

EDUCATION COMMITTEE MEETING



September 25, 2015



NOTICE OF ACUPUNCTURE BOARD EDUCATION COMMITTEE MEETING

Friday, September 25, 2015, 10 a.m.

**Department of Consumer Affairs
1747 North Market Boulevard
First Floor Hearing Room
Sacramento, CA 95834**

**Los Angeles Teleconference Location
Junipero Serra State Building
320 West Fourth Street
8th Floor conference room 8A
Los Angeles, CA 90013**

**San Diego Teleconference Location
Pacific College of Oriental Medicine (PICOM)
7445 Mission Valley Road
Conference Room, Main Building 2
San Diego, CA 92108**

AGENDA

EDUCATION COMMITTEE MEETING - 10:00 a.m.

- 1. Call to Order, Roll Call, and Establishment of a Quorum**
- 2. Opening Remarks**
- 3. Public Comment for Items not on the Agenda**
- 4. Approval of Minutes:**
 - **May 29, 2015**
 - **July 21, 2015**
- 5. Consideration and possible action regarding proposed regulatory language to establish standards for education training and clinical experience outside the United States pursuant to**

Education Committee Members

Kitman Chan, Chair, Public Member
Michael Shi, L.Ac, Licensed Member
Jeannie Kang, L.Ac, Licensed Member
Jamie Zamora, Public Member
Francisco Hsieh, Public Member
Dr. Michael Corradino, DAOM, Licensed

Business and Professions Code section 4939 related to the implementation of Senate Bill (SB) 1246.

6. Consideration and possible action regarding Title 16, California Code of Regulations (CCR) section 1399.434 curriculum standards for training beginning after 1/1/05 related to implementation of SB 1246.

7. Consideration and possible action regarding Title 16, CCR section 1399.436 curriculum standards for training beginning prior to 1/1/05 related to implementation of SB 1246.

8. Consideration and possible action regarding Title 16, CCR section 1399.437 related to documentation required for Board approval of curriculum related to implementation of SB 1246.

9. Consideration and possible action regarding proposed regulatory language for reporting of approved curriculum compliance Title 16, CCR section 1399.439.1.

10. Future Agenda Items

11. Adjournment

Public Comment on items of discussion will be taken during each item. Time limitations will be determined by the Chairperson. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda.

**THE AGENDA, AS WELL AS COMMITTEE MEETING MINUTES, CAN BE FOUND ON THE
ACUPUNCTURE BOARD'S WEBSITE AT
www.acupuncture.ca.gov**

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**AGENDA ITEM #4:
APPROVAL OF MINUTES
MAY 29, 2015**



Draft Minutes

**NOTICE OF ACUPUNCTURE BOARD
EDUCATION COMMITTEE MEETING**

MAY 29, 2015

**Department of Consumer Affairs
1747 North Market Blvd.
HQ2 Hearing Room
Sacramento, CA 95834**

**Teleconference Meeting Location:
Jeannie Kang, L.Ac., Licensed Member
Jamie Zamora, Public Member
Junipero Sera STATE BUILDING
320 W. Fourth Street, 8 B Conference Room, 8th Floor
Los Angeles, CA 90013**

Board Members Present

Kitman Chan – Chair
Michael Shi, L.Ac, Licensed Member
Jeannie Kang, L.Ac, Licensed Member

Board Members Absent

Jamie Zamora, Public Member

Staff Present

Terri Thorfinnson – Executive Officer
Ben Bodea – Continuing Education Coordinator
Katie Le – Education Coordinator
Tammy Graver – Board Liaison

Education Committee Members

*Kitman Chan, Chair, Public Member
Michael Shi, L.Ac, Licensed Member
Jeannie Kang, L.Ac, Licensed Member
Jamie Zamora, Public Member*

EDUCATION COMMITTEE MEETING – 10:00 a.m.

1. Roll call was taken and a quorum was established. Kitman Chan and Michael Shi were present in Sacramento; Jeannie Kang was present in Los Angeles. Jamie Zamora was absent.

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2. Opening Remarks – Michael introduced Kitman as the new chair of the Education Committee. This is the first Education Committee meeting for this year. Kitman requested that any public comment be limited to two minutes.

3. Public Comment for Items not on the Agenda

4. Approve Minutes - The minutes from January 23, 2015 were approved as submitted. Michael made the motion to approve and Jeannie seconded the motion. Kitman, Michael and Jeannie voted yes to approve the minutes. MOTION PASSED 3-0

5. Review and Make Recommendations on School Applications Seeking Board Approval of Acupuncture Training Program:

- **California Institute of Integral Studies (CIIS)**

Katie reviewed the curriculum and Ben Bodea attended the site visit. The school has corrected all non-compliances and all were well documented and very complete. ACTCM (who was previously approved) and CIIS are going through a merger, effective July 1st. Members of the school staff did join this meeting via teleconference. Jeannie made the motion to recommend approval to the full Board on the American College of Traditional Chinese Medicine. Michael seconded the motion. Kitman, Michael and Jeannie all voted yes for the motion. MOTION PASSED 3-0.

Dr. Goldstein corrected the name of the college to be California Institute of Integral Studies. Michael remarked that this recommendation will now be brought up at the Board Meeting on June 19th. The school will be sending representation to the Board Meeting.

6. Request for Board approval of CPR and First Aid Curricula pursuant to Section 1399.434 (f)(4) and 1399.436 (a)(14):

This issue was on the agenda because it was referred at the last Board Meeting to the Education Committee. In our regulations we specify the American Red Cross (ARC) and the American Heart Association (AHA) as the approved providers of CPR and First Aid certification, but we also provide for an equivalent curriculum that is approved by the Board. The following two organizations are seeking Board approval of their curriculum for First Aid and CPR courses. Not all Board approved schools offer these programs so many graduates rely on vendors to fulfill this licensure requirement.

- **EMS Safety Services, Inc.** – Rob Pryce was on the teleconference. He is the Program and Resource Director for EMS Safety Services, Inc. This company does both adult and child CPR, which we require in our regulations.

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- **Save - A - Life Educators, Inc.** - Vicky Igou was on the teleconference. She currently uses the AHA curricula but she would create her own course to teach.

These two programs both meet the Board's requirements. Jeannie made the motion to recommend these programs to the full Board for approval of their CPR and First Aid certification pursuant to the section. Michael seconded the motion. Kidman, Michael and Jeannie all voted yes. MOTION PASSED 3-0.

Public Comment – Chris Ruth from Emperor's College – he is a certified trainer of CPR and First Aid through the American Heart Association and American Red Cross. There are many "fly by night" companies out there that are issuing CPR & First Aid cards that are not doing the required training and there have been many students that have fallen victim to these companies.

Vicky with Save–A–Life agreed with Chris Ruth's comments. The Heart saver program takes a minimum of five hours of training and there are many companies that will do the training in three to four hours. Because her business is small she has total oversight as to what is going on and being taught. Rob from EMS Safety Services, Inc. agreed with everything that was said from Chris and Vicky. He has dealt with falsified cards.

Kitman asked that Vicky forward any emails she has on the subject to Terri.

Michael made the request to work with Vicky and Rob to be able to verify certification and program documentation and requirements. Are they willing to work with the Board to verify certifications? Rob recommended that the Board have a process with a checklist just like the one the Board uses for school certifications. Vicky and Rob both gave an overview regarding how they train their trainers.

Jeannie asked that Rob and Vicky submit any questions they have to Terri and she will pass them along to the committee to be answered. No materials have been submitted to date.

7. Proposed regulatory change 1399.434 (f)(3) and 1399.436 (a)(14):

It was brought to the Board's attention that there were other providers out there that the Board could approve and also that the American Heart Association and the American Red Cross have reduced their hours for the required course from 8 hours, which is in our regulations. One of the problems with putting specific names of organizations or specific hours in a regulation is that when it changes, the regulatory process is not nimble, and it will take us time to change. Should the Board raise the standard to a health care standard? Should this be something the Board should look at and eliminate the hourly requirement? Also, in our regulations, we don't require people to have current certification when they apply, an expired card is sufficient. We also don't require



proof of current certification with renewal. If we're going to make a regulatory change we may want to add this. We might want to require all renewals and new license applicants have current certification. Rob talked about the need to also require AED training for lay people.

Public comment included that CPR should be included as part of the renewal process.

Terri brought up the point to committee members that in the regulations it requires that a person have knowledge of Eastern and Western medicine, so should the requirement be to have the training (CPR, AED & First Aid) for a health care provider or a lay person? Jeannie made a motion to recommend to the Board the proposed regulatory changes to certification and hours requirements to CPR, with the three points that Terri brought up (CPR and First Aid at Health Care Provider certification level, require current certification for licensure and renewal, and eliminate 8 hour requirement) with the consideration of those organizations, and to have the language be amended with further discussion between Terri and the organizations, and then put through legal counsel for language revisions. Michael seconded the motion. Jeannie, Michael and Kitman all voted yes. MOTION PASSED 3-0.

A public comment was brought up from Emperor's College in regards to those out of the country wanting to obtain a license in California but cannot take the course on line.

Terri asked Rob and Vicky to provide some language recommendations. Terri was asked to send something to Rob and Vicky to work on.

8. Future Agenda Items

9. Adjournment

Public Comment on items of discussion will be taken during each item. Time limitations will be determined by the Chairperson. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda.

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**AGENDA ITEM #4:
APPROVAL OF MINUTES
JULY 21, 2015**



Draft Minutes

**NOTICE OF ACUPUNCTURE BOARD
EDUCATION COMMITTEE MEETING**

A webcast of this meeting can be found at:
<https://www.youtube.com/watch?v=m5IBDdhMbjQ>

Tuesday, July 21, 2015, 10 a.m.

**Department of Consumer Affairs
1625 North Market Blvd
First Floor Hearing Room
Sacramento, CA 95834**

**Los Angeles Teleconference Location
Lewis Brisbois Bisgaard & Smith LLP
633 West Fifth Street, Suite 4000
Los Angeles, CA 90071**

**San Diego Teleconference Location
Pacific College of Oriental Medicine (PICOM)
7445 Mission Valley Road, Suite 105
Conference Room # Annex 2
San Diego, CA 92108**

Committee Members Present

Kitman Chan, Chair, Public Member
Michael Shi, L.Ac, Licensed Member
Jeannie Kang, L.Ac, Licensed Member
Francisco Hsieh, Public Member
Dr. Michael Corradino, DAOM, Licensed Member
Jamie Zamora, Public Member

Education Committee Members

*Kitman Chan, Chair, Public Member
Michael Shi, L.Ac, Licensed Member
Jeannie Kang, L.Ac, Licensed Member
Jamie Zamora, Public Member
Dr. Michael Corradino, DAOM, Licensed Member*

Staff Present

Terri Thorfinnson - Executive Officer
Tammy Graver - Board Liaison

EDUCATION COMMITTEE MEETING - 10:00 a.m.

1. Call to Order and Quorum established

2. Opening Remarks

Kitman noted that the meeting today is to discuss SB 1246.

3. Public Comment for Items not on the Agenda

No public comments made.

4. Implementation of SB 1246 (Discuss/ Action)

This meeting was to discuss how the Board is going to establish the foreign standards for foreign students taking the CALE. Terri explained that Business and Professions Code section 4939, effective January 1, 2017, was the Board's new authority for setting foreign equivalency curriculum standards. The purpose of the committee meeting was to discuss the next steps as to how to create the standards and timeline because these standards need to be in regulation and established in the regulations by January 1, 2017. There needs to be a final regulation package or recommendations as to what the standards would be by August 31st. The committee will meet again in September to review the final proposed standards and then a Board meeting mid-October to approve the standards and give Terri the authority to promulgate those regulations.

There was concern from some Board members as well as the public as to why the Board wouldn't have the same curriculum standards for foreign schools as it does for the domestic schools. There was a recommendation and discussion about selecting a panel of experts to give input for the curriculum standards for foreign schools for students wishing to apply for a California Acupuncture license. There are already licensed acupuncturists in California who have extensive clinical experience in California as well as some foreign training background that could provide the Board advice on foreign training. Legal Counsel made clear that the new statute going into effect January 1, 2017 requires the Board to establish standards for educational training and clinical experience received outside the U.S. and Canada. Michael remarked that approximately 20% of licensees in California are foreign trained.

A statement from Leondra Clark Harvey from the Assembly Committee of Business & Professions was read. She stated "It sounds like obviously there is a lot on concerns about the panel recruitment formation, etc. and if that's an issue that can't be resolved quickly because of the limited timeframe then maybe you all should just move forward with doing what Terri announced at the beginning of the meeting which was the goal, which was to have the same standards for foreign and domestic. If that is truly the case and that's the goal, then there are mechanisms and ways to do that that are pretty simple. I understand that the regulations have to be promulgated again but that could be as simple as cutting and pasting the domestic standards that you all have created, which are the highest standards in the country and also indicating that these are also applicable for foreign applicants as well. That's a process that can happen and your legal counsel of course could advise you on that. The authority for the CAB to create curriculum standards for foreign applicants is something that you already have so this isn't a new thing. You already have....you've been doing this. It's a matter of continuing

to do that and some of that is spelled out in statute already. I heard the comments about the residency, etc. being an equivalent to the curriculum. So this isn't anything new. You all could simply choose to continue the process you already have in statute and do the new pulmigation of the new regulations without changing them substantially. So I just want to put that out there because that's something in my view that that can be done, especially considering that all these concerns are coming forth in regards to the panel and getting them. The other thing that I just wanted to mention is process in terms of meeting. The agenda was not sent out via your list serve and the subject of this meeting was not included in your agenda. In addition there was no background information included and those are the types of things that need to be provided to members of the public so you're able to have a full and robust discussion. I think the subject was 1246 but it sounds very clear from the beginning of the announcement at the beginning of this meeting that this is really about the foreign equivalency requirements for curriculum so just wanted to note that that would be helpful for members of the public to have going forward."

Jamie made a motion for the Executive Officer to draft foreign curriculum standards using the same exact language used for domestic standards and present those at our next committee meeting. Dr. Corradino seconded the motion. Vote: Kidman-yes; Michael-no; Jeannie-yes, Jamie-yes; Francisco-no; Dr. Corradino-yes. MOTION PASSED 4-2.

Legal Counsel clarified that when talking about deleting regulations that are no longer valid because the statutes have changed, you would wait until the bill went into effect and then do a section 100 package. For changes to the regulation that are actual substantive changes that would require the standard regulation process.

Terri noted that there is no approval needed for the ACAOM changes to go into effect. Once the statute goes into effect they become the approver of schools. Terri has been working with ACAOM and sharing the results of whatever the Board has approved in terms of the school visits and they have been sharing the results of their accreditation decisions. Jamie requested that Terri keep giving the Board updates and let the public know as well. Jeannie requested that Terri give an update at the next Board meeting as to the correspondence she has with ACAOM.

5. Future Agenda Items

6. Adjournment

Public Comment on items of discussion will be taken during each item. Time limitations will be determined by the Chairperson. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda.

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AGENDA ITEM #5:

**PROPOSED REGULATORY
LANGUAGE FOR EDUCATION
TRAINING AND CLINICAL
EXPERIENCE OUTSIDE OF THE
UNITED STATES RELATED TO
IMPLEMENTATION OF SB 1246**

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| | |
|----------------|--|
| DATE | September 25, 2015 |
| TO | Education Committee |
| FROM | Terri Thorfinnson Executive Officer |
| SUBJECT | Proposed Curriculum Standards for International Education and Clinical Experience –create Title 16, CCR Section 1399.433 |

Issue: SB 1246 makes changes to the Board’s school oversight authority and, after January 1, 2017, provides new authority for the Board to set standards for approval of education training and clinical experience received outside the United States (U.S.).

Problem: With this new authority, the Board must create standards to evaluate training and clinical experience completed outside the U.S. To address this requirement, the proposed language creates a new regulatory section that set forth curriculum and clinical standards for training completed outside the U.S. The new section Title 16, California Code of Regulations (CCR) Section 1399.433 is proposed to be created as the section that contains the curriculum and clinical standards.

Background: SB 1246 changed Business and Professions Code (BPC) Section 4939, effective January 1, 2017.

Current Language Business and Professions Code (BPC) Section 4939 (a):

The Board shall establish standards for the approval of schools and colleges offering education and training in the practice of an acupuncturist, including standards for the faculty in those schools and colleges, completion of which will satisfy the requirements of BPC Section 4938 otherwise known as the licensure standards section.

New Language (Effective January 1, 2017) BPC Section 4939 (a) states:

(a) The Board shall establish standards for the approval of educational training and clinical experience received outside the United States.

(b) This section shall become operative on January 1, 2017.

This new section is the authority for the proposed regulatory language that creates a new section Title 16, CCR Section 1399.433 listed below.

Discussion: During the July 21, 2015 Education Committee meeting, the Committee made a recommendation to essentially adopt the current curriculum and clinical standards unchanged as the standards that apply to applicants who complete their education and training outside the U.S.. The discussion focused on the strong preference that the standards applied to foreign education be the same as those applied to domestic education. Thus, the same standards as set forth in Title 16, CCR Section 1399.434 are being proposed for the new section Title 16, CCR Section 1399.433. The curriculum and clinical standards are identical. Since it is a new section, all of the proposed language is underlined to indicate that it is newly proposed language that does not yet exist in regulation.

Recommendation: Recommend to the Board to approve the proposed statutory language for Title 16, Section 1399.433.

Proposed Regulatory Language

1399.433 Criteria for International Education Training and Clinical Experience (effective 1/1/17)

An applicant that has received educational training and clinical experience outside of the United States shall meet all of the following criteria contained herein. The total number of hours of all didactic and laboratory training shall consist of a minimum of 2,050 hours and a total of number of hours of supervised clinical instruction shall consist of a minimum of 950 hours, with the curriculum including the following components:

(a) Basic Sciences 350 hours

The curriculum in basic sciences shall prepare students to enter postsecondary upper division biomedical and clinical science courses and shall consist of at least 350 hours of didactic and laboratory instruction in the following basic science courses:

- (1) General biology;
- (2) Chemistry, including organic and biochemistry;
- (3) General physics, including a general survey of biophysics;
- (4) General psychology, including counseling skills;
- (5) Anatomy-- a survey of microscopic, gross anatomy and neuroanatomy;
- (6) Physiology-- a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry;
- (7) Pathology and Pathophysiology-- a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology;
- (8) Nutrition and vitamins;

(b) Acupuncture and Oriental Medicine Principles, Theories and Treatment 1,255 hours

The curriculum in acupuncture and Oriental medicine principles, theories and treatment shall consist of at least 1,255 hours of didactic instruction in the following principles, theories, prescription, and treatment procedures of acupuncture and Oriental medicine:

(1) Acupuncture and Oriental Medicine Principles and Theories

- (A) Oriental Medicine Principles and Theory;
- (B) Acupuncture Principles and Theory;
- (C) Oriental Massage (e.g., Tui Na or Shiatsu) Principles and Theory;
- (D) Chinese Herbal Medicine Principles and Theory, including relevant botany concepts (This subject area shall consist of at least 450 hours of instruction);
- (E) Acupuncture and Oriental Medicine Diagnosis;
- (F) Acupuncture and Oriental Medicine Specialties, including dermatology, gynecology, pediatrics, ophthalmology, orthopedics, internal medicine, geriatrics, family medicine, traumatology, and emergency care;
- (G) Classical acupuncture and Oriental medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing;
- (H) Modern acupuncture and Oriental medicine literature.

(2) Acupuncture and Oriental Medicine Treatment

- (A) Integrated acupuncture and Oriental medicine diagnostic and treatment procedures;
- (B) Acupuncture techniques and treatment procedures, including electroacupuncture;
- (C) Oriental massage (e.g., Tui Na or Shiatsu), acupressure, and other techniques utilizing manual therapy and mechanical devices;
- (D) Exercise therapy, including breathing, qi gong and taiji quan;
- (E) Herbal prescription, counseling and preparation;
- (F) Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling;
- (G) Cold and heat therapy, including moxibustion and ultrasound;
- (H) Lifestyle counseling, and self-care recommendations;
- (I) Adjunctive acupuncture procedures, including bleeding, cupping, gua sha, and dermal tacks;
- (J) Acupuncture micro therapies, including auricular and scalp therapy;
- (K) Hygienic standards, including clean needle techniques. The clean needle technique portion of this subject shall use as its primary reference the most current edition of the "Clean Needle Technique Manual" published by the National Acupuncture Foundation, or an equivalent standard which has been approved by the Board. Students shall successfully complete the clean needle technique portion of the hygienic standards subject prior to performing any needling techniques on human beings;
- (L) Equipment maintenance and safety;
- (M) Adjunctive acupoint stimulation devices, including magnets and beads.

(c) Clinical Medicine, Patient Assessment and Diagnosis 240 hours

The curriculum in clinical medicine, patient assessment and diagnosis shall consist of at least 240 hours of didactic instruction and shall prepare the student to possess the knowledge, skills and abilities necessary to utilize standard physical examinations, laboratory and imaging studies, and international classification of diseases (ICD) diagnostic principles to improve treatment efficacy, patient safety, referral, and continuity of care; to improve communication and collaboration of care with all other medical providers; to assist in the evaluation and documentation of patient progress; and to improve the acupuncturists understanding of biochemical etiology and pathology. Clinical medicine, patient assessment, and diagnostic skills curriculum shall include the following:

- (1) Comprehensive history taking;
- (2) Standard physical examination and assessment, including neuromusculoskeletal, orthopedic, neurological, abdominal, and ear, nose and throat examinations, and functional assessment;
- (3) Pharmacological assessment, emphasizing side-effects and herb-drug interactions;
- (4) Patient/practitioner rapport, communication skills, including multicultural sensitivity;
- (5) Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports;

- (6) Clinical reasoning and problem solving;
- (7) Clinical impressions and the formation of a working diagnosis, including acupuncture and Oriental medicine diagnoses, and the World Health Organization's international classification of diseases (ICD-9);
- (8) Awareness of at-risk populations, including gender, age, indigent, and disease specific patients;
- (9) Standard medical terminology;
- (10) Clinical sciences--a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health;
- (11) Clinical medicine--a survey of the clinical practice of medicine, osteopathy, dentistry, psychology, nursing, chiropractic, podiatry, naturopathy, and homeopathy to familiarize practitioners with the practices of other health care practitioners.

(d) Case Management 90 hours

The curriculum in case management shall consist of at least 90 hours of didactic instruction and shall prepare the student to manage patient care as a primary health care professional, and shall include instruction in the following subject:

- (1) Primary care responsibilities;
- (2) Secondary and specialty care responsibilities;
- (3) Psychosocial assessment;
- (4) Treatment contraindications and complications, including drug and herb interactions;
- (5) Treatment planning, continuity of care, referral, and collaboration;
- (6) Follow-up care, final review, and functional outcome measurements;
- (7) Prognosis and future medical care;
- (8) Case management for injured workers and socialized medicine patients, including a knowledge of workers compensation/labor codes and procedures and qualified medical evaluations;
- (9) Coding procedures for current procedural codes, including (CPT) and ICD-9 diagnoses;
- (10) Medical-legal report writing, expert medical testimony, and independent medical review;
- (11) Special care/seriously ill patients;
- (12) Emergency procedures.

(e) Practice Management 45 hours

The curriculum in practice management shall consist of at least 45 hours of didactic instruction and shall include the following subjects:

- (1) Record keeping, insurance billing and collection;
- (2) Business written communication;
- (3) Knowledge of regulatory compliance and jurisprudence (municipal, California, and federal laws, including OSHA, Labor Code, Health Insurance Portability and Accountability Act of 1996 (HIPAA));
- (4) Front office procedures;
- (5) Planning and establishing a professional office;
- (6) Practice growth and development;

- (7) Ability to practice in interdisciplinary medical settings including hospitals;
- (8) Risk management and insurance issues;
- (9) Ethics and peer review.

(f) Public Health 40 hours

The curriculum in public health shall consist of at least 40 hours of didactic instruction and shall include training in the principles of public health, including the following subjects:

- (1) Public and community health and disease prevention;
- (2) Public health education;
- (3) A minimum of eight (8) hours in first-aid and adult/child cardiopulmonary resuscitation (CPR) from the American Red Cross, American Heart Association or other organization with an equivalent course approved by the board;
- (4) Treatment of chemical dependency;
- (5) Communicable disease, public health alerts, and epidemiology.

(g) Professional Development 30 hours

The curriculum in professional development shall consist of at least 30 hours of didactic instruction and shall prepare the student with the skills to continue to expand their knowledge, including instruction in the following subjects:

- (1) Research and evidence based medicine;
- (2) Knowledge of academic peer review process;
- (3) Knowledge and critique of research methods;
- (4) History of medicine.

(h) Clinical Practice 950 hours

The curriculum in clinical practice shall consist of at least 950 hours in clinical instruction, 75% of which shall be in a clinic owned and operated by the school, which includes direct patient contact where appropriate in the following:

- (1) Practice Observation (minimum 150 hours)--supervised observation of the clinical practice of acupuncture and Oriental medicine with case presentations and discussion;
- (2) Diagnosis and evaluation (minimum 275 hours)--the application of Eastern and Western diagnostic procedures in evaluating patients;
- (3) Supervised practice (minimum 275 hours)--the clinical treatment of patients with acupuncture and oriental medicine treatment modalities listed in the Business and Professions Code section 4927(d) and 4937(b).
- (4) During the initial 275 hours of diagnosis, evaluation and clinical practice, the clinic supervisor shall be physically present at all times during the diagnosis and treatment of the patient. Thereafter, for a second period of 275 hours the clinic supervisor shall be physically present at the needling of the patient. The clinic supervisor shall otherwise be in close proximity to the location at which the patient is being treated during the clinical instruction. The student shall also consult with the clinic supervisor before and after each treatment.

AGENDA ITEM #6:

**CCR SECTION 1399.434
CURRICULUM STANDARDS FOR
TRAINING AFTER 1/1/05 RELATED
TO IMPLEMENTATION OF SB 1246**



| | |
|----------------|---|
| DATE | September 25, 2015 |
| TO | Education Committee |
| FROM | Terri Thorfinnson Executive Officer |
| SUBJECT | Proposed Amendments to Title 16, CCR Section 1399.434 |

Issue: SB 1246 makes changes to the Board's authority to establish training program standards as set forth in Business and Professions Code (BPC) section 4939 and Title 16, California Code of Regulations (CCR) Section 1399.434. The specific changes essentially narrow the Board's oversight authority to setting and approving curriculum including clinical standards; and eliminate the Board's authority to approve schools and inspect them after January 1, 2017.

Problem: The current regulations setting specific curriculum and clinical training are set forth in Title 16, CCR 1399.434. This section must be revised to reflect the Board's new role, which will no longer include school approval or inspections. The Committee requested that the curriculum and clinical standards remain the same; and thus are not revised in the proposed language below.

Background: BPC section 4939 is the authority for the Board's current curriculum and clinical standards that are included in Title 16, CCR Section 1399.434. This section is repealed effective January 1, 2017. However, BPC section 4927.5 provides the new authority for the current standards after January 1, 2017. Thus, the Board can, if it so chooses, to retain the curriculum and clinical standards contained in Title 16 CCR Section 1399.434. The only needed revision in this section is with respect to referring to the Board approved curriculum and clinical training and not Board approved training program.

Discussion: Since the Board retains its authority to set curriculum including clinical training or instruction, the focus of this proposed regulatory language is to have it reflect that the Board no longer approves training programs. To accomplish this revision, the opening paragraph has been proposed for deletion and the proper new language added as underlined language. The new language makes two changes: 1) revises the language to reflect the fact that the curriculum is Board approved, not the entire training program; 2) Moves the curriculum hour's requirements from the end of this section to the opening paragraph. This revision is easier to understand the requirements because it begins with the total number for didactic and clinical hours and then goes into the breakdown of these hours. This is a more logical order than having the total hours at the end of the section as they are now. No other changes are proposed to this section.

Recommendation: Recommend to the Board to approve the proposed regulatory language for this section.

Proposed Regulatory Language

1399.434 Criteria for Approval of Acupuncture and Oriental Medicine Training Program Curriculum (effective 1/1/17)

~~A school approved by the board shall use a training program, which related to the study and practice of acupuncture and oriental medicine, for all students entering its acupuncture and oriental medicine training program on or after January 1, 2005 that meets the following criteria:~~
To be approved by the Board an acupuncture and oriental medicine educational and training curriculum shall consist of at least 2,050 hours of didactic and laboratory training and at least 950 hours of supervised clinical instruction. The curriculum shall include the following criteria:

(a) Basic Sciences 350 hours

The curriculum in basic sciences shall prepare students to enter postsecondary upper division biomedical and clinical science courses and shall consist of at least 350 hours of didactic and laboratory instruction in the following basic science courses:

- (1) General biology;
- (2) Chemistry, including organic and biochemistry;
- (3) General physics, including a general survey of biophysics;
- (4) General psychology, including counseling skills;
- (5) Anatomy-- a survey of microscopic, gross anatomy and neuroanatomy;
- (6) Physiology-- a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry;
- (7) Pathology and Pathophysiology-- a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology;
- (8) Nutrition and vitamins;

(b) Acupuncture and Oriental Medicine Principles, Theories and Treatment 1,255 hours

The curriculum in acupuncture and Oriental medicine principles, theories and treatment shall consist of at least 1,255 hours of didactic instruction in the following principles, theories, prescription, and treatment procedures of acupuncture and Oriental medicine:

(1) Acupuncture and Oriental Medicine Principles and Theories

- (A) Oriental Medicine Principles and Theory;
- (B) Acupuncture Principles and Theory;
- (C) Oriental Massage (e.g., Tui Na or Shiatsu) Principles and Theory;
- (D) Chinese Herbal Medicine Principles and Theory, including relevant botany concepts (This subject area shall consist of at least 450 hours of instruction);
- (E) Acupuncture and Oriental Medicine Diagnosis;
- (F) Acupuncture and Oriental Medicine Specialties, including dermatology, gynecology, pediatrics, ophthalmology, orthopedics, internal medicine, geriatrics, family medicine, traumatology, and emergency care;

(G) Classical acupuncture and Oriental medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing;

(H) Modern acupuncture and Oriental medicine literature.

(2) Acupuncture and Oriental Medicine Treatment

(A) Integrated acupuncture and Oriental medicine diagnostic and treatment procedures;

(B) Acupuncture techniques and treatment procedures, including electroacupuncture;

(C) Oriental massage (e.g., Tui Na or Shiatsu), acupressure, and other techniques utilizing manual therapy and mechanical devices;

(D) Exercise therapy, including breathing, qi gong and taiji quan;

(E) Herbal prescription, counseling and preparation;

(F) Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling;

(G) Cold and heat therapy, including moxibustion and ultrasound;

(H) Lifestyle counseling, and self-care recommendations;

(I) Adjunctive acupuncture procedures, including bleeding, cupping, gua sha, and dermal tacks;

(J) Acupuncture micro therapies, including auricular and scalp therapy;

(K) Hygienic standards, including clean needle techniques. The clean needle technique portion of this subject shall use as its primary reference the most current edition of the "Clean Needle Technique Manual" published by the National Acupuncture Foundation, or an equivalent standard which has been approved by the Board. Students shall successfully complete the clean needle technique portion of the hygienic standards subject prior to performing any needling techniques on human beings;

(L) Equipment maintenance and safety;

(M) Adjunctive acupoint stimulation devices, including magnets and beads.

(c) Clinical Medicine, Patient Assessment and Diagnosis 240 hours

The curriculum in clinical medicine, patient assessment and diagnosis shall consist of at least 240 hours of didactic instruction and shall prepare the student to possess the knowledge, skills and abilities necessary to utilize standard physical examinations, laboratory and imaging studies, and international classification of diseases (ICD) diagnostic principles to improve treatment efficacy, patient safety, referral, and continuity of care; to improve communication and collaboration of care with all other medical providers; to assist in the evaluation and documentation of patient progress; and to improve the acupuncturists understanding of biochemical etiology and pathology. Clinical medicine, patient assessment, and diagnostic skills curriculum shall include the following:

(1) Comprehensive history taking;

(2) Standard physical examination and assessment, including neuromusculoskeletal, orthopedic, neurological, abdominal, and ear, nose and throat examinations, and functional assessment;

(3) Pharmacological assessment, emphasizing side-effects and herb-drug interactions;

(4) Patient/practitioner rapport, communication skills, including multicultural sensitivity;

- (5) Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports;
- (6) Clinical reasoning and problem solving;
- (7) Clinical impressions and the formation of a working diagnosis, including acupuncture and Oriental medicine diagnoses, and the World Health Organization's international classification of diseases (ICD-9);
- (8) Awareness of at-risk populations, including gender, age, indigent, and disease specific patients;
- (9) Standard medical terminology;
- (10) Clinical sciences--a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health;
- (11) Clinical medicine--a survey of the clinical practice of medicine, osteopathy, dentistry, psychology, nursing, chiropractic, podiatry, naturopathy, and homeopathy to familiarize practitioners with the practices of other health care practitioners.

(d) Case Management 90 hours

The curriculum in case management shall consist of at least 90 hours of didactic instruction and shall prepare the student to manage patient care as a primary health care professional, and shall include instruction in the following subject:

- (1) Primary care responsibilities;
- (2) Secondary and specialty care responsibilities;
- (3) Psychosocial assessment;
- (4) Treatment contraindications and complications, including drug and herb interactions;
- (5) Treatment planning, continuity of care, referral, and collaboration;
- (6) Follow-up care, final review, and functional outcome measurements;
- (7) Prognosis and future medical care;
- (8) Case management for injured workers and socialized medicine patients, including a knowledge of workers compensation/labor codes and procedures and qualified medical evaluations;
- (9) Coding procedures for current procedural codes, including (CPT) and ICD-9 diagnoses;
- (10) Medical-legal report writing, expert medical testimony, and independent medical review;
- (11) Special care/seriously ill patients;
- (12) Emergency procedures.

(e) Practice Management 45 hours

The curriculum in practice management shall consist of at least 45 hours of didactic instruction and shall include the following subjects:

- (1) Record keeping, insurance billing and collection;
- (2) Business written communication;
- (3) Knowledge of regulatory compliance and jurisprudence (municipal, California, and federal laws, including OSHA, Labor Code, Health Insurance Portability and Accountability Act of 1996 (HIPAA));
- (4) Front office procedures;
- (5) Planning and establishing a professional office;

- (6) Practice growth and development;
- (7) Ability to practice in interdisciplinary medical settings including hospitals;
- (8) Risk management and insurance issues;
- (9) Ethics and peer review.

(f) Public Health 40 hours

The curriculum in public health shall consist of at least 40 hours of didactic instruction and shall include training in the principles of public health, including the following subjects:

- (1) Public and community health and disease prevention;
- (2) Public health education;
- (3) A minimum of eight (8) hours in first-aid and adult/child cardiopulmonary resuscitation (CPR) from the American Red Cross, American Heart Association or other organization with an equivalent course approved by the board;
- (4) Treatment of chemical dependency;
- (5) Communicable disease, public health alerts, and epidemiology.

(g) Professional Development 30 hours

The curriculum in professional development shall consist of at least 30 hours of didactic instruction and shall prepare the student with the skills to continue to expand their knowledge, including instruction in the following subjects:

- (1) Research and evidence based medicine;
- (2) Knowledge of academic peer review process;
- (3) Knowledge and critique of research methods;
- (4) History of medicine.

(h) Clinical Practice 950 hours

The curriculum in clinical practice shall consist of at least 950 hours in clinical instruction, 75% of which shall be in a clinic owned and operated by the school, which includes direct patient contact where appropriate in the following:

- (1) Practice Observation (minimum 150 hours)--supervised observation of the clinical practice of acupuncture and Oriental medicine with case presentations and discussion;
- (2) Diagnosis and evaluation (minimum 275 hours)--the application of Eastern and Western diagnostic procedures in evaluating patients;
- (3) Supervised practice (minimum 275 hours)--the clinical treatment of patients with acupuncture and oriental medicine treatment modalities listed in the Business and Professions Code section 4927(d) and 4937(b).
- (4) During the initial 275 hours of diagnosis, evaluation and clinical practice, the clinic supervisor shall be physically present at all times during the diagnosis and treatment of the patient. Thereafter, for a second period of 275 hours the clinic supervisor shall be physically present at the needling of the patient. The clinic supervisor shall otherwise be in close proximity to the location at which the patient is being treated during the clinical instruction. The student shall also consult with the clinic supervisor before and after each treatment.

~~(i) A board approved training program shall consist of at least 2,050 hours of didactic and laboratory training and at least 950 hours of supervised clinical instruction. The course work shall extend over a minimum period of four (4) academic years, eight (8) semesters, twelve (12) quarters, nine (9) trimesters, or thirty six (36) months.~~

AGENDA ITEM #7:

CCR SECTION 1399.436

CURRICULUM STANDARDS FOR

TRAINING BEGINNING PRIOR TO

1/1/05 RELEATED TO

IMPLEMENTATION OF SB 1246

ACUPUNCTURE BOARD

1747 North Market Boulevard, Suite 180, Sacramento, CA 95834
(916) 515-5200 FAX (916) 928-2204 www.acupuncture.ca.gov



| | |
|----------------|---|
| DATE | September 25, 2015 |
| TO | Education Committee |
| FROM | Terri Thorfinnson Executive Officer |
| SUBJECT | Proposed Amendments to Title 16, CCR Section 1399.436 |

Issue: SB 1246 makes changes to Business and Professions Code (BCP) section 4939 that provides the Board's authority to establish training program standards. Effective January 1, 2017, that authority changes who approves schools and curriculum. This current authority is repealed from this section and replaced with new authority related to establishing foreign equivalency training standards. Additionally, BPC Section 4927.5, effective January 1, 2017, requires a curriculum include at least 3,000 hours.

Problem: This current regulation relates to school approval and contains a curriculum standard that is in conflict with the statute as of January 1, 2017.

Background:

The pre-2005 curriculum standard only required 2,348 hours of which 800 hours are clinical training. The standard created in SB 1246 requires 3,000 hours, of which, 950 are clinical training; this is essentially the same standard as is currently set forth in CCR Section 1399.434.

Discussion: Title 16, California Code of Regulations (CCR) 1399.436 contains the curriculum standards prior to 2005 and applies to those who enrolled in their training prior to 2005. These standards are significantly different than the post 2005 curriculum standards. When the new standards set forth in Title 16, CCR Section 1399.434 were promulgated in 2005, it made sense to have pre-2005 standards and post 2005 in order to allow for a gradual phase in of these new standards and not preclude those who had studied and graduated under the older standards from being eligible to take the exam precisely because they did not meet the new standards. If there was not a gradual phase period for the new standards, graduates from programs designed under the pre-2005 standards would have to repeat a significant amount of their course work and complete new course work in order to meet current standards. However, the new standards set forth in CCR Section 1399.434 have been in effect for more than 10 years, which is well beyond the time needed for phasing in the new standards. Thus, the pre-2005 standards have become obsolete and should be repealed, leaving room for a single curriculum standard moving forward. Moreover, this regulation will be in conflict with the statute; therefore, staff recommends it be repealed. A regulation that conflicts with statutory law cannot be enforced.

One of the policy consequences of repealing CCR Section 1399.436 is that those who did course work prior to 2005 would not be eligible to take the California Acupuncture Licensing Examination (CALE) because their education no longer meets the Board's current and future curriculum standards. From the perspective of public safety, there is no good argument to preserve the pre-2005 curriculum standards because they are significantly lower standards than the current standard contained in CCR Section 1399.434. Additionally, there is a public safety concern about the age of the educational training. In continuing to preserve this old, less rigorous standard as a pathway for licensure, it essentially creates a loophole exemption in the Board's current standards that may pose a risk to public safety.

An additional concern is that in establishing a future standard for foreign equivalency, it becomes problematic to establish two different standards. One of the Education Committee's articulated policies is to make sure the domestic and foreign standards are the same.

Recommendation: Recommend to the Board to approve the proposed repeal of Title 16, CCR Section 1399.436.

Proposed Regulatory Language

~~1399.436. Criteria for Approval of Acupuncture Training Program.~~

~~A school approved by the board shall use a training program for all students enrolled in its acupuncture and Oriental medicine training program before January 1, 2005 that meets the following criteria:~~

- ~~(a) The curriculum shall include adequate theoretical training in the following:~~

~~Subject~~

~~Minimum Class Hours~~

- ~~(1) General biology.~~
- ~~(2) Chemistry—including organic and biochemistry.~~
- ~~(3) General physics—including a general survey of biophysics.~~
- ~~(4) General psychology—including counseling skills.~~
- ~~(5) Anatomy—a survey of microscopic, gross anatomy and neuroanatomy.~~
- ~~(6) Physiology—a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry.~~
- ~~(7) Pathology—a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology.~~
- ~~(8) Nutrition and vitamins.~~
400
- ~~(9) History of medicine—a survey of medical history, including transcultural healing practices.~~
- ~~(10) Medical terminology—fundamentals of English language medical terminology.~~
30
- ~~(11) Clinical sciences—a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health.~~
- ~~(12) Clinical medicine—a survey of the clinical practice of medicine, osteopathy, dentistry, psychology, nursing, chiropractic, podiatry, and homeopathy to familiarize practitioners with the practices of other health care practitioners.~~
- ~~(13) Western pharmacology.~~
- ~~(14) A minimum of eight (8) hours in a certified course offering first-aid and adult/child cardiopulmonary resuscitation (CPR). Such course shall be taken from the American Red Cross, American Heart Association or other organization with an equivalent course work approved by the board.....128 class hours~~
- ~~(15) Traditional Oriental medicine—a survey of the theory and practice of traditional diagnostic and therapeutic procedures.~~
- ~~(16) Acupuncture anatomy and physiology—fundamentals of acupuncture, including the meridian system, special and extra loci, and auriculotherapy.~~
- ~~(17) Acupuncture techniques—instruction in the use of needling techniques, moxibustion, and electroacupuncture, including contraindication and complications. Students shall either (1) successfully complete a course which requires a student to pass an examination in clean needle technique, taught at a board approved school that uses as its primary reference the most current edition of the "Clean Needle Technique Manual" published by the National Acupuncture~~

Foundation, or (2) successfully complete a Clean Needle Technique course administered by the Council of Colleges of Acupuncture and Oriental Medicine.

~~(18) Acupressure.~~

~~(19) Breathing techniques—introductory course in QiGong.~~

~~(20) Traditional Oriental exercise—introductory course in Tai Chi Chuan.....660 minimum class hours~~

~~660~~

~~(21) Traditional Oriental herbology including botany—a portion of the hours shall be given in a clinical setting.....300 minimum class hours~~

~~(22) Practice management—instruction in the legal and ethical aspects of maintaining a professional practice, including record keeping, professional liability, patient accounts, and referral procedures.~~

~~(23) Ethics relating to the practice of acupuncture.....30 minimum class hours~~

~~(b) The curriculum shall include adequate clinical instruction, 75% of which shall be in a clinic which is owned and operated by the training program, which includes direct patient contact where appropriate in the following:~~

~~(1) Practice observation—supervised observation of the clinical practice of acupuncture with case presentations and discussions.~~

~~(2) Diagnosis and evaluation—the application of Eastern and Western diagnostic procedures in evaluating patients.~~

~~(3) Supervised practice—the clinical treatment of a patient with acupuncture~~

~~.....800 minimum class hours~~

~~During the initial 235 hours of diagnosis, evaluation and clinical practice the supervisor shall be physically present at all times during the diagnosis and treatment of the patient. Thereafter, for a second period of 235 hours the supervisor shall be physically present at the needling of the patient. The supervisor shall otherwise be in close proximity to the location at which the patient is being treated during the clinical instruction. The student shall also consult with the supervisor before and after each treatment.~~

~~(c) The total number of hours of all theoretical training shall consist of a minimum of 1,548 hours and the total number of hours of clinical instruction shall consist of a minimum of 800 hours., and the course work shall extend over minimum period of four~~

~~(4) academic years, eight (8) semesters, twelve (12) quarters, nine (9) trimesters, or thirty-six (36) months.~~

~~(d) Candidates for admission shall have successfully completed an approved high school course of study or have passed a standard equivalency test.~~

~~(e) The training program should be located in a state university or college, an institution approved under Article 4 (commencing with Section 94770) of Chapter 7 of Part 59 of the Education Code, or in the case of training programs located outside California, in an institution which is approved by the appropriate governmental accrediting authority or an accrediting agency recognized by the U.S. Department of Education.~~

~~(f) The training program shall develop an evaluation mechanism to determine the effectiveness of its theoretical and clinical program.~~

~~(g) Coursework shall carry academic credit.~~

~~(h) The director and/or supervisor(s) of the clinical portion of the training program shall be a licensed acupuncturist or other licensed practitioner authorized to practice acupuncture.~~

~~(i) All instructors shall be competent to teach their designated courses by virtue of their education, training and experience.~~

~~(j) Each approved program shall receive accreditation or approval under Article 4 (commencing with Section 94770) of Chapter 7 of Part 59 of the Education Code, or the approval of the program by the board shall automatically lapse.~~

~~(k) Each training program shall develop a mechanism to evaluate and award transfer credit to students for prior coursework and experience which is equivalent to that coursework and clinical instruction required in subsections (b) and (d). The training program's policies and procedures for evaluating and awarding transfer credit shall be set forth in writing and submitted to the board. Such policies and procedures shall include all of the following:~~

~~(1) Credit shall only be awarded for actual coursework or directly relevant experience received by the student. As used in this regulation, "experience" means academically relevant learning which involved the student directly in the area of the curriculum required in this section and includes integrated field and clinical internships, apprenticeships, tutorial programs and cooperative educational programs.~~

~~(2) Where the coursework and clinical instruction were completed at an acupuncture school not approved by the board, the evaluation shall include an examination administered by the school in the subject area(s) in which transfer credit may be awarded.~~

~~(3) The outcome of the prior education and experience shall be equivalent to that of an average student who has completed the same subject(s) in the training program and shall meet the curriculum standards and graduation requirements of the training program.~~

~~(4) Up to 100% transfer credit may be awarded for coursework and clinical instruction completed successfully at another acupuncture school or college which is approved by the board.~~

~~(5) Up to 100% transfer credit may be awarded for courses completed successfully in biology, chemistry, physics, psychology, anatomy, physiology, pathology, nutrition and vitamins, history of medicine, medical terminology, clinical science, clinical medicine, Western pharmacology, cardiopulmonary resuscitation, practice management, and ethics at a school which is approved under Article 4 (commencing with Section 94770) of Chapter 7 of Part 59 of the Education Code or by an accrediting agency recognized by the U.S. Department of Education.~~

~~(6) Credit for clinical coursework and instruction in traditional Oriental medicine, acupuncture anatomy and physiology, acupuncture techniques, acupressure, breathing techniques, traditional Oriental exercise, or traditional Oriental herbology completed successfully at a school which is not approved by the board may be awarded by a school approved by the board, provided that at least 50% of the course hours in these subject areas are completed successfully at a school approved by the board.~~

~~(7) The entire record of the training program's evaluation and award of the student's transfer credit shall be included in the student's academic file and shall be made an official part of the student's transcript which shall be filed with the board upon request of the student.~~

~~(8) All students shall receive upon matriculation a copy of the training program's policies and procedures for evaluating and awarding transfer credit.~~

AGENDA ITEM #8:

**CCR SECTION 1399.437
DOCUMENTATION REQUIRED
FOR BOARD APPROVAL OF
CURRICULUM RELATED TO
IMPLEMENTATION OF SB 1246**

ACUPUNCTURE BOARD

1747 North Market Boulevard, Suite 180, Sacramento, CA 95834
(916) 515-5200 FAX (916) 928-2204 www.acupuncture.ca.gov



| | |
|----------------|---|
| DATE | September 25, 2015 |
| TO | Education Committee |
| FROM | Terri Thorfinnson Executive Officer |
| SUBJECT | Proposed Amendments to Title 16, CCR Section 1399.437 Requirements for Board Approval of Curriculum |

Issue: SB 1246 makes changes to the way in which curriculum is approved. Business and Professions Code (BPC) Section 4927.5 requires that Board approve all curriculum within 30 days.

Problem: SB 1246 changes the Board's school oversight authority. The new authority set forth in BPC section 4927.5 expands the definition of "approved training program" and requires all curriculum be approved by the Board. The Board's current authority for approving schools becomes inoperative January 1, 2017. Thus, the Board needs to create a new process for curriculum approval, which this proposed regulation provides.

Background: SB 1246 changed the definition of what constitutes an approved training program. This change was accomplished in two ways: 1) Making the current Board authority for school approval inoperative as of January 1, 2017; 2) Creating a new definition of what constitutes an approved curriculum set forth in BPC Section 4927.5.

BPC section 4927.5 states:

(a) For purposes of this chapter, "approved educational and training program" means a school or college offering education and training in the practice of an acupuncturist that meets all of the following requirements:

(1) Offers curriculum that includes at least 3,000 hours of which at least 2,050 hours are didactic and laboratory training, and at least 950 hours are supervised clinical instruction. Has submitted that curriculum to the board, and has received board approval of the curriculum.

(2) Has received full institutional approval under Article 6 (commencing with Section 94885) of Chapter 8 of Part 59 of Division 10 of Title 3 of the Education Code in the field of traditional Asian medicine, or in the case of institutions located outside of this state, approval by the appropriate governmental educational authority using standards equivalent to those of Article 6 (commencing with Section 94885) of Chapter 8 of Part 59 of Division 10 of Title 3 of the Education Code.

(3) Meets any of the following:

(A) Is accredited by the Accreditation Commission for Acupuncture and Oriental Medicine.

(B) Has been granted candidacy status by the Accreditation Commission for Acupuncture and Oriental Medicine.

(C) Has submitted a letter of intent to pursue accreditation to the Accreditation Commission for Acupuncture and Oriental Medicine within 30 days of receiving full institutional approval pursuant to paragraph (2), and is granted candidacy status within three years of the date that letter was submitted.

(b) Within 30 days after receiving curriculum pursuant to paragraph (1), the board shall review the curriculum, determine whether the curriculum satisfies the requirements established by the board, and notify the school or college, the Accreditation Commission for Acupuncture and Oriental Medicine, and Bureau of Private and Postsecondary Education of whether the board has approved the curriculum.

(c) This section shall become operative on January 1, 2017.

Discussion: SB 1246 made changes to the Board's school oversight and definition of approved training program. Under this new authority to approve curriculum, the Board must create a new regulatory process for approving curriculum. The proposed regulatory language sets forth the curriculum approval process and required documentation. The proposed language addresses the consequences for incomplete applications. Applications that are incomplete shall not be deemed received pursuant to BPC Section 4927.5 (b). Those incomplete applications shall be deemed abandoned if not completed within 30 days of receiving notification that the application is incomplete. An application submitted subsequent to the abandonment of a former application shall be treated as a new application.

This regulation deems that any changes to the curriculum after the Board has approved it shall constitute a new curriculum, which requires Board approval pursuant to BPC Section 4927.5. This regulation also requires prior Board approval of any curriculum changes. This will prevent any unapproved, non-compliant course work from being taught to students while attending schools with Board approved curriculum. It also prevents students be denied admission to take the California Acupuncture Licensing Examination (CALE) because they do not meet the Board's curriculum standards. A new curriculum approval form is incorporated by reference.

Recommendation: Recommend to the Board to approve the proposed regulatory language.

Proposed Regulatory Language

1399.437 Requirements for Board Approval of Curriculum

~~Educational institutions or programs seeking approval of an acupuncture training program shall provide the board with such documents and other evidence as may be necessary for the board to determine the actual nature and extent of the training offered, including but not limited to, catalogues, course description, curricula plans, and study bulletins.~~

(a) Educational and training programs seeking board approval of its curriculum shall submit an “Application for Board Approval of Curriculum” (rev 1/1/17), incorporated herein by reference. The application shall be accompanied by the following information and documentation:

1. Educational and training program legal name, current address, phone number, website, contact person, and program(s) requested for board curriculum approval.
2. A completed a course-by-course list for each course that meets the board required coursework with course number, clock hour, and course unit to document that the curriculum meets the requirements for Section 1399.434.
3. A list of all courses in the program requested for board approval of curriculum with course hours, course units, course number and course title.
4. A copy of all course syllabi for program(s) requested for board curriculum approval; and
5. A copy of the current course catalog.

All documentation submitted shall be in English.

(b) Application for Board Approval of Curriculum shall be deemed received pursuant to Business and Professions Code section 4927.5(b) when the board has received a complete application as defined in subdivision (a) of this regulation.

(c) An educational and training program whose application for board approval of curriculum is incomplete shall be notified in writing that the application is incomplete and what documentation is still needed. An educational and training program’s incomplete application shall be deemed abandoned if the educational and training program does not submit all required documents to the board within 30 days of the mailing of the written notification that the application is incomplete.

(d) An application submitted subsequent to the abandonment of a former application shall be treated as a new application.

(e) Any changes to curriculum after Board approval constitutes a new curriculum and requires Board approval pursuant to BPC 4927.5. The approval shall be attained prior to implementing the new curriculum.

**Department of Consumer Affairs
California Acupuncture Board**

**APPLICATION FOR
BOARD APPROVAL OF CURRICULUM**



**1747 North Market Blvd, Suite 180
Sacramento, CA 95834
Phone: (916) 515-5200
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SECTION A – GENERAL INFORMATION

APPLICATION DATE _____

NAME OF SCHOOL _____

ADDRESS OF PHYSICAL LOCATION OF THE SCHOOL CAMPUS:

STREET ADDRESS _____

CITY, STATE, ZIP _____

SCHOOL PHONE NUMBER(S) _____

SCHOOL FAX NUMBER _____

SCHOOL EMAIL _____

MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

STREET ADDRESS _____

CITY, STATE, ZIP _____

NAME AND TITLE OF CONTACT PERSON

CONTACT PERSON NAME _____

TITLE _____

DIRECT PHONE NUMBER _____

EMAIL _____

PROGRAM REQUESTED FOR BOARD APPROVAL OF CURRICULUM

SECTION B: COURSE-BY-COURSE LIST OF REQUIRED CURRICULUM

CURRICULUM for _____ ACADEMIC YEAR _____
The Acupuncture Board Curriculum Requirements, per California Code of Regulations Section, 1399.434.
(effective January 5, 2005)

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|---|---------------------------------------|---------------|----------------|
| (a) Basic Sciences350 hours | | | |
| (1) General Biology; | | | |
| (2) Chemistry, including organic and biochemistry; | | | |
| (3) General Physics, including a general survey of biophysics; | | | |
| (4) General psychology, including counseling skills; | | | |
| (5) Anatomy—a survey of microscopic, gross anatomy and neuroanatomy; | | | |
| (6) Physiology---a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry; | | | |
| (7) Pathology and Pathophysiology—a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology; | | | |
| (8) Nutrition and vitamins. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|---|---------------------------------------|---------------|----------------|
| (b) Acupuncture and Oriental Medicine Principles, Theories and Treatment....1,255 Hours | | | |
| (1) Acupuncture and Oriental Medicine Principles and Theories | | | |
| (A) Oriental Medicine Principles and Theory; | | | |
| (B) Acupuncture Principles and Theory; | | | |
| (C) Oriental Massage (Tui Na or Shiatsu) Principles and Theory; | | | |
| (D) Chinese Herbal Medicine Principles and Theory, including relevant botany concepts (This subject area shall consist of at least 450 hours of instruction); | | | |
| (E) Acupuncture and Oriental Medicine Diagnosis; | | | |
| (F) Acupuncture and Oriental Medicine Specialties, including dermatology, gynecology, pediatrics, ophthalmology, orthopedics, internal medicine, geriatrics, family medicine, traumatology, and emergency care; | | | |

| | | | |
|--|--|--|--|
| (G) Classical acupuncture and Oriental medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing; | | | |
| (H) Modern acupuncture and Oriental medicine literature. | | | |
| (2) Acupuncture and Oriental Medicine Treatment | | | |
| (A) Integrated acupuncture and Oriental medicine diagnostic and treatment procedures; | | | |
| (B) Acupuncture techniques and treatment procedures, including electroacupuncture; | | | |
| (C) Oriental massage (e.g., Tui Na or Shiatsu), acupressure and other techniques utilizing manual therapy and mechanical devices; | | | |
| (D) Exercise therapy, including breathing, qi gong and taiji quan; | | | |
| (E) Herbal prescription, counseling and preparation; | | | |
| (F) Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling; | | | |
| (G) Cold and heat therapy, including moxibustion and ultrasound; | | | |
| (H) Lifestyle counseling, and self-care recommendations | | | |
| (I) Adjunctive acupuncture procedures, including bleeding, cupping, gua sha, and dermal tacks; | | | |
| (J) Acupuncture micro therapies, including auricular and scalp therapy; | | | |
| (K) Hygienic standards, including clean needle techniques. The clean needle technique portion of this subject shall use as its primary reference the most current edition of the "Clean Needle Technique Manual" published by the National Acupuncture Foundation, or an equivalent standard, which has been approved by the Board. Students shall successfully complete the clean needle technique portion of the hygienic standards subject prior to performing any needling techniques on human beings; | | | |
| (L) Equipment maintenance and safety; | | | |
| (M) Adjunctive acupoint stimulation devices, including magnets and beads. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|---|---|-----------------------|------------------------|
| (c) Clinical Medicine, Patient Assessment and Diagnosis.....240 hours | | | |
| (1) Comprehensive history taking; | | | |
| (2) Standard physical examination and assessment, including neuromusculoskeletal, orthopedic, neurological, abdominal, and ear, nose and throat examinations, and functional assessment; | | | |
| (3) Pharmacological assessment, emphasizing side-effects and herb-drug interactions; | | | |
| (4) Patient/practitioner rapport, communication skills, including multicultural sensitivity; | | | |
| (5) Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporation the resulting data and reports; | | | |
| (6) Clinical reasoning and problem solving; | | | |
| (7) Clinical impressions and the formation of a working diagnosis, including acupuncture and Oriental medicine diagnoses, and the World Health Organization's international classification of diseases (ICD-9); | | | |
| (8) Awareness of at-risk populations, including gender, age, indigent, and disease specific patients; | | | |
| (9) Standard medical terminology; | | | |
| (10) Clinical sciences—a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health; | | | |
| (11) Clinical medicine—a survey of the clinical practice of medicine, osteopathy, dentistry, psychology, nursing, chiropractic, podiatry, naturopathy, and homeopathy to familiarize practitioners with the practices of other health care practitioners with the practices of other health care practitioners. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|---|---|-----------------------|------------------------|
| (d) Case Management.....90 hours | | | |
| (1) Primary care responsibilities; | | | |
| (2) Secondary and specialty care responsibilities; | | | |
| (3) Psychosocial assessment; | | | |
| (4) Treatment contraindications and complications, including drug and herb interactions; | | | |
| (5) Treatment planning, continuity of care, referral, and collaboration; | | | |
| (6) Follow-up care, final review, and functional outcome measurements; | | | |
| (7) Prognosis and future medical care; | | | |
| (8) Case management for injured workers and socialized medicine patients, including a knowledge of workers compensation/labor codes and procedures and qualified medical evaluations; | | | |
| (9) Coding procedures for current procedural codes, including CPT and ICD-9 diagnoses; | | | |
| (10) Medical-legal report writing, expert medical testimony, and independent medical review; | | | |
| (11) Special care/seriously ill patients; | | | |
| (12) Emergency procedures. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|--|---------------------------------------|---------------|----------------|
| (e) Practice Management.....45 hours | | | |
| (1) Record keeping, insurance billing and collection; | | | |
| (2) Business written communication; | | | |
| (3) Knowledge of regulatory compliance and jurisprudence (municipal, California, and federal laws, including OSHA, Labor Code, Health Insurance Portability and Accountability Act of 1996 (HIPAA)); | | | |
| (4) Front office procedures; | | | |
| (5) Planning and establishing a professional office; | | | |
| (6) Practice growth and development; | | | |
| (7) Ability to practice in interdisciplinary medical settings including hospitals; | | | |
| (8) Risk management and insurance issues; | | | |
| (9) Ethics and peer review. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|--|---------------------------------------|---------------|----------------|
| (f) Public Health.....40 hours | | | |
| (1) Public and community health and disease prevention; | | | |
| (2) Public health education; | | | |
| (3) A minimum of eight (8) hours in first-aid and adult/child cardiopulmonary resuscitation (CPR) from the American Red Cross, American Heart Association or other organization with an equivalent course approved by the board; | | | |
| (4) Treatment of chemical dependency; | | | |
| (5) Communicable disease, public health alerts, and epidemiology. | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|--|---------------------------------------|------------|-------------|
| (g) Professional Development.....30 hours | | | |
| (1) Research and evidence based medicine; | | | |
| (2) Knowledge of academic peer review process; | | | |
| (3) Knowledge and critique of research methods; | | | |
| (4) History of medicine | | | |

TOTAL CLOCK HOURS _____

| Acupuncture Board Requirement | COURSE NUMBER (per school catalog) | CLOCK HOUR | COURSE UNIT |
|---|---------------------------------------|------------|-------------|
| (h) Clinical Practice.....950 hours | | | |
| (1) Practice Observation (minimum 150 hours)—supervised observation of the clinical practice of acupuncture and Oriental medicine with case presentations and discussion; | | | |
| (2) Diagnosis and evaluation (minimum 275 hours)—the application of Eastern and Western diagnostic procedures in evaluating patients; | | | |
| (3) Supervised practice (minimum 275 hours)—the clinical treatment of patients with acupuncture and oriental medicine treatment modalities listed in the Business and Professions Code section 4927(d) and 4937(b). | | | |

TOTAL CLOCK HOURS _____

TOTAL PROGRAM CLOCK HOURS _____

To be approved by the board, an acupuncture and oriental medicine shall consist of at least 2,050 hours of didactic and laboratory training and at least 950 hours of supervised clinical instruction.

SECTION D – COPY OF ALL COURSE SYLLABI

PLEASE SUBMIT A COPY OF ALL COURSE SYLLABI FOR COURSE WORKS LISTED IN SECTION B AND C OF THE APPLICATION.

SECTION E - A CURRENT COURSE CATALOG

HYPERLINK TO CURRENT COURSE CATALOG*:

*If your school current course catalog is not on your webpage, please attach a hard-copy with your submission.