

BIENNIAL REPORT OF EXAMINING AND LICENSING BOARDS

(M.S.

Section 214.07)

900540

BOARD: OPTOMETRY

LOCATION: 2700 University Avenue West, St. Paul, MN 55114

STATUTORY AUTHORITY: 148.52 - 148.62

REPORT PERIOD: July 1, 19 88 To: June 30, 1990

SUBMITTED BY:	<u>Laurel Mickelson</u>	<u>Interim Director</u>	<u>Sept. 21,</u>	1990
	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;- Each health-related 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 89 and FY 90 and include any changes (additions/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. The Board annually examines 50 to 60 applicants as to fitness and qualifications; monitors continuing education requirements; re-evaluates and determines the need for changes or additional rules and regulations; investigates 5 to 10 complaints received each year.

Clause b: TOTAL NUMBER MEETINGS HELD FY 89 7 FY 90 6 FY 89 AND 90 13

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

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 89	FY 90	FY 89 & 90	TYPE	FY 89	FY 90	FY 89 & 90
Lee A. Nelson, O.D. Duluth Professional Member	regular	21	18	39	national	48		48
	examinations	20	20	40				
	conference		1	1				
Patricia Kluis Chandler Public Member	regular	9		9				
	examinations	20		20				
Mary K. Laconic, O.D. Minneapolis Professional Member	regular	18	18	36	national		48	48
	examinations	20	20	40				
	conference		1	1				
Dean Stensrud Coon Rapids Professional Member	regular	18	18	36				
	examinations	20	20	40				
	conference		1	1				

Clause b: TOTAL NUMBER MEETINGS HELD FY 89 7 FY 90 6 FY89 AND⁹⁰ 13

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

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 89	FY 90	FY 89 & 90	TYPE	FY 89	FY 90	FY 89 & 90
Joseph Powell Waseca Public Member	regular	21	18	39				
	examinations	20	20	40				
	conference	1		1				
Alan Paymar, O.D. Eagan Professional Member	regular	21	18	39	national	48		48
	examinations	20	20	40				
	conference		1	1				
	legislative	3		3				
James J. Hess, O.D. Robbinsdale Professional Member	regular	18	15	33	national		48	48
	examinations	20	20	40				
	conference		1	1				
	legislative	3	2	5				
Mary Jane Hendel Caledonia Public Member	regular	3		3				

Clause c: THE RECEIPT AND DISBURSEMENT OF BOARD FUNDS

	FY 89	FY 90	FY's 89 & 90
Total State Appropriations	61,727	74,629	136,356
Total Non-Dedicated Fee Receipts	57,989	76,534	134,523
Total Disbursements	54,811	68,995	123,806

COMMENTS (Optional)

In accordance with 214.06 the total fees collected will as closely as possible equal anticipated expenditures during the fiscal biennium. General tax revenue is not used for operation of the Board of Optometry.

Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 89 AND FY 90

FOR EASY REFERENCE PLEASE GIVE:

(A) Number of Board members required by statute: 7.(B) The statutory length of term: 4 years.

NAME & ADDRESS	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE- APPOINTMENT	
Jean Lemberg Shoreview		1-30-90	1-93
Alan Paymar Eagan	Optometrist	1-86 1-90	1-90 1-94
Dean Stensrud Coon Rapids	Optometrist	1-85 2-89	1-89 1-93
Joseph Powell Waseca	Retired	1-85 2-89	1-89 1-93
Mary Jane Hendel Caledonia	Housewife	2-89	1-93 resigned 11-89
Mary K. Laconic Minneapolis	Optometrist	1-84 1-88	1-88 1-92
Lee A. Nelson Duluth	Optometrist	1-84 1-87	1-87 1-91
James J. Hess	Optometrist	1-87	1-91
Patricia Kluis Chandler	Nurse	10-83 12-85	1-85 1-89

Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED
DURING FY 89 AND/OR FY90

[illegible]

Clause f: BRIEF SUMMARY OF BOARD RULES PROPOSED OR ADOPTED DURING THIS REPORTING PERIOD, FY 89 AND FY90 . GIVE APPROPRIATE CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR THOSE ADOPTED.

In FY 89 the Minnesota Board of Optometry adopted rules amending the license renewal fee and late penalty fee.

Published State Register of February 13, 1989 at 13SR 1989. The rule cited as 6500.2000.

Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE
AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1990
(IN THE YEAR OF THE REPORT)

[illegible]

ADMINISTRATION OF EXAMINATIONS BY BOARD

EXAMINATION:

[illegible][illegible]

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 License

AGE GROUP	FY 89									FY 90									FY 89 AND FY 90 -								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25										1	2	3	1	2	3				1	2	3	1	2	3			
26-34	11	3	14	11	3	14				11	1	12	11	1	12				22	4	26	22	4	26			
35-59	2		2	2		2													2		2	2		2			
60-65																											
66 & Over																											
Total	13	3	16	13	3	16				12	3	15	12	3	15				25	6	31	25	6	31			

Calculate % of Male and % of Female to the Total of Each Category

% of Total	81	19	100	81	19	100			100	80	20	100	80	20	100			100	81	19	100	81	19	100			100
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Clauses 1, 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 License

AGE GROUP	FY 89									FY 90									FY 89 AND FY 90								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25	7	6	13	6	6	12	1		1	3	3	6	3	2	5		1	1	10	9	19	9	8	17	1	1	2
26-34	17	9	26	17	8	25		1	1	33	8	41	33	8	41				50	17	67	50	16	66		1	1
35-59	5	1	6	5		5		1	1	3		3	3		3				8	1	9	8		8		1	1
60-65																											
66 & Over																											
Total	29	16	45	28	14	42	1	2	3	39	11	50	39	10	49		1	1	68	27	95	67	24	91	1	3	4

Calculate % of Male and % of Female to the Total of Each Category

% of Total	64	36	100	67	33	100	33	67	100	78	22	100	80	20	100		100	100	72	28	100	74	26	100	25	75	100
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State	PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE																									
Canada		1	1		1	1													1	1		1	1			
Brazil	1		1	1		1													1		1	1		1		
AL											1	1		1	1					1	1		1	1		
IN										1		1	1		1				1		1	1		1		

CONTINUATION SHEET:

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 License

State	FY 89									FY 90									FY 89 AND FY90								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE																											
WI	4	3	7	4	2	6		1	1	9	3	12	9	3	12				13	6	19	13	5	18			
IL		1	1		1	1				1	1	2	1	1	2				1	2	3	1	2	3			
ND	4	3	7	3	3	6	1		1	9		9	9		9				13	3	16	12	3	15			
MI	2	2	4	2	2	4				1	1	2	1	1	2				3	3	6	3	3	6			
CA	2	2	4	2	2	4				2	3	5	2	3	5				4	5	9	4	5	9			
SD	1		1	1		1				2		2	2		2				3		3	3		3			
NE	1		1	1		1													1		1	1		1			
IA	6	3	9	6	2	8		1	1	11	2	13							17	5	22	17	4	21		1	1
LA	1		1	1		1													1		1	1		1			
CO	1		1	1		1													1		1	1		1			
HI	1	1	2	1	1	2													1	1	2	1	1	2			
PA	1		1	1		1													1		1	1		1			

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

TYPE OF LICENSE/REGISTRATION Optometry License

[illegible]

Clause 1: THE NUMBER OF PERSONS NOT TAKING EXAMINATIONS WHO WERE LICENSED OR REGISTERED BY THE BOARD OR WHO WERE DENIED LICENSING OR REGISTRATION WITH THE REASONS FOR THE LICENSING OR REGISTRATION OR DENIAL THEREOF .

TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND GRANTED LICENSES OR REGISTRATION	FY89 <u> </u>	FY90 <u> 2 </u>	FY89 & 90 <u> 2 </u>
TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND DENIED LICENSES OR REGISTRATION	<u> 6 </u>	<u> 2 </u>	<u> 8 </u>

FOR EACH PERSON GIVE:

Type of lic./Regis.,	State of Res.	AGE GROUP						SEX		* Method of Lic./Regis.			** Reasons for Granting or Denial
		0-18	18-25	26-34	35-59	60-65	66-	M	F		Grant	Deny	
Optometric	IL			X				X		Application		X	Did not appear for examination
Optometric	IA			X				X		Application		X	Did not appear for examination
Optometric	IL			X				X		Application		X	Withdrew before examination
Optometric	MN				X			X		Application		X	Did not meet Board requirements
Optometric	CA			X				X		Application		X	Did not meet Board requirements
Optometric	MI			X				X		Application		X	Withdrew before examination
Optometric	IL			X					X	Application		X	Did not meet Board requirements
Optometric	KS				X			X		Reciprocity	X		Complied to all requirements
Optometric	MN			X				X		Application		X	Did not meet Board requirements
Optometric	PA				X			X		Reciprocity	X		Complied to all requirements

* 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 89	FY 90	FY's 89 & 90
2	13	15
2	11	13
21	38	59

TYPE OF LICENSE OR REGISTRATION (By case)	TYPE OF STATUS CHANGE			REASONS FOR EACH CHANGE IN STATUS FOR EACH CASE
	Revoked	Suspended	Other (Specify)	
Optometric	15			Failure to Renew
Optometric		13		non-compliance to Continuing Education
Optometric			9	Emeritus Registration
Optometric			48	Voluntarily dropped license
Optometric			2	Deceased

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

IN FY 89 6 Written
 No.

0 Oral
 No.

IN FY 90 7 Written
 No.

0 Oral
 No.

THAT ALLEGE OR IMPLY A VIOLATION OF A STATUTE OR RULE WHICH THE BOARD IS EMPOWERED TO ENFORCE. THESE TOTALS INCLUDE CASES REFERRED TO THE ATTORNEY GENERAL'S STAFF WHO ARE ASSIGNED TO ASSIST YOUR BOARD.

IN FY 89 0 Written
 No.

0 Oral
 No.

IN FY 90 0 Written
 No.

0 Oral
 No.

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

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

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 occurring during this period of complaints and communications received prior to July 1, 1988 and complaints and communications received but not disposed of as of June 30, 1990 should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY SPECIFIC CATEGORY (Give number in each specific category)	SUMMARY OF RESPONSES AND DISPOSITIONS FOR EACH SPECIFIC CATEGORY (Give number in each specific category)
2) inadequate examination	2) no violation
1) inappropriate behavior	1) no violation
1) incompetency	1) no violation
1) release of records	1) resolved with release of records
3) Illegal use of drugs	2) used within the law
	1) closed-adequate information unavailable
1) sexual misconduct	1) receiving treatment
1) prescription practice	1) no violation
1) illegal advertisement	1) resolved without penalty
1) inadequate record keeping	1) approved use of new record card
1) unauthorized release of records	1) no violation

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?)

The Minnesota Board of Optometry participates annually in a regional meeting of Boards of Optometry of the North Central Region of States. The Minnesota Board of Optometry participates in a national meeting of the International Association of Boards of Optometry annually.

Currently there is no mechanism to exchange information regarding disciplinary proceedings against licensees in other states. Information is exchanged between health boards when disciplinary jurisdiction is alleged to violate statutes or rules of another Board or agency.

A meeting of the health boards are conducted on a monthly basis.

ANNUAL COMPARISON REPORT OF LICENSEES AS OF APRIL 30, 1990

	<u>1989</u>	<u>1990</u>
Total Licensed	749	738
Living in state	487	491
Living outside of state	262	247
Voluntary drops	19	30
Emeritus Registrations	4	5
Deceased	0	2
Revoked for non-compliance	3	13
Suspended for CE non-compliance	4	0
Reinstated after CE compliance	1	0
Reinstated	0	0
Applicants for licensure	66	0
Failed to show for examination	2	0
Passed	63	0
Declined registration	1	0
Licensed by reciprocity	1	1

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 not include the name or specific identifying information about any person, agency, or organization. Include cases received prior to July 1, 1988, but disposed of in FY '89 and FY '90, as well as cases received prior to June 30, 1990, but not yet disposed of.

- 1) touched and held the clothed breast of female patient
kissed female patient
made suggestive comment to female patient
put arm around female patient and cupped breast
played with female patient necklace and caressed
area of her body surrounding necklace
embraced female patient face-to-face, moved leg
forward between her legs, and made contact with
her legs and crotch
- 2) all alleged misconduct above was admitted to
- 3) referred case to S.A.A.G. for investigation
had hearing between Board and defendant with
counsel for both parties in attendance
referred to Office of Administrative Hearings
parties agreed to stipulation
- 4) license is under conditional status
licensee must undergo psychological evaluation
licensee must have present a female staff person
during examinations

Item q (Continuation Sheet)

- 5) conditional status maintains Board's control
of rehabilitation compliance
presence of female staff prohibits the environ-
ment conducive to repeat actions
psychological evaluation will provide basis for
determination of license status in the future