# Board of Pharmacy

Annual Performance Progress Report

Reporting Year 2024

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KPM #	Approved Key Performance Measures (KPMs)
1	Percent of inspected pharmacies that are in compliance annually. -
2	Percentage of individual and facility licenses that are issued within 30 days. -
3	Percent of pharmacies inspected every two years. -
4	Average number of days to complete an investigation from complaint to board presentation. -
5	Customer Service - Percent of customers rating their satisfaction with the agency's customer service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.
6	Board Best Practices - Percent of total best practices met by the Board.

- red
- green
- yellow
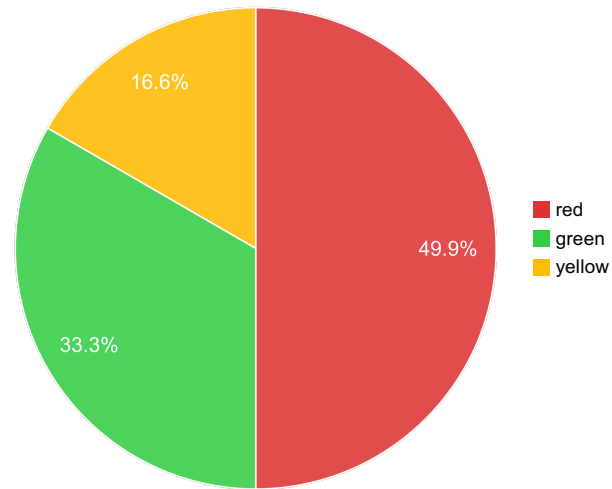
Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	33.33%	16.67%	50%

| KPM #1 | Percent of inspected pharmacies that are in compliance annually. - |
| | Data Collection Period: Jan 01 - Dec 31 |

* Upward Trend = positive result
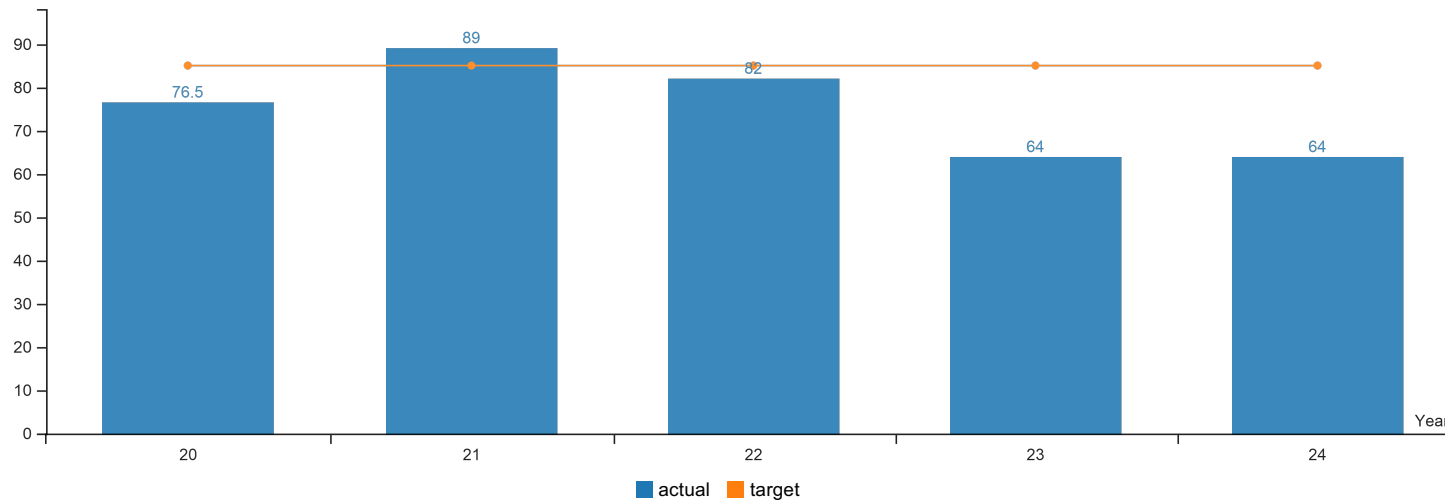
Report Year	2020	2021	2022	2023	2024
Percentage of Pharmacies that are in compliance annually.					
Actual	76.50%	89%	82%	64%	64%
Target	85%	85%	85%	85%	85%

How Are We Doing

In October 2023, the board implemented a new inspection process to improve transparency, communication, and oversight of pharmacy compliance. The goal was to enhance identification of potential patient safety risks. This report summarizes inspection data from January to December 2023, encompassing both the previous and new processes.

Compliance Officers conducted 511 Retail Pharmacy and Institutional Pharmacy inspections. Inspection results included 121 Passes, 205 Passed With Notes, 24 Required Responses, 51 with Deficiency Notifications, and 109 with Non-Compliance Notifications. Approximately 64% of pharmacies required no further board action, and 35.8% had no observed violations.

Deficiency Notification	51
Non-Compliance Notification	109
Response Needed	24
Pass	121
Passed with Notes	143
No Response Needed	62
New Outlet Inspection	1

|	
Total:	511

Factors Affecting Results

In 2020, the board instituted a biennial inspection model with a focus on patient safety. The COVID-19 public health emergency, which persisted until May 2023, significantly impeded our inspection activities. Concurrently, pharmacies encountered challenges in meeting public demands and operational continuity. Also, in October 2023, the board implemented a new inspection process to improve transparency, communication, and oversight of pharmacy compliance.

| KPM #2 | Percentage of individual and facility licenses that are issued within 30 days. - |
| | Data Collection Period: Jan 01 - Dec 31 |

Upward Trend = positive result
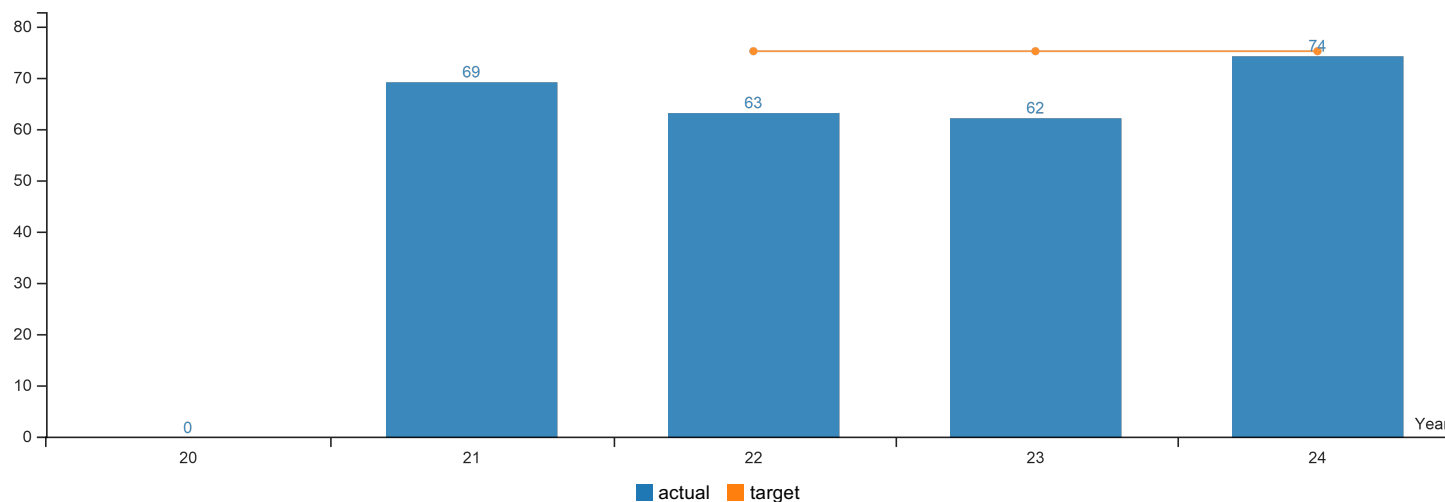
Report Year		2020	2021	2022	2023	2024
Percentage of individual and facility licenses that are issued within 30 days.						
Actual			69%	63%	62%	74%
Target				75%	75%	75%

How Are We Doing

This measure assesses our efficiency in processing applications for over 30 different types of licenses and registrations. It is crucial that we maintain a consistent approach in evaluating each applicant against the minimum qualifications to uphold public safety.

In 2023, 74% of licenses were issued within 30 days, an increase of 12% from 2022. This demonstrates a significant improvement in our processing efficiency. During the year, a total of 3,291 licenses were issued, representing an 11.6% increase over 2022. The average processing time was 42 days for facilities and 29 days for individuals, compared to 38 and 35 days respectively in 2022.

Factors Affecting Results

The data includes all applications that were initially incomplete. This requires agency staff to follow up to obtain the necessary information, causing delays in processing. Applications involving out-of-state discipline or criminal background checks require thorough review and may be subject to investigation and preparation for deliberation at a bi-monthly board meetings, further extending processing times.

Staffing limitations have impacted our ability to process applications promptly. Early 2023 saw a 33% reduction in available licensing staff resources due to vacancies and staff leave (including vacations or other protected/approved leave), affecting application processing in the first and second quarters. Despite these challenges, our team remains committed to enhancing communication with applicants and refining internal workflow processes for greater efficiency. The efficiency of current processes could be significantly improved by upgrading to a more modern software platform, which is currently under consideration.

| KPM #3 | Percent of pharmacies inspected every two years. - |
| | Data Collection Period: Jan 01 - Dec 31 |

Upward Trend = positive result
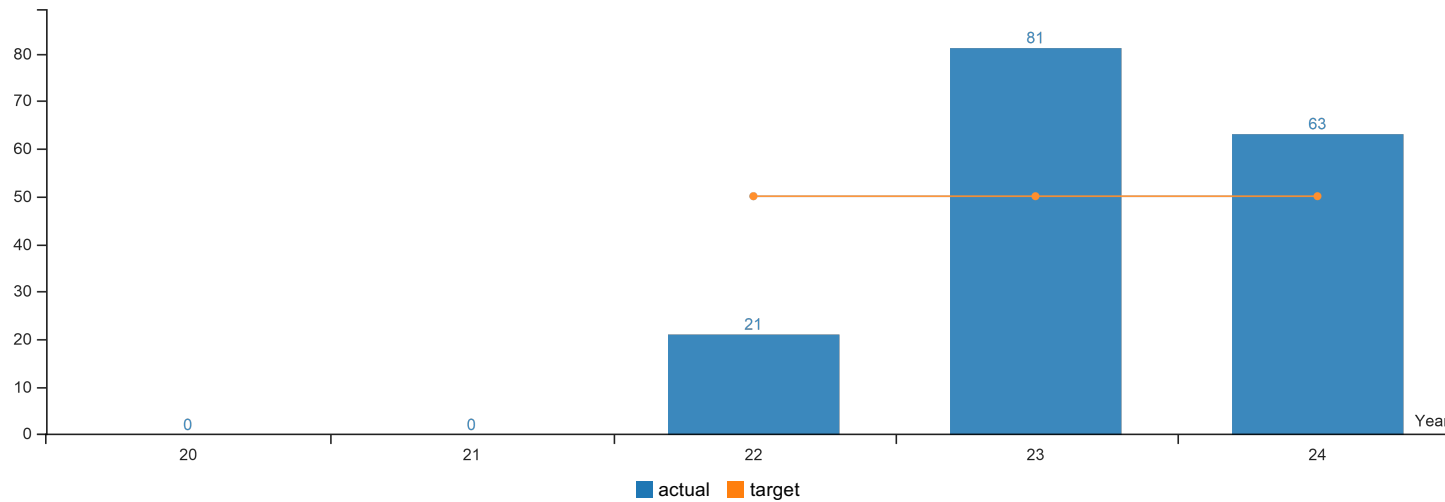
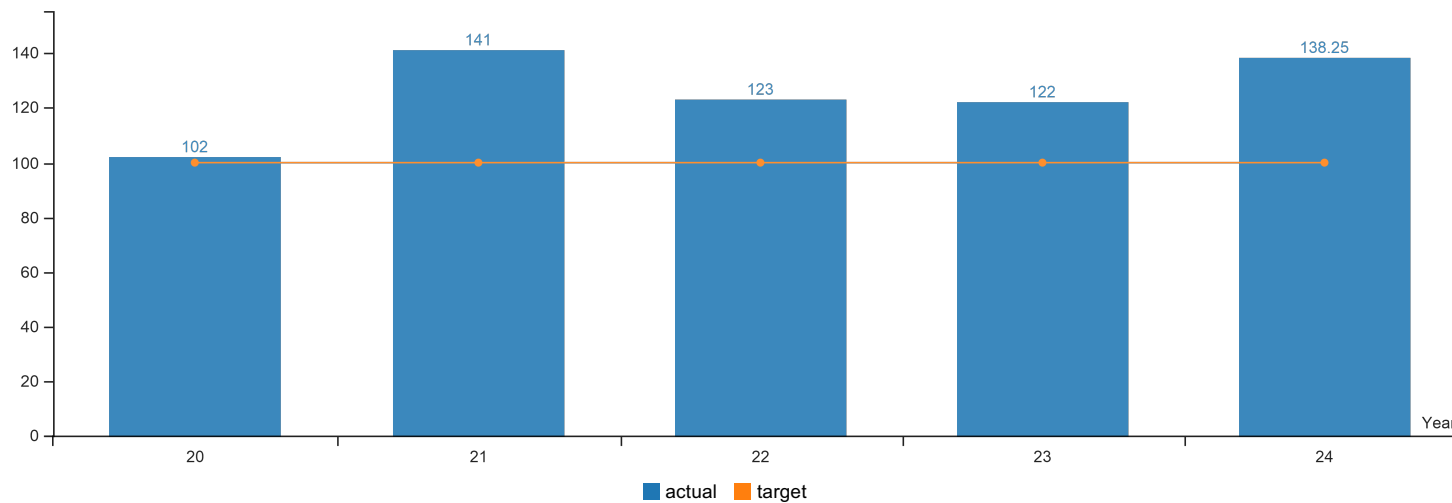| Report Year	2020	2021	2022	2023	2024
Percent of pharmacies inspected every 2 years.					
Actual			21%	81%	63%
Target			50%	50%	50%

How Are We Doing

The report encompasses inspections conducted from January 1 to December 31, 2023. Following a 2021 change to a biennial inspection cycle, 511 of the 808 Oregon retail and institutional pharmacies (63%) were inspected in 2023.

Factors Affecting Results

The board implemented a biennial inspection cycle in 2021. The COVID-19 pandemic delayed full implementation until the 2023-2025 cycle. The inspection cycle was July 1, 2021 to June 30, 2023, so the most recent percentage reflects data from two cycles. At the end of the inspection life cycle, there is usually a spike in inspections as the team focuses on closing out their work for the biennium. Therefore, there tends to be a higher number of inspections every other year. However, due to staff absences and medical leave, fewer inspections were able to be completed than expected. One compliance officer position was approved to be hired to add capacity to the team, but the position was not filled until November 2023.

| KPM #4 | Average number of days to complete an investigation from complaint to board presentation. - |
| | Data Collection Period: Jan 01 - Dec 31 |

* Upward Trend = negative result

Report Year	2020	2021	2022	2023	2024
Number of days to process complete investigation from complaint to Board presentation.					
Actual	102	141	123	122	138.25
Target	100	100	100	100	100

How Are We Doing

The total number of investigatory cases from January 1, 2023 – December 31, 2023, was 1160, which is an increase from 2022's total of 1061 and 2021's total of 834. This number is inclusive of all cases, which include those initiated from inspection results, licensee and registrant application cases, drug diversion and theft cases, impairment cases, unprofessional conduct cases and all consumer complaints. Cases are triaged for public safety which may cause delays in processing of other types of cases. On average, cases were reported and presented to the board in 138 days, an increase of 17 days from 2022.
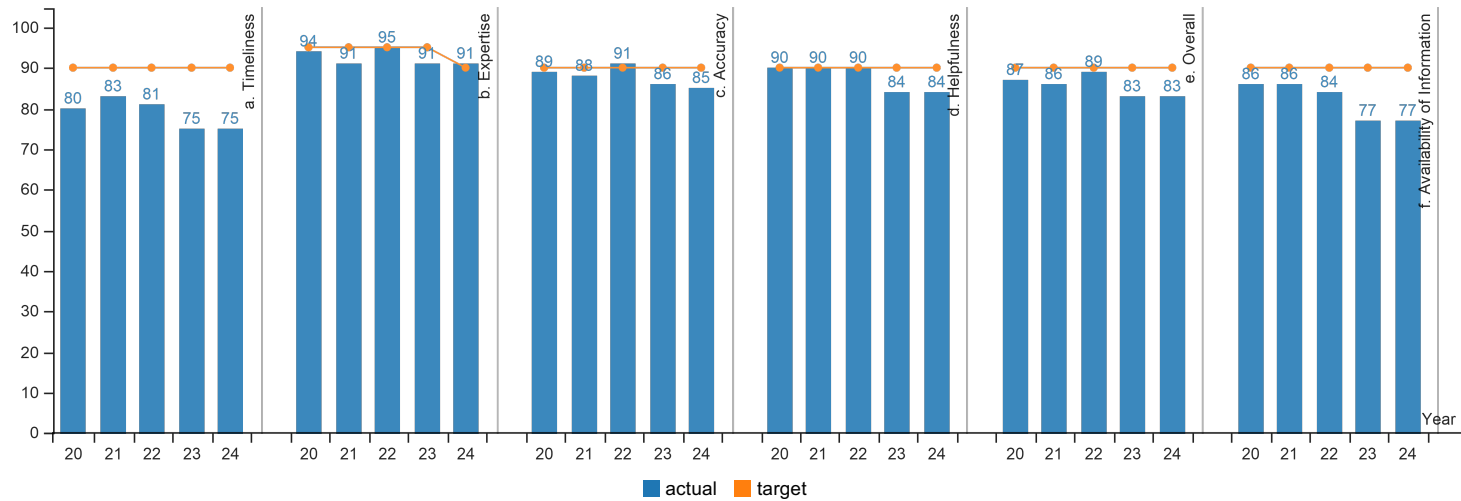
Factors Affecting Results

Factors affecting results included agency staff leave (including vacations or other protected/approved leave) combined with an increase in cases, inspections, and training.

An additional Compliance Officer position was approved in the 2023-25 Legislatively Adopted Budget to address increased case workload, but the position was not filled until 11/15/2023. A new Compliance Officer may not be assigned their first case until they've completed approximately 6 months of one-on-one training and supervision, which requires time and resources from the Compliance team. This may result in a transient decrease in the efficiency of processing cases, as the full benefit from the new position may not be statistically evident for the first year. In 2024, the Compliance team has had additional vacancies that may continue to affect these results.

It should be noted that beyond a certain threshold, there may be a direct, inverse relationship between the overall number of cases and processing efficiency. This is primarily due to the time associated with manual tracking of cases, disposition of correspondence, and the strategic planning of resource allocation for the triaging of cases; the impact of these, in part, could be substantially mitigated by an upgrade to a more contemporary software platform, which is in consideration.

	Customer Service - Percent of customers rating their satisfaction with the agency's customer service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.
KPM #5	
	Data Collection Period: Jan 01 - Dec 31

Report Year	2020	2021	2022	2023	2024
a. Timeliness					
Actual	80%	83%	81%	75%	75%
Target	90%	90%	90%	90%	90%
b. Expertise					
Actual	94%	91%	95%	91%	91%
Target	95%	95%	95%	95%	90%
c. Accuracy					
Actual	89%	88%	91%	86%	85%
Target	90%	90%	90%	90%	90%
d. Helpfulness					
Actual	90%	90%	90%	84%	84%
Target	90%	90%	90%	90%	90%
e. Overall					
Actual	87%	86%	89%	83%	83%
Target	90%	90%	90%	90%	90%
f. Availability of Information					
Actual	86%	86%	84%	77%	77%
Target	90%	90%	90%	90%	90%

How Are We Doing

The percentage results provided represent the respondents who responded with a rating of either "Excellent" or "Good". Those that responded "Don't Know" or "N/A" were not factored into these ratings. Our overall customer satisfaction average of 83% is a decrease of 5% from 2021. The overall service questions indicate decrease in satisfaction of applicants.

Factors Affecting Results

Factors that contributed to the results:

• 33% reduction in licensing staff due to overlapping resignations (1 failed recruitment – increased hiring timeframes)

• Agency staff resources at a minimum during peak workload times

• Agency staff category reassignments & additional training times on additional licensure categories

• Training time for new employees

KPM #6	Board Best Practices - Percent of total best practices met by the Board.
	Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result
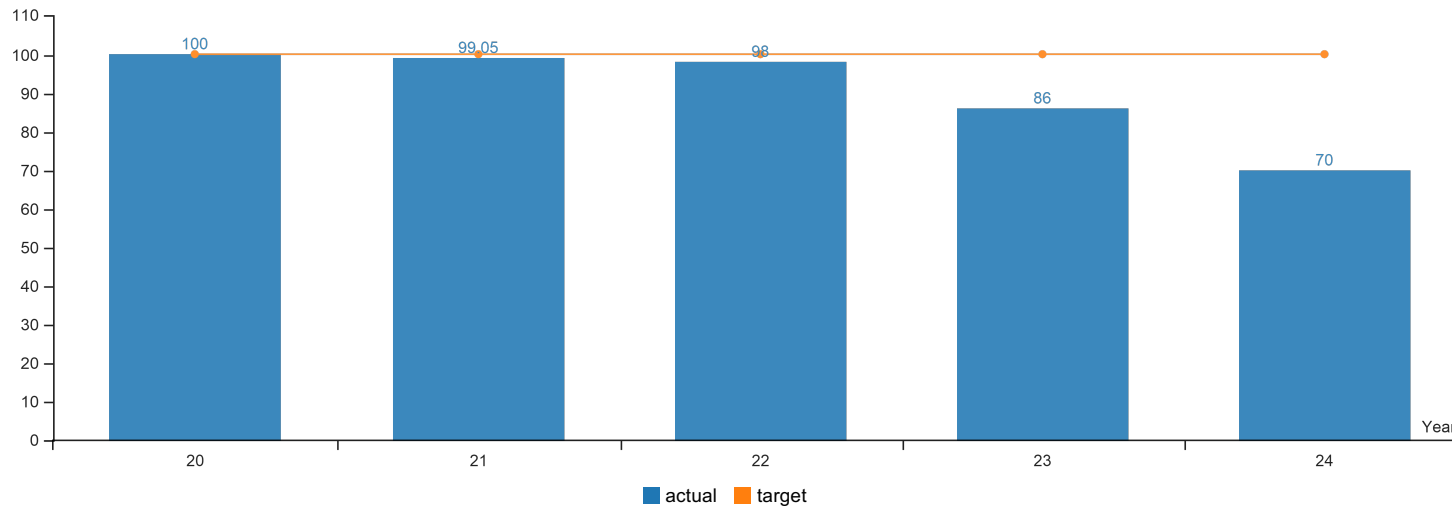
Report Year	2020	2021	2022	2023	2024
Is the Board following Best Practices?					
Actual	100%	99.05%	98%	86%	70%
Target	100%	100%	100%	100%	100%

How Are We Doing

The purpose of the self-evaluation is to assist boards and commissions in developing governance oversight. The self-evaluation contains 15 yes or no survey questions about Executive Director expectations and feedback, strategic management, strategic policy development, fiscal oversight, and board management. The board regularly works to follow best practices and annually completes a self-assessment of their work as the governing body for the Board of Pharmacy. The Executive Director provides weekly communications to the board and meets with the board President as needed.

The eight board members who were appointed at the time of the previous calendar year participated in the response. A score of 70% of the 15 questions received a yes response, 30% received a no response with an average of one comment per person. Agency staff developed a Best Practices Self-Assessment Guide to assist the board in evaluating and responding to the survey to demonstrate the board's adherence to best practices.

Factors Affecting Results

This year, eight out of nine members participated in providing feedback for this measure due to the board having one member resign prior to participating in the survey. There were few comments or questions in the results and around the process. Because the survey was conducted in April 2024 and many changes had been made between October 2023 and the time of the survey (e.g., a new Executive Director hired and onboarded), some board members expressed that it was difficult to recall and assess the best practices from earlier in 2023 and asked how to separate scores around two different Executive Director tenures. The evaluation was helpful in that it brought up suggestions that agency staff develop and implement a revised board member orientation process. This process was revised and went into effect in 2024.