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BIENNIAL REPORT OF EXAMINING AND LICENSING BOARDS

(MS 1978 SECTION 214.07) 78-1056

Board: (OP'	COMETRY, Board of.			150
		7 Delaware Street S. E.			
	Mi	nneapolis, MN 55440			
		ORITY: 148.52 148.		June 30,	1978
Submitted	ВУ:	Leo A. Meyer, O. D. Name	Executive Title	: Secretary	Sept. 8, 1978 Date
				(Ja) Bienni	al Report

(9) Supplement 8, 1978

Copies of this report shall be delivered to: (1) the Legislature in accordance with Section 3.195 (1 copy to the Secretary of the Senate, 1 copy to the Chief Clerk of the House of Representatives and 10 copies to the Legislative Reference Library); (2) the Governor; and (3) Commissioner of Administration. Each health-related board shall also deliver a copy of their report to the Board of Health.

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Clause a: GENERAL STATEMENT OF BOARD ACTIVITIES

This description should cover both FY 77 and FY 78 and include any changes (addition $\overline{\text{deletions}}$) in activities between those years.

The Board of Optometry serves the public need for quality vision care by enforcement of state statutes and rules and regulations relating to the optometric profession. To annually examine 35 applicants as to fitness and qualification; to monitor continuing education requirements; to reevaluate current rules and regulations and determine the need for changes or additional rules and regulation; to investigate the 14 to 20 written complaints received each year.

AD:	-	Title	TRY
UP	111	r.M	1 K I

Clause b: TOTAL NUMBER MEETINGS HELD FY 77 8 FY 78 7 FY 77 AND 78 15

APPROXIMATE TOTAL HUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

	MEETING	J	IIOURS		OTHER ACTIVITIES HOURS						
DOARD MEMBER'S NAME	ТҮРЕ	FY 77	FY 78	FY 77 & 78	TYPE	FY 77	FY 78	FY 77 & 78			
MR. Robert Moran	Regular	00	Resigne	4	!	Res	gned				
Public Member	Examination	00	 '		·						
Mrs Eileen Malonbeach	REGULAR		16	16	Miscellaneous		10	10			
Public Member	EXAMINATIONS		24	24							
Dr. John Davison	Regular	38	21	59	National	16	16	32			
Prof. Member	Examinations	24	24	48	Misc., Prepare & Grade	60	60	120			
Dr. John R. Kennedy	Regular	45	18	63	National	24	30	54			
Prof. Member	Examinations	24	24	48	Misc., Prepare & Grade	60	60	120			
Dr. J. Burke	Regular	38	21	59	National						
Prof. Member	Examinations	24	24	48	Misc., Prepare & Grade	60	60	120			
Dr. Cora Ruhr	Regular	45	21	66	National	16		16			
Prof. Member	Examinations	24	24	48	Misc., Prepare & Grade	60	60	120			
Dr. Wm. N. Deuberry	Regular	45	21	66	National		16	16			
Prof. Member	Examinations	24	24	48	Misc., Prepare & Grade	60	60	120			
Mrs Vi DeMars	Regular	45	21	66	National	16		16			
Public Member	Examinations	24	24	48	Miscellaneous	60	40	100			

Page 1 of 1 pages for Clause b

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Clause c: THE RECEIPTS AND DISBURSEMENTS OF BOARD FUNDS

Total State Appropriations

Total Non-Dedicated Fee Receipts

Total Disbursements

FY 77	FY 78	FY's 77 - 78
25395.	35046.	60441.
29501	36423.	65924.
23303.	30985	54288.

COMMENTS (Optional)

Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 77 AND FY 78

For easy reference please give:

- (A) Number of Board members required by statute: 7
- (B) The statutory length of term: 3 years with changeover to four

NAME	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE-APPOINTMENT						
Mrs Barbara Street	Housewife (Deceased 8-29-76) 12-73/12-75; 1-76/1-79.						
Dr. Cora B. Ruhr	Optometrist	1-73/1-76; 1-76/1-80.						
Dr. B. J. Davison	Optometrist	1-72/1-76; 1-75/1-78; 3-78/1-79.						
Dr. John R. Kennedy	Optometrist	1-72/1-75; 1-75/1-78; 3-78/1-82.						
Dr. J. Burke	Optometrist	1-71/1-74; 1-74/1-77; 5-77/1-81.						
Mr. Robert Moran	Union Executive	12-73/12-76.						
Mrs Vi DeMars	Housewife	11-76/1-79.						
Mrs Eileen MaloneBeac	Housewife	5-77/1-80.						
1								
	I .	!						

Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED

DURING FY 77 AND/OR FY 78

			,		
		CLASS		ST/	ATUS
MAME	JOB CLASSIFICATION/TITLE & CLASS	CODE	FT	PT	Dates o Service
Leo A. Meyer, O. D.	Executive Secretary	UNCL		х	11-69/Pres
·					

Clause f: Brief summary of Board Rules Proposed or Adopted During
THIS REPORTING PERIOD, FY 77 AND FY 78, GIVE APPROPRIATE
CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR
THOSE ADOPTED.

State Register, Monday July 11, 1977
Site 1 S. R. 44
BOARD OF OPTOMETRY
Establishment of General
Provisions, Definitions, and Fees,
and to the Amendment or Repeal
of Certain Existing Rules

State Register, Monday March 13, 1978

Site 2 S. R. 1669

BOARD OF OPTOMETRY

Adopted Rules for the

Establishment of General

Provisions, Definitions, and

Fees, and to the Amendment or

Repeal of Certain Existing Rules

State Register, Monday April 3, 1978

ERRATA

1. 2 S.R. 1670: At OPT 3 A., second sentence:

Change "may" to "shall".

Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1978 (IN THE YEAR OF THE REPORT

TYPE OF LICENSE/REGISTRATION	TOTAL NUMBER IN EFFECT
OPTOMETRIST	513

ADMINISTRATION OF EXAMINATIONS BY BOARD Clause h EXAMINATION: LOCATION TYPES OF LICENSE/REGISTRATION DATES July 21,22, 1977 **OPTOMETRY** Dept. of Health Bldg. July 20, 21, 1978 Page 1 of 1 pages for Clause h

BOYED

OPTOMETRY

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION OPTOMETRY

<u></u>				FY	77	7				1			i	Υ 7	В						FY	77	CINA	FY	78		
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Under										_	_			_									-				
18		ļ		-																	ļ						
18-25	9	1	10	7	1	8	2		2	6	1	7	5	1	6	i		1	15	2	17	12	2	14	3		3
26-34	7		7	6		6	1		1	7		7	6		6	1		1	14		14	12		12	2		2
35-59																											
60-65 66 &																											
Over				.												_											
Total	16		12	13	1_	_14	13		_3	13	1	14	ليا	_1	12	2		2	29	2	31	24	2	26	5		4

Note: Resident status determined by place of high school graduation.

Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION OPTOMETRY

F	Γ			F.	7	7			- 1					·Y 7	'st				-	 -	FY	77	ΔND	Vil	78		
AGE			T					NO.	_ 1							1	NO			EXAMINED LIC/REG					NO		
GROUP	EX/ M	MIN	VED T	LIC/ M	REC	GIS T	LIC	C/RE	GIS	EX M	AMII F	VED T	M	7/R1	GIS	LIC	:/RI	GIS TT	EX M	AMI		LIC M	/RE	GIS	M	C7101	EGIS T
Under 18		<u> </u>			<u>-</u> -			•													·						
18-25	9		9	9	_	9	_	-		5	3	8	5	2	7	_			14	3	17	14	2	16	_	-	-
26-34	10	_	10	9	_	9	1		_1	12	_	12	11		11	1	_	1	22		22	20	-	20	2	-	2
35-59																											
60-65 66 &																											
Over				-																							
Total	19	_	19	18	_	18	1	-	1	17	3	20	16	2	18	1	-	1	26	3	39	34	2	36	2	-	2
				Cal	c ula	ite	% of	Mal	e an	d %	of l	ema.	le to	th	е То	tal o	f E	ach (Cate	gory				i			
% of Total	100		100	100	_	100	/ou	-	100	85	15	100	89	//	100	100	-	100	67	33	100	94	6	100	100	-	100
State F	Y 8	-		P	LEA	SE I	LIST	THE	тот	AL	NUMI	BER (ION:	RESI	DEN	TS E	3Y ST	ATE	3				1l		.	
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ND			1	NV		_2_							MI		1	MS		1									
IA			2	MT		2			,				IN		1	WA	l	1									l
Page 1	of		<u> </u>	ages	s f	or	Clai	ıses	i,	j,	k (Non-	Res	ide	nts)									Pag	ge J	10

Clause 1:		RD OR	WHO I	IERE D	ENIED	LICE	NSING	OR	REG	WHO WERE LICE ISTRATION WITH		REASO	IS FOR	
TOTAL NUMBER	OF PERS	ONS N	or <u>no</u>	CING E	XAMS A	AND G	RANTE	D LIC	CENS	SES OR REGISTR	MOITA	FY 7	7 FY 78	FY 77-78
TOTAL NUMBER	OF PERS	ons <u>n</u>	OT TAR	CING E	XAMS .	AND D	ENIED	LICE	ense	S OR REGISTRA	TION	***************************************		
FOR EACH	PERSON	GIVE:						.		annah agang saysakhilikhilikh kanah yan 1800kilikhi says			 	
ype of lic./Regis.;	State of		,	AGE GR				SE	Y	* Method of Lic./Regis.			** Reason	ns for or Denial
	Res.	0-18		26-34		60-65	66-	M		, , , , , , , , , , , , , , , , , , ,	Grant	Deny	Chaming	or Demai
Not applica	ble. All	annli	ants m	ust tak	e some	form	of exa	ninati	on.					
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Page 1 of 1 pages for Clause 1

Page 1

^{*} IDENTIFY METHOD: e.g. Application, Reciprocity, Endorsements, Credential Evaluation, Comity, etc. ** REASONS FOR GRANTING OR DENIAL: Attach Additional Sheets if necessary.

Clause m:

PERSONS PREVIOUSLY LICENSED OR REGISTERED BY THE BOARD WHOSE LICENSES OR REGISTRATIONS WERE REVOKED, SUSPENDED OR OTHERWISE ALTERED IN STATUS WITH BRIEF STATEMENTS OF THE REASONS FOR THE REVOCATION, SUSPENSION OR ALTERATION.

TOTAL number of revocations

TOTAL number of suspensions

TOTAL number of other status changes

FY 77	Fy 78	Fy's 77-73
9	7	16
4	4	8
13	7	20

TYPE OF LICENSE OR REGISTRATION	1	TYPE OF US CHANGE		REASONS FOR EACH CHANGE IN STATUS FOR EACH CASE			
(By case)	Revoked	Suspended	Other (Specify)				
Optometry	16			Failure to submit renewal fee and subsequent to Hearing office report.			
"		8		Failure to comply with C. E. requirement & subsequent to Hearing Officer report.			
15			20	Deceased and request to drop license.			

Clause n: List the number of complaints and other communications received by the Executive Secretary, each Board member, employee or other person performing services for the Board

THAT ALLEGE OR IMPLY A VIOLATION OF A STATUTE OR RULE WHICH THE BOARD IS EMPOWERED TO ENFORCE.

WHICH ARE FORWARDED TO OTHER AGENCIES
AS REQUIRED BY M.S. 214.10.

Please indicate the number of complaints referred to each other governmental agencies in each fiscal year. (Federal, State, and Local).

Clause o:

SUMMARIZE BY CATEGORY THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CLAUSE (n) OF M.S. 214.07 AND THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 214.10 and 214.11 (INDICATE AUTEORITY/CITATIONS FOR DISPOSITION).

(Dispositions occurring during this period of complaints and communications received prior to July 1, 1976 and complaints and communications received but not disposed of as of June 30, 1978, should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY CATEGORY (Give number in each category)

SUMMARY OF RESPONSES AND DISPOSITIONS (Give number in each category)

- 13 Complaint received. Forms sent to complainant with no response.
- 8 Improper fitting proceedure.
- 5 Professional judgement.
- 4 Unclassified complaints.
- 3 Refund requests.
- 3 Contact lens complaints.
- 3 Questionable practices.
- 2 Materials not supplied.
- 2 Incomplete examinations.
- 2 Alcohol on breath.
- l Unprofessional conduct.
- 1 Transfer of records
- l Poor quality material
- 1 Sale of Used eyeglasses.

- 22 No violation.
- 6 Warnings.
- 4 No jurisdiction.
- 3 Stipulations.
- l Licensee complied.

Clause p:

STATE ANY OTHER OBJECTIVE INFORMATION WHICH THE BOARD MEMBERS BELIEVE WILL BE USEFUL IN REVIEWING BOARD ACTIVITIES:

(For Example: In what other states do your licensees hold licenses? Number of Minnesota licenses verified/certified to other states? Number of inspections? Comparisons with past Biennial Reports.)

As of the June 10, 1978 Central Licensing printout.

Alaska	1	Nebraska	2
Arizona	3	New Jersey	1
California	10	New Hampshire	1
Colorado	6	New York	4
Florida	3	Ohio	4
Georgia	1	Oregon	3
Hawii	1	Pennyslvania	1
Iowa	14	South Carolina	1
Illinois	4	South Dakota	9
Kansas	1	Tennessee	1
Michigan	5	Texas	3
Maryland	1	Utah	1
Massachusetts	1	Virginia	2
Montana	3	Washington	2
North Dakota	13	Wisconsin	26
		Wyoming	2
		Canada	1