

Dr. Charles F. Mullen '69, Clinical Architect



Dr. Charles Mullen.

Today's optometry students take for granted their ability to train at settings including neighborhood health centers and Department of Veterans Affairs (VA) facilities as part of their clinical education. Yet, these doors were not always open to them. While there are many people who contributed to this welcome change, the man with the vision to know where the profession was going and how to get there is

Dr. Charles F. Mullen '69.

Alumni Profile

Dr. Mullen, who is retiring from his position as president of the Illinois College of Optometry (ICO), has spent his 33-year career designing and reshaping the delivery of clinical education for optometry students and residents. He has advanced clinical education with his keen foresight and forceful leadership. In doing so, he has opened up eye care services to many previously underserved patients.

From 1970-76 Mullen served President William Baldwin at The New England College of Optometry (then Massachusetts College of Optometry) as Special Assistant for Clinical Development. Baldwin appointed him shortly after his 1969 graduation.

During the years between 1976 and 1990, Mullen served as executive director of the Eye Institute at Pennsylvania College of Optometry (PCO). He then directed the Optometry Service at the Department of Veterans Affairs in Washington, DC, from 1990-96 and in 1996 he was selected president of the Illinois College of Optometry

Beginning with NEWENCO, Dr. Mullen was able to plant the seeds of moving optometry into the forefront of primary eye care by developing a delivery system that optimally served patients. Perhaps best known for clearly seeing the potential of expanding the scope of the practice of optometry, Mullen recognized in the early 1970's that optometrists would be treating eye disease and the necessity for students in the clinical system of NEWENCO to develop new skills. Think of how difficult this was without a single diagnostic or therapeutic drug law in place!

Working to implement new clinical protocols, Mullen creatively developed teaching affiliations with Boston's system of neighborhood health centers and other multidisciplinary settings. He did this by partnering with a progressive team of optometrists and ophthalmologists in caring for patients in special and underserved populations as a way of enhancing education of future doctors of all disciplines.

Breaking Down the Barriers

To reflect back on the 1970s, when Mullen began his career in optometry, is to see a radically different time than today.

Co-management was not the norm, as it is today. Diagnostics and therapeutic pharmaceuticals were the sole province of the medical profession.

Early in his career, Dr. Mullen understood that ophthalmology and optometry were complementary. However, integrating a different model in a resistant health care field would require both conviction and persistence. He and other clinicians saw an opportunity to introduce a primary care system into clinical education and, in 1970 circumstances allowed him to begin his mission.

In 1972, the College was commissioned by the State of Rhode Island to develop the clinical curriculum and certify

its Optometric State Board in the use of diagnostic and pharmaceutical agents. Mullen directed the implementation of the clinical component for the first diagnostic pharmaceutical course and along with Matt Garston '66 certified the first diagnostic pharmaceutical certified optometrist in the United States.

Following that milestone, Mullen collaborated with a team of neighborhood health care and public pol-

icy leaders: Tres Blake of the South End Community Health Center; Bob Morgan of Dimock Community Health Center and the Harvard School of Public Health; Mark Richman, M.D. of Boston University and the South End Community Health Centers; and David Miller, M.D., of Beth Isreal and Harvard Medical School. All were committed to enhancing ophthalmologic clinical education and services.

The ophthalmic community and private optometric practitioners were skeptical, but the group stayed the course. Over time, local neighborhood health centers formed partnerships with the College and integrated optometric services and students into their clinical programs. Dr. Mullen is still viewed as the architect of the clinical model used in Boston and duplicated elsewhere to this day.

Dr. Barry J. Barresi '77, Vice President for Clinical Care and Services at New England Eye Institute (NEEI), testifies to that fact. "Even today as we meet with Boston's health care leaders to further expand the NEEI system of community-based clinical sites, many of them vividly recall the innovative leadership of Dr. Mullen some 30 years ago. With his

"We had a need and wanted to enrich the students' clinical experience and give them more exposure... we also saw an opportunity to provide eye care services to those who were underserved in the Boston area."

Dr. Mullen

colleagues, he built a strong foundation of community health partnerships. Today these collaborations are fueling continued innovation and growth in the College's mission of excellence in patient care, clinical education and research."

Dr. Gerald Selvin '73, Professor of Optometry at NEWENCO and National Education Chair for the Optometry Service Field Advisory Group of VA Central Office considers Dr. Mullen to have had the largest impact on his development than anyone else in optometry. While still a student, he remembers two particular proclamations made in 1972 which not only greatly influence his practice life but all of optometry.

"Optometrists will be treating eye disease routinely, so we are going to start to teach you how now.";

"There are no welfare patients, no poor patients, no rich patients...there are only patients, and each individual will be treated with dignity and respect."

These principles are what Charles Mullen has always placed above all else...take care of patients compassionately and with expertise. Never having lost sight of these principles is what made Mullen the visionary he is. And those optometrists who have had the good fortune to be directly influenced by him can imprint these values on a new generation of doctors, continuing the legacy.

The Eye Institute

Then it was time for another professional challenge. In 1976, Dr. Norman Wallis, former president of Pennsylvania College of Optometry (PCO) and now executive director of the National Board of Examiners, approached him about



Dr. Mullen and his wife Rita.

developing an integrated clinical system at PCO's newly built Eye Institute. Wallis felt that Mullen was the only person capable of handling this daunting assignment. Dr. Wallis explained to *Perspective* that PCO's objective was to establish an enterprise that resembled an "eye hospital." It would combine the three O's (opticianry, optometry, and ophthalmology) under one roof. This innovation in eye care education would completely change the character of the clinic, and — ultimately — eye care delivery.

With his characteristic methodical approach, Mullen set out to implement the model, which would greatly expand the scope of educational and training resources available at PCO. Dr. Wallis recalls why it was successful.

"Charlie organized the clinic like a military campaign. Every aspect was covered to the greatest detail. It was like Operation Desert Storm."

In the 1980's, Mullen saw changes taking place in the profession and made great efforts to merge the interests between optometry and the medical community. He wrote that, "the impetus comes from outside parties — particularly third-party payers, health care policymakers and legislators — who will attempt to define the roles each profession will play in the future of eye care provision if the two professions do not actively define the role themselves."

He knew that the mutual interests could form a bond. Therefore, he initiated several affiliations with medical facilities in the Philadelphia region. The hallmark would be PCO's affiliation with Hahnemann University, a Philadelphia-based medical college. The two combined their resources and worked to develop "unique approaches to ophthalmic education, eye care provision, and optometric research."

Meeting More Professional Challenges

In 1990 Dr. Mullen left PCO to head the Optometry Service of the Department of Veterans Affairs in Washington, DC. With this post, he became the highest-ranking civilian optometrist employed by the government. A former Navy officer himself, he was familiar with the need for change in the VA system. True to form, he began a process of systematic restructuring. Under his stewardship, he implemented protocols for clinical privileging and standardized the educational component system-wide at the VHA. These guidelines are the principle force driving policy decisions today. He was also responsible for the sizable growth of the student and residency programs.

Many colleagues, including those at the Department of Veterans Affairs, feel that he was a perfect representative for the optometric profession in Washington. Described as a “visionary,” a “poised ambassador” and an “executive’s executive,” he based his entire career on teamwork. When asked about his leadership style, Charles Mullen credits Dr. Wallis. “Norman taught me the ability to empower the people who work for you — to trust them and how to delegate authority.”

Another term that is often used in reference to Charles Mullen is “turn-around specialist.” In 1996, he accepted the challenge of the presidency at the Illinois College of Optometry. The institution had gone through a difficult time and needed to be restored to its previous stature.

Mullen confronted the issues head on, turning ICO into a thriving and stable institution. He implemented a strategic management plan, “Commitment to Excellence,” which restructured the college to address the challenges of the future.

Commenting on what he views as the most significant transformation at ICO during his tenure, Dr. Mullen is quick to state that “it has been the institutional culture.

With his retirement from ICO this fall, you might expect Mullen to contemplate his golf handicap or other hobbies. But instead, he is thinking of returning to federal service. You can expect that wherever he heads next, his vision and leadership will do nothing short of transforming that entity.

We initiated the process by focusing on the CORE four-year program and utilized tools to evaluate outcome assessment and national board performance. Change has permeated the institution.”

The list of accomplishments at ICO is noteworthy. ICO has increased its endowment, raised its clinical revenues, significantly improved student national board performance, frozen tuition, improved its student retention rate and increased student and faculty involvement in institutional governance. The outcome of Mullen’s taking charge is remarkable.

You can also see his trademark in the clinical programs of ICO. When he arrived there were only nine clinical affiliates. That number has grown to 137 sites throughout the United States and abroad. This has significantly impacted students’ access to patient encounters. In 1997, ICO formed an affiliation with the University of Chicago that has strengthened both institutions. ICO is in the process of expanding that relationship further and plans are underway to move the University of Chicago’s ophthalmic surgical practice to the ICO campus.

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Alumni Profiles is part of an ongoing series of special feature articles on graduates of The New England College of Optometry. If you would like to suggest a colleague to be profiled in an upcoming issue of Perspective, please contact Lauretta Woods, Director of Alumni Relations.