

ISSUE #1: (STRUCTURAL BUDGET DEFICIT). What is the CAB's plan to balance its budget?

Staff Recommendation: *The CAB should discuss its plan to address the structural imbalance or otherwise avoid insolvency, such as implementing minimum reserve thresholds, seeking authority to charge a fee for school curriculum approval (Issue #6) or continuing education course review (Issue #10), pursuing improvements or cost savings identified under the Business Modernization Plan (Issue #2), or any other potential options.*

Response:

The Board has been operating with structural imbalance for a period of time to reduce its fund balance reserve. At the end of fiscal year 2010-11, the Board's fund balance reserve was approximately 37 months, which exceeded its 24-month statutory limit.

In 2011-12, the Board provided a \$5 million General Fund (GF) loan, which reduced the fund balance reserve to approximately 8.4 months. Since 2011-12, the structural imbalance has contributed to reducing the fund balance reserve to approximately 4.9 months by the end of 2015-16. In 2016-17, \$4 million of the GF loan was repaid with interest, which increased the fund balance reserve to approximately 16.6 months.

At the current rate of revenues and expenditure, the Board will remain solvent until 2022-23. The Board is monitoring the structural imbalance and will likely be required to adjust fees in the next few years.

The Board's fee limits are set in statute and implemented through regulations. Except for the delinquent license renewal fee (set regulatorily at \$25 pursuant to 16 CCR § 1399.460(f) and a statutory limit of \$150 pursuant to BPC § 163.5), which generates minimal revenue, all of the Board's other fees are currently set at their statutory limit. Additionally, Board staff has identified that the Board has statutory authority pursuant to BPC § 4945 (b) to approve continuing education providers and set a fee covering the cost of approval and monitoring. The Board will review a regulatory fee proposal at an upcoming Board meeting. As a result, any increases to Board fees (except the delinquent license renewal fee, and continuing education course fee, which can be increased through regulations) would require a statutory change.

ISSUE #2: (BUSINESS MODERNIZATION PLAN AND BREEZE). What is the CAB's status on the transition to BreEZe or its alternative?

Staff Recommendation: *The CAB should discuss its progress with the Business Modernization Plan, when it anticipates moving to the next stage in CalTech's Project Approval Lifecycle, whether the BreEZe contributions will cover the costs of the Business Modernization Plan, and how the redirection of staff resources will impact the CAB's operations.*

Response:

The Board was previously scheduled to adopt the BreEZe system as part of Release #3. Those Department of Consumer Affairs entities, including the Board, which were scheduled for Release #3, are now undergoing a Business Modernization Plan (BMP) to determine whether the BreEZe system (or another IT system) is the most appropriate IT system for them.

The Board has begun Phase #1 of the BMP to map the current “as is” business processes and requirements. This phase is anticipated to be completed on or around May 15, 2018.

Phase #2 will then map the Board’s “could be” processes. Upon completion of Phase #1 and #2, a cost benefit analysis will be conducted to determine the most appropriate IT system for the Board.

The Board’s BreEZe funding contributions are sufficient to cover any BMP costs. The Board has been required (and will continue) to redirect staffing resources during this time. The Board notes the redirection of resources has resulted in workload being delayed in various program areas, but any delay has not affected public safety. Additionally, any impacts resulting from the redirection of resources are anticipated to be cleared upon the completion of Phase #1.

ISSUE #3: (WORKLOAD AND STAFF MANAGERS). What are the impediments preventing the CAB from hiring additional managers?

Staff Recommendation: *Given that this is a high priority for the CAB, the CAB should discuss the difficulties it has faced in trying to hire additional managers and what would be needed to do so.*

Response:

The 2018-19 Governor’s Budget includes funding and position authority for 1.0 Staff Services Manager I (SSMI) to be effective July 1, 2018. The Board’s 2018-19 Budget Change Proposal (BCP) requesting this position provides detailed explanation and justification for authorizing the SSMI position to align the Board’s management-to-staffing ratios consistent with CalHR staffing guidelines.

The Legislature is scheduled to begin hearings to deliberate on the Board’s BCP request beginning in April 2018.

The Board will continue monitoring its workload to assure it has the proper staffing ratios.

ISSUE #4: (BOARD MEMBER CONFLICT OF INTEREST POLICIES). Does the CAB review potential conflicts of interest outside of public board meetings?

Staff Recommendation: *The CAB should discuss its current process for managing board member conflicts of interest and whether that process can be improved.*

Response:

The Board works pro-actively to address any actual or perceived Conflicts of Interest. Board Members have filed their Conflict of Interest Statement Form 700 on time every year, as well as upon appointment, reappointment, and end of appointment. Board Members also take the required Conflict of Interest Training per DCA's policies and the Board's Administrative Procedure Manual. Board Members, along with the Executive Officer, work closely with the Board's Legal Counsel, as well as the DCA's Ethics Officer, to address potential conflicts of interest (real and perceived). The Board members have also asked for and received additional training at Board Meetings from Legal Counsel, such as the "Role of a Regulatory Board" and "How Stakeholders Can Communicate with the Board."

ISSUE #5: (STRATEGIC PLAN). When does the CAB anticipate completing its 2013-2017 Strategic plan and adopting its 2018-2022 Strategic Plan?

Staff Recommendation: *While the CAB has made considerable progress on completing its 2013-2017 Strategic Plan, it should discuss the status of the remaining items and progress on the development of its 2018-2022 Strategic Plan.*

Response:

The Board continues to work to implement the 2013-2017 Strategic Plan and has made considerable progress in the last two years. Additionally, the Board will be reviewing all uncompleted items at its upcoming March 30, 2018, Strategic Planning Meeting as it establishes its goals for its new 2018-2021 Strategic Plan. Once these goals are established, the Board will review and approve them and move on to creating the action plan that will guide the Board's actions in the next four years.

Set out below is an update on the current 2013-2017 outstanding strategic plan items which are still being pursued by the Board.

Goal 2: Enforcement

2.2. Strengthen the Board's enforcement authority through Implementation of Uniform Standards Related to Substance Abuse and Recommended Guidelines for Disciplinary Orders and Probation, and the Consumer Protection Enforcement Initiative. Not completed

The Board is continuing to work on this goal with an expected completion date by or before Quarter three of 2018.

2.3. Seek legislation to expand non-complaint based clinic inspection authority to further public protection. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

2.4. Determine feasibility of strengthening the recertification process for reinstatement of an inactive license to further public safety. Promulgate regulations to do so, if found feasible. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

Goal 3: Education

3.2. To ensure that students are qualified to successfully complete Acupuncture training programs, the Board will explore increasing initial licensure qualifications to a Bachelor's degree or set a score for the Medical College Admission Test (MCAT). Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

3.4. Promulgate regulations to require international applicants and students attending non-English track schools to pass the TOEFL exam before being eligible to sit for the California Acupuncture Licensing Exam (CALE). Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

3.5. The Education Committee will evaluate the feasibility of enhancing school curriculum regulations by adding a required course in Standardized Acupuncture terminology. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

Goal 4: Professional Qualifications

4.1. Evaluate the approved continuing education course list and create a defined scope for continuing education coursework that focuses on improving practice knowledge, best practices, and updated research. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

4.2. Formalize the continuing education audit process of the Education Committee's review of potentially non-compliant continuing education courses and providers. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

Goal 5: Outreach

5.1. Form a Licensee Education Committee to create educational materials for licensees and a "What You Need to Know" educational series that will be accessible from the website. Not completed

The Board will consider this as a goal option for its 2018 – 2021 Strategic Plan.

5.4. Educate stakeholders on requirements of the Affordable Care Act and the implications for electronic records management.

The Board has determined that this is not within its authority to address and is no longer pursuing this item.

EDUCATION AND EXAMINATION ISSUES

ISSUE #6: (SCHOOL APPROVAL). Are there additional updates, issues, or hurdles relating to the school approval process?

Staff Recommendation: *The CAB should update the Committees on any outstanding issues relating to the school approval process transition, including any outstanding statutory changes needed to complete the transition, foreseeable hurdles, and whether it will perform a fee audit or seek statutory authority to charge a curriculum review fee.*

Response:

The Board has worked closely with the two additional agencies now required as part of Acupuncture Training Program Approval; California's Bureau of Private Post-Secondary Education (BPPE), and the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). The Board has developed open communication channels and responsive protocols such that relevant information can be shared to satisfy each agency's role in the approval and enforcement of approved acupuncture training programs. In 2016, Board staff and members met with BPPE and ACAOM representatives on numerous occasions to understand the separate processes each are charged with. The Board and ACAOM, as well as the Board and BPPE, have observed the other's site visit process and all three agencies have worked together on enforcement matters. The Board does not have any outstanding issues with ACAOM or BPPE in the administration of training program approvals and is committed to continued improvement in this collaborative effort.

Board staff has identified potential statutory changes which could be considered by the Committees to improve public protection. These items are planned to be brought before the Board to consider in the summer of 2018. Specifically, the issues to be considered for the Board's review and revision are:

- Clarifying the statutory text of BPC § 4927.5(3)(B) to be consistent with the current terminology used by ACAOM.

- Staff has observed confusion on the part of new training programs about the process necessary to complete BPC § 4927.5(3)(C), and the absence of a requirement of this statute to include a completed site visit by ACAOM for programs pursuing initial accreditation. Staff recommendation is that the standard necessary to meet BPC § 4927.5(3)(C) be set at a later point in the existing ACAOM accreditation process to include a completed site visit by ACAOM.
- Statute provides that meeting the three approval requirements of BPC § 4927.5 constitutes the requirements to become an “*approved educational and training program*.” Currently there is no authority assigned to any one agency to verify all three approvals required of programs to have their students be eligible for the licensing examination. With all three approvals, an approved training program now can allow for enrolled students to engage in the pre-licensure practice of acupuncture (with the required supervision). However, this creates the possibility that a training program may begin operating prior to completing all necessary approvals as described in BPC § 4927.5. Since the January 1, 2017, implementation of BPC § 4927.5, Board staff has observed programs that have begun operating in this manner. This highlights the need for appropriate oversight necessary to meet the Board’s mandate for public protection. Staff has recommended that the Board consider taking a position to amend this statute to give the Board the authority to verify that acupuncture training programs have met all three requirements in BPC § 4927.5. Once this verification has been completed, training programs would be officially recognized by the Board, as Board approved training programs.
- To further support the full enactment of BPC § 4927.5, the Board is aware of the need for changes to the regulations in 16 CCR §§ 1399.435, 1399.438-1399.439 that address a program’s required documentation, enforcement and monitoring. There are items that may be eliminated that are currently being monitored by ACAOM and BPPE. There is also a need to revise or promulgate regulations to address training program accountability in response to enforcement actions to include training program ownership. Under current law, the jurisdiction for training program enforcement of the practice of acupuncture falls on the clinic supervisors (as licensees) and students (as unlicensed practice).
- The Board will keep the Committees updated on its discussion on seeking statutory authority to charge a curriculum review fee.

ISSUE #7: (FOREIGN EDUCATION AND TRAINING). Are there additional updates, issues, or hurdles relating the implementation of the approval process for education and training obtained outside of the United States?

Staff Recommendation: *The CAB should discuss its progress on implementing AB 2190, including any hurdles or unforeseen issues, such as lack of credential evaluation service providers, costs, or large disparities in curriculum or courses.*

Response:

Staff has moved to researching AB 2190 requirements after completion of its regulations tied to SB 1246, which took effect in May 24, 2017. As of March 2018, the Board has continued working on developing regulations to implement AB 2190 at a staff level. To date, these actions have included:

- Regular staff meetings to develop proposed regulations and processes implementing AB 2190. Board staff has drafted the proposed text to implement AB 2190 and is continuing to refine as the process continues.
- Staff has met and communicated with members of the National Association of Credential Evaluation Services (NACES) to better understand the process of credential evaluation and to assist in developing best practices for the process.
- Staff is drafting a survey to be released to all eligible evaluation companies for a comprehensive look at the process.
- The Board has consulted with the Board of Accountancy, who shares similar statutory authority (BPC § 5094 et seq.) for assistance in implementing regulations.
- Similarly, the Board has consulted with the Board of Registered Nursing for their assistance in understanding the foreign equivalency process.

Staff plans to bring proposed AB 2190 regulations before the Board in Fall 2018.

ISSUE #8: (EXAMINATION). Are there updates from the CAB on the use of the California Acupuncture Licensing Examination (CALE) or the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) examination?

Staff Recommendation: *The CAB should discuss feasibility, cost, and time constraints related to: (1) switching the CALE to computer-based testing; (2) developing a California supplement to the NCCAOM examination or for purposes of reciprocity; and (3) working nationally with other states and potentially federal healthcare agencies to increase the portability of the California acupuncture license and improve reciprocity with other out-of-state licenses.*

Response to 8.1:

The Board agrees with the Committees that computer-based testing would be an effective and efficient upgrade. This would allow for continuous, adaptive, on-demand testing as opposed to the current system of pencil and paper exams held twice a year. High security and testing standards would be maintained and will also allow for greater accessibility by offering multiple testing sites available year-round.

The Board application to move to computer-based testing with the DCA's Office of Information Services has been approved. Implementation of computer-based testing is estimated to be available October 1, 2018.

The costs of switching to computer-based testing have yet to be determined. The Board anticipates that computer-based testing will lower the costs to administer the CALE with the cost of developing the CALE remaining the same.

The Board continues to meet with the Office of Professional Examination Services (OPES) for their input and contract requirements, as well as with the Office of Information Services (OIS) for technical expertise in the transition. This process began in the fall of 2017 and will take twelve to eighteen months.

Response to 8.2:

As the background paper noted, after reviewing OPES's audit of the NCCAOM examinations, in June 2016, the Board voted to support legislation that would transition the licensing examination from the one-day CALE to requiring four of the NCCOAM modules as well as a California supplemental examination, not to take place before January 1, 2019.

OPES is in the process of reviewing the NCCAOM's most recent Job Task Analysis which will provide a clearer picture on how to develop a California Supplemental Exam. The Board will also reach out to other boards that have developed their own California supplemental exams to develop policies, procedures and regulations necessary for implementation.

The overall cost and length of time needed to develop a California supplemental exam is yet to be determined. Once unresolved issues and the overall feasibility of a change in examination format have been addressed, the Board is confident that the creation of a supplemental exam can be completed when the need and a timeline have been clearly defined.

The Board has noted discrepancies in the total cost to applicants to take all four modules of the NCCAOM, as well as additional fees to provide those examination results to the Board for qualification for licensure. These concerns have been addressed by the Board at several meetings, including the June 2016 meeting, and remain unresolved. The Board confirms that current pricing to applicants of all four modules of the NCCAOM is at \$1,795, along with an additional fee of \$100 for submitting a written application as opposed to an online application. The Board also notes that the NCCAOM website is no longer displaying additional fees to take the modules in a foreign language as opposed to in English, a difference of \$200 per module for a total of \$800. The Board affirms that the cost to applicants for the CALE is \$625.

Response to 8.3:

In the absence of national standards for acupuncture education and practice, each state sets their own specific standards. As the Background Paper notes, there are 16 states that license acupuncturists which recognize out-of-state licenses and can administer reciprocal licensing agreements.

The Board has discussed and directed board staff to research other states' licensing requirements and the possibility of working with other states to accept the CALE or the California Acupuncture License. With each state enforcing their own standards, there may be the additional requirement of California licensees to pass that state's supplemental examination.

In California, applicants are required to complete an approved 3000-hour curriculum at an approved training program. Many states require 1900 hours.

The Board needs to discuss the feasibility, cost, and time constraints necessary to increase the portability of the California acupuncture license and improve reciprocity with other out-of-state licenses.

ISSUE #9: (LICENSEE CONTINUING EDUCATION AUDITS). Has the CAB taken steps to avoid future lapses in its CE audit process?

Staff Recommendation: *The CAB should update the Committees on the status of its CE audit program. It should also discuss plans for or progress on implementing processes to avoid future lapses in audits, such as additional cross-training of staff or back-up protocols.*

Response:

The Board has filled its vacancy for the staff position conducting CE Course reviews and Licensee Audits. This position has now been trained, allowing the Board to begin the CE Audit process. Staff has been cross-trained on the CE Audit process, as well as created updated procedures for conducting the CE Audit.

The Board conducts its Licensee CE Audit by randomly selecting 10% of the renewing active licensees. In the coming months, staff will work to eliminate the backlog that was a result of staffing issues.

ISSUE #10: (CONTINUING EDUCATION COURSE PROVIDERS). Are there impediments to performing audits of CE providers or affirmatively enforcing the CAB's conflict of interest policy?

Staff Recommendation: *The CAB should discuss possibilities for seeking a CE course review fee and implementing CE provider audits.*

Response:

The Board has discussed CE Course Review Fees at past meetings. The Board has determined that it currently has the authority pursuant to BPC § 4945 (b) to set fees for continuing education course applications. As such, staff is researching costs and constraints to present to the Board for future action, as well as a more comprehensive approach to monitoring and Auditing CE Providers, including:

- Working with subject matter experts to attend and review CE courses for compliance
- Monitoring live web-cast courses
- Inquiring with national CE accreditors, as well as other DCA Board's to identify best practices to improve the efficacy of CE education to maintain continued competency in the practice of acupuncture.

ISSUE #11: (DISCIPLINARY GUIDELINES AND UNIFORM STANDARDS). What is the status of the CAB's updates to its Disciplinary Guidelines and Uniform Standards?

Staff Recommendation: *The CAB should discuss the details regarding OAL disapproval of other regulatory packages updating Uniform Standards and whether the CAB is still on track to have both packages ready in 2018.*

Response:

In April 2017, the Board decided to withdraw its pending regulatory package implementing the Uniform Standards. This decision was based on several factors, including:

- Limited time remaining within OAL's one-year filing deadline (which was to expire in April 2017) to complete the rulemaking;
- A review of the Board's proposed Uniform Standards manual requested of the Attorney General's office in March 2017. This was completed in July 2017 and contained multiple changes;
- Rejection by OAL of similar healing arts boards' rulemaking packages. For example, the Osteopathic Medical Board submitted their regulations implementing the Uniform Standards to OAL on October 25, 2016. On December 9, 2016, OAL rejected the regulatory package based on several factors. Most notably, OAL noted that BPC § 315 clearly requires Boards to adhere to all sixteen Uniform Standards and requires standards to be used by each healing arts Board whether or not the Board chooses to have a formal diversion program. The Acupuncture Board's 2016 regulatory rulemaking package, as proposed to be submitted, did not contain uniform standards #13 -16 since the Board does not have a diversion program.

Staff is awaiting guidance from Legal Counsel as to how to integrate the missing uniform standards (if necessary) into the Board's rulemaking package. However, the Board has been continuing work on a new Uniform Standards rulemaking package at a staff level, and anticipates presenting the rulemaking package to the Board during the Summer of 2018.

Separately, the Board approved changes to its 1996 Disciplinary Guidelines as a new, distinct rulemaking package at the February 24, 2017, public meeting. As with the Board's proposed Uniform Standards, the Attorney General's office was requested, in March 2017, to review and suggest changes to the Disciplinary Guidelines. Their review was completed in July 2017 and contained multiple changes. The Board has been continuing work on the Disciplinary Guidelines at a staff level, and anticipates presenting a rulemaking package to the Board during Summer of 2018.

ISSUE #12: (ACUPUNCTURE SERVICES BY NON-ACUPUNCTURISTS). Is action needed to address the performance of acupuncture services by other types of licensed healthcare professionals?

Staff Recommendation: *It is unclear whether action is needed at this time. The CAB should discuss whether this issue is manageable with its current authority and any plans to increase awareness or further coordinate with other DCA boards to streamline referrals.*

Response:

The Board agrees with the Committee staff's recommendation on this issue and does not believe any further action is needed at this time. At present, the Board has sufficient authority within the Acupuncture Licensure Act to take appropriate action on the unlawful practice of acupuncture, and actively collaborates with other Healing Arts Boards to attend to the investigation and enforcement of these violations. The Board will continue to discuss the issue at the Board Committee level and is open to further discussion and insight offered by the public and stakeholders.

ISSUE #13: (PROFESSIONAL TO PUBLIC BOARD MEMBER RATIO). Should the CAB's ratio of professional to public members be adjusted?

Staff Recommendation: *The CAB should discuss its current balance of professional to public members and whether any changes are needed.*

Response:

The Board is comprised of three licensed members and four public members, with one current vacancy for a Governor appointed licensed member. The ratio of public to licensed members has not been brought up as an issue by stakeholders at Board meetings, nor has the Board discussed the issue as an agenda item. At present, the Board affirms that the current balance of professional to public members is sufficient for the Board to conduct business and does not seek any changes to the ratio.

ISSUE #14: (TECHNICAL CHANGES). Are there technical changes that can improve the CAB or its functions?

Staff Recommendation: *The CAB should continue to work with the Committees and suggest any technical clean-up that may be needed.*

Response:

The Board appreciates the opportunity to address technical changes to the Acupuncture Licensure Act, and offers the following suggestions:

(Existing text is italicized. Proposed additions are underlined, and deletions are in ~~strikethrough~~)

BPC § 4927.5(a)(3)(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~~ pre-accreditation status within three years of the date that letter was submitted.*

Rationale: As of October 21, 2017, ACAOM has changed their terminology to describe their pre-candidacy and candidacy status¹ as “pre-accreditation” status. Changing the terminology to match ACAOM’s terminology will provide clarity and consistency for the Board and potential approved training programs.

BPC § 4935(c): *A person holds himself or herself out as engaging in the practice of acupuncture by the use of any title or description of services incorporating the words “acupuncture,” “acupuncturist,” “certified acupuncturist,” “licensed acupuncturist,” “Asian medicine,” “oriental medicine,” “Chinese medicine,” or any combination of those words, phrases, or abbreviations of those words or phrases, or by representing that he or she is trained, experienced, or an expert in the field of acupuncture, Asian medicine, oriental medicine, or Chinese medicine.*

Rationale: This proposed change would add and make consistent placement of terms which are already set out in the same statutory section, and brings additional clarity to the statute.

BPC § 4938(a)(5): *Completes a clinical internship training program approved by the board. The clinical internship training program shall not exceed nine months in duration and shall be located in a clinic in this state that is an approved educational and training program. The length of the clinical internship shall depend upon the grades received in the examination and the clinical training already satisfactorily completed by the individual prior to taking the examination. ~~On and after January 1, 1987, individuals with 800 or more hours of documented clinical training shall be deemed to have met this requirement.~~ The purpose of the clinical internship training program shall be to ensure a minimum level of clinical competence.*

Rationale: This deleted section is no longer consistent with the definition of “Approved educational and training program” as set out in BPC § 4927.5(a)(1). That definition requires a minimum of 950 hours of supervised clinical instruction. This change will help to clarify the statute and make the requirement consistent.

BPC § 4955(e): *Except for good cause, the knowing failure to protect patients by failing to follow infection control guidelines of the board, thereby risking transmission of blood-borne infectious diseases from licensee to patient, from patient to patient, and from*

¹ ACAOM Standards and Master’s Level and Postgraduate Doctoral [DAOM] Pg.6. Available at: <http://acaom.org/wp-content/uploads/2018/01/ACAOM-Standards-and-Criteria-Manual-Masters-DAOM.pdf>

patient to licensee. In administering this subdivision, the board shall consider referencing the standards, regulations, and guidelines of the State Department of Health Services developed pursuant to Section 1250.11 of the Health and Safety Code and the standards, regulations, and guidelines pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing the transmission of HIV, hepatitis B, and other blood-borne pathogens in health care settings. As necessary, the board shall consult with ~~the Medical Board of California, the California Board of Podiatric Medicine, the Dental Board of California, the Board of Registered Nursing, and the Board of Vocational Nursing and Psychiatric Technicians,~~ other healing arts boards as listed in Division 2, sections 500 – 4999.129 of the Business and Professions Code to encourage appropriate consistency in the implementation of this subdivision.

Rationale: While the Board continues to consult with boards currently listed in the statute, it may be appropriate to codify consulting with all applicable healing arts boards as listed in Division 2, sections 500-4999.129 of the Business and Professions Code. The Board already informally consults with other healing arts boards not listed within the statute. This change would make formal a consultation process with all healing arts boards which the Board already follows.

BPC § 4961(b): *An acupuncturist licensee shall post his or her wall license in a conspicuous location in his or her place of practice at all times. If an acupuncturist has more than one place of practice, he or she shall obtain from the board a duplicate wall license for each additional location and post the duplicate wall license at each location.*

Rationale: The Board has observed that some licensees are unaware or uncertain about the posting of additional licenses at duplicate practice locations. When applicable, the Board will take disciplinary action against those licensees. In other cases, the licensees will attempt to order duplicate renewal receipts (also known as “pocket” licenses, which are issued upon normal license renewal) in order to fulfill this requirement. This proposed change provides clarity to the licensee as to which license is required to be posted at all duplicate address locations and better connects the fee associated with ordering the duplicate wall license (currently \$15.00). Additionally, the change matches the terminology as set forth in BPC § 4970(g), which states, “The duplicate **wall** license fee is an amount equal to the cost to the board for the issuance of the duplicate license.” (emphasis added).

CONTINUED REGULATION OF THE PROFESSION

ISSUE #15: (SUNSET EXTENSION). Should the State continue to license and regulate acupuncturists under the current CAB?

Staff Recommendation: *The CAB should continue to regulate licensed acupuncturists order to protect the interests of the public. However, given the CAB’s inconsistent past and recent*

membership change, the CAB should be extended for two years with a reduced reporting requirement, unless the CAB can demonstrate that the current progress and focus will continue.

Response:

The Board agrees with the staff recommendation to continue regulating licensed acupuncturists to protect the interests of the public. Overall, the Board has noted considerable improvement in the last two years, and believes it is poised for continued improvement in the coming years. The Board has engaged in increased collaboration with the Legislature, stakeholders, and colleagues within the Department of Consumer Affairs, receiving commendation from its stakeholders for its evaluation and responsiveness to the public's concerns. The Board's accomplishments also include measurable progress in the key areas as identified by the Committees. Additionally, the Board has prioritized addressing the Committees' concerns through statutory implementation; changes in regulatory language; meeting or exceeding enforcement timelines; and improving its daily functions and operations.

Although the Board has gone through a recent Board membership change, the current Board shares the Committees' strong commitment and dedication to the protection of the public. The Board will continue collaborating and communicating with the Committees such that the attention and focus that the Board has demonstrated in the last two years endures.