

CAB Proposed Agenda Item
November 15, 2012

CALE Pass Rates

What is the purpose of changing the way the CAB evaluates CALE Pass Rates? California State Business and Professions Code, Acupuncture Licensure Act, Section 3934.2(b) states: The board shall study and recommend ways to improve the frequency and consistency of their auditing and the quality and relevance of their courses. This change will evaluate how acupuncture schools prepare graduating students entering the field of acupuncture by evaluating the results of the California Acupuncture License Exam.

The CAB has approved approximately 36 training programs of which 20 are located in California. The CAB rarely, if ever, removes a training program from its approved list which keeps growing despite very strong evidence that many of the approved schools are doing a terrible job preparing graduates to pass the CALE. There are at least seven schools with less than half their graduates able to pass the CALE. Four of these programs have pass rates below 40%!! The CAB must do more than just approve schools. The CAB must also "*ensure excellence in practitioner training and education.*" The CAB must continually evaluate how well approved schools are doing their job.

Why CALE pass rates matter. The rate at which graduates of a training program pass the licensing exam is the first and foremost indicator of the quality of their training. Most healthcare professions including Physical Therapy, Nursing, Physician Assistant and Physician, have pass rates above 85%. The Board of Nursing mandates that all nursing programs demonstrate at least 75% of their graduates pass the state licensing exam each year or that school is placed on probation and can be removed from the Board of Nursing list of approved programs. The average pass rate for acupuncturists on the CALE across a decade (2001 and 2010) was 61%. *[ed. these data are from the* [HYPERLINK "http://www.acupuncture.ca.gov/students/exam_statistics.shtml"](http://www.acupuncture.ca.gov/students/exam_statistics.shtml)*CAB website/*. A pass rate this low means passing the licensing exam is almost the same as flipping a coin. There are only a few explanations for a pass rate this low: the exam is "too hard", the exam is poorly constructed (e.g., it does not test what people study), or the people taking the exam are simply not well prepared. The CAB has had testimony from the state's own testing department (Office of Professional Exam Services - OPES) that there is nothing wrong with the CALE as a measurement tool. The test is neither irrelevant or too hard. That leaves one conclusion. Many graduates – as in the 40% who consistently fail – are poorly prepared. That leads to only one other conclusion. Some schools do not actually exist to train acupuncturists. Different conclusions would merit consideration if the evidence of academic failure among so many training programs was short term. It is not. Here is the real question. With so much strong evidence in its hands why has the CAB failed to take any action to protect the public? Why is it the CAB does not ensure the quality of training by removing at least the worst performing schools from its list?

The Senate Committee on Business, Professions and Economic Development appears to be ready to replace the CALE with the national certifying exam (NCCAOM), and remove the school oversight function from the CAB by deferring to the national program accreditation body (ACAOM). These are both bad ideas because they simply kick the problem outside the state. ACAOM and NCCAOM serve the very schools that are problems in our state. If the CAB wants to avoid the removal of its licensing and approval functions then the CAB has to begin functioning according to its mission and initiate a program that uses CALE data to guide its school approval process.

The AAAOM made the following recommendation in its May 2012 AAAOM REVIEW OF 2nd DRAFT STANDARDS FOR THE FIRST PROFESSIONAL DOCTORATE IN AOM ACCREDITATION: “Programs must provide annual outcomes data for (i) pass rates of graduates who take licensing exams, discriminating between first time and repeat takers; and (ii) total graduates in each year and total who sit for a licensing exam from that cohort within three years. With regards to pass rates, ACAOM should set a standard that allows for progressively achieving a criterion level on par with other health professions; e.g. annually working towards 0.5 deviation – approximately the 67th percentile - above the mean within a two-year moving average until the criterion level of 85% is attained.”

The CAB does not use its own information available on its own website (!!) to function independently and responsibly. If the CAB continues this practice it might result in a significant loss of authority which would not be good for the CAB, the profession or the public.

Recommendations The CALE Examination Committee recommendations to the Board a new policy for evaluating currently approved schools and new schools that are applying for approval using the following recommendation as a framework

1. New schools can only receive provisional approval for no more than three years. The school must achieve a seventy percent pass rate by year two and maintain it in year three.
2. All currently approved schools must achieve a seventy percent pass rate by 2014. The board will place a program on probation with intent to revoke the program’s approval and may revoke approval if a program fails to maintain the minimum pass rate.
3. A program exhibiting a pass rate below seventy percent for first time candidates in an academic year shall conduct a comprehensive program assessment to identify variable contributing to the substandard pass rate and will submit a written report to the board. The report shall include the findings of the assessment and a plan for increasing the pass rate including specific corrective measures to be taken, resources and timeframe.

There is one more issue; the number of graduates from any school that actually sit for the CALE. The CAB should require that each school on its approved list must annually report the total number of graduates and the number of graduates that took the CALE each year. The threshold of graduates who take the exam should be 85%.

4. Any school with fewer than 85% of its graduates who register for and take the CALE should be placed on one year probation to achieve the standard. If that standard is not met then that school should be removed from the list of CAB approved schools. The school may reapply after five years and significant reorganization.

CALE Should be provided solely in English
Discussion and Action

California Acupuncture Licensure Act, 4928.1 states the following: "Protection of the public shall be highest rarity for the Acupuncture Board in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount."

Consumer Protection or public safety is first and foremost the reason this Board was created. As a public safety issue, the California Acupuncture Board should consider action to increase patient safety by providing the CALE test solely in English for all examinees. When the CALE originated, testing in three languages, it was provided in order to grandfather in those acupuncturists who were in practice at that particular time and was to sunset after the first couple of tests were administered. Somehow, that did not happen.

Our California Acupuncture Board is the only healthcare professional Board testing in three languages, English, Chinese and Korean. The repeal of California Code of Regulation, Title 16, Division 12.7, Section 1399.41, would ensure that all examinees taking the CALE are proficient enough in English to communicate with all other healthcare professions and their patients. Remember, foreign students are required to take a TOFL test that demonstrates their ability to read, speak and comprehend English at a college level. Therefore, there should be no issue about the CAB providing the CALE solely in English.

By providing the CALE solely in English, thereby lacking the translations in to Chinese and Korean, the Board can expect a yearly saving of \$138,166

Our California Constitution, Article 3 of the State of California, Sect 6 (b) states: "English as the Official Language of California. English is the official language of the State of California." The reason for this Article 3 of the State of California is to build accountability in to our system as noted by the following Business and Professions Code Section 11.

Business and Professions Code Section 11 requires all writing, including records, to be written in English.

"Business and Profession Code 11. Writing: English language - Writing includes any form of recorded message capable of comprehension by ordinary visual means.

Whenever any notice, report, statement or record is required by this code, it shall be made in writing in the English language unless it is otherwise expressly provided."

Please note that most, if not all, Chinese and Korean acupuncturist have patients who are

not of their culture: therefore, there is a clear need for these acupuncturist to be able to communicate with all of their patients. In any emergency, it is expected that these same acupuncturists be capable of communicating with emergency crews and other healthcare professionals.

Another issue to add to this picture is that for many years there have been allegations about cheating on the CALE. Korean students taking the CALE have always had strikingly higher pass rates. Are the Korean examines smarter than the English and Chinese examines or are the Korean examines receiving some sort of an advantage? It appears to me that the former is no and the later is yes.

I was recently informed by one individual that one Korean administrator, and possibly more administrators, assigns students taking the examines to memorize the first five question and report back to her. This person than asks the second student taking the test to memorize the next five question and so on and so on. Other individuals within the profession have informed me that this situation does exist. I understand there are approximately 200 questions on the test. The information received from these individuals taking the CALE is accumulated and placed in a booklet that is "sold" to future Korean students who are expecting to take the CALE.. This process continues today. Any acupuncturist involved in this type of situation could lose their licenses. Business and Professions Code, Section 123 criminalizes conduct that violates the security of an examination. This section provides the following.

BPC, Section123. It is a misdemeanor for any person to engage in any conduct which subverts or attempts to subvert any licensing examination or the administration of an examination, including but not limited to

This is an issue we should address later today in a different part of the agenda: but, it does have bearing on todays discussion about the CALE.

The repeal of California Code of Regulation, Title 16, Article 4, Section 1399.441, would provide that the CALE would be given solely in English . It would ensure that all examinees taking the CALE are proficient enough in English; thereby, demonstrating they can fully communicate with all other healthcare professions and their patients. It would also provide fairness for all examines taking the CALE.