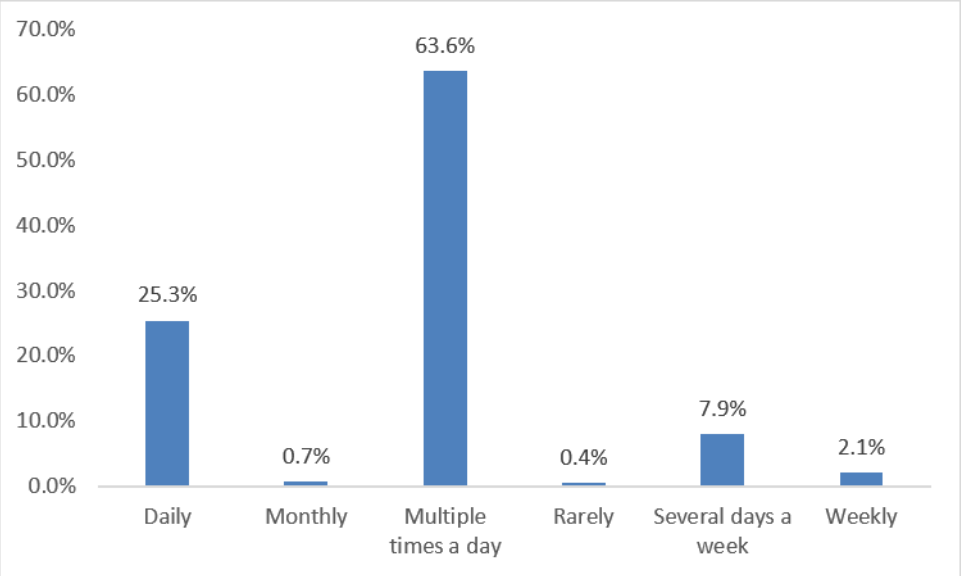
At the same time, workload and complexity are increasing due to medicine supply challenges, workforce shortages, and growing patient demand – particularly as access to general practice is impacted.

These pressures are directly impacting staff wellbeing and on patient care, resulting in delays, reduced service quality, and plans to cut opening hours or introduce charges for previously free services.

Overall, the findings continue a trend seen in previous surveys and point to a system that is widely viewed as unsustainable, with urgent reform needed to address funding gaps, workforce challenges, and supply chain issues to prevent further deterioration in pharmacy services and patient access to care.

Annex: Breakdown of results

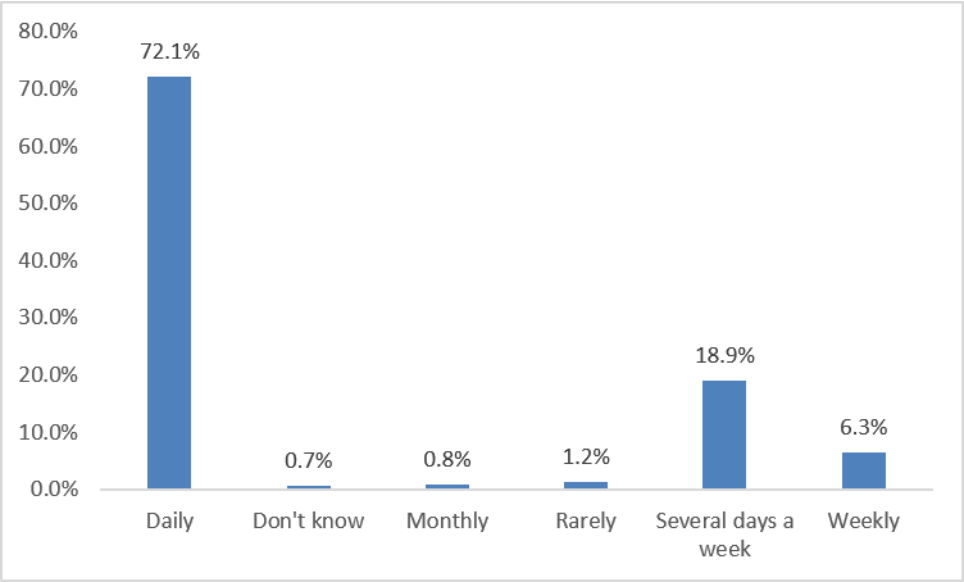
How often are medicines supply chain issues affecting the pharmacy?



Which of the following have occurred as a consequence of medicines supply issues (please tick all that apply)?

More patient owings issued	81.7%
Patients inconvenienced	80.9%
Patient health put at risk (e.g. delays receiving urgent antibiotics)	58.6%
Patient frustration	81.2%
Verbal abuse to staff	66.4%
Physical abuse to staff	6.5%
Patients going to other pharmacies	73.8%
Additional stress for staff	76.3%
Extra workload for staff	77.2%
Communication with GP practice needed	73.9%

How often are patients negatively impacted by supply chain issues? (n=756)



73.7% suggested that their pharmacy is consistently experiencing staff shortages. The reasons for this are:

Staff sickness, due to illness unrelated to their work	27.2%
Staff sickness, due to stress or other issues linked to working in the pharmacy	26.5%
Difficulties recruiting permanent staff leaving unfilled pharmacist vacancies	19.3%
Difficulties recruiting permanent staff leaving support staff vacancies	25.3%
Difficulties finding locums	16.1%
Fully staffed, but staffing level no longer sufficient to meet patient demand	34.3%

Staff were asked for "Other" reasons that contributed to staffing issues. They suggested:

- Pharmacies lack sufficient funding to hire and retain adequate staff.
- Many owners deliberately limit staffing or leave vacancies unfilled to control costs.
- Staff absences (sickness, holidays, maternity leave) are often not covered.
- Some pharmacies close despite available pharmacists due to cost constraints.
- Difficulty attracting staff due to low pay, high stress, and better-paying alternatives (e.g. Aldi).
- High turnover, with staff leaving and not being replaced.
- Shortage of locums, especially at lower pay rates.
- Growing reliance on untrained or inexperienced staff.
- Lack of time and resources for proper training.
- Poor skill mix increases errors and places extra burden on experienced staff.

Are staff shortages having any other impacts on the pharmacy and its patients?

Reduced opening hours	10.0%
Stopping provision of non-Essential services	20.6%
Reduction in ability to offer services or provide advice to patients	37.4%
Increased waiting times for patients	54.1 %
Increased working hours for staff	33.2%
Increased pressure on staff	61.2%

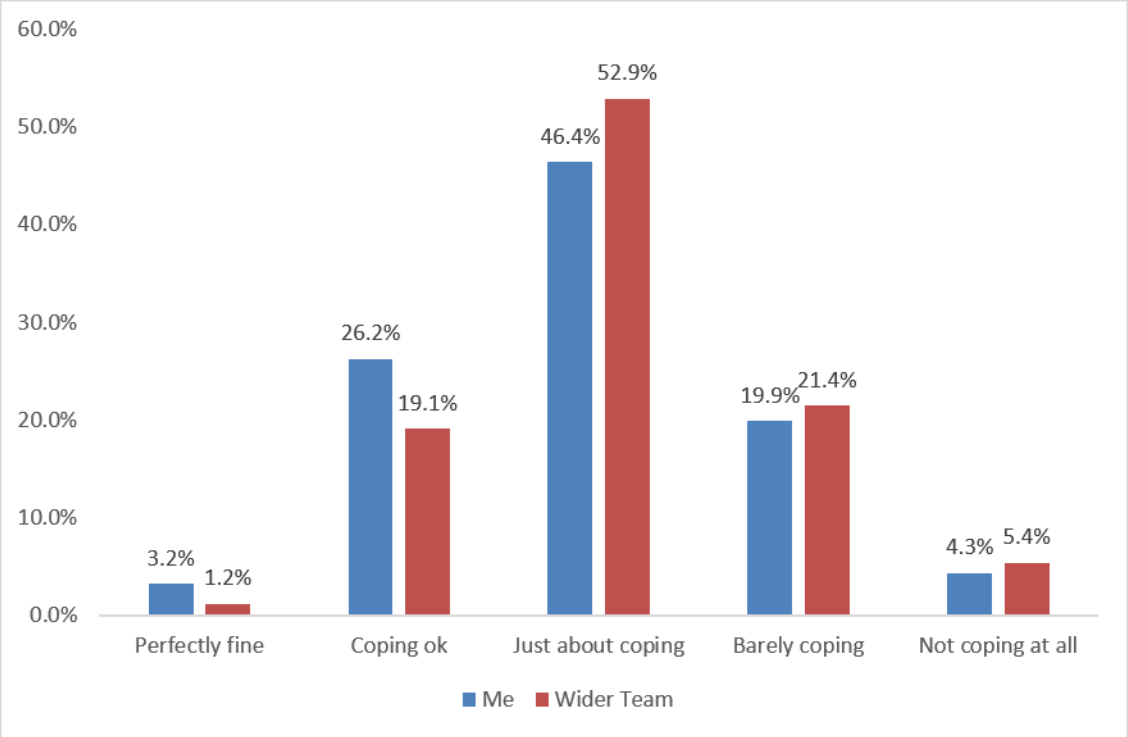
In wider responses staff raised concerns about errors due to limited staff. This pressure is contributing to high levels of stress, burnout, and poor work-life balance, alongside growing reports of verbal abuse and aggression from frustrated patients facing long waits. Quality of care is being impacted, with increased risks of errors and near-misses as staff rush to manage workloads. The situation is exacerbated by reliance on untrained or low-paid staff, inconsistent locum support, and lack of pay progression, leaving pharmacists carrying the bulk of

responsibility. Overall, the system is described as overstretched and unsustainable, with declining morale and reduced ability to maintain high-quality patient care.

Pressures' impacts on patients are:

Taking longer to dispense prescriptions	58.9%
Unable to source some medicines and supply these to patients	71.0%
Waiting longer to seek advice from staff in the pharmacy	49.3%
Unable to provide some NHS funded clinical services	19.5%
Unable to provide some Pharmacy First Consultations	17.4%
Unable to provide some locally commissioned services	15.3%
Unable to spend as much time supporting/advising patients	51.0%
Unable to respond to patients' phone calls/emails as promptly as usual	47.9%
Temporary closures meaning patients have to visit other pharmacies	7.5%
Local pharmacy closures driving up wait times	13.0%

How well would you say you and the pharmacy team are coping with the current pressures?



If you and the team are not coping well, what do you believe are the main challenges?

Lack of staff – due to unavailability of staff	24.2%
Lack of staff – due to insufficient funding	41.9%
Patient requests for help with prescriptions	32.8%
Patient requests for healthcare advice	35.9%
Patient abuse	30.0%
Workload	58.0%
Problems sourcing medicines	54.7%
Introduction of new Pharmacy First service	23.4%

If you have any queries or require more information, please contact: comms.team@cpe.org.uk