

Pharmacy, Board of

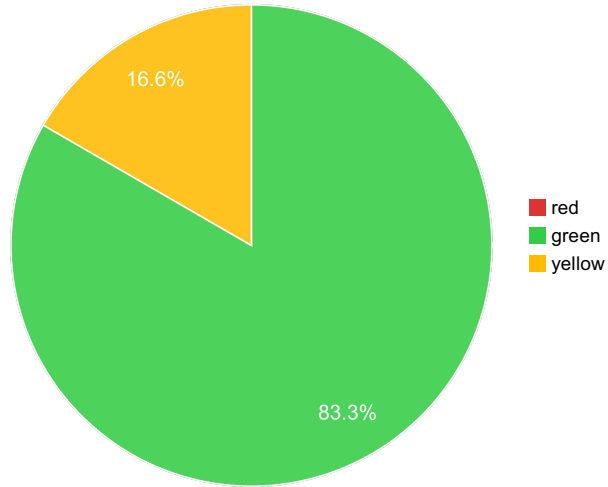
Annual Performance Progress Report

Reporting Year 2020

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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 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.

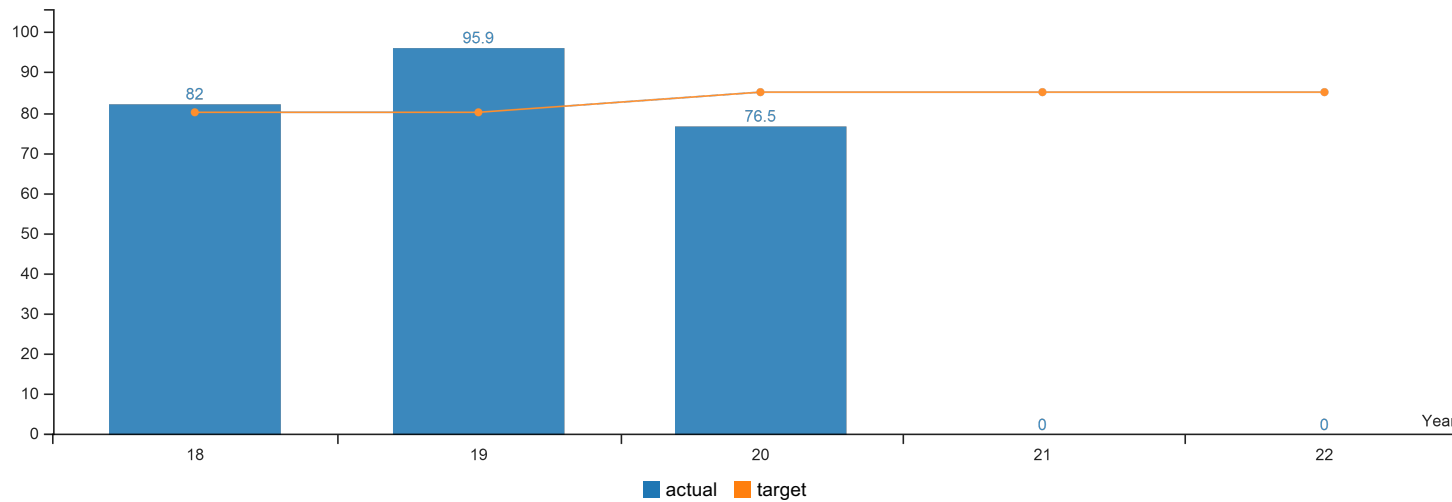
Proposal	Proposed Key Performance Measures (KPMs)
Delete	Percent of audited pharmacists who complete continuing education on time. -
New	Percentage of individual and facility licenses that are issued in within 30 days. -
Delete	Percent of pharmacies inspected annually. -
New	Percent of pharmacies inspected every 2 years. -



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

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

* Upward Trend = positive result



Report Year	2018	2019	2020	2021	2022
Percentage of Pharmacies that are in compliance annually.					
Actual	82%	95.90%	76.50%	No Data	No Data
Target	80%	80%	85%	85%	85%

How Are We Doing

From February 1, 2019 - January 31, 2020 Board Inspectors completed 854 Retail and Institutional pharmacy inspections of which 76.5% were in compliance. Of the 854 completed inspections, 67 passed inspection, 577 passed with notes for improvement, 162 received deficiency notifications and 39 notifications of non-compliance were issued; note: all notifications are reviewed by the Board to determine if disciplinary action is warranted.

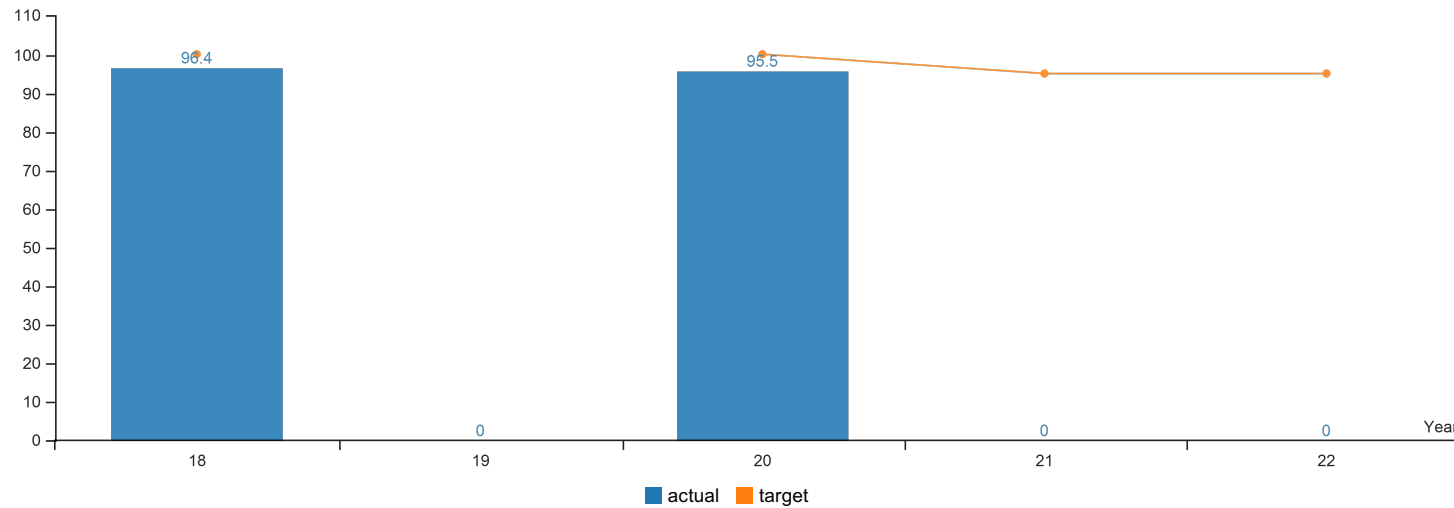
Factors Affecting Results

Many rule changes have been implemented over the past 5 years to account for new legislative authorities for a pharmacist to prescribe and rules related to outlet requirements to ensure cold drug storage integrity. Many outlets were identified to be non-compliant with these rules and needed corrective action follow up to ensure that patient safety is maintained. In the last year, several Rules Advisory Committees were formed to discuss pending large rule changes related to updated compounding rules which went into place in 2019 to meet national standards, as well as new legislation related to dual language prescription label and reader requirements. The new rules contributed to outlets focusing on implementation of large projects which may have contributed to noted deficiencies and non-compliance.

Staff continues to work to communicate effectively with all outlets to improve patient safety by achieving compliance with laws and rules.

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	2018	2019	2020	2021	2022
Percentage of audited pharmacists who complete continuing education on time.					
Actual	96.40%	No Data	95.50%	No Data	No Data
Target	100%	TBD	100%	95%	95%

How Are We Doing

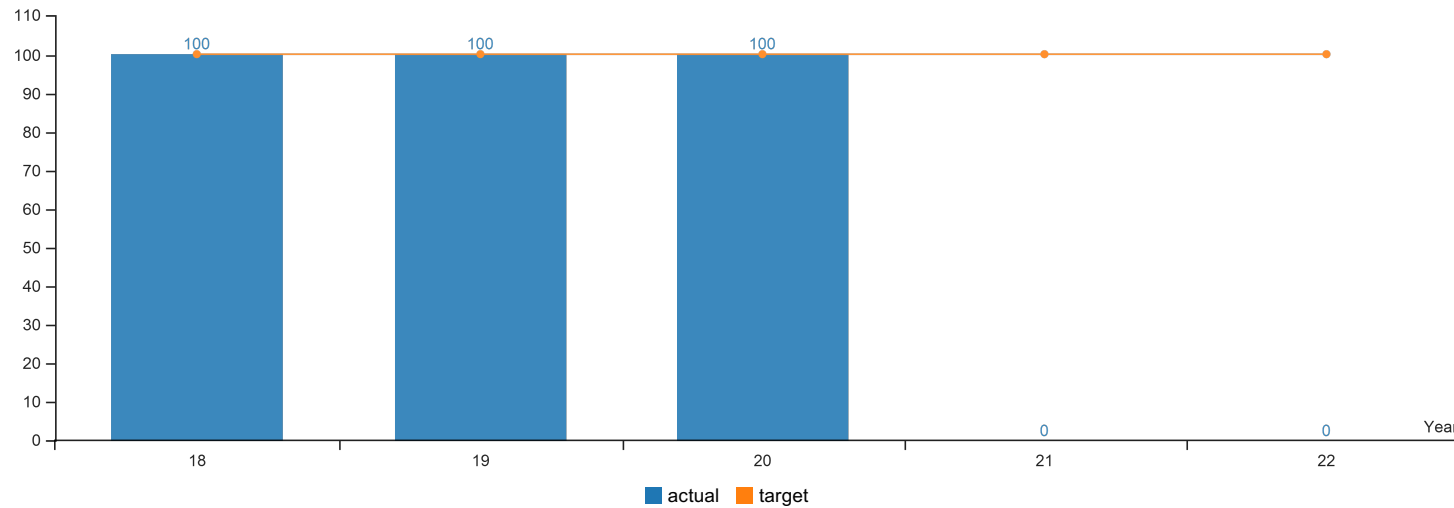
704 or 11% of the pharmacists who renewed their license in 2019 were audited. Of those, 675 or 95% completed their continuing education in the timeframe specified. This is a biennial renewal in odd numbered years.

Factors Affecting Results

The results for this audit are similar to the previous audit and within the target goal. This measure is the responsibility of individual pharmacist to complete their continuing education within the specified timeframe identified by rule. The audit was finished in early 2020.

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

* Upward Trend = positive result



Report Year	2018	2019	2020	2021	2022
Percent of pharmacies inspected annually					
Actual	100%	100%	100%	No Data	No Data
Target	100%	100%	100%	100%	100%

How Are We Doing

For the reporting period February 1, 2019 - January 31, 2020, Board Inspectors completed 854 inspections of Retail and Institutional pharmacy outlets licensed and located in Oregon. In 2018, staff began inspecting additional outlets and the 2019-2020 inspection period included Community Health Centers, Consulting/Drugless Pharmacies, Manufacturers, Medical Device, Equipment and Gas Drug Outlets, Dispensing Practitioner Drug Outlets, Remote Dispensing Facilities, Supervising Physician Drug Outlets & Wholesalers. This accounted for an additional 215 inspections and this reflects an increase of 129 inspections from the previous reporting year.

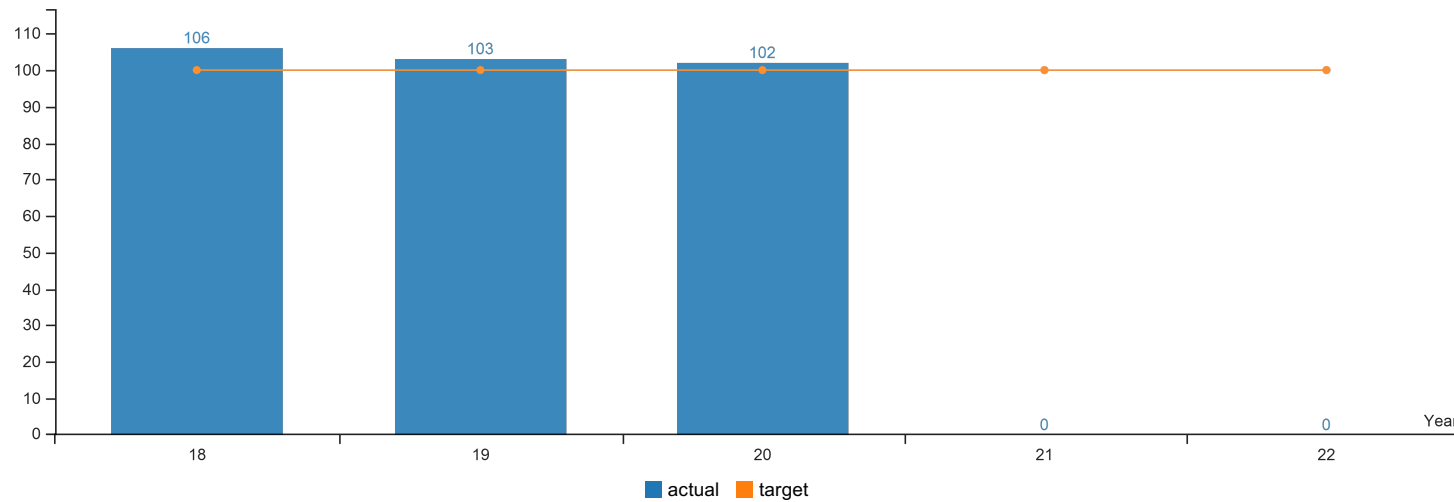
The 2020-2021 inspection cycle will include all Oregon Retail and Institutional pharmacy outlets as well as Consulting/Drugless pharmacies, Animal Euthanasia outlets, Correctional Facilities and Drug Distribution Agents.

Factors Affecting Results

With a fully developed Compliance team, we were able to achieve and complete 100% of the required inspections as well as 8 additional registration types.

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	2018	2019	2020	2021	2022
Number of days to process complete investigation from complaint to Board presentation.					
Actual	106	103	102	No Data	No Data
Target	100	100	100	100	100

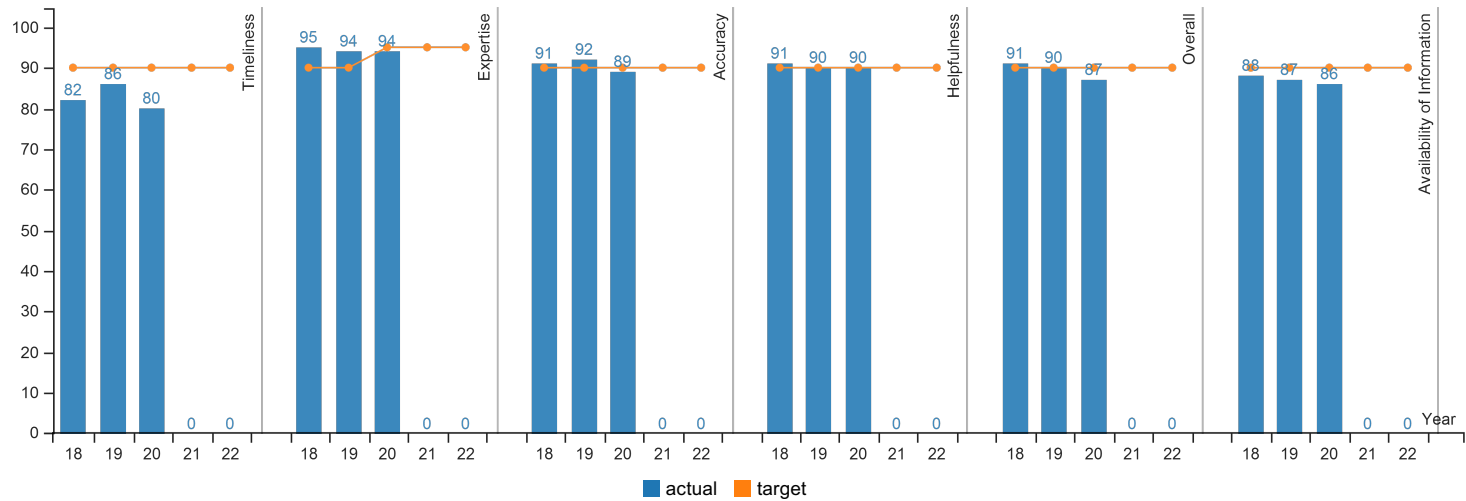
How Are We Doing

The total number of investigations/inspections that resulted in cases from January 1, 2019 - December 31, 2019 was 776 which is a decrease of 26 from 2018. This number is inclusive of all cases, which include those initiated from inspection results, licensee application cases, drug diversion and theft cases, impairment cases, fraud / misrepresentation cases and all consumer complaints. Cases are triaged to ensure that the public's safety is maintained which may cause delays in processing of other types of cases. On average, cases are reported and presented to the Board within 102 days. This is a decrease of 7 days from 2018.

Factors Affecting Results

Full staffing, continuous process improvement, and case triage are all contributors to ensuring patient safety through timely Board review / action.

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	2018	2019	2020	2021	2022
Timeliness					
Actual	82%	86%	80%	No Data	No Data
Target	90%	90%	90%	90%	90%
Expertise					
Actual	95%	94%	94%	No Data	No Data
Target	90%	90%	95%	95%	95%
Accuracy					
Actual	91%	92%	89%	No Data	No Data
Target	90%	90%	90%	90%	90%
Helpfulness					
Actual	91%	90%	90%	No Data	No Data
Target	90%	90%	90%	90%	90%
Overall					
Actual	91%	90%	87%	No Data	No Data
Target	90%	90%	90%	90%	90%
Availability of Information					
Actual	88%	87%	86%	No Data	No Data
Target	90%	90%	90%	90%	90%

How Are We Doing

Our overall average of 87.7% is a decrease of .55% from 2018. The Board continues to see licensee growth which increases application processing times.

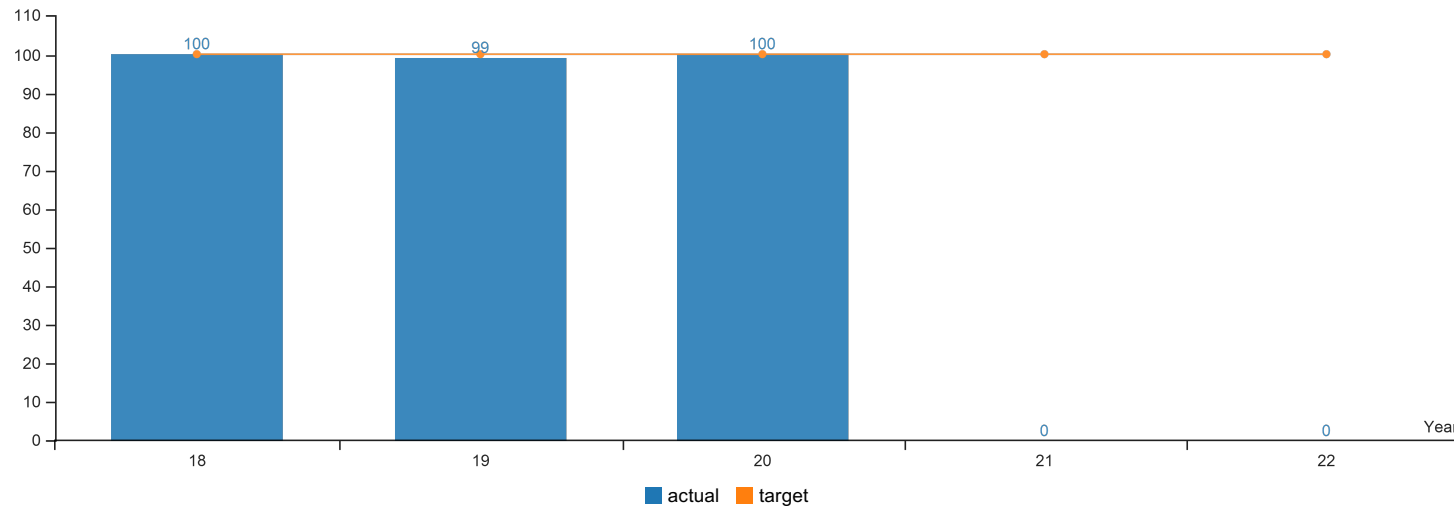
Factors Affecting Results

We had several factors that impacted the decreases noted in the results:

- A long-term licensing staff member left the agency to pursue employment outside of state service and an additional FTE was added effective 7/1/2019. Two new staff were hired and started with the Board in the fall. With over 30 different license types, there is a significant learning curve to understand all the nuances and regulations surrounding licensure/registration with the Oregon Board of Pharmacy.
- For several months, national fingerprint based background check results were taking an average of 20 - 30 days to be received. This caused significant dissatisfaction with applicants, but was out of the Board's control.
- In October of 2019, the Board implemented an upgrade to the licensing and compliance database. Included in the implementation was a new licensee interface. The setup, training and implementation of these new systems caused a slow-down in the processing of applications due to staff resources required to for user acceptance testing, training on the new systems and the assistance provided to licensees with the new online processes.

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	2018	2019	2020	2021	2022
Is the Board following Best Practices?					
Actual	100%	99%	100%	No Data	No Data
Target	100%	100%	100%	100%	100%

How Are We Doing

The Board regularly works to follow best practices.

Factors Affecting Results

This year, eight out of nine members participated in providing feedback to this measure. Of those, three out of nine members were new since February 2020, one of those since July. The opportunity to regularly orient the Board to best practices and answer questions is very useful.