2023 College Performance Scorecard

No.	SP1	SP2	SP3	2022 Actual	BOARD MONITORED Key Performance Indicators and Milestones (M)	YTD Q1	YTD Q2	YTD Q3	YTD Q4	2023 Target
		Strategic Alignment					2023 YTD (year-to-date)			
					Domain 1: Governance					
1			✓	95%	**Percentage of Board Directors voluntarily contributing at each Board meeting**	94%	94%	96%	97%	≥95%
2			✓	87%	**Percentage of Board Directors completing evaluation surveys**	95%	97%	98%	98%	100%
					Domain 2: Resources					
3			✓	-6.0%	**Variance of year-end actuals to annual operating budget**	Annual Report January 2024			-2%	+/- 5%
4			✓	78%	**Percentage of employee engagement (Inclusion survey subset)**	Scheduled for June 2023	88%			≥78%
5			✓	62%	**Percentage of employee engagement (Culture survey subset)**	Scheduled for June 2023	78%			≥70.5%
6			✓	n/a	*Acquisition and initial implementation of the new Pharmacy, Registrant & Information Management Environment system (PRIME) on time in keeping with benchmarks(M)*					12/31/23
					Domain 3: System Partner					
7	✓	✓		n/a	*Develop and implement a stakeholder engagement strategy on the expansion of scope of practice (M)*			Aug-23		12/31/23
					Domain 4: Information Management					
8			✓	n/a	*SharePoint Online implementation for Corporate Service & Quality Division on time in keeping with benchmarks (M)*					12/31/23
					Domain 5: Regulatory Policies					
9	✓		✓	82%	**Percentage of community pharmacists passing quality assurance (QA) re-assessment**	100% (18/18)	94% (29/31)	85% (46/54)	86% (59/69)	≥82%
10	✓		✓	25%	**Prioritized practice documents (policies/guidelines/guidance) updated within target timeline**	0% (0/6)	0% (0/6)	0% (0/6)	0% (0/6)	≥50%
11	✓	✓	✓	n/a	*Introduction of Equity, Diversity & Inclusion strategy (EDI) and initial implementation of action plan in keeping with benchmarks (M)*					12/31/23
					Domain 6: Suitability To Practice					
12		✓	✓	27%	**Percentage of high and moderate risk complaints disposed of within 150 days**	9% (4/44)	22% (17/77)	38% (43/114)	38% (55/143)	≥30%
13		✓	✓	58%	**Percentage of high and moderate risk Registrar's inquiries disposed of within 365 days**	68% (13/19)	64% (20/31)	61% (24/39)	60% (39/65)	≥50%
14		✓		96%	**Percentage of HPARB complaint decisions confirmed**	100% (4/4)	100% (6/6)	91% (10/11)	88% (15/17)	≥88%
15	✓			582	**Cycle time in average days from previous assessment to most recent assessment for community pharmacies in highest risk category**	496	501	488	441	≤365 days
16	✓	✓	✓	43%	**Percentage of community pharmacies entering events on AIMS platform**	23%	33%	39%	43%	≥80%
					Domain 7: Measurement, Reporting & Improvement					
17			✓	98%	**Percentage of Board Directors report receiving appropriate info. to exercise oversight role**	100%	100%	100%	99%	≥95%
18			✓	n/a	**Percentage of Board Directors indicating availability to sit on a Discipline Committee (DC) contested or uncontested hearing panel**	40%	41%	43%	45%	Collecting Baseline

LEGEND

Strategic Alignment	Indicator Range	Milestone Range	Symbols
SP1: Enhance system and patient outcomes through collaboration & optimization of current scope of practice	Meets or Exceeds target	On Track (proceeding per plan)	n/a Not Avail.
SP2: Strengthen trust and confidence in the College's role as a patients-first regulator	Approaching Target ≤ 25%	Potential Risk	(M) Milestone
SP3: Enhance capacity to address emerging opportunities & advance quality & safe pharmacy practice & regulatory excellence	Beyond Target > 25%	Risk/Roadblock	Completed