

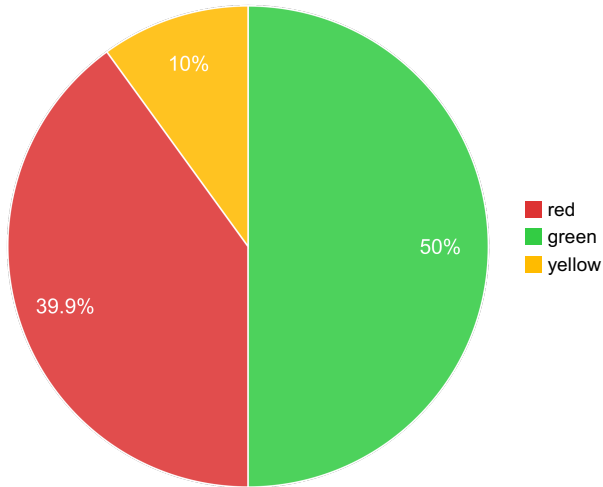
Board of Chiropractic Examiners

Annual Performance Progress Report

Reporting Year 2026

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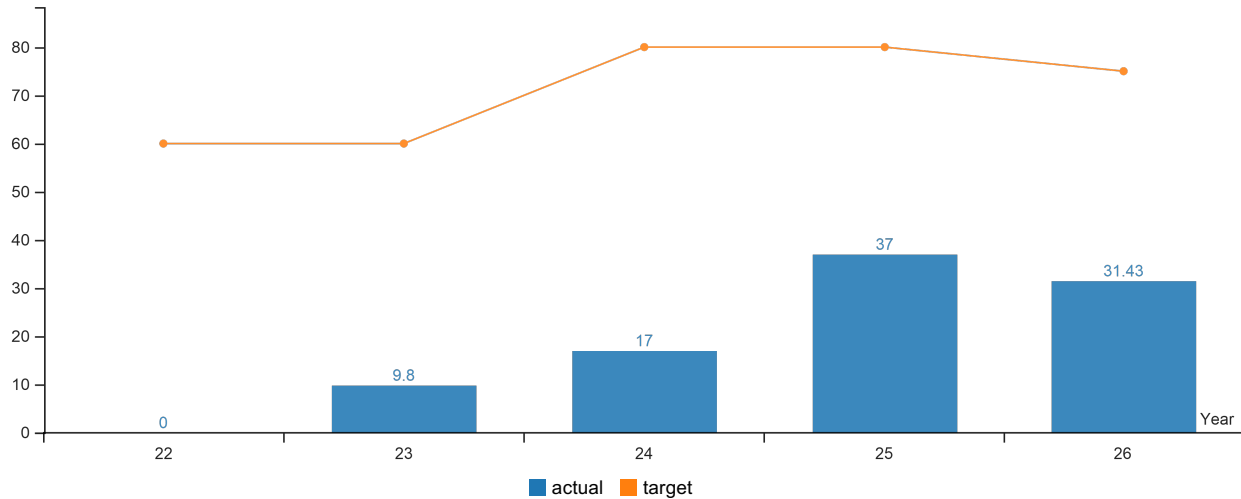
KPM #	Approved Key Performance Measures (KPMs)
1	Days between complaint receipt and investigation report finalized for Board (investigative process step one) - Percent of cases having investigative reports written within 150 days from when a complaint is received to when the investigation is prepared for Board review/action.
2	Days between investigation report finalized and presentation to the Board (investigative process step two) - Percent of cases, with a prepared investigation that is ready for Board review/action, that are presented to the Board within 60 days of completion.
3	Summary of investigative steps: Percentage of new complaints that are assessed, investigated, and presented to the board for an initial decision within 150 days. -
4	Days between Board review/initial action and case closure (investigative process step three). - Percent of cases closed within 90 days of Board review/initial action.
5	Summary of investigative steps: Average number of days to resolve a complaint. -
6	Percent of sexual misconduct/boundary complaints resolved in 180 days -
7	Percentage of chiropractic physicians meeting the annual continuing education requirements. -
8	Percentage of licenses issued within 5 days once all application components (that are the responsibility of the applicant) have been received. -
9	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.
10	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:	50%	10%	40%

KPM #1	Days between complaint receipt and investigation report finalized for Board (investigative process step one) - Percent of cases having investigative reports written within 150 days from when a complaint is received to when the investigation is prepared for Board review/action.
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Complaint receipt to investigation preparation to Board.					
Actual	0%	9.80%	17%	37%	31.43%
Target	60%	60%	80%	80%	75%

How Are We Doing

In our last reporting period (target of 150 days), 16 of the 43 complaints processed (37%) included investigators' reports that were completed at or below the 150-day target. The remaining 27 cases (63%) were completed in excess of the target timeframe. The average for cases over the target was 201.8 days/case, while cases at or below the target averaged 105.5 days/case.

For the current reporting period, **11 of the 35 complaints processed (31.43%)** included investigators' reports that were completed at or below the 150-day target. The remaining **24 cases (68.57%)** were completed in excess of the target timeframe.

The average number of days from complaint receipt to investigators' report for the 24 cases over the 150-day target was **256.46 days/case**. For the 11 cases at or below the target, the average was **96.55 days/case**, well below the 150-day standard.

Factors Affecting Results

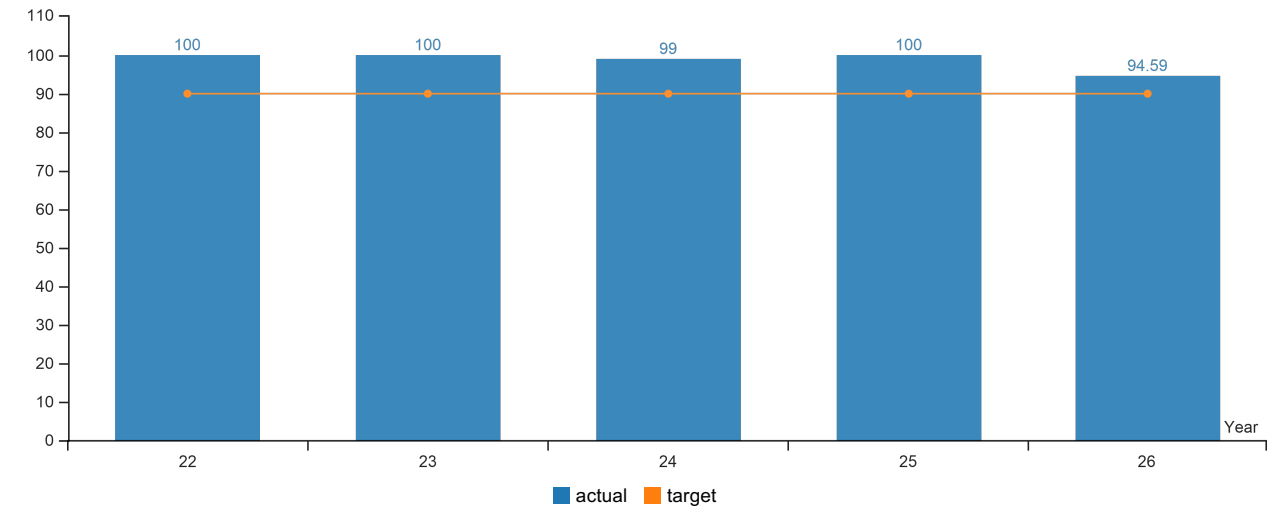
OBCE did not meet the target for the current reporting period. The percentage of cases meeting the 150-day target decreased from 37% in the previous reporting period to 31.43% in the current reporting period. While the average time for cases completed within the target improved from 105.5 days to 96.55 days, the average for cases exceeding the target increased from 201.8 days to 256.46 days.

Several older cases with significantly longer investigative timelines were completed during this reporting period and contributed to the decline in overall performance. The agency also continues to operate with reduced investigative staffing following prior budget-driven reductions, which continues to affect investigative capacity.

To help improve case processing times, OBCE increased the number of regular Board meetings from four per year to six per year. This provides more frequent opportunities for cases to move forward for Board review and action. The agency continues to monitor caseload distribution, refine workflow efficiencies, and prioritize cases to improve performance in upcoming reporting periods.

KPM #2	Days between investigation report finalized and presentation to the Board (investigative process step two) - Percent of cases, with a prepared investigation that is ready for Board review/action, that are presented to the Board within 60 days of completion.
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Days between investigation preparation and presentation to the Board.					
Actual	100%	100%	99%	100%	94.59%
Target	90%	90%	90%	90%	90%

How Are We Doing

The 2021 Legislative session changed this KPM, allowing 60 days instead of the original 30 days, for prepared investigations to be presented to the Board due to our agency board meetings occurring every other month. For planning and administrative efficiency purposes, it is better to have the investigation reports submitted as far ahead of the board meeting in which the case is being reviewed as possible.

For this reporting period, we exceeded our target with 94.59% of our cases (35/37) being presented within 60 days. The average number of days to presentation was 24.95, well below the 60-day threshold, demonstrating strong efficiency in case processing and timely preparation for Board action.

Factors Affecting Results

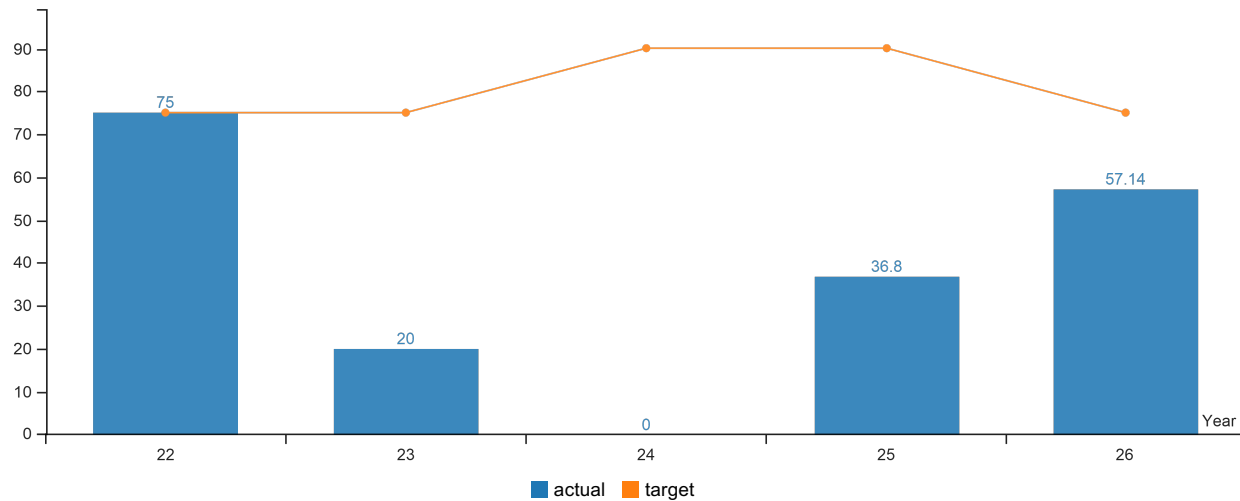
This reporting period included 37 cases, compared to 42 cases in the prior year. Even with the continued variability in case volume across reporting periods, the agency has consistently met and surpassed this KPM's target.

Two cases exceeded the 60-day target, with one presented in 61 days and one in 72 days. All remaining cases were presented within the target timeframe.

To help improve case processing times, OBCE increased the number of regular Board meetings from four per year to six per year, providing more frequent opportunities for cases to be presented for Board review and action. This change supports continued efforts to move cases through the review process as efficiently as possible.

KPM #3	Summary of investigative steps: Percentage of new complaints that are assessed, investigated, and presented to the board for an initial decision within 150 days. -
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Percentage of complaints/investigations presented to the Board within 120 days					
Actual	75%	20%	0%	36.80%	57.14%
Target	75%	75%	90%	90%	75%

How Are We Doing

For this reporting period, we did not meet the target for KPM 3. Of the 14 cases that were opened and closed during the reporting period, 8 of the 14 cases (57.14%) were completed and presented to the Board within 150 days, while 6 of the 14 cases (42.86%) exceeded the 150-day benchmark.

Although the target was not met, performance improved compared to the prior reporting period, when 7 of 19 cases (36.8%) were completed and presented to the Board within 150 days. The agency continues to make progress in moving cases through the full investigative cycle and into Board review.

Factors Affecting Results

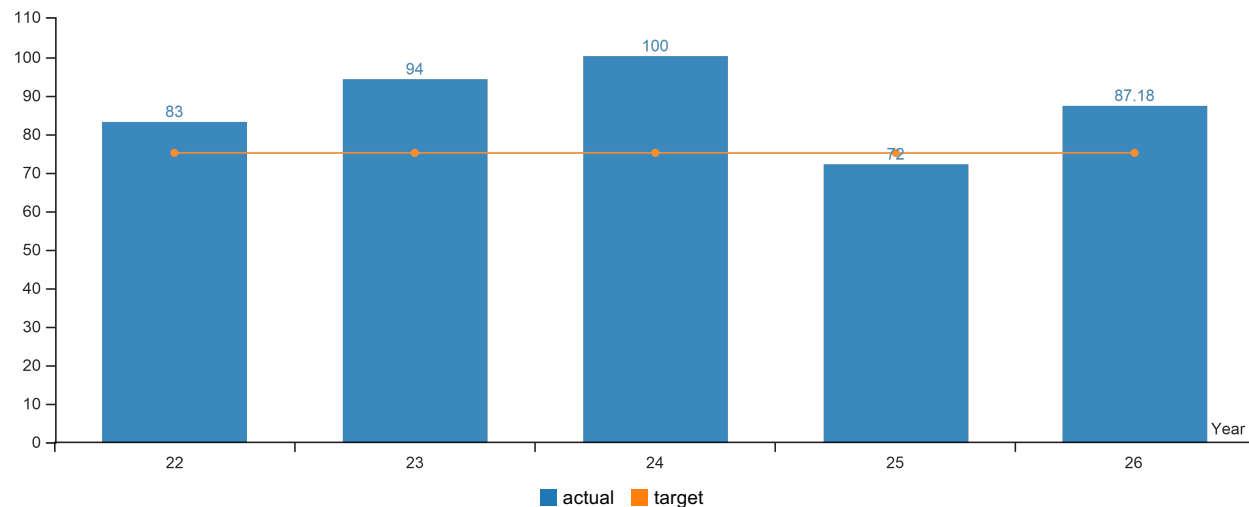
Our case backlog from prior years, caused in part by limited investigative staffing, continues to affect KPMs related to case timeliness. The agency also continues to operate with reduced investigative staffing following prior budget-driven reductions, which has limited our ability to move cases through the investigative process as quickly as desired.

Despite these challenges, the percentage of cases meeting the 150-day benchmark, increased from 36.8% in the prior reporting period, to 57.14% in the current reporting period. OBCE also increased the number of regular Board meetings from four per year to six per year, providing more frequent opportunities for cases to be presented for Board review and action.

As the backlog continues to diminish and cases move through the process more regularly, we anticipate continued improvement in meeting the 150-day benchmark in future reporting periods.

KPM #4	Days between Board review/initial action and case closure (investigative process step three). - Percent of cases closed within 90 days of Board review/initial action.
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Days between Board review/initial action and case closure.					
Actual	83%	94%	100%	72%	87.18%
Target	75%	75%	75%	75%	75%

How Are We Doing

For this reporting period, we met the target for KPM 4. Of the 39 cases reviewed by the Board and closed during the reporting period, 34 of the 39 cases (87.18%) were closed within 90 days of Board review and initial action, while 5 of the 39 cases (12.82%) exceeded the 90-day benchmark.

The average time to closure was 38.97 days, compared to 66.6 days in the prior reporting period, demonstrating continued improvement in resolving cases efficiently after Board action. Last year, 23 of 32 cases (72%) were closed within 90 days.

Factors Affecting Results

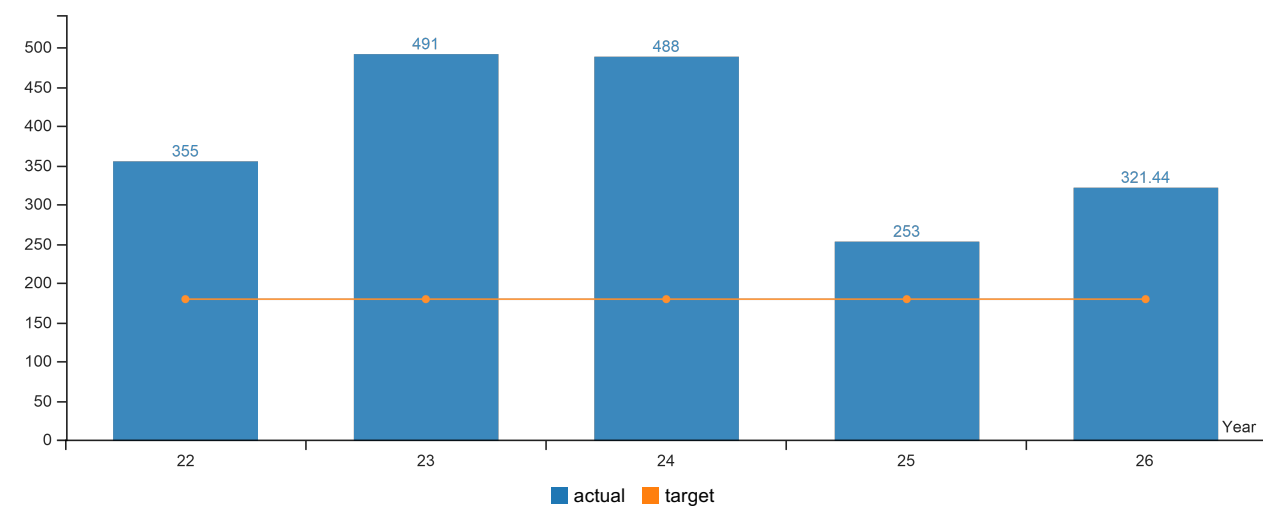
Performance improved during this reporting period, with the percentage of cases closed within 90 days increasing from 72% to 87.18%. The average time to closure also decreased from 66.6 days to 38.97 days.

While a small number of cases exceeded the 90-day window due to case complexity and staff workload, the majority were resolved well within the required timeframe. Once staff receives the Board's determinations on cases, we continue to work diligently to implement outcomes as efficiently and effectively as possible.

OBCE also increased the number of regular Board meetings from four per year to six per year, providing more frequent opportunities for case review and action and supporting continued improvement in overall case-processing timelines.

KPM #5	Summary of investigative steps: Average number of days to resolve a complaint. -
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = negative result



Report Year	2022	2023	2024	2025	2026
Average number of days to resolve a complaint.					
Actual	355	491	488	253	321.44
Target	180	180	180	180	180

How Are We Doing

The average number of days to resolve a complaint for our previous reporting period (2025) was **253**. A total of **36 cases** were closed during that reporting period, with **28 closing over beyond the 180-day target**. Of these 28 cases, 27 Oregon licensed DCs were involved, amounting to only 1.61% of the total 1,675 licensed DCs as of 9/1/2025. The 28 cases were open for an average of 253 days.

For our current reporting period, the target was not met. The average number of days to resolve a complaint was **321.44 days**. A total of **50 cases** were closed during this reporting period, with 11 of the 50 cases (22.00%) closing within the 180-day target and 39 cases (78.00%) closing over the 180-day target. Of these 39 cases, 36 Oregon licensed DCs were involved, amounting to 2.15% of the total 1,672 actively licensed DCs as of 9/1/2026. 8 of these 39 cases resulted in license revocation or suspension.

Cases closed within the 180-day target averaged **133.64** days, while cases exceeding the target averaged **374.41** days. The percentage of cases meeting the target remained relatively consistent with the prior reporting period, decreasing slightly from 22.22% to 22.00%.

Factors Affecting Results

Our severe understaffing during 2020-2022 continues to influence KPMs related to investigations, as a backlog of cases carried forward into the current reporting period. This challenge was compounded by prior budget reductions, which resulted in the loss of an investigator as of July 2025, and continue to limit investigative capacity.

Several significantly older, long-running cases were brought to resolution during this reporting period. A small number of these cases had substantially longer resolution times than the majority of

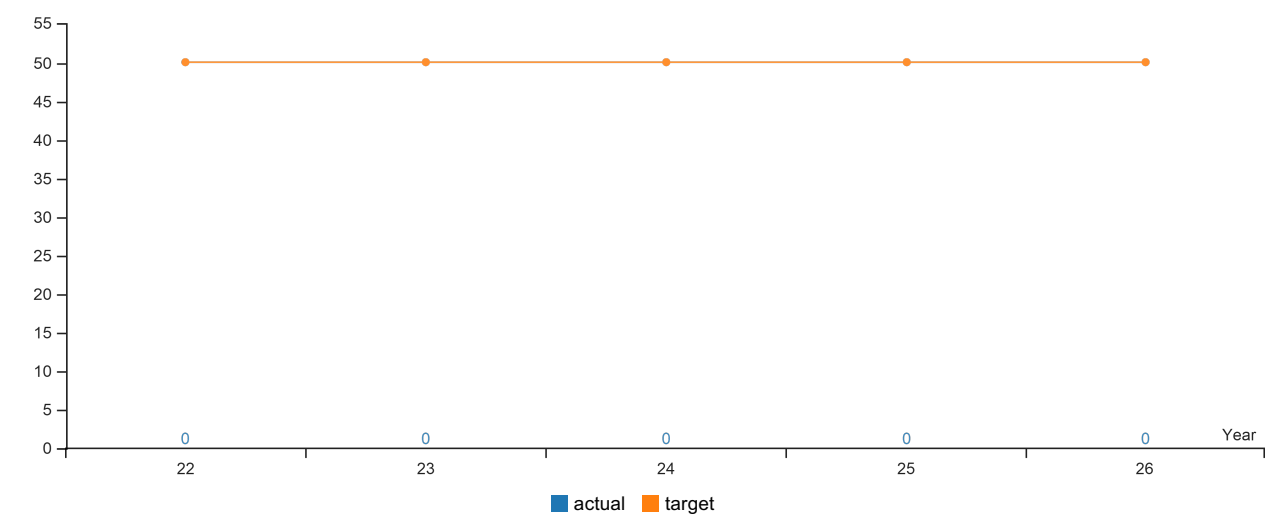
cases and increased the overall average number of days to closure. Because KPM 5 measures cases closed during the reporting period regardless of when they were originally opened, resolving these older cases can negatively affect the current-year average even as the agency continues to reduce its backlog.

Ongoing technical and workflow issues with the InLumon licensing system have also created inefficiencies in case tracking and processing. Other factors affect outcomes as well. Some cases are inherently more complex, involving multiple complainants, witnesses, or cross-jurisdictional issues that extend timelines.

OBCE increased the number of regular Board meetings from four per year to six per year, providing more frequent opportunities for cases to move forward for Board review and action. As the backlog continues to diminish and cases move through the process more regularly, we anticipate continued improvement in meeting this KPM target.

KPM #6	Percent of sexual misconduct/boundary complaints resolved in 180 days -
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Percent of sexual misconduct/boundary complaints resolved in 180 days					
Actual	0%	0%	0%	0%	0%
Target	50%	50%	50%	50%	50%

How Are We Doing

We have not met the target for this reporting period. A total of 13 sexual misconduct/boundary cases were opened during the reporting period, of which 8 were closed. 5 remained open at the end of the reporting period.

The 8 cases that were closed during the reporting period averaged 447.88 days from receipt to closure, with closure times ranging from 190 to 725 days. None of the 8 closed cases were resolved within the 180-day target.

This represents an increase in the average number of days to closure compared with the prior reporting period, when 8 closed cases averaged approximately 284 days.

Factors Affecting Results

Sexual misconduct and boundary-related cases are often among the most complex matters investigated by OBCE. These cases can involve multiple parties, extensive records, trauma-sensitive interviews, legal representation, and coordination with other jurisdictions or agencies, all of which can extend investigative and resolution timelines.

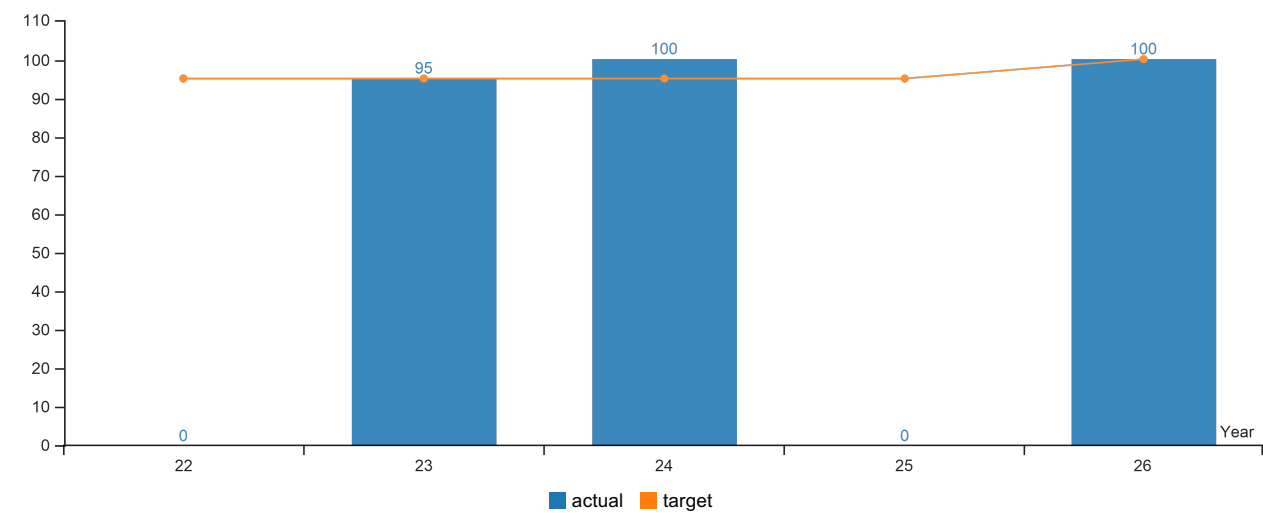
Several significantly older sexual misconduct cases were brought to resolution during this reporting period. These long-running cases, including cases with closure times of 725, 599, 549, and 481 days, substantially increased the overall average for this KPM.

Prior staffing reductions and the investigative backlog from earlier reporting periods also continue to affect case timelines. At the same time, resolving these older cases represents continued progress in reducing the backlog.

OBCE increased the number of regular Board meetings from four per year to six per year, providing more frequent opportunities for case review and action. As older cases continue to be resolved and newer cases move through the process more regularly, OBCE will continue working toward improved timeliness for this KPM.

KPM #7	Percentage of chiropractic physicians meeting the annual continuing education requirements. -
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Percentage of chiropractic physicians meeting the annual continuing education requirements.					
Actual	0%	95%	100%	0%	100%
Target	95%	95%	95%	95%	100%

How Are We Doing

We have met this target with 100% of DCs meeting the annual continuing education requirements, as based on our audit information.

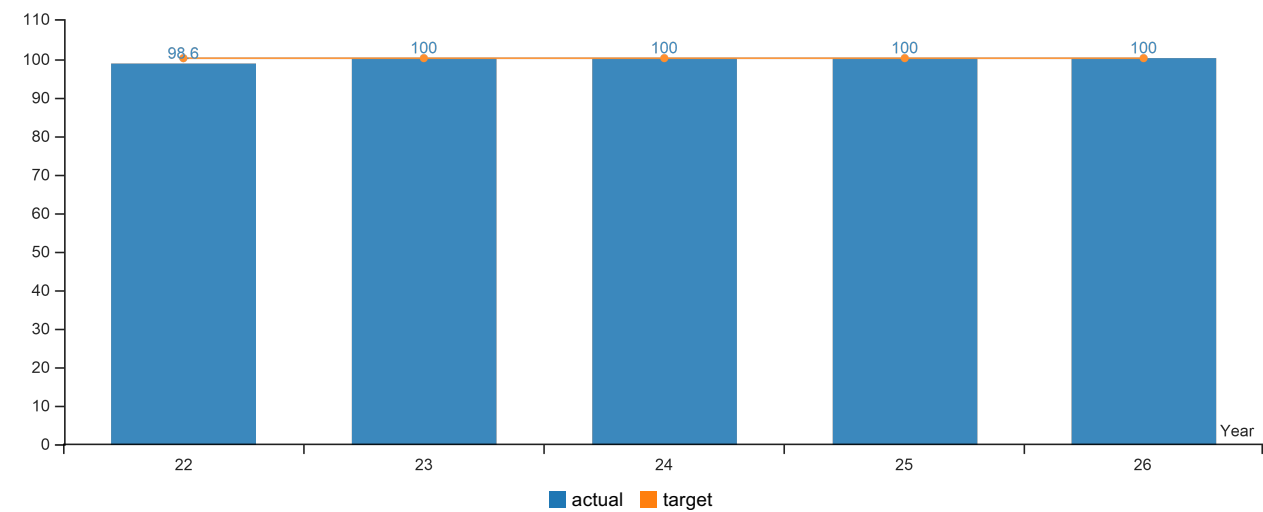
Continuing education audits were placed on temporary hold during the 2025 reporting period due to technical issues with the InLumon licensing database, which have since been resolved.

Factors Affecting Results

Licensees are able to upload proof of their continuing education directly into their electronic license file for ease in complying with our continuing education audits.

KPM #8	Percentage of licenses issued within 5 days once all application components (that are the responsibility of the applicant) have been received. -
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Time to process chiropractor applications					
Actual	98.60%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%

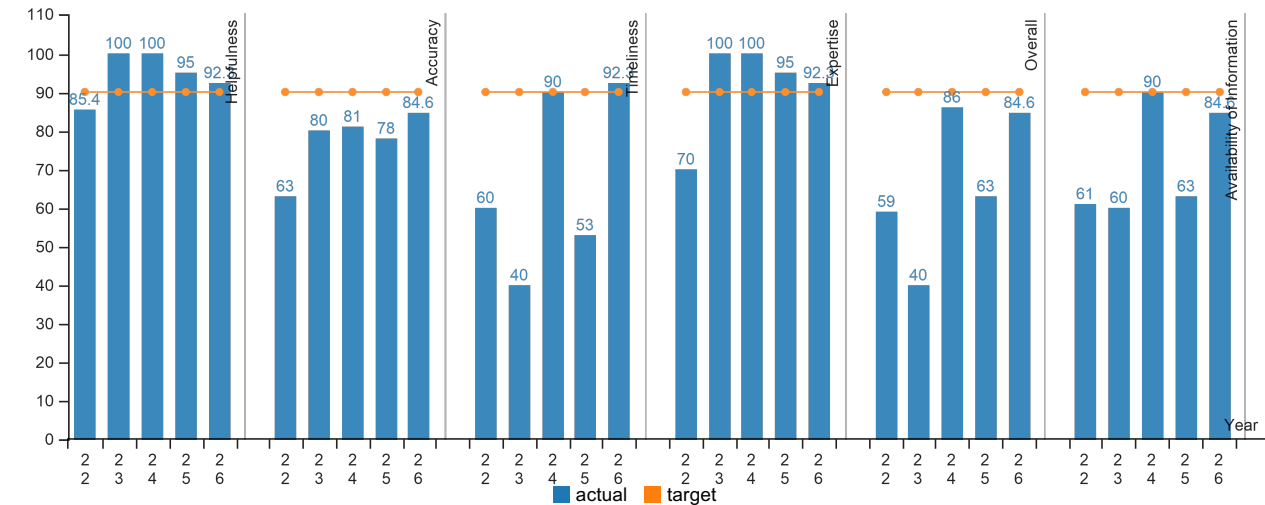
How Are We Doing

We met this target for this reporting period, with 100% of completed license applications issued within the target timeframe.

Factors Affecting Results

Once a full and complete license application is received, we are able to issue licenses the same day.

KPM #9	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: Sep 01 - Aug 31



Report Year	2022	2023	2024	2025	2026
Helpfulness					
Actual	85.40%	100%	100%	95%	92.30%
Target	90%	90%	90%	90%	90%
Accuracy					
Actual	63%	80%	81%	78%	84.60%
Target	90%	90%	90%	90%	90%
Timeliness					
Actual	60%	40%	90%	53%	92.30%
Target	90%	90%	90%	90%	90%
Expertise					
Actual	70%	100%	100%	95%	92.30%
Target	90%	90%	90%	90%	90%
Overall					
Actual	59%	40%	86%	63%	84.60%
Target	90%	90%	90%	90%	90%
Availability of Information					
Actual	61%	60%	90%	63%	84.60%
Target	90%	90%	90%	90%	90%

How Are We Doing

We met or exceeded our targets in 3 of the 6 measures within this customer satisfaction survey: Helpfulness, Timeliness, and Expertise. If the range included “fair” in addition to “good” and “excellent,” we would have met our targets in all 6 measures and reflects overall improvement over last reporting period.

Factors Affecting Results

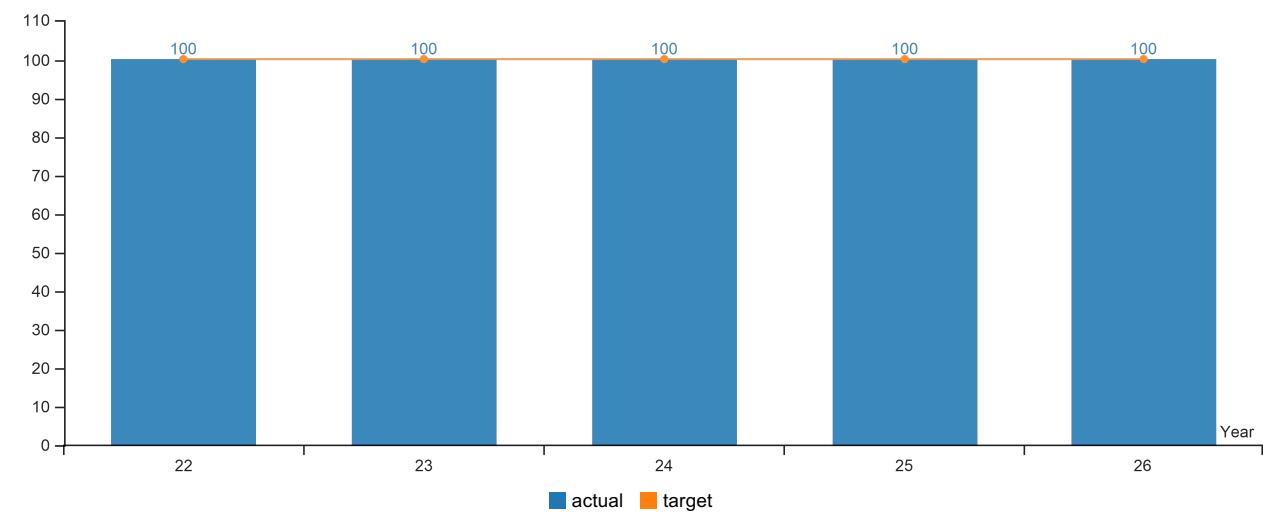
Several factors influenced these outcomes. The agency continues to experience technical and workflow challenges with the InLumon licensing database, which can create barriers that affect staff efficiency and the overall customer experience.

It is important to note, however, that 92.3% of respondents rated staff as courteous and professional, and 92.3% indicated that staff were able to answer their questions or refer them to someone who could. These results demonstrate our continued commitment to professionalism and responsiveness despite ongoing system limitations.

Written comments were generally positive and reflected satisfaction with staff assistance and responsiveness. A small number of comments identified areas for improvement, including easier access to information on the OBCE website and removal from the agency mailing list.

KPM #10	Board Best Practices - Percent of total best practices met by the Board.
	Data Collection Period: Sep 01 - Aug 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Board Best Practices - Percent of total best practices met by the Board.					
Actual	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%

How Are We Doing

All 7 Board members provided a response to the Board Best Practices KPM and assessed a 100% aggregate score, meeting our target for this reporting period.

Factors Affecting Results