

AGENDA

CONNECTICUT BOARD OF EXAMINERS FOR OPTICIANS

Monday, September 12, 2022, at 8:00 AM
Department of Public Health
410 Capitol Avenue, Hartford CT

CALL TO ORDER

I. **Minutes**

Review and approval of the minutes from June 6, 2022.

II. **DPH Updates**

Licensure Applications / Examinations / Investigations

III. **NEW BUSINESS**

A. **License Reinstatement Application**

- Matthew Debella

*Presented by Stephen Carragher, Public Health Services Manager, Practitioner
Licensing and Investigations Section*

IV. **OPEN FORUM**

ADJOURN

Board of Examiners for Opticians via Microsoft Teams

Join on your computer or mobile app

[Click here to join the meeting](#)

Meeting ID: 248 140 142 538

Passcode: xhTxxU

[Download Teams](#) | [Join on the web](#)

Or call in (audio only)

[+1 860-840-2075](#) - Phone Conference ID: 818 983 298#

The following minutes are draft minutes which are subject to revision and which have not yet been adopted by the Board.

A meeting of the **Connecticut Board of Examiners for Opticians** was held on **June 6, 2022**.

BOARD MEMBERS PRESENT:	Jenney Rivard, L.O Alden Mead, JD, Public Member
BOARD MEMBERS ABSENT:	None
ALSO PRESENT:	Alfreda Gaither, Hearing Officer Deborah Brown, DPH, Practitioner Licensing and Investigations Section Celeste Dowdell, DPH, Practitioner Licensing and Investigations Section

The meeting was called to order at 8:30 a.m. Participants were present via Microsoft Teams.

- I. **Minutes**
The minutes from the March 7, 2022 meeting were approved on a motion by Ms. Rivard, seconded by Mr. Mead.

- II. **DPH Updates**
Practical Examination
Ms. Brown and Ms. Dowdell provided an update regarding the practical examination
Investigations
Mr. Kardys reported that there is currently one investigation of an optical establishment being conducted by DPH.

- III. **Open Forum**
Damian Carroll, National Director and Chief of Staff, Wade Brown, National Director of Operations, and Sabrina A. Davis Program Manager made a presentation regarding Vision -to-Learn
Vision To Learn, is a non-profit charity, started in Los Angeles in 2012. The program has helped kids in over 500 underserved communities in 14 states. Vision To Learn serves the needs of the hardest to-reach children; about 90% of kids served by Vision To Learn live in poverty and about 85% are kids of color. Since its founding in 2012, Vision To Learn has helped provide more than 1.2 million children with vision screenings, over 300,000 with eye exams and almost 250,000 with glasses – all free of charge to children and their families
The Board addressed questions from Vision To Learn regarding the need for optical selling permits and requirements that dispensing be done by a licensed optician.

- IV. **Adjourn**
As there was no further business, the meeting was adjourned at 9:23 a.m.

Respectfully Submitted,
Jenney Rivard, LO
Connecticut Board of Examiners for Opticians

TO: Connecticut Optician Board

FROM: Steve Carragher
Public Health Services Manager
Practitioner Licensing and Investigations Section

RE: Matthew DeBella, Optician License #001631-Reinstatement of a lapsed license

Matthew DeBella is an applicant for reinstatement of a lapsed license. The Department is seeking the Board's recommendation regarding Mr. DeBella suitability for reinstatement.

HISTORY:

1. Matthew DeBella graduated from Middlesex Community College, Middletown, CT in 2004.
2. Mr. DeBella's Connecticut license was issued December 8, 2009. His license lapsed due to nonrenewal January 01, 2019. There has been no disciplinary action against his license.
3. Mr. DeBella last practiced as an optician in 2018.

DEPARTMENT OF PUBLIC HEALTH

APPLICATION FOR OPTICIAN LICENSURE

(check one) Exam (Fee \$200) Reinstatement CT License # 1631 (Fee \$200)

Name: Matthew R. DeBella
FIRST MI LAST MAIDEN

Address: 216 Lamplighter Lane Newington CT 06111
NO. & STREET CITY STATE ZIP CODE

U.S. SOCIAL SECURITY: _____ Email: .com

Please indicate below how you would like your name and address to appear on your official license. This will become your address of record for all future mailings.

Name on License: Matthew R. DeBella

Address: 216 Lamplighter Lane

City, State, Zip: Newington, CT 06111

Phone Number: 860- _____ Date of Birth _____ Gender: M.

RACE/ETHNIC DATA: (This section is voluntary. Information gathered will be used solely for the purpose of examining the demographics of Connecticut licensees. This data will not be used for discriminatory purposes and will not be considered in the evaluation of your application.)

- AMERICAN INDIAN OR ALASKAN NATIVE: Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- ASIAN OR PACIFIC ISLANDER: Persons having origins in any of the original peoples of the Far East, Southeast Asia the Indian Subcontinent of the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.
- BLACK: Persons having origins in any of the black racial groups of Africa.
- HISPANIC: Persons of Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.
- WHITE (not of Hispanic Origin): Persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

List all states/territories of the United States in which you are now or have ever been licensed (attached additional sheet if necessary):

STATE	LICENSE NO.	EXPIRATION DATE
<u>Connecticut</u>	<u>1631</u>	<u>1/31/2019</u>

If ABO and NCLE were taken in Connecticut, please indicate dates: ABO May 2006 NCLE November 2006

Have you completed (4) calendar years of full-time or 8,000 hours of part-time employment as a registered optical apprentice under the supervision of a licensed optician? Yes No If yes, please indicate the name and license number of the supervisor: Mike Bean Regional Manager

Do you hold an Associates Degree in ophthalmic dispensing? Yes No If yes, please indicate name of institution Middlesex community college

What is the name of the firm, partnership or corporation with which you are associated/employed:

Name: NOT EMPLOYED AT THIS TIME

Address: _____

NO. & STREET

CITY

STATE

ZIP CODE

What have been your duties and/or activities at this establishment? Instrumental coaching
(Specify) and developing staff, promote products and services,

Does this establishment hold a current Optical Shop permit? Yes No If yes, Permit #: _____

NOT APPLICABLE - Currently not employed.

AT THE EXAM, DO YOU REQUIRE ACCOMMODATION FOR ANY DISABLING CONDITION? _____ IF YES, ATTACH A SEPARATE WRITTEN STATEMENT TO THE APPLICATION, BRIEFLY DESCRIBING THE NATURE OF YOUR DISABILITY AND THE ACCOMMODATION YOU ARE SEEKING. UPON REVIEW OF YOUR REQUEST, THIS OFFICE WILL CONTACT YOU FOR APPROPRIATE DOCUMENTATION.

STATEMENT OF PROFESSIONAL HISTORY: Please answer each question below. If you answer yes to any question, please refer to attached instructions.

1. Have you ever been censured, disciplined, dismissed or expelled from, had admissions monitored or restricted, had privileges limited, suspended or terminated, been put on probation, or been requested to resign or withdraw from any of the following:
-Any hospital, nursing home, clinic, or similar institution;
-Any health maintenance organization, professional partnership, corporation, or similar health practice organization, either private or public;
-Any professional school, clinical clerkship, internship, externship, preceptorship or postgraduate training program;
-Any third party reimbursement program, whether governmental or private? Yes No
2. Have you ever had your membership in or certification by any professional society or association suspended or revoked for reasons related to professional practice? Yes No
3. Has any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction, limited, restricted, suspended or revoked any professional license, certificate, or registration granted to you, or imposed a fine or reprimand, or taken any other disciplinary action against you? Yes No
4. Have you ever, in anticipation or during the pendency of an investigation or other disciplinary proceeding, voluntarily surrendered any professional license, certificate or registration issued to you by any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction? Yes No
5. Have you ever been subject to, or do you currently have pending, any complaint, investigation, charge, or disciplinary action by any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction or any disciplinary board/committee of any branch of the armed services?
You need not report any complaints dismissed as without merit. Yes No
6. Have you ever entered into, or do you currently have pending, a consent agreement of any kind, whether oral or written, with any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, any branch of the armed services or a foreign jurisdiction? Yes No

If your answer is "yes" to questions 1-5 give full details, names, addresses, etc. on a separate notarized statement.

If your answer is "yes" give full details on a separate notarized statement and submit notarized copy of agreement.

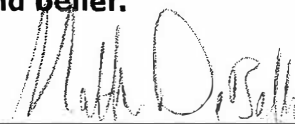
7. Have you ever been found guilty or convicted as a result of an act which constitutes a felony under the laws of this state, federal law or the laws of another jurisdiction and which, if committed within this state, would have constituted a felony under the laws of this state?

Yes No

If your answer is "yes" give full details on a separate notarized statement and furnish a Certified Court Copy (with court seal affixed) of the original complaint, the answer, the judgement, the settlement, and/or the disposition of the case.

On this 12th day of April (month/year) 2022 (applicant's name) personally appeared before me, who being duly sworn says that she/he is the person referred to in the foregoing application and that the photograph attached hereto is a true picture of self and that the statements made herein are true in every respect.

All of the above statements contained herein are true and correct to the best of my knowledge and belief.



SIGNATURE OF APPLICANT

Sworn to me this 12th day of April (month/year) 2022

Notary Public Signature Nancy Hoff My Commission Expires September 30, 2025

Please return this application, the fee for \$200 (certified bank check or money order) made payable to, "Treasurer, State of Connecticut" to:

**Department of Public Health
Optician Licensure Remittance Unit
410 Capitol Ave., MS# 12MQA
P.O. Box 340308
Hartford, CT 06134-0308**

www.ct.gov/dph

MATTHEW DEBELLA

EXPERIENCE

DIRECTOR OF MARKETING AND LICENSED OPTICIAN AT LENSESONLY LLC.

2017-2018

Solid application towards sales marketing and management

Leadership role model for employees and colleagues

Strategic ability to network and build relationships

Led a specific location to 20% growth increase from prior year

Remarkable energy, enthusiasm and positivity

LICENSED OPTICIAN MANAGER AT LUXOTTICA RETAIL

2000-2016

Strong verbal and written communication skills

Instrumental at coaching and developing staff

Creative at idea thinking in formulating plans

860-805-0521

LINKEDIN URL

MATT DEBELLA

OBJECTIVE

An asset to any employer and will
improve the bottom line of the
business.

EDUCATION

DEGREE / DATE EARNED

School

Middlesex Community College

Associate of Science

2002-2004

Licensed Optician State of CT

ABO & NCLE Certified

University of Hartford

Bachelor of Business Administration

SKILLS

Strong work ethic and aim for
achieving the highest level of
success in business.

~~MDEB@SBCGLOBAL.NET~~

matthewdebella1@gmail.com

Matt

Letter of recommendation

Matt was hired in May of 2017 and quickly hit the ground running. He adapted to the culture and to our business model and procedures in a matter of a week. Matt demonstrates a tireless work ethic and always goes outside his day to day responsibilities to assist in business related tasks.

Matt is very intelligent and understands business and marketing concepts. His communication skills are excellent and he listens to understand. He is a solid optician and can promote all products and services available. Matt was instrumental in training others and in leading the way for apprentices and acted as a role model for all employees.

Matt promotes sales and has a very easy-going way about him that puts customers at ease. He was quick to recommend options and choices and had a high percentage of multiple pair sales. Customers often commented on helpfulness and desire to meet there needs. His energy, enthusiasm and positivity is unmatched and his ability to network and build relationships is unique.

Matt grew our Hartford location month over month with an average of a 20% above prior year. Unfortunately, our Hartford location underperforms, and barley breaks even. We questioned our ability to survive in Hartford when we rekeyed this location 2 years ago. Effective 2.1.18 we made a move to use open our Hartford location by appointment only and to use for special events. As a result, Matts position was affected by this decision. This decision was strictly a business one and I would certainly rehire Matt if the need arises and he was available.

Matt time at Lensesonly was very productive, we will miss his good nature and his relentless pursuit of our business. I am happy to discuss any of this at any time. Matt is truly an asset to any employer and will improve the bottom line of the business.

Steven Abbate

Owner LensesOnly