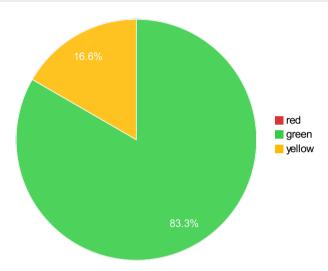
Pharmacy, Board of

Annual Performance Progress Report
Reporting Year 2018

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KPM#	Approved Key Performance Measures (KPMs)
1	Percent of inspected pharmacies that are in compliance annually
2	Percent of audited pharmacists who complete continuing education on time
3	Percent of pharmacies inspected annually
4	Average number of days to complete an investigation from complaint to board presentation
5	CUSTOMER SERVICE - Percent of Oustomers Rating Their Satisfaction With the Agency's Oustomer Service as "Good" or "Excellent": Overall Oustomer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.
6	Board Best Practices - Percent of total best practices met by the Board.



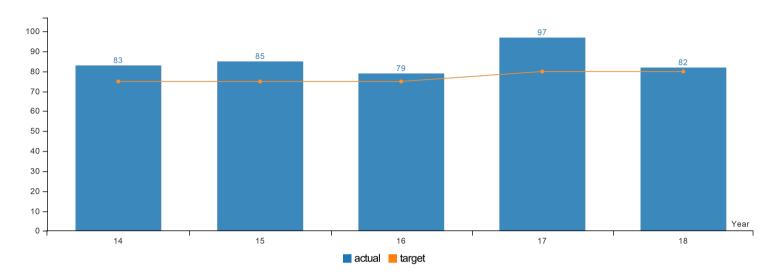
Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	83.33%	16.67%	0%

K	Р	M	1#1

Percent of inspected pharmacies that are in compliance annually. -

Data Collection Period: Feb 01 - Jan 31

^{*} Upward Trend = positive result



Report Year	2014	2015	2016	2017	2018	
Percentage of Pharmacies that are in compliance annually.						
Actual	83%	85%	79%	97%	82%	
Target	75%	75%	75%	80%	80%	

How Are We Doing

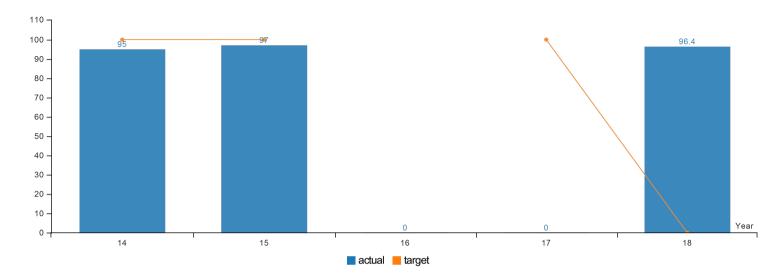
From February 1, 2017- January 31, 2018 Board Inspectors completed 100% or 887 retail and institutional pharmacy inspections. Outlets are required to complete their Annual Self-Inspection Report prior to February 1st in order for inspectors to be able to complete a thorough inspection. The form is required to be completed on time and available for inspection by the Board at all times. The purpose of the self-inspection form is to assist the pharmacy in ensuring compliance with state and federal laws and rules governing the practice of pharmacy. Each question references the corresponding law and/or rule. In addition, it's to help educate the Pharmacist in Charge (PIC) of current areas of regulatory focus and awareness. When a PIC assumes a new position, they are required to complete the self-inspection for the pharmacy within 15 days of becoming a PIC to ensure a pharmacy is in compliance.

Of the 887 inspections completed, Inspectors found that 82% or 731 passed inspection, 127 Warning Notifications were issued and 29 Notifications of Non-Compliance were issued; note: each notification is reviewed by the Board to determine if disciplinary action is necessary. The vast majority do not result in disciplinary action. Upon reciept of a warning notification, an outlet has 30 days to correct deficiencies and report back to the Board. When a Notification of Non-Compliance is issued, a pharmacy must address deficiencies immediately and respond within 15 days. The Board will determine what if any level of discipline is associated with the violations.

Compliance through Education is the Board's priority and Inspectors utilize the inspection to help educate pharmacists, staff and PICs during the inspection process. A pharmacy may pass inspection with or without notes. If notes are recieved, the Inspector identified areas of improvement or minor deficiencies to be addressed without additional Board follow up. Pharmacies that receive "passed with notes" usually show improvement in subsequent years. When deficiencies are identified, outlets are advised what needs to be corrected. The Self Inspection Form cites to the specific laws and rules Inspectors are evaluating to verify compliance. The Board allows time for outlets to achieve compliance with newer laws and rules upon implementation. However, some outlets are not always as quick to change or comply. We continue to work with these outlets to achieve compliance and more importantly, maintain patient safety.

KPM #2	Percent of audited pharmacists who complete continuing education on time
	Data Collection Period: Jan 01 - Dec 31

^{*} Upward Trend = positive result



Report Year	2014	2015	2016	2017	2018		
Percentage of audited pharmacists who complete continuing education on time.							
Actual	95%	97%	No Data	No Data	96.40%		
Target	100%	100%	TBD	100%	0%		

How Are We Doing

Because Pharmacists now renew their license every other odd numbered year, there was no CE audit in 2018. However, the 2017 Pharmacist CE audit was in progress during the performance measure reporting period ending 9/30/17. The following is an update on the completion of that audit. 1392 were selected for the pharmacists CE audit. 96.4% of licensees audited passed for the renewal period ending June 30, 2017. This was the first year that pharmacists had to submit 30 hours of CE for audit due to biennial license renewal. The Board elected to increase the number of individuals selected for audit from 10% to 20% to capture the same number selected over a biennial renewal period if it had been done annually.

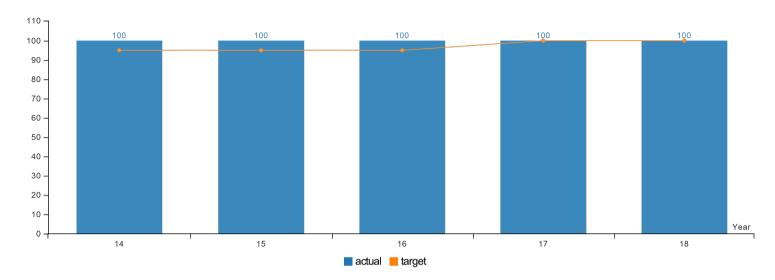
Factors Affecting Results

Due to the biennial renewal, the audit results found that 50 individuals failed the audit; 3 individuals elected to lapse their license, 2 were deceased, 45 others elected to retake the MPJE (Multistate Pharmacy Jurisprudence Examination) exam or accept Board discipline. It is a pharmacists responsibility to complete 30 hours of CE during each two-year period and respond to an audit when selected within the response time-frame. Pharmacists continue to maintain the same level of passing rate for the CE audit between 95-97%.

We will continue to communicate with licensees regarding their CE requirements.

KPM #3	Percent of pharmacies inspected annually
	Data Collection Period: Feb 01 - Jan 31

^{*} Upward Trend = positive result



Report Year	2014	2015	2016	2017	2018		
Percent of pharmacies inspected annually							
Actual	100%	100%	100%	100%	100%		
Target	95%	95%	95%	100%	100%		

How Are We Doing

For the reporting period February 1, 2017 - January 31, 2018, Board Inspectors completed 100% of the retail and instituational pharmacy outlets licensed and located in Oregon. The Board continues to see a greater need to expand regular inspections to other outlets and staff is working to incorporate these into the inspection schedule.

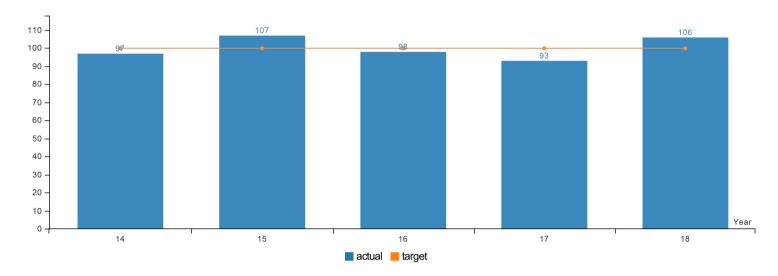
Factors Affecting Results

With a fully staffed Compliance Department, we have been able to maintain successful inspection completion of all retail and institutional pharmacies located in Oregon. The need to expand inspections such as to manufacturers, wholesalers, community health clinics and supervising dispensing practitioner outlets and drug rooms continues to grow. Staff have identified a schedule to incorporate other outlet categories in the coming years.

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	2014	2015	2016	2017	2018		
Number of days to process complete investigation from complaint to Board presentation.							
Actual	97	107	98	93	106		
Target	100	100	100	100	100		

How Are We Doing

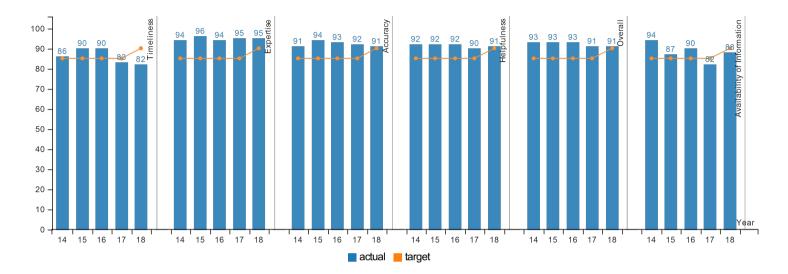
The total number of investigations/inspections that resulted in cases from January 1, 2017 through December 1, 2017 was 566. This includes Board initiated cases, cases initiated because of inspection deficiencies or notifications of non-compliance, license application cases etc. Drug diversion, theft, fraud and impairment cases always take priority for the public's safety and may cause delays in processing other types of cases. 187 out of the 566 cases were the result of consumer complaints and these were on average, reported to the Board within 106 days.

Factors Affecting Results

Of the Board's five full-time equivalent (FTE) pharmacists that conduct pharmacy inspections and/or investigations. Four of these positions do both investigations and inspections as part of their regular day to day activies, as well as take/respond to compliance related phone calls. The fifth position is primarily dedicated to conducting inspections. The number of cases from year to year has generally increased over the last ten years without additional staffing. As of October 2018, we have 661 cases and anticipate over 800 before the year's end. The time to complete investigations is likely to rise without additional staffing.

KPM #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.

Data Collection Period: Jan 01 - Dec 31



Report Year	2014	2015	2016	2017	2018	
Timeliness						
Actual	86%	90%	90%	83%	82%	
Target	85%	85%	85%	85%	90%	
Expertise						
Actual	94%	96%	94%	95%	95%	
Target	85%	85%	85%	85%	90%	
Accuracy						
Actual	91%	94%	93%	92%	91%	
Target	85%	85%	85%	85%	90%	
Helpfulness						
Actual	92%	92%	92%	90%	91%	
Target	85%	85%	85%	85%	90%	
Overall						
Actual	93%	93%	93%	91%	91%	
Target	85%	85%	85%	85%	90%	
Availability of Information						
Actual	94%	87%	90%	82%	88%	
Target	85%	85%	85%	85%	90%	

We emailed a link to the SurveyMonkey Customer Service Survey to Board customers that obtained a new license between the dates of January 1, 2017 and December 31, 2017. We emailed the survey link to 2995 new licensees. 47 email addresses came back to us as undeliverable. Of the 2948 remaining licensees that provided valid email addresses, 578 individuals responded to the surveys. This represents an overall response rate of 20%. This is a 1.05% decrease from the 2016 overall response rate. Customer services continues to be a high priority for staff.

The methods that most applicants or licensees utilize to contact our staff are by telephone, mail and email. Each of these increased as noted from the prior year - Telephone 34.6% (2016) to 60.5% (2017), Mail 33.1% (2016) to 68% (2017), Walk-in 5.7% (2016) to 12.1% (2017). These significantly higher numbers definitely impacted our timliness score in 2017 as well as reductions on most of our our other scores, although four of the six are still above the target and two are slightly below.

Factors Affecting Results

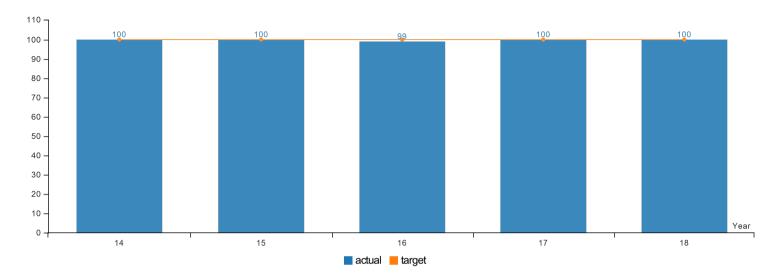
Overall the average of the scores remains at 91% which is the same as 2016.

We are continuing to focus on customer service and ways to streamline our processes. We are still experiencing licensee growth, which results in an increase in applications that are presented to the Board for approval. While we've experienced increases in both licensing and compliance activities, we've had the same number of staff since 2015. Because of this workload, license application and renewal processing times have been extended.

The Oregon Board of Pharmacy is continually striving to provide excellent service in a timely manner in all departments of our agency. Without additional staffing in our licensing department, it's likely that our timeliness results will continue to be challenged.

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	2014	2015	2016	2017	2018		
Is the Board following Best Practices?							
Actual	100%	100%	99%	100%	100%		
Target	100%	100%	100%	100%	100%		

How Are We Doing

Each year, our Board reviews the Best Practices Self Assessment criteria and scores. This year, the Board scored 100% on each of the best practices criteria. Our Board and staff are regularly looking at ways to do things better and more efficiently.

Factors Affecting Results

The Board Members and Officers are very active. They are committed to excellence and ensuring the Board and agency are effectively through the work of the Executive Director and staff.