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#### BIENNIAL REPORT OF EXAMINING AND LICENSING BOARDS

861722

	(M.S. 1985 Supplement, Section 214.07)
Board:	Minnesota Board of Podiatry
LOCATION:	2700 University Avenue West, #108
	St. Paul, MN 55114
STATUTORY	AUTHORITY: Minnesota Statutes, Chapter 153
Report Per	TO: July 1, 1984 To: June 30, 1986
	OM
SUBMITTED	BY: Joyce M. Schowalter, Executive Director October 15, 1986 Name Title Date

Copies of this report shall be delivered to: (A) 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); (B) the Governor; and (C) Commissioner of Administration. Each healthrelated board shall also deliver a copy of their report to the Board of Health.

#### Clause a: GENERAL STATEMENT OF BOARD ACTIVITIES

This description should cover both FY 85 and FY 86 and include any changes (additions/deletions) in activities between those years.

The authorized Board of Podiatry functions during FY 85 and 86 were:

- 1. Licensure by examination and reciprocity
- 2. License renewal

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- 3. Continuing education compliance
- 4. Processing disciplinary complaints
- 5. Registration of podiatry corporations

Podiatry BOARD

Clause b: TOTAL NUMBER MEETINGS HELD FY 85 \_\_4 FY 86 \_\_4 FY 85 AND 86 \_\_8\_\_\_

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

,	MEET ING			HOU	RS					OTHER ACTIVITIES			HOU	RS				_
BOARD MEMBER'S NAME	ТҮРЕ	FY	85	FY	86	FY	85	&	86	ТҮРЕ	FY	85	FY	8.6	FY	85	k	86
Ann Rotramel, DPM	Board		2		-			2		Discipline Conference	1	0	+-	-		<u>10</u>		_
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	Board		2		-			2					_				<del></del>	Adamiy an an antije of a sample classes
John McCarthy, public member							<u> </u>											
													-					-
Richard Lochner, DPM	Board		13		4			17										
								-							-			
·		<u> </u>					194 <u>0-</u>											
	Board	1	0		6			16	<u> </u>									
Jean P. Weitzel,						·												
public member						•							<u> </u>					
															•			

 Podiatry	BOARD

Clause b: TOTAL NUMBER MEETINGS HELD FY 85 \_\_\_\_ FY 86 \_\_\_ FY 85 AND 86 \_\_\_\_

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

	MEETING		HC	OURS				OTHER ACTIVITIES			HOU	rs			
BOARD MEMBER'S NAME	ТҮРЕ	FY 8	5 <b>F</b>	Y 86	F	Y 85	<b>&amp; 8</b> 6	Түре	FY	85	FY	P.6.	FY I	<u>85</u>	<b>&amp;</b> 86
	Board	13	-	5	-	· <u> </u>	18			5-0					
Alexander Worobel, DPM										••••••••••••••••••••••••••••••••••••••					
r Beleve Seller DDV	Board	11	<u> </u>	4			15					-			
Robert Sabbann, DPM															
C. Saatta Sharda DBM	Board	11	+	8			19	Discipline Conferences	-	-	2	20		20	
S. Scott Standa, DPM														,	
	Board	8		6		<u> </u>	14					+	ان المراجع التقالي	-	
Royal Bakke, public member	· · · · · · · · · · · · · · · · · · ·											_			
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Podiatry	BOARD

Clause b: TOTAL NUMBER MEETINGS HELD FY 85 4 FY 86 4 FY 85 AND 86 8

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

1	MEETING		HOURS		OTHER ACTIVITIES		HOURS	
BOARD MEMBER'S NAME	ТҮРЕ	FY 85	FY 86	FY 85 & 86	ТҮРЕ	FY 85	FY R	FY 85 & 8
	Board	8	7	15		<u></u>		ļ
Michael Stone, DPM			ļ					·
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Podiatry	•
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BOARD

# Clause c: THE RECEIPT AND DISBURSEMENT OF BOARD FUNDS

	FY 85	FY 86	FY'S 85 & 86
Total State Appropriations	6.0	5.7	11.7
Total Non-Dedicated Fee Receipts	7.7	9.1	16.8
Total Disbursements	8.1	6.9	15.0

COMMENTS (Optional)

#### Page <u>1</u> of <u>1</u> pages for Clause c

# Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 85 AND FY 86

FOR EASY REFERENCE PLEASE GIVE:

- (A) Number of Board members required by statute: 7 \_\_\_\_.
- (B) The statutory length of texm: 4 years

NAME & ADDRESS	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE- APPOINTMENT
John McCarthy		
Duluth	Retired	6/19/79-1/27/85
Ann Rotramel		
New Ulm	Podiatrist	5/22/81-1/27/85
S. Scott Standa		
Shakopee	Podiatrist	8/11/83-1/87
Michael Stone		
Moorhead	Podiatrist	8/11/83-1/87
Richard Lochner		
Minneapolis	Podiatrist	10/20/83-1/5/86;1/6/86-1/90
Jean Weitzel		
St. Cloud	Registered Nurse	10/20/83-1/5/86;1/6/86-1/90
Alexander Worobel		
St. Paul	Podiatrist	2/15/84-1/88
Royal Bakke		1 (00 (05 1 (00
<u>Mendota</u>	Retired	1/28/85-1/89
Robert Sabbann	Delistates	1/20/05 1/00
Rochester	Podiatrist	1/28/85-1/89

BOARD

# Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED DURING FY 85 AND/OR FY 86

			[	St	ATUS Dates of
\ME	JOB CLASSIFICATION/TITLE & CLASS	Class Code	FT	PT	Dates of Service
None					
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## Clause 1: BRIEF SUMMARY OF BOARD RULES PROPOSED OR ADOPTED DURING THIS REPORTING PERIOD, FY 85 AND FY 86. GIVE APPROPRIATE CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR THOSE ADOPTED.

None

## Page 1 of 1 pages for Clause f

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BOARD

#### Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1986 (IN THE YEAR OF THE REPORT)

TYPE OF LICENSE/REGISTRATION	TOTAL	NUMBER	IN	EFFECT
Podiatry	138			
Corporation	16			
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Page 1 of 1 pages for Clause g

BOARD

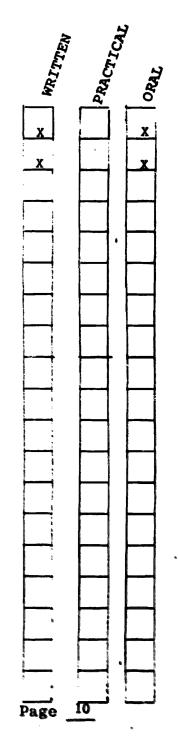
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## Clause h ADMINISTRATION OF EXAMINATIONS BY BOARD

#### EXAMINATION:

LOCATION	TYPES OF LICENSE/REGISTRATION	DATES
Minneapolis	Podiatrist	6/6/85
Minneapolis	Podiatrist	9/13/85
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Page 1 of 1 pages for Clause h

BOARD

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

List the number of Minnesota Residents <u>only</u> who were (1) examined and either (2) Licensed/Registered or (3) <u>Not</u> 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 Podiatrist

		FY 85								FY 86								FX 85 AND FY 86									
AGE GROUP	EX/	AMIN	NED	LIC	/RE(	GIS	LI	NO C/RE	DT EGIS	EX	AMI	NED	LIC	C/RE	EGIS	LIC	NO 7RE	T Egis	EX	AMI						NO' C/RE	GIS
	Μ	F	T	М	F	T	M	F	T	M	F	T	М	F	T	М	F	T	Μ	F	T	М	F	T	Μ	F	T
Under 18																											
18-25	1		1	1		1													1		1	1		1			
26-34	2		2	2		2				2		2	2		2				4		4	4		4			
35-59	1		1	]					1	1*		1	1		1				2*		2	1		1	1		1
60-65								$\square'$																			
66 & O <u>ver</u>								L_'																			
Total	4		4	3		3	1		1	3*		3	3		3				, 7*		7	6		6	1		1
	Calculate % of Male and % of Female to the Total of Each Category																										
% of Total	100		100	100		100	100		100	100		100	100		100			100	100		100	100		100	100		100

\* Includes one repeater

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Page 1 of 1 pages for Clauses i, j, k (Minnesota Residents)

BOARD

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. Podiatrist

TYPE OF LICENSE/REGISTRATION

		FY 85								FY 86							FY. 85 AND FY 86										
AGE GROUP	EX	AMIN	NED	LIC/	'RE(	GIS		NO C/RE		EX	AMI	NED		C/RI	EGIS		NO C/RE		EX		INED	LIC	:/RE	GIS		NO C7RE	
	M	F		M	F	T	M	F	T	M	F	T	M	F	T	М	F	T	М	F		М	F	T	M	F	T
Under 18																											
18-25													 														
26-34	3	1	4	2		_2	1	1	2	3*	2*	5	3	2	5	<b></b>			6*	31	9	5	2	7			
35-59										1		1	1_1		_1				1		1	1		1			
60-65																											
66 & O <u>ver</u>																											
Total	3	1	4	2		2		1	2	4*	2*	6	4	2	6				7*	31	10	6	2	8			
				Cal	c ula	ite	% of	Ma	ie an	d %	of	Fema	le to	o th	e Toi	tal c	of E	ach (	Cate	gory	*]	Incl	udes	one	re	peate	er
% of Total	75	25	100	100		100	50	50	100	70	30	100	70	30	100			100	70	30	100	75	25	100			100
State				PI	LEA	SE I	LIST	THE	тот	ALN	IUM	BER	OF N	ION	RESI	DEN	TSE	<u>37 S1</u>	ATI		·	_		<b>k</b>			
CA											1	1		1	1					1	1		1	1			:
DE	Ì									1		1	1		1				1		1	1		1			
IL	2		2	1		1	1		1	1	r	1	1		1				3	*	3	2		2	1		1
NJ										1		1	1		1												
Page 1	of	2	pa	iges	fc	or (	Clau	ses	i,	j,	k (1	lon-	Res	ide	nts)		<b></b>			,				<b>B</b>	Pag	e 12	

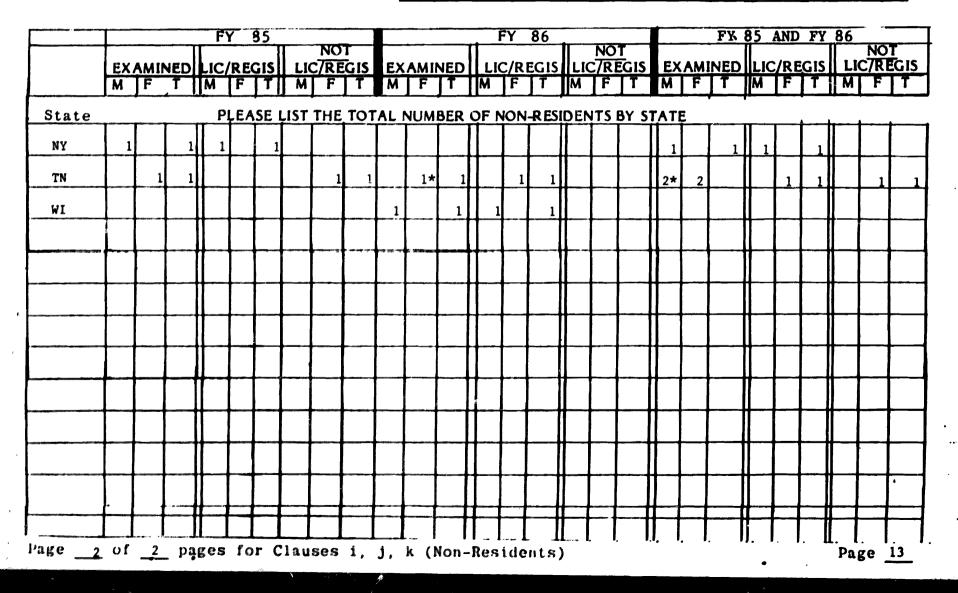
BOARD

CONTINUATION SHEET:

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

List the number of Non-Minnasota 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. Podiatrist

TYPE OF LICENSE/REGISTRATION



Pod	lia	try
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BOARD

Clause 1: <u>HE NUMBER OF PERSONS NOT TAKING EXAMINATIONS WHO WERE LICENSED OR REGISTERED BY</u> <u>THE BOARD OR WHO WERE DENIED LICENSING OR REGISTRATION WITH THE REASONS FOR</u> <u>THE LICENSING OR REGISTRATION OR DENIAL THEREOF</u>, FY 85 FY 86 FY 85 & 8

 TOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND GRANTED LICENSES OR REGISTRATION
 5
 6
 11

 TOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND DENIED LICENSES OR REGISTRATION

FOR EACH PERSON GIVE:

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ype of lic./Regis.;	State							SE	<b>~</b>	* Method of Lic./Regis.			** Reasons for	
	of <u>Res.</u>	AGE GROUP 0-18   18-25   26-34   35-59   6			60-69	60-69 66-		F		Grant	Deny	Granting or Denial		
Podiatrist	CA			1				1		Reciprocity	x		Met requirements	
Podiatrist	FL			1				1		Reciprocity	x		Met requirements	
Podiatrist	IA				1				1	Reciprocity	x		Met requirements.	
Podiatrist	IL			2				2		Reciprocity	x		Met_requirements	
Podiatrist	OR			1				1		Reciprocity	x		Met requirements	
Podiatrist	PA			1	1			2		Reciprocity	x		Met requirements	
Podiatrist	TX			1	1			2		Reciprocity	x		Met requirements	
Podiatrist	VT			1				1		Reciprocity	x		Met requirements	
										n — marana an			an a	

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

Page 1 of 1 pages for Clause 1

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 suspen	sions
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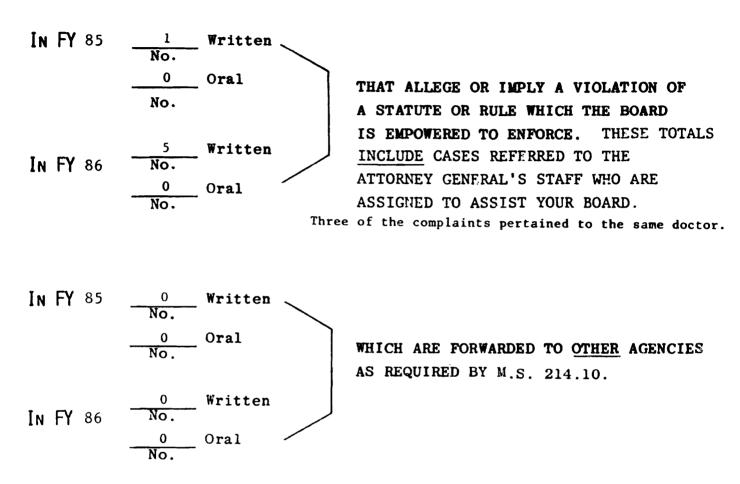
FY 85	FY 86	FY's 85&86
0	0	0
0		0
0	1	1

TOTAL number of other status changes

TYPE OF LICENSE OR REGISTRATION	STAT	TYPE OF TUS CHANGE		REASONS FOR EACH CHANGE IN STATUS FOR EACH CASE					
(By case)	Revoked	Suspended	Other (Specify)	]					
DPM			Restricted Conditioned	Unprofessional conduct					

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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



Please indicate the number of complaints referred to <u>each</u> other governmental agency (Federal, State, and Local) in each fiscal year:

Page  $\underline{\cdot 1}$  of  $\underline{1}$  pages for Clause n

Clause o:

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

(Dispositions occuring during this period of complaints and communications received prior to July 1, 1984, and complaints and communications received but not disposed of as of June 30, 1986 should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY SPECIFIC CATEGORY	SUMMARY OF RESPONSES AND DISPOSITIONS FOR EACH SPECIFIC CATEGORY
(Give number in each specific category)	(Give number in each specific category)
Unprofessional conduct (3) (same podiatrist)	Restricted and Conditional (1)
Improper advertising (2)	Dismissed with warning (2)
Improper practice (1)	Dismissed for insufficient evidence (1)

Page 1 of 1 pages for Clause o

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?)

For health-related boards: (except Veterinary Medicine)

1) What progress has the board made so far in establishing procedures to exchange information with other Minnesota state boards, agencies, and departments responsible for licensing health related occupations, facilities, and programs, and for coordinating investigations involving matters within the jurisdiction of more than one licensing body? and,

2) What progress has the board made so far in establishing procedures for exchanging information with other states regarding disciplinary action against licensees? (see M.S. 1985 Supplement, Section 214.10, Subd. 8(d)(e).

In January, 1986, when the health licensing boards moved out of the Department of Health building, the Board of Podiatry began receiving services from the Board of Nursing.

The Board of Podiatry has established procedures for exchange of information with other state agencies when appropriate and will recommend coordinated investigations whenever more than one licensing body is involved.

The Board has established procedures for exchanging information with other states via the Federation of Podiatric Medical Boards regarding disciplinary action against Podiatrists.

**Page** 1 of 1 pages for Clause p

Item q: For all health related boards except the Board of Veterinary Medicine, per M.S. 1985 Supplement, Section 214.10, Subd. 8(b): Provide a summary of each individual case (complaint or other communication) that involved possible sexual contact of a licensee with a patient or client.

Each summary must include:

- 1) a description of the alleged misconduct;
- 2) the general results of the investigation;
- 3) the nature of board activities relating to that case;
- 4) the disposition of the case;

and

5) the reasons for board decisions concerning the disposition of the case.

The information disclosed must <u>not</u> include the name or specific identifying information about any person, agency, or organization. Include cases received prior to July 1, 1984, but disposed of in FY '85 and FY '86, as well as cases received prior to June 30, 1986, but not yet disposed of.

None