STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.

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

NOTICE OF ACUPUNCTURE BOARD EDUCATION COMMITTEE MEETING

Friday, May 29, 2015, 10 a.m.

Department of Consumer Affairs
1747 North Market Blvd.
HQ2 First Floor 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, 8B Conference Room, 8th Floor
Los Angeles, CA 90013

Education Committee Members

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

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: January 23, 2015, Committee Meeting**

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

   - **California Institute of Integrated Studies (CIIS) (School may connect by teleconference)**

6. **Review and Make Recommendation Regarding Request for Board approval of CPR and First Aid Curricula pursuant to Section 1399.434 (f)(3) and 1399.436 (a)(14):**

   - **EMS Safety Services, Inc. (EMS may connect by teleconference)**
   - **Save - A - Life Educators, Inc. (Save-A-Life may connect by teleconference)**

7. **Discuss and Consider Proposed regulatory changes to certification and hours Requirement 16 CCR sections 1399.434 (f)(3) and 1399.436 (a)(14) regarding CPR and First Aid**

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.

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

Please Note: Committee meetings are open to the public and are held in barrier free facilities that are accessible to those with physical disabilities in accordance with the Americans with Disabilities Act (ADA). If you need additional reasonable accommodations, please make your request no later than five (5) business days before this meeting. Please direct any questions regarding this meeting to the Board Liaison, Tammy Graver at (916) 515-5204; FAX (916) 928-2204

January 23, 2015 Education Committee Meeting – draft minutes

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Draft Minutes

NOTICE OF ACUPUNCTURE BOARD EDUCATION COMMITTEE MEETING

JANUARY 23, 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 Serra State Building
320 W. Fourth Street, 8 A Conference Room, 8th Floor
Los Angeles, CA 90013

Board Members Present

Michael Shi - Chair
Francisco Hsieh
Jeannie Kang
Jamie Zamora

Education Committee Members

Michael Shi, L.Ac, Chair, Licensed Member
Francisco Hsieh, Public Member
Jeannie Kang, L.Ac, Licensed Member
Jamie Zamora, Public Member

Staff Present

Terri Thorfinnson – Executive Officer
Katie Le – Education Coordinator
Ben Bodea – Continuing Education Coordinator

EDUCATION COMMITTEE MEETING - 9:00 a.m.

1. Roll call was taken and a quorum was established

2. Opening Remarks – Michael wished everyone a happy new year. He also discussed the establishment of a site visit team of experts for schools inspections. The Board staff on the site team includes the Executive Officer, Katie Le or Ben Bodea. Anyork Lee is the senior member of the site visit team Subject Matter Experts (SMEs). We have a talented group of site team experts including Dr. Anyork Lee, former Board President, Dr. David Chen, former Board President over 20 years ago

and many others who have practice, school and research experience. Each of the Board members is encouraged to attend at least one or the site visits as an observer.

3. Review and Make Recommendations on School Applications Seeking Board Approval of Acupuncture Training Programs:

a) Hongik International University – Katie Le gave an overview report of the site visit. Jeannie Kang made the motion to recommend denial to the full board. Jamie Zamora seconded the motion. The votes were as follows: Michael – yes; Francisco – yes; Jamie – yes; Jeannie -- yes. The motion passed unanimously.

b) Yuin University – Katie Le gave an overview of the report that was distributed to the committee members. Discussion took place regarding a motion at the board level to adopt the committee's recommendation to approve. There was discussion about including a requirement that the site team re-visits the school within six months to check for compliance, but it was decided to let the Board decide whether it wants to impose that condition on the approval. Jamie Zamora made a motion to recommend approving the school. Francisco Hsieh seconded the motion. The votes were as follows: Michael – yes; Francisco – yes; Jeannie – yes; Jamie – yes. The motion passed unanimously.

4. Continuing Education Providers:

a) Proposal to Increase Continuing Education Provider Approval and Monitoring Fee (Business and Professions Code (BPC) Section 4945(b) and California Code of Regulations (CCR) Section 1399.462)

b) Proposal to Change Continuing Education Provider Renewal Frequency (CCR Section 1399.481(b))

c) Proposal to Change Criteria for Provider Approval (CCR Section 1399.481)

The Board has the authority to authorize, monitor and set some fees for continuing education. The current fees date back to 1989, when fees were initially instituted. Currently, we only have one fee for continuing education providers, which is $150 every two years and no fee for monitoring or course approvals. There has been concern raised by the Sunset Committee as to the quality and oversight of our continuing education and they recommend that the Board provide better enforcement and oversight of this process. In the past, we have received input that some classes are not within the framework of acupuncture and Oriental Medicine. The Board is committed to improving its oversight of continuing education. Increased oversight, course and provider approval, course and provider monitoring require a significant increase in staff and staff time.

This brings us to the discussion and focus on a couple of areas of our current structure: 1) provider fee 2) monitoring fee. These fees would fund staff to carry out and provide better oversight and services to ensure that course work is appropriate. The Board has statutory authority to increase the provider fee and create a monitoring fee. Fees for course approval would require a statutory change. The recommendation for this discussion is to raise the provider fee to $500 per year. For regulatory purposes, the fee must be justified by staffing needs and workload. It was estimated that one (1) full time staff would be needed to conduct auditing of courses and providers in addition to the staff the Board already has overseeing continuing education (CE).

The discussion briefly touched on what other Boards charge in fees, but switched to staffing needs and workload. There was concern expressed over the fact that anyone can be approved to be a CE provider so that increases the number of providers and courses and impacts quality. Increasing the fees would address staffing and workload needs and may address quality oversight of both providers and course work. The $500 per year fee would fund Board staffing needs, but also may cause a consolidation of CE providers that have higher quality and increased resources. Additional requirements for CE providers was discussed including a minimum resources of $50,000 as a way to ensure CE providers have sufficient resources to hire quality instructors. Setting the fee at $500 and requiring a set minimum level of resources on hand requirement would guarantee the sponsoring entity would have the resources to provide high quality courses and instructors. A $50 monitoring fee was proposed to fund staff monitoring of courses and providers as well. There was concern expressed that that $500 provider fee and $50 monitoring fee may be insufficient to cover the travel costs of staff monitoring CE courses, particularly out of state and out of the country. The discussion turned to how the Board could effectively monitor quality of courses and instructors without it costing too much. There was discussion about additional CE provider criteria such as creating categories such as school, association, and organization. Item was tabled to give members more time reflect on fee changes, criteria and changes to the process. Discussion tabled to future meeting.

Public comment: Several professional associations expressed support for increasing the CE provider fee. The American Association of Chinese Medicine and Acupuncture (AACMA) supported the $500 per year provider fee and proposed a $25 application fee and an additional fee of $50 for every hour of course work provided. They supported the Board monitoring the quality of courses and providers to improve the quality of CEs. It was explained that AACMA was recently formed as a merger of California Certified Acupuncturist Association (CCAA) and United California Practitioners of Chinese Medicine (UCPCM) professional associations. California State Oriental Medicine Association (CSOMA) commented that the Board should consider the root cause of the variation in course quality and ensure audit staff are qualified to evaluate quality of course and instructor. There was a recommendation for the Board to consider course fees.

Board members commented about the need to audit courses to prevent providers from deviating from the approved course. If the Board began auditing course, this practice would stop. One of the schools supported the $500 provider fee but expressed concern about a per course fee and online courses. There was concern for providers who offer free courses in exchange for buying their products, which is unfair competition to CE providers who only provide courses. Another comment expressed concern that the focus of the Board's discussion should be providing supervision over courses and instructors not focusing on the fee amount. Set the fee at how much it costs to supervise and let the market decide the fees.

5. Future Agenda Items

6. Public Comment for Items not on the Agenda

7. Adjournment

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California Institute of Integrated Studies (CIIS)

School Application

STATE OF CALIFORNIA
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American College of Traditional Chinese Medicine at California Institute of Integral Studies 1453 Mission Street San Francisco, CA 94103 Training Program Seeking Approval Exit Report

PART I: BACKGROUND

INSTITUTION MISSION AND OBJECTIVE

California Institute of Integral Studies (CIIS) stemmed from the American Academy of Asian Studies, which was founded by Louis Gainsborough and Frederic Spiegelberg in 1951 in San Francisco, CA. The purpose of the American Academy of Asian Studies was to bring together "Eastern and Western scholars to study the fundamentals of Eastern culture, philosophy, yoga, psychology, and literature." From the Academy's vision, Dr. Haridas Chaudhuri founded California Institute of Asian Studies (CIAS) in 1968 as the "educational arm of the Cultural Integration Fellowship". Six years later, CIAS was incorporated separately as a private, nonprofit, nonsectarian graduate school. CIAS was renamed to CIIS in 1980 and expanded its scope to offer "comparative and cross-cultural studies in philosophy, religion, psychology, counseling, cultural anthropology, organization studies, health studies and the arts."

CIIS' mission statement obliges the institution to:

"California Institute of Integral Studies (CIIS) is an accredited university that strives to embody spirit, intellect, and wisdom in service to individuals, communities, and the earth. CIIS expands the boundaries of traditional degree programs with transdisciplinary, cross-cultural, and applied studies with face-to-face, hybrid, and online pedagogical approaches. Offering a personal learning environment and supportive community, CIIS provides an excellent multifaceted education for people committed to transforming themselves, others, and the world."

Manifested from CIIS' mission, the Seven Commitments of CIIS are:

1. "Practice integral approachs to learning and research"
2. "Affirm spirituality"
3. "Commit to diversity and inclusion"
4. "Foster multiple ways of learning and teaching"
5. "Advocate sustainability and social justice"
6. "Support community"
7. "Strive for an integral and innovative governance"

ACADEMIC PROGRAMS OFFERED AT CIIS:

CIIS currently offers or will offer 20 academic programs:

1. Anthropology & Social Change - MA; PhD
2. Clinical Psychology – PsyD
3. Counseling Psychology, with a concentration in Community Mental Health – MA
4. Counseling Psychology, with a concentration in Drama Therapy – MA
5. Counseling Psychology, with a concentration in Expressive Arts Therapy – MA
6. Counseling Psychology, with a concentration in Integral Counseling Psychology – MA
7. Counseling Psychology with a concentration in Somatic Psychology – MA
8. Human Sexuality – PhD
9. Integral Studies – BA
10. Integrative Health Studies – MA
11. East-West Psychology – MA; PhD
12. Philosophy & Religion, with a concentration in Asian & Comparative Studies – MA; PhD
13. Philosophy & Religion, with a concentration in Ecology, Spirituality, and Religion – MA; PhD
14. Philosophy & Religion, with a concentration in Philosophy, Cosmology, & Consciousness – MA; PhD
15. Women, Gender, Spirituality, and Social Justice – MA
16. Women's Spirituality –PhD
17. Writing Consciousness, & Creative Inquiry – MFA
18. Traditional Chinese Medicine, MSTCM; DAOM; DACM
19. Transformative Leadership – MA
20. Transformative Studies – PhD

CIIS is applying for California Acupuncture Board Training Program approval for its Master of Science in Traditional Chinese Medicine (MSTCM). This degree will be offered at CIIS upon the merger between CIIS and the American College of Traditional Chinese Medicine (ACTCM) effectively July 1, 2015. The MSTCM program will be offered at CIIS' branch campus, ACTCM at CIIS, also located in San Francisco, CA.

ACCREDITATION

Since 1981, CIIS have been institutionally accredited by the Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC). Since CIIS is accredited by WASC, CIIS no longer needs to receive authorization from the Bureau for Private Postsecondary Education to operate. Additionally, the MSTCM

program is programmatically accredited by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM).

PART II: GOVERANCE, ADMINSTRIATION, AND PERSONNEL

CIIS' Board of Trustees consists of 29 members:

1. Michael Aho
2. Peter Baumann
3. Margy Boyd
4. Keith Cich
5. Fania E Davis
6. Helen Desai
7. Stuart Diamond
8. Richard Giardina
9. Betsy Gordan
10. Lixan Huang
11. Yasmine Khan
12. Kishore Kripalani
13. Rose Lavandero
14. John Paul Lenny
15. Tamar March
16. Ashor Narasimhan
17. Sandra Pacheco
18. William Pegg
19. Ricki Pollycove
20. Renuka Prasad Relan
21. Brenda M. Sanders
22. Joseph Subbiondo
23. Prasad Vepa
24. Ruel Walker
25. Daphne Crocker-White
26. Meihong Xu
27. Elizabeth McCormack
28. Zeppelin Wong
29. Savita Wakhlu

The Board of Trustees meets three times a year and meeting minutes are recorded.

CIIS have 78 permanent administrators:

1. Joseph Subbiondo – President/CEO
2. Lixin Huang – VP China Projects & Executive Director ACTCM
3. Michelle Coleman – Director of Human Resources
4. David Blohm – Controller & Director of Finance
5. Dorotea Reyna –Vice President of Development
6. Deirdre Visser – Arts Curator
7. Richard Buggs – Dean of Alumni & Travel Services
8. Lauren Selfridge – Interim Director Student Affairs
9. Jodie O'Connor – International Student Recruitment & Advising Manager
10. Judie Wexler – Academic Vice President
11. Anne Teich – Academic Affairs Manager
12. Karim Bear – Director of Public Program and Performances
13. Steven Swanson – Director of Auxiliary Services
14. Janet Cragin – Director of Information Technology Services
15. Emma Dunne – Enrollment Systems Manager
16. Frank Talamantez – Director of Facilities and Operations
17. I Chen – Director of Financial Aid
18. Wendell Tull – Director of Admissions
19. Dan Gurler – Registrar

20. Chip Goldstein – Dean of Academic Planning & Administration
21. Noah Lowenstein – Director of Laurence S. Rockefeller Library
22. Heather Fester – Director of the Center for Writing & Scholarship
23. Peter Jones – Director of Institutional Effectiveness
24. Becky McGovern – Director of MCP Field Placement & Clinic Sites
25. James Martin – Director of Communications
26. Neil Freese – Online Content & Social Media Manager
27. Karim Baer – Director of Public Programs & Performances
28. Laura Reddick – Program Manager of Public Programs & Performances
29. Bing Zou – Dean of ACTCM
30. Steve Given – Director of Clinical Education & Director of Academic Assessment of ACTCM
31. Carla Wilson – Director of Doctoral Programs & Director of Research of ACTCM
32. Kathy Littles – Director of Online Learning & Director of Transformative Inquiry Department
33. Sarah Smetzer-Fox – Manager of Educational Technology
34. Meg Jordan – Department Chair of Somatic Psychology, Health, and Sexuality & Program Chair of Somatic Psychology & Integrative Health
35. Rachel Lefkowitz – Program Manager and Internship Supervisor of Somatic Psychology, Health, and Sexuality
36. Collin Eyre –Administration & Advising Coordintor forthe Somatic Psychology Program
37. Richard Buggs – Interim Program Director of Human Sexuality Program
38. Emily Mckee – Program Assistant of Human Sexuality Program
39. Mera Atlis – Department Chair of Clinical Psychology
40. Monica Munjai – Program Coordinator of the Clinical Psychology Department
41. Josefa Molina – Program Chair of Community Mental Health
42. Brittaney Barba – Program Coordinator of the Community Mental Health Program
43. Renee Emunah – Program Chair of Drama Therapy
44. Travis DiRuzza – Program Coordinator of the Drama Therapy Program
45. Shoshana Simons – Program Chair of Expressive Arts Therapy Program
46. Majal Logan – Program Coordinator of the Expressive Arts Therapy Program
47. Barbara Morrill – Program Chair of Integral Counseling Psychology & Integral Counseling Psychology Weekend Program
48. Claudia Wallen – Program Coordinator of Integral Counseling Psychology
49. Sophia Mendoza–Program Coordinator of the Integral Counseling Psychology Weekend Program
50. Mandy Billings – Advising & Supervision Coordinator for Integral Counseling Psychology

51. Steven Tierney – Chair of Counseling Psychology Programs
52. Adeeba Deterville – Program Coordinator of the Counseling Psychology Programs
53. Rodrigo Caldera –Filed Placement Specialist for the Counseling Psychology Programs
54. Michelle Eng – Dean of School of Undergraduate Studies
55. Fraylanie Aglipay – Program Manager of School of Undergraduate Studies
56. Tossie Long – Program Coordinator of School of Undergraduate Studies
57. Alka Arora – Chair of the Women's Spirituality Program
58. Anjali Nash– Program Coordinator of Women's Spirituality Program
59. Martha Brumbaugh – Senior Program Managerof Transformative Inquiry Department
60. Craig Chalquist – Department Chair of the East West Psychology Department
61. Heidi Fraser – Program Manager of the East West Psychology Department
62. Carolyn Cooke – Chair of the Writing, Consciousness, & Creative Inquiry Department
63. Ahmunt Jordon – Program Coordinator of the Writing, Consciousness & Creative Inquiry Department
64. Andrej Grubacic – Department Chair of the Anthropology and Social Change Department
65. Tim Moyhihan – Program Coordinator of the Anthropology and Social Change Department
66. Robert McDermott – Department Chair of the Philosophy & Religion & Department, and Chair of the Philosophy, Cosmology, & Consciousness Program
67. Steven Goodman – Chair of the Asian Comparative Studies Concentration
68. Sundari Johansson – Program Coordinator of the Asian and Comparative Studies Concentration & Ecology & Ecology, Spirituality and Religion Concentration
69. Aaron Weiss – Program Coordinator of Philosophy, Cosmology, & Consciousness Program
70. Elizabeth Allison –Chair of Ecology, Spirituality and Religion Concentration
71. Mera Atlis – Chair of Clinical Psychology Department
72. Monica Munjal – Senior Program Manager of Clinical Psychology Department
73. Trevor Evans-Young – Filed Placement Specialist for Clinical Psychology Department
74. Lani Chow – Director of Clinical Training for the Clinical Psychology Department and director of the Psychological Services Counseling Center
75. Daniel Gottsegen – Director of Pierce Street Counseling CenterGieve Patel – Director of Church Street Counseling Center

76. Steuart Gold – Director of Somatic Psychotherapy Center
77. Jessica Wallace – Director of Golden Gate Integral Counseling Center
78. Thomas Marchevsky – Director of the Clinic Without Walls

CIIS' Organization Chart for its Academic Administration and Academic Programs is attached.

PART III: RESOURCES

TEACHING FACILITIES

CIIS's Master of Science in Traditional Chinese Medicine will be taught at its branch campus, ACTCM at CIIS. ACTCM at CIIS currently has two campuses. The first campus is located at 455 Arkansas Street in San Francisco, CA which is owned by St. Teresa's Church/Archdiocese of San Francisco. The Arkansas campus that is approximately 10,000 square feet has:

Arkansas Campus

- 3 classrooms
  - Classroom A
    - Seats 25 students
    - Have 1 computer work station, 6 wall mounted sharp containers, 1 red bag, 6 massage tables, 1 infrared lamp, 1 fire extinguisher, 1 towel dispenser, 1 white board, & 6 wall mounted charts
  - Classroom B
    - Seats 31 students
    - Have 1 computer work station, 6 wall mounted sharps container, 1 red bag, 7 massage tables, 1 air cleaner, 1 white board, 3 wall mounted charts, & 1 skeleton
  - Classroom C
    - 1 computer work station, 1 wall mounted sharps container, 1 red bag, 1 skeleton, 3 wall mounted charts, 11 wall mounted herbs chart, 11 white boards & 2 massage tables

- 13 treatment rooms
- Clinic with herbal dispensary, reception area, & two consultation rooms
- Student lounge
- Student services office
- Several administrative offices
- Public library nearby

Pioneer Square Campus

The second campus is located four blocks away at 555 De Haro Street and also 10,000 square feet. This De Haro Campus has:

- 5 classrooms
  - Classroom D
    - Seats 23 students
    - Have 1 computer work station, 1 white board, 2 wall mounted sharps container, 5 massage tables
  - Classroom E
    - Seats 50 students
    - Have 1 computer work station, 1 white board, 6 massage tables, 2 wall mounted sharps containers, 1 red bag, & 1 skeleton
  - Classroom F
    - Seats 50 students
    - Have 1 computer work station, 2 white boards, & 6 sharp containers
  - Classroom G
    - Seats 24 students
    - Have 1 computer work station, 1 wall mounted white board, 1 free standing white board, 5 wall mounted sharps container, 1 teapot, and 1 red bag
  - Classroom H
    - Have 1 computer, 1 white board, 6 wall mounted sharps container, 15 massage tables, 20 chairs, 1 fire extinguisher, 1 three dimensional point and muscle model, 2 air cleaners, & 1 massage chair
- Library
- Faculty office
- Twenty single-occupancy student housing rooms

LIBRARY

Students attending CIIS can utilize two libraries: CIIS library located at its main campus and ACTCM at CIIS' library which is located at ACTCM at CIIS' Pioneer Square Campus. The library located at the Pioneer Square Campus has all the relevant collections to students enrolled in the Master of Traditional Oriental Medicine program. This library consists of 6,551 books and 70 periodicals which consist of: 9 biomedicine journals in English 31 TCM Journals in Chinese, and 30 TCM Journals in English, which are cataloged according to the National Library of Medicine Classification and the Library of Congress classification. New library materials are based on the recommendation of faculty, students, and the Director of Learning Center. The institution also has a library committee that meets annual to discuss holdings, services, policies, and overall goals of the library.

In addition to the books and periodicals, the library has 540 sets of audio-visual teaching materials that include slides, videotapes, DVD, computer files, etc. The library have an automated system called "CyberTools for Library" that allows student to check in and out books, get due-day reminders, renew books via email, and access the library catalog through the website. Furthermore, this library participates in Interlibrary Loan (IIL) which allows students and faculty to obtain materials from other libraries in this network if its own library does not the book or resource needed. The library also has six computers with free internet, printer, and headphones available for students.

FINANCES

CIIS operates as a non-profit corporation. The major expenditures for CIIS are: 1) Instruction and research 2) Institutional Support 3) Student Services 4) Academic Support and 5) Public Service. The school major revenues are 1) Net tuition and fees 2) Sales and Services of Aux. Enter 3) Contributions 4) Government grants and 5) Other. In 2012, CIIS had a net surplus of $1,069,483. However, in 2013, the institution had a net deficit of $386,412. Most recently, in 2014, CIIS had a net surplus of $345,046. Furthermore, CIIS have an endowment with an estimated worth of $1,382,723 and a fiscal operating reserves of $4,580,155.

Summary of CIIS's Expenditures & Revenues

Fiscal Year	2014	2013	2012
Expenditures			
Instruction and Research	$12,394,980	$13,290,017	$13,003,999
Institutional Support	$6,576,925	$7,051,208	$7,389,474
Student Services	$1,807,667	$2,902,392	$1,997,987
Academic Support	$1,083,418	$1,129,363	$1,257,724
Public Service	$1,162,036	$1,102,973	$1,084,861
Total	$23,025,026	$24,665,953	$24,734,045
Income			
Net Tuition and Fees	$20,169,230	$20,526,323	$21,884,720
Sales and service of aux. enter	$1,629,498	$1,664,449	$1,559,486
Contributions	$930,964	$1,289,911	$766,526
Government grants	$172,575	$219,533	$229,906
Other	$487,805	$579,280	$1,362,890
Total	$23,370,072	$24,279,541	$25,802,528
Net Surplus/Deficit	$345,046	($386,412)	$1,609,483

PART IV: ACTCM AT CIIS' MASTER OF SCIENCE IN TRADITIONAL CHINESE MEDICINE CURRICULUM NON-COMPLIANCE CCR 1399.434

CIIS is applying for California Acupuncture Board Training approval for its Master in Traditional Oriental Medicine program. CIIS operates year-round on a semester system. The program is 12 semester or 48 months with a total of 3,098 hours.

Finding #1: The General Physics requirement is not met due to the lack of instruction of biophysics.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(a)(3):

"General Physics, including a general survey of biophysics".

California Institute of Integral Studies' (CIIS) Curriculum

CIIS listed on its curriculum requirement form that the course, FC 440 General Physics, fulfills CCR Section 1399.434(a)(3). Upon review, course lacks instruction of biophysics and therefore does not satisfy the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM4045 General Physics, to include biophysics (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(a)(3).

Finding #2: The Anatomy requirement is not met due to the lack of instruction of neuroanatomy.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(a)(5):

"Anatomy – a survey of microscopic, gross anatomy and neuroanatomy".

CIIS's Curriculum

CIIS stated on its curriculum requirement form that the following courses satisfy CCR Section 1399.434(a)(5).

1. FC 450 Human Anatomy
2. FC 451 Human Anatomy II

Upon review, none of the course has instruction of neuroanatomy and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in courses: 1) ACM 5143 Surface Anatomy 2) ACM 5141 Human Anatomy I and 3) ACM 5242 Human Anatomy II to include neuroanatomy (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(a)(5).

Finding #3: The Physiology requirement is not met due to the lack of instruction of neurophysiology, endocrinology, and neurochemistry.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(a)(6):

"Physiology – a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry".

CIIS's Curriculum

On its curriculum requirement form, CIIS listed the course, FC 400 Human Physiology, to fulfill CCR Section 1399.434(a)(6). Upon review, the course does not meet the Board's requirement because it lacks instruction of neurophysiology, endocrinology, and neurochemistry. Although the topic, endocrinology, is taught in another course at CIIS, it is not listed on the curriculum requirement form to fulfill this requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in course, ACM 6141 Human Physiology to include neurophysiology, endocrinology, and neurochemistry (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(a)(6).

Finding #4: The Pathology and Pathophysiology requirement is not met due to the lack of instruction of microbiology psychopathology, and epidemiology.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(a)(7):

"Pathology and Pathophysiology – a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology".

CIIS's Curriculum

CIIS stated on its curriculum requirement form that the following courses satisfy CCR Section 1399.434(a)(7):

1. WM 511 Pathology I
2. WM 512 Pathology II
3. WM 513 Western Clinical Medicine I
4. WM 514 Western Clinical Medicine II
5. WM 515 Western Clinical Medicine III

Upon review, the courses do not meet the Board's requirement because it lacks instruction of microbiology, psychopathy and epidemiology.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the courses: 1) ACM 6241 Pathology and Pathophysiology 2) Western Clinical Medicine I and 3) ACM 7213 Western Clinical Medicine II to include microbiology, psychopathology, and epidemiology (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(a)(7).

Finding #5: The classical acupuncture and Oriental Medicine literature requirement is not met due to the lack of instruction in Jin Gui and Nei Jing literature.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(1)(G):

"Classical acupuncture and Oriental Medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing."

CIIS's Curriculum

CIIS stated that the courses: 1) ACM 511 History of Medicine 2) ACM 6532 TCM Classics: Wen Bing and 3) ACM 7231 TCM Classics: Shang Han Lun fulfills CCR Section 1399.434(b)(1)(G) on its curriculum requirement form. Upon review, the courses lack instruction in Jin Gui and Nei Jing and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 5111 History of Medicine to include Jin Gui and Nei Jing (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(1)(JG).

Finding #6: The Acupuncture techniques and treatment procedures requirement is not met due to the lack of instruction of electroacupuncture.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(B):

"Acupuncture techniques and treatment procedures, including electroacupuncture."

CIIS's Curriculum

CIIS listed on its curriculum requirement form the courses below to fulfill CCR Section 1399.434(b)(1)(B):

1. AT 535 Acupuncture Technique I
2. AT 536 Acupuncture Technique II
3. AT 537 Acupuncture Technique III
4. AT 545 Acupuncture Treatment for Disease I

Upon review, none of these courses have instruction of electroacupuncture and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the courses: 1) ACM 5323 Acupuncture Technique I and CNT 2) ACM5425 Acupuncture Technique II and 3) ACM 6121 Acupuncture Technique III to include electroacupuncture (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(1)(B).

Finding #7: The herbal prescription counseling and preparation requirement is not met due to the lack of instruction of counseling.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(E):

"Herbal prescription, counseling and preparation."

CIIS's Curriculum

On its curriculum requirement form, CIIS stated that the following courses satisfy CCR Section 1399.434(b)(2)(E):

1. ACM 6131 TCM Formulary I

Although the course has herbal prescription and preparation, it lacks instruction on counseling and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM 6131 TCM Formulary I, to include herbal counseling (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(2)(E).

Finding #8: The Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling requirement is not met due to the lack of instruction of counseling.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(F):

"Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling."

CIIS's Curriculum

CIIS listed the following courses on its curriculum requirement form to satisfy CCR Section 1399.434(b)(2)(F):

1. ACM 6412 TCM Nutrition
2. ACM 6543 Diet and Nutrition

Upon review, none of the courses listed above have instruction on counseling and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM 6543 Diet and Nutrition, to include dietary counseling (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(2)(F).

Finding #9: The Adjunctive acupuncture procedures requirement is not met due to the lack of instruction of bleeding.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(I):

"Adjunctive acupuncture procedures, including bleeding, cupping, gua sha, and dermal tacks."

CIIS's Curriculum

CIIS stated on its curriculum requirement form that the course, ACM 5323 Acupuncture Technique I and CNT fulfills CCR Section 1399.434(b)(2)(I). Upon review, the course lacks instruction of bleeding. The topic, bleeding, is covered in another course from CIIS's curriculum but these courses are not listed on the curriculum requirement form to fulfill CCR Section 1399.434(b)(2)(I).

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM Acupuncture Technique II, to include pricking bleeding (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(2)(I).

Finding #10: The acupuncture micro therapies requirement is not met due to the lack of instruction of auricular therapy.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(J):

"Acupuncture micro therapies, including auricular and scalp therapy."

CIIS' Curriculum

On its curriculum requirement form, CIIS listed the course, AT 537 Acupuncture Technique III to satisfy CCR Section 1399.434(b)(2)(J). Though the course has instruction of scalp therapy, it lacks instruction of auricular therapy and therefore does not meet the Board's requirement. The topic, auricular therapy, is taught in another course in CIIS' program, but the course is not listed on the curriculum requirement form to satisfy this requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in course, ACM 6121 Acupuncture Technique III to cover scalp therapy (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(2)(J).

Finding #11: The Adjunctive acupoint stimulation devices requirement is not met due to the lack of instruction of magnets and beads.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(b)(2)(M):

"Adjunctive acupoint stimulation devices, including magnets and beads."

CIIS's Curriculum

CIIS listed the course, AT 537 Acupuncture Technique III, to fulfill CCR Section 1399.434(b)(2)(M). Upon review, the course does not meet the Board's requirement because it lacks instruction of magnets and beads.

Training Program Corrective Action Taken

Changes were made to the competencies covered in course, ACM 6121 Acupuncture Technique III to cover magnets and beads (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(b)(2)(M).

Finding #12: The Patient/practitioner rapport, communication skills, including multicultural sensitivity requirement is not met due to the lack of instruction of multicultural sensitivity.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(c)(4):

"Pharmacological assessment, emphasizing side-effects and herb-drug interactions."

CIIS' Curriculum

CIIS stated on its curriculum requirement form that the course, WM 662 Patient Counseling Techniques, satisfies CCR Section 13998.434(c)(4). Upon review, the course lacks instruction of multicultural sensitivity and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in course, ACM 6346 Patient Management and Ethics to cover multicultural sensitivity.

This action brings CIIS in compliance with CCR Section 1399.434(c)(4).

Finding #13: The Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(c)(5):

"Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports."

CIIS's Curriculum

CIIS listed the course, WM 515 Western Clinical Medicine III, to satisfy CCR Section 1399.434(c)(5). Upon review, the course does not meet the Board's requirement because it lacks instruction for procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports.

Training Program Corrective Action Taken

Changes were made to the competencies covered in course, ACM 6443 Advanced Physical Assessment to include the procedure for ordering diagnostic imaging, radiological and laboratory tests and incorporating the resulting data and reports (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(c)(5).

Finding #14: The Clinical impressions and the formation of a working diagnosis requirement is not met due to the lack of instruction of the World Health Organization's international classification of disease (ICD-9).

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(c)(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)."

CIIS' Curriculum

CIIS listed the following courses on its curriculum requirement form to fulfill CCR Section 1399.434(c)(7):

1. CM 517 TCM Diagnosis I
2. CM 518 TCM Diagnosis II
3. CM 519 TCM Diagnosis III

Upon review, none of the courses listed above have instruction on the World Health Organization's international classification of diseases (ICD-9), and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in courses 1) ACM 5210 TCM Diagnosis I and 2) ACM 5311 TCM Diagnosis II to include the World Health Organization's international classification of disease (ICD-9) (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(c)(7).

Finding #15: The awareness of at-risk population requirement is not met due to the lack of instruction of gender, age, indigent, and disease specific patients.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(c)(8):

"Awareness of at-risk population, including gender, age, indigent, and disease specific patients."

CIIS' Curriculum

On its curriculum requirement form, CIIS listed the following course to satisfy CCR Section 1399.434(c)(8):

1. ACM 7345 Public Health

Upon review, the course does not meet the Board's requirement because it lacks instruction of awareness of at-risk population, including gender, age, indigent, indigent, and disease specific patients.

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM 7345 Public Health, to include: awareness of at-risk population, including gender, age, indigent, and disease specific patients (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(c)(8).

Finding #16: The Clinical sciences requirement is not met due to the lack of instruction of surgery.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(c)(10):

"Clinical sciences – a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health."

CIIS' Curriculum

CIIS stated on its curriculum requirement form that the courses listed below fulfill CCR Section 1399.434(c)(10):

1. ACM 6441 Western Clinical Medicine I
2. ACM 7213 Western Clinical Medicine II
3. ACM 7142 Pharmacology
4. ACM 7145 Western Gynecology
5. ACM 6412 Nutrition
6. ACM 7345 Public Health

Upon review, the courses listed above do not meet the Board's requirement because it lacks instruction of surgery.

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM 6441 Western Clinical Medicine I, to include a review of internal medicine and surgery (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(c)(10).

Finding #17: The clinical medicine requirement is not met due to the lack of instruction of a survey of the clinical practice of psychology, podiatry, and homeopathy.

California Acupuncture Board Training Program Curriculum

CCR Section 1399.434(c)(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."

CIIS' Curriculum

CIIS listed course, ACM 6441 Western Clinical Medicine I, on its curriculum requirement form to satisfy CCR Section 1399.434(c)(11). The course does not fulfill the Board's requirement because it lacks instruction of a survey of the clinical practice of psychology, podiatry, and homeopathy.

Training Program Corrective Action Taken

Changes were made to the competencies to course, ACM 6441 Western Clinical Medicine I, to include a survey of psychology, podiatry, and homeopathy (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(c)(11).

Finding #18: The primary care responsibilities requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(1):

"Primary care responsibilities."

CIIS' Curriculum

CIIS stated on its curriculum requirement form that the following courses satisfy CCR Section 1399.434(d)(1):

1. ACM 6441 Western Clinical Medicine I
2. ACM 7213 Western Clinical Medicine II

Upon review, the courses do not meet the Board's requirement because it lacks instruction of primary care responsibilities.

Training Program Corrective Action Taken

Changes were made to the competencies to courses, ACM 6441 Western Clinical Medicine I and ACM 6542 Western Clinical Medicine II, to include primary care responsibilities (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(d)(1).

Finding #19: The Secondary and specialty care responsibilities requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(2):

"Secondary and specialty care responsibilities."

CIIS' Curriculum

CIIS stated on its curriculum requirement form that the following courses satisfy CCR Section 1399.434(d)(2):

1. ACM 6441 Western Clinical Medicine I
2. ACM 7213 Western Clinical Medicine II
3. ACM 7145 Western Gynecology

Upon review, the course lacks instruction of secondary and specialty care responsibilities and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies to courses, ACM 6441 Western Clinical Medicine I, ACM 6542 Western Clinical Medicine II, and ACM 7145 Western Gynecology, to include secondary and specialty care responsibilities (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(d)(2).

Finding #20: The psychosocial assessment requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(3):

"Psychosocial assessment."

CIIS' Curriculum

CIIS listed course, WM 662 Patient Counseling Techniques, on its curriculum requirement form to fulfill CCR Section 1399.434(d)(3). Upon review, the course does not meet the Board's requirement because it lacks instruction on psychosocial assessment.

Training Program Corrective Action Taken

Changes were made to the competencies covered in courses: 1) ACM 7213 Western Clinical Medicine II and 2) ACM 6346 Patient Management and Ethics to include psychosocial assessment.

This action brings CIIS in compliance with CCR Section 1399.434(d)(3).

Finding #21: The treatment planning, continuity of care, referral, and collaboration requirement is not met due to the lack of instruction of continuity of care, referral, and collaboration.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(5):

"Treatment planning, continuity of care, referral, and collaboration."

CIIS' Curriculum

On its curriculum requirement form, CIIS listed courses 1) CM 690 Symposium: Case Study I and 2) CM 691 Symposium: Case Study II to fulfill CCR Section 1399.434(d)(5).

Though the courses have instruction on treatment planning, it lacks instruction on continuity of care, referral, and collaboration. Thus, these courses do not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 7213 Clinical Case Review and Management to include treatment planning, continuity of care, and collaboration.

This action brings CIIS in compliance with CCR Section 1399.434(d)(5).

Finding #22: The prognosis and future medical care requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(7):

"Prognosis and future medical care."

CIIS' Curriculum

Upon review, the courses, 1) CM 690 Symposium: Case Study I and 2) CM 691 Symposium: Case Study II on CIIS' curriculum requirement form does not satisfy CCR

Section 1399.434(d)(7) because it lacks instruction of prognosis and future medical care.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 7213 Clinical Case Review and Management to include prognosis and future medical care.

This action brings CIIS in compliance with CCR Section 1399.434(d)(7).

Finding #23: The medical-legal report writing, expert medical testimony, and independent medical review requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(10):

"Medical-legal report writing, expert medical testimony, and independent medical review."

CIIS' Curriculum

CIIS listed on its curriculum requirement form the course, WM 609 Practice Management, to satisfy CCR Section 1399.434(d)(10). Upon review, the course lacks instruction of medical-legal report writing, expert medical testimony, and independent medical review. Thus, the course does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 6545 Practice Management to include medical-legal report writing, expert medical testimony, and independent medical review.

This action brings CIIS in compliance with CCR Section 1399.434(d)(10).

Finding #24: The special care/seriously ill patients requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(d)(11):

"Special care/seriously ill patients."

CIIS' Curriculum

On its curriculum requirement form, CIIS listed the following courses to satisfy CCR Section 1399.434(d)(11):

1. WM 513 Western Clinical Medicine I
2. WM 514 Western Clinical Medicine II
3. WM 515 Western Clinical Medicine III

Upon review, none of the courses listed above have instruction on special care/seriously ill patients, and therefore does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 7213 Western Clinical Medicine II, to include special care/seriously ill patients.

This action brings CIIS in compliance with CCR Section 1399.434(d)(11).

Finding #25: The business written communications requirement is not met.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(e)(2):

"Business written communications."

CIIS' Curriculum

CIIS have listed course, WM 609 Practice Management, on its curriculum requirement form to fulfill CCR Section 1399.434(e)(2). Upon review of the course, it does not meet the Board's requirement because it lacks instruction of business written communications.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 6245 Business Practice and Marketing, to include business written communications.

This action brings CIIS in compliance with CCR Section 1399.434(e)(2).

Finding #26: The knowledge of regulatory compliance and jurisprudence requirement is not met due to the lack of instruction of Labor Code.

California Acupuncture Board Training Program Curriculum Requirement

CCR Section 1399.434(e)(3):

"Knowledge of regulatory compliance and jurisprudence (municipal, California, and federal laws, including OSHA, Labor Code, Health Insurance Portability and Accountability Act of 1966 (HIPAA)."

CIIS' Curriculum

CIIS stated on its curriculum requirement form that the course, WM 601 Research Methods, satisfy CCR Section 1399.434(e)(3). Upon review, the course lacks instruction of knowledge of academic peer review process and does not meet the Board's requirement.

Training Program Corrective Action Taken

Changes were made to the competencies covered in the course, ACM 6545 Practice Management, to include Labor Code (See CIIS' Corrective Action Report).

This action brings CIIS in compliance with CCR Section 1399.434(e)(3).

Summary of ACTCM at CIIS' Non-Compliances

California Acupuncture Board Requirements CCR Section 1399.434	California Institute of Integral Studies' Curriculum	Unsatisfied Requirement	ACTCM AT CIIS Corrective Action
1. (a)(3): "General Physics, including a general survey of biophysics".	FC 440 General Physics	Biophysics	Changes were made to competencies include biophysics. CIIS is now in compliance.
2. (a)(5): "Anatomy – a survey of microscopic, gross anatomy and neuroanatomy".	FC 450 Human Anatomy FC 451 Human Anatomy II	Neuroanatomy	Changes were made to competencies to include neuroanatomy. CIIS is now in compliance.
3. (a)(6): "Physiology – a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry".	FC 400 Human Physiology	Neurophysiology, endocrinology, and neurochemistry	Changes were made to competencies to include neurophysiology, endocrinology, and neurochemistry. CIIS is now in compliance.
4. (a)(7): "Pathology and Pathophysiology – a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology".	WM 511 Pathology I WM 512 Pathology II WM 513 Western Clinical Medicine I WM 514 Western Clinical Medicine II WM 515 Western Clinical Medicine III	Microbiology, psychopathology, epidemiology	Changes were made to competencies to include microbiology, psychopathology, and epidemiology. CIIS is now in compliance.

5. (b)(1)(G): "Classical acupuncture and Oriental Medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing."	ACM 5111 History of Medicine ACM 6532 TCM Classics: Wen Bing ACM 7231 TCM Classics: Shang Han Lun	Jin Gui & Nei Jing	Changes were made to competencies to include Jin Gui and Nei Jing. CIIS is now in compliance.
6. (b)(2)(B): "Acupuncture techniques and treatment procedures, including electroacupuncture."	AT 535 Acupuncture Technique I AT 536 Acupuncture Technique II AT 537 Acupuncture Technique III AT 545 Acupuncture Treatment for Disease I	Electroacupuncture	Changes were made to competencies to include electroacupuncture. CIIS is now in compliance.
7. (b)(2)(E): "Herbal prescription, counseling and preparation."	ACM 6131 TCM Formulary I	Counseling	Changes were made to competencies to include herbal counseling. CIIS is now in compliance.
8. (b)(2)(F): "Oriental and Western clinical and medical nutrition, dietary and supplement prescription and counseling."	ACM 6412 TCM Nutrition ACM 6543 Diet and Nutrition	Counseling	Changes were made to competencies to include dietary counseling. CIIS is now in compliance.
9. (b)(2)(I): "Adjunctive acupuncture procedures, including bleeding, cupping, gua sha, and dermal tacks.	ACM 5323 Acupuncture Technique I and CNT	Bleeding	Changes were made to competencies to include bleeding. CIIS is now in compliance.
10. (b)(2)(J): "Acupuncture micro therapies, including auricular and scalp therapy."	AT 537 Acupuncture Technique III	Auricular therapy	Changes were made to competencies to include auricular therapy. CIIS is now in compliance.
11. (b)(2)(M): "Adjunctive acupoint stimulation devices, including magnets and beads."	AT 537 Acupuncture Technique III	Magnets and beads	Changes were made to competencies to include magnets and beads. CIIS is now in compliance.
12. (c)(4): "Pharmacological assessment, emphasizing side-effects and herb-drug interactions."	WM 662 Patient Counseling Techniques	Multicultural sensitivity	Changes were made to competencies to include multicultural sensitivity. CIIS is now in compliance.

13. (c)(5): "Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports."	WM 515 Western Clinical Medicine III	Procedures for ordering diagnostic imaging, radiological, and laboratory tests and incorporating the resulting data and reports	Changes were made to competencies to include procedures for ordering diagnostic imaging, radiological, and laboratory test and incorporating the resulting data and reports. CIIS is now in compliance.
14. (c)(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)."	CM 517 TCM Diagnosis I CM 518 TCM Diagnosis II CM 519 TCM Diagnosis III	World Health Organization international classification of disease (ICD-9)	Changes were made to competencies to include World Health Organization International Classification of Disease (ICD-9). CIIS is now in compliance.
15. (c)(8): "Awareness of at-risk population, including gender, age, indigent, and disease specific patients."	ACM 7345 Public Health	Gender, age, indigent, and disease specific patients	Changes were made to competencies awareness of at-risk population, including gender, age, indigent, and disease specific patients.
16. (c)(10): "Clinical sciences – a review of internal medicine, pharmacology, neurology, surgery, obstetrics/gynecology, urology, radiology, nutrition and public health."	ACM 6441 Western Clinical Medicine I ACM 7213 Western Clinical Medicine II ACM 7142 Pharmacology ACM 7145 Western Gynecology ACM 6412 Nutrition ACM 7345 Public Health	A review of surgery and internal medicine	Changes were made to competencies to include a review of surgery and internal medicine. CIIS is now in compliance.
17. (c)(11): "Clinical medicine – a survey of the clinical practice of medicine, osteopathy, dentistry, psychology, nursing, chiropractic, podiatry, naturopathy, and homeopathy to familiarize	ACM 6441 Western Clinical Medicine I	A survey of the clinical practice of psychology, podiatry, and homeopathy	Changes were made to competencies to include a survey of clinical practice of psychology, podiatry, and homeopathy. CIIS is now in compliance.

practitioners with the practices of other health care practitioners”			
18. (d)(1): “Primary care responsibilities.”	ACM 6441 Western Clinical Medicine I ACM 7213 Western Clinical Medicine II	Primary care responsibilities	Changes were made to competencies to include primary care responsibilities. CIIS is now in compliance.
19. (d)(2): “Secondary and specialty care responsibilities.”	ACM 6441 Western Clinical Medicine I ACM 7213 Western Clinical Medicine II ACM 7145 Western Gynecology	Secondary and specialty care responsibilities	Changes were made to competencies to include secondary and specialty care responsibilities. CIIS is now in compliance.
20. (d)(3): “Psychosocial assessment.”	WM 662 Patient Counseling Techniques	Psychosocial assessment	Changes were made to competencies to include psychosocial assessment. CIIS is now in compliance.
21. (d)(5): “Treatment planning, continuity of care, referral, and collaboration.”	CM 690 Symposium: Case Study I CM 691 Symposium: Case Study II	Continuity of care, referral, and collaboration	Changes were made to competencies to include continuity of care, referral, and collaboration. CIIS is now in compliance.
22. (d)(7): “Prognosis and future medical care.”	CM 690 Symposium: Case Study I CM 691 Symposium: Case Study II	Prognosis and future medical care	Changes were made to competencies to include prognosis and future medical care. CIIS is now in compliance.
23. (d)(10): “Medical-legal report writing, expert medical testimony, and independent medical review.”	WM 609 Practice Management	Medical-legal report writing, expert medical testimony, and independent medical review	Changes were made to competencies to include medical-legal report writing, expert medical testimony, and independent medical review. CIIS is now in compliance.
24. (d)(11): “Special care/seriously ill patients.”	WM 513 Western Clinical Medicine I WM 514 Western Clinical Medicine II WM 515 Western Clinical Medicine III	Special care/seriously ill patients	Changes were made to competencies to include special care/seriously ill patients. CIIS is now in compliance.

25. (e)(2): "Business written communications."	WM 609 Practice Management	Business written communications	Changes were made to competencies to include business written communications. CIIS is now in compliance.
26. (e)(3): "Knowledge of regulatory compliance and jurisprudence (municipal, California, and federal laws, including OSHA, Labor Code, Health Insurance Portability and Accountability Act of 1966 (HIPAA)."	WM 601 Research Method	Labor Code	Changes were made to competencies to include Labor Code. CIIS is now in compliance.

PART V: ACTCM AT CIIS' CLINICAL NON COMPLIANCE CCR 1399.434

The site visit team evaluated the clinic for compliance to ensure the curriculum requirements are reflected in the clinical training pursuant to CCR 1399.434.

California Acupuncture Board Training Program Clinical Requirement

CCR Section 1399.434(h):

(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).

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."

California Acupuncture Board Record Keeping Requirement

CCR Section 1399.453:

"An acupuncturist shall keep complete and accurate records on each patient who is given acupuncture treatment, including but not limited to, treatments given and progress made as a result of the acupuncture treatments."

Clean Needle Technique Reference

Finkelstein, Malvin, et al. *Clean Needle Technique Manual for Acupuncturists: Guidelines and Standards for the Clean and Safe Clinical Practice of Acupuncture.* Ed. Steve Given. 6th ed. Trans. Anita Chang. Chaplin, Connecticut: National Acupuncture Foundation, 2009. Print.

Department of Industrial Relations Worker's Compensation Requirement
Section 9785. Reporting Duties of the Primary Treating Physician:

"(h) When the primary treating physician determines that the employee's condition is permanent and stationary, the physician shall, unless good cause is shown, report within 20 days from the date of examination any findings concerning the existence and extent of permanent impairment and limitations and any need for continuing and/or future medical care resulting from the injury. The information may be submitted on the "Primary Treating Physician's Permanent and Stationary Report" form (DWC Form PR-3 or DWC Form PR-4) contained in section 9785.3 or section 9785.4, or in such other manner which provides all the information required by Title 8, California Code of Regulations, section 10606. For permanent disability evaluation performed pursuant to the permanent disability evaluation schedule adopted on or after January 1, 2005, the primary treating physician's reports concerning the existence and extent of permanent impairment shall describe the impairment in accordance with the AMA Guides to the Evaluation on Permanent Impairment, 5th Edition (DWC Form PR-4). Qualified Medical Evaluators and Agreed Medical Evaluators may not use DWC Form PR-3 or DWC Form PR-4 to report medical-legal evaluations."

ACTCM AT CIIS' Clinic

<u>Finding #1</u>: ACTCM's clinical practicum for intern training did not demonstrate sufficient application of Eastern and Western diagnostic procedures in evaluating patients.

1. Eastern assessments were not applied to some patients:
    a. Inspected medical charts lacked documentation of Zang-Fu
    b. Proposed herbs/formulas are not noted in charts even though they were discussed between the supervisor and the intern.
    c. Several treatment plans in inspected medical charts lacked prognosis and future medical care. For continuity of care, prognosis and duration of prognosis must be documented.
2. Western assessments were not applied to patients:
    a. Standard physical assessments, such as orthopedic, were not conducted for musculoskeletal cases
    b. Standard Medical Terminology was not used
    c. Height, weight, or blood pressure was not noted
3. Patient's records were not accurate and complete:
    a. No Page numbers listed on patient medical charts
4. Although the charts did list a section for a pain scale, it was not the two dimensional scale used in California's Worker's Compensation system. For worker's compensation, there must be four levels of severity and frequency of pain.

Training Program Corrective Action Taken

ACTCM at CIIS submitted new medical charts, meeting minutes, and a memo to all supervisors to demonstrate corrective action of findings of clinical non-compliance found during the site visit (See CIIS Corrective Action Report). Upon review of the medical charts, meeting minutes, and memo, CIIS is in full compliance with CCR Section 1399.434(h)(2).

This action brings CIIS in compliance with CCR Section 1399.434(h)(2).

<u>Finding #2:</u> ACTCM at CIIS does not adhere to the California Acupuncture Board's clinical supervision requirement stating that clinic supervisor shall be physically present at the needling of the patient during the second period of 275 hours of supervised practice.

Training Program Corrective Action Taken

ACTCM at CIIS submitted new clinical syllabi that adhere to the Board's supervision requirement and implemented a new policy that requires supervisors to be present when intern at level II and level II are needling.

This action brings CIIS in compliance with CCR Section 1399.434(h)(2).

PART VI: PEER REVIEW RECOMMENDATIONS

1. Single herbs and herbal formulas are not used as often as capsules and pills.
2. It was observed that clinical students were opening the door for other interns then going back to wash their hands before entering the treatment room even though there was alcohol dispensing machines in the treatment rooms. In another situation, an observing intern opened the needle packages for the practicing trainee. For teaching purposes, such assistance need not be provided as ultimately these students will be practicing on their own.
3. It is recommended that patients' treatments be re-evaluated when their condition has not improved.

PART VII: CIIS' TRAINIG PROGRAM NON-COMPLIANCE CCR SECTION 1399.435

Finding: Some student records were missing official transcripts that are needed to show that minimum qualifications are met.

California Acupuncture Board Training Program Requirement

CCR Section 1399.435(a):

"Candidates for admission shall have successfully completed at least two (2) academic years (60 semester credit/90 quarter credits) of education at the baccalaureate level that is appropriate preparation for graduate level work, or the equivalent from an institution accredited by an agency recognized by the U.S. Secretary of Education."

Training Program Corrective Action Taken

ACTCM at CIIS implemented a new policy that foreign applicants must submit original copy of their transcript directly from the foreign institution (See CIIS Corrective Action).

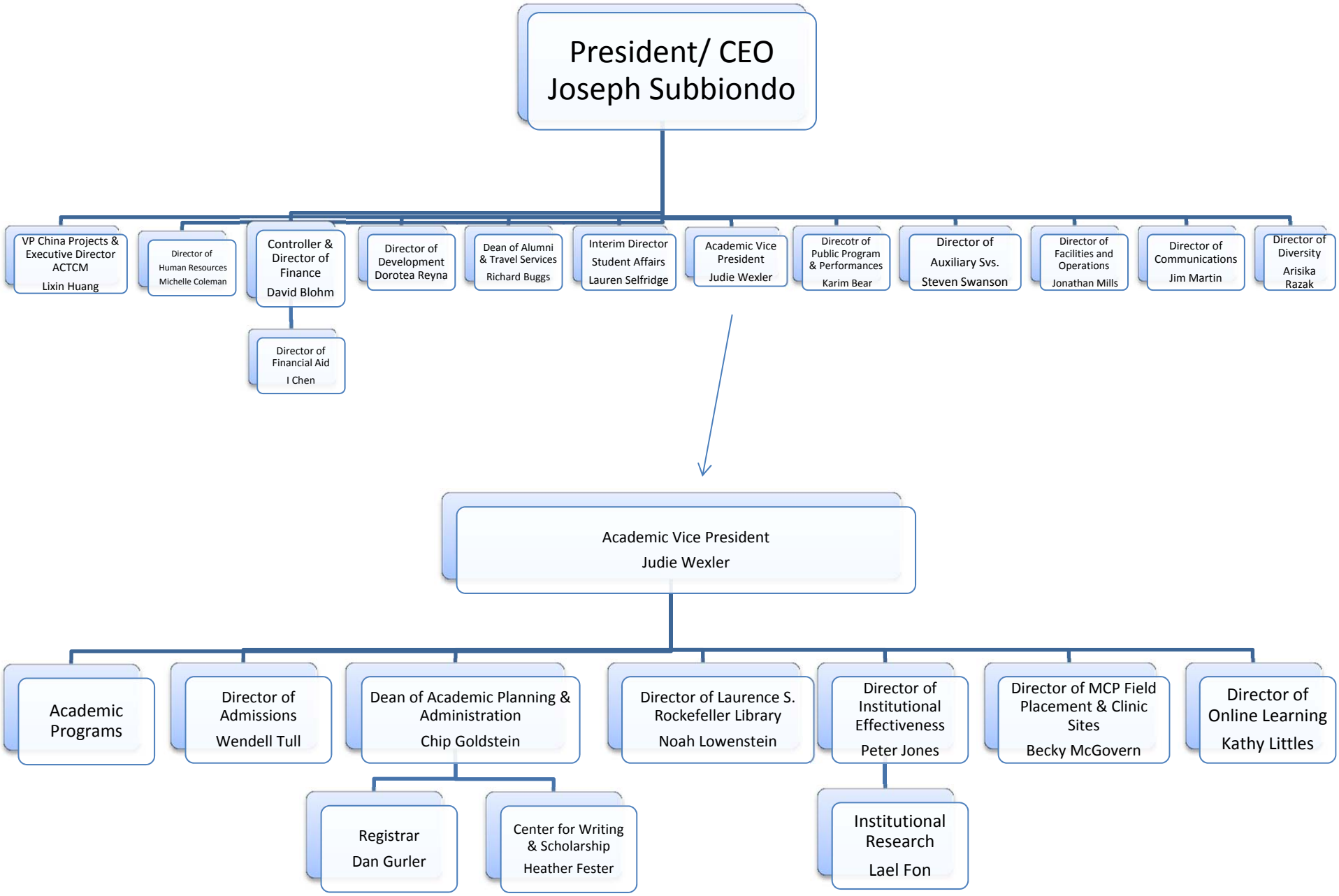
This action brings ACTCM at CIIS in compliance with CCR Section 1399.435(a).

PART VIII: RECOMMENDATION

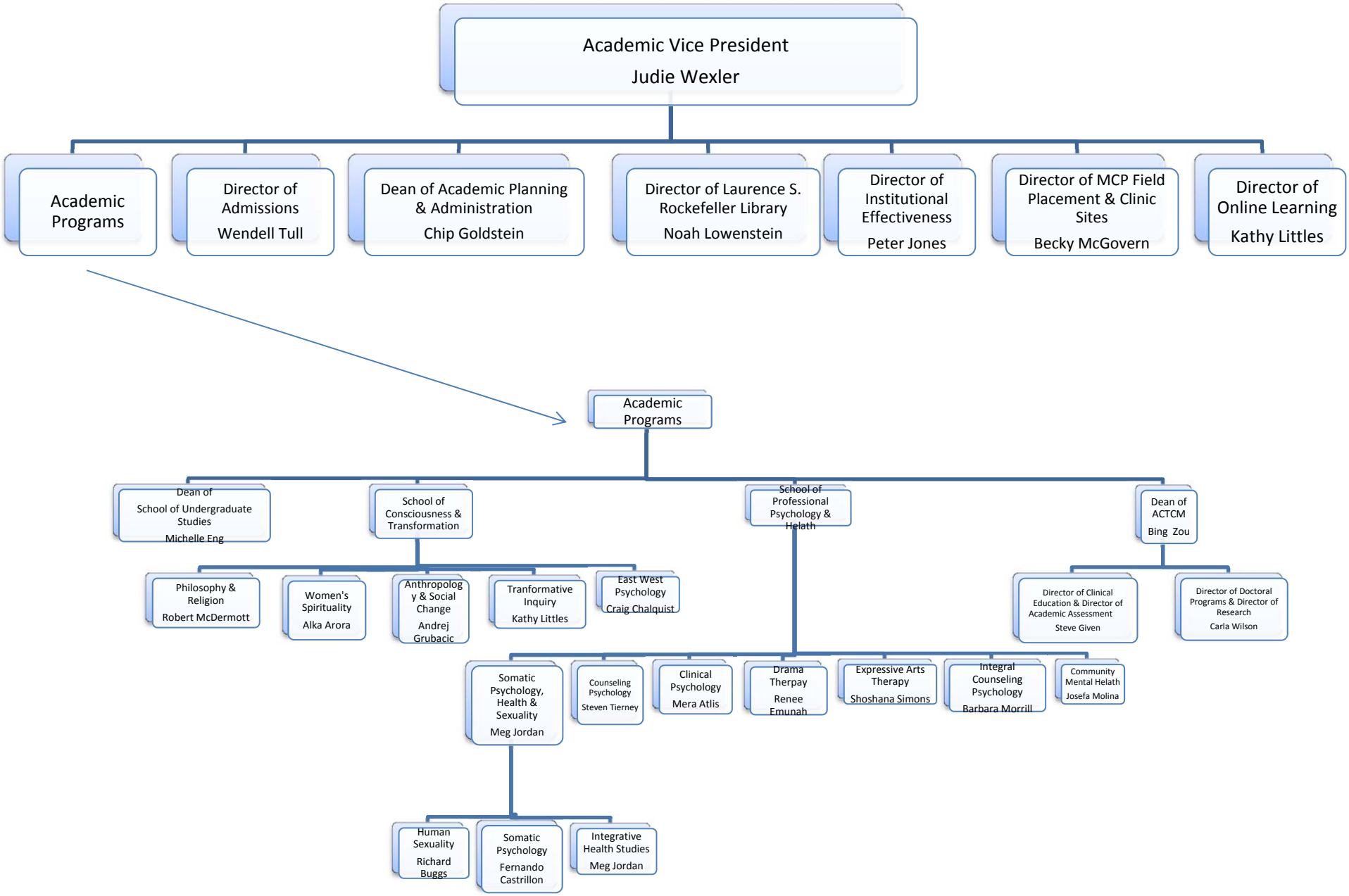
Protection of the public shall be the highest priority for the Acupuncture Board in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount (California Business and Professions Code, Section 4928.1).

Site Team Recommendation: Approval

CIIS' Master of Traditional Oriental Medicine meets all the Board's requirement; the site team recommends approval of CIIS' Master of Science of Traditional Oriental Medicine program to become a California Acupuncture Board approved training program.



Proposed Org. Structure with Merger 6/3/2014

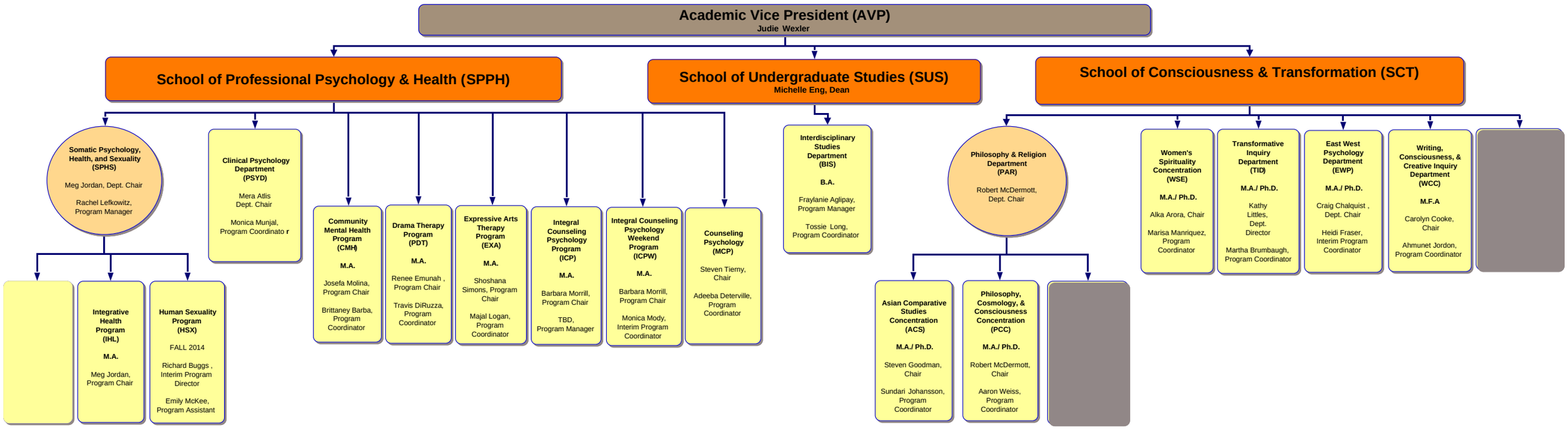


Proposed Org. Structure with Merger 6/3/2014

California Institute of Integral Studies

Nomenclature & Organization Chart for CIIS Academic Departments and Programs

AY 2014-15



1/14/2015

Approval of CPR and First Aid curricula

STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.

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

DATE	May 29, 2015
TO	Education Committee
FROM	Terri Thorfinnson Executive Officer
SUBJECT	Request for Approval of CPR and First Curriculum Pursuant to CCR Section 1399.434 (f) (3) and 1399.436 (a) (14)

Issue: Cardio-Pulmonary Resuscitation (CPR) and first aid educators require Board approval of their curriculum in order for their certification to fulfill the Board's requirement.

Background: One of the Board's curriculum requirements is to become certified in Adult/Child CPR and First Aid for a minimum of eight hours by either the American Heart Association or the American Red Cross pursuant to CCR 1399.434 (f) (3) and 1399.436 (a) (14). However, this same section also provides for, "an organization with an equivalent course approved by the Board." The EMS Safety Services, Inc. and the Save - A - Life Educators, Inc. are organizations who are requesting the Board to approve their course.

Discussion: EMS Safety Services, Inc. provides several courses, but the course that meets the Board's eight hour CPR and first aid requirements is the CPR/AED and Basic First Aid for Community Rescuers course, whose intended audience is workplace and community. This course is eight hours and has both adult and child Cardio-Pulmonary Resuscitation (CPR) and first aid. They provide training for the U.S. Coast Guard, Emergency Services Agencies in CA, DE, FL, IL, KY, ME, NY, OH, PA, TX, American General Dentistry/PACE, Mine Safety and Health Administration (MSHA).

Save - A - Life Educator, Inc. provides an adult/child CPR and first aid course that meets the American Heart Association and American Red Cross courses. One issue is that both the CPR and First Aid courses are three to four hours. Both would have to be four hours to meet the Board's eight-hour requirement. This organization provides training to San Diego County Emergency Medical Services Authority (EMSA) to meet their CPR/AED program; State of California EMSA's training for CPR/AED/First Aid; U.S. Department of Homeland Security Coast Guards training for CPR/AED/First Aid; and California State Community College Teaching Credential.

Recommendation: Approve both training programs.

EMS - Safety Services

Sinkovich, Terry@DCA

From: Jerry Lerouge <JLerouge@emssafety.com>
Sent: Thursday, January 08, 2015 9:45 AM
To: Sinkovich, Terry@DCA
Cc: Rob Pryce
Subject: EMS SAFETY SERVICES PROGRAM APPROVAL REQUEST
Attachments: Overview and Capabilities Statement_Approvals_12-24-13.pdf; EMSS_EQUIV_2010.pdf; Program-Overview_CPR-AED-for-Community-Rescuers_11-2014.pdf; Program-Overview_First-Aid_11-2014.pdf

Hello Terry Sinkovich

My name is Jerry Lerouge, I am the Regulatory Affairs Coordinator for EMS Safety Services.A company that is committed to providing the best in quality education for the healthcare provider, caregiver and the general public.

We were contacted by Ron Leggett, Coordinator with R&B CPR and First Aid Training and was told to contact you regarding having EMS Safety Services approved by the California Acupuncture Board for CPR and First Aid Training.

I called and left you a voice mail today and I am following up with this email regarding our request.

We are seeking the approval of our CPR and First Aid Curricula in hopes that our certification would be approved and recognized by the California Acupuncture Board for CPR and First Aid Training.

Our programs are based on the gold standard of the American Heart Association's Emergency Cardiovascular Care Committee (ECC) and the International Liaison Committee on Resuscitation (ILCOR). EMS Safety's training guidelines are updated per AHA's and ILCOR'S most current treatment recommendations. EMS Safety Services uses nationally recognized, evidence-based guidelines for CPR and First Aid and incorporates psychomotor skills to support the instruction.

We provide instructors throughout the United States with emergency response training curricula for the instruction of CPR, First Aid, AED, and Bloodborne Pathogens (awareness) for both lay providers and professional rescuers. Our training programs are approved by many different organizations. To view a complete listing of our approvals please visit our website at: http://www.emssafetyservices.com/training-programs/approvals/

I have attached Information regarding our program for your review. We are also approved by the Continuing Education Certification Board for Emergency Medical Services (CECBEMS) http://www.emssafetyservices.com/training-programs/continuing-education/ we are happy to send you samples of instructor and student materials for your evaluation upon your request.

Thank you for your time. I look forward to hearing from you soon, thank you.

Jerry Lerouge

Regulatory Affairs Coordinator
EMS Safety Services, Inc.
approvals@emssafety.com
www.emssafety.com
(909) 239-1326 CELL
(800) 215-9555
(949) 388-2776 FAX

EMS Safety Services, Inc.
1046 Calle Recodo Suite K. San Clemente, CA 92673
www.emssafety.com • info@emssafety.com • (800) 215-9555 • Fax (949) 388-2776

Overview and Capabilities Statement

Company: EMS Safety Services, Inc.

Established: 1991

Mission: Teaching Skills for Life

Core Competency: Emergency Response Training

- Nationally recognized, evidence-based guidelines
- Skills practice, written testing and skills testing required
- Instructor and student training
- Professional and workplace levels

Key Contacts:

- President and CEO: Marian Lepore, marian@emssafety.com
- Quality and Program Development: Rob Pryce, rprcye@emssafety.com
- Sales and Instructor Training: Matt Muncie, mmuncie@emssafety.com
- Regulatory Affairs: Jerry Lerouge, jlerouge@emssafety.com

Core Programs:

Program Title	Intended Audience	Course Length
CPR& AED for Professional Rescuers	EMS Responders	6 Hours
CPR/AED and Basic First Aid for Community Rescuers	Workplace, Community	8 Hours
CPR & Basic First Aid for Childcare Providers	Child Caregiver	8 Hours
Emergency Oxygen Administration	EMS Responder	1 Hour
Bloodborne Pathogens Awareness	Std: 1910.1030	1 Hour

Sample Approval List:

Below is a very small sample of EMS Safety program approvals. For a complete list of EMS Safety program approvals, please visit http://www.emssafetyservices.com/training-programs/approvals/.

- Continuing Education Coordinating Board for EMS (CECBEMS)
- United States Coast Guard
- EMS Agencies: CA, DE, FL, IL, KY, ME, NY, OH, PA, TX, etc...
- American General Dentistry/PACE
- Mine Safety and Health Administration (MSHA)

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www.emssafety.com • info@emssafety.com • (800) 215-9555 • Fax (949) 388-2776

November, 2014

To Whom It May Concern:

RE: Basic First Aid for Community Rescuers

The following information is an overview of the content, certification requirements and general information related to the *Basic First Aid for Community Rescuers* training course.

This course is designed for citizen-rescuers at work, home, or out the community. The content includes First Aid information for all ages. The course is approved by numerous agencies and organizations throughout the United States.

First Aid Guidelines from EMS Safety reflect the 2010 International Consensus on CPR and ECC Science and the International First Aid Science Advisory Board.

Required Topics:

- Chain of Survival
- Responding to Emergencies
- Legal Issues
- Protection from Infection
- Heart Attack
- Stroke
- Adult, Child and Infant Choking[+]
- Assessing, Positioning, and Moving a Victim
- Bleeding, Shock & Trauma
- Head, Neck and Back Injuries
- Chest & Abdominal Injuries
- Burns
- Difficulty Breathing & Asthma
- Allergic Reactions
- Seizures
- Fainting
- Diabetic Emergencies
- Poisoning
- Heat & Cold Emergencies
- Bites and Stings
- First Aid Kit Contents
- Safety Checklists

[+] Child/Infant choking topics are required for child or infant certification

Course Delivery:

- DVD
- Instructor lecture and skills demonstration
- Skills review and practice
- Written and skills testing required for certification

Course Length:

- Approximately 4-5 hours based on a 1:12 Instructor to Student ratio.
- Optional components will increase the course length

Certification Card:

- Issued to passing students only
- Valid for two years after issue date
- Identifies instructor's name and instructor number
- Has a unique control number

Training Ratio:

- Instructor-to-Student Ratio (maximum): 1:12
- Manikin-to-Student Ratio (recommended): 1:2

Requirements for Passing:

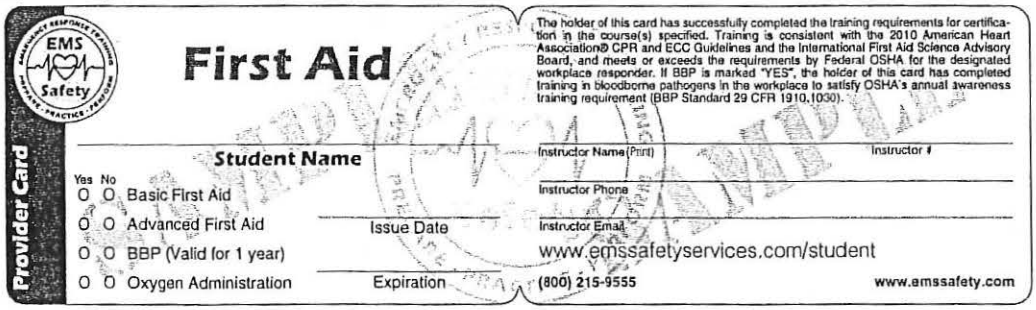
- Course participation and skills practice
- Written testing with a minimum passing score of 80%
- Successful skills testing required in:
  - Adult/child choking
  - Infant choking
  - Disposable glove removal
  - Bleeding control and bandaging
  - Assessment of a conscious victim
  - Epi-pen use

Please let us know if you require any other information about our program, or would like a sample of our training material. We are available to address any comments or questions by phone at (800) 215-9555 or via email at info@emssafety.com. Thank you for your consideration.

Sincerely,

EMS Safety Services, Inc.
Teaching Skills for Life

Sample Image, Course Completion Card:


Provider Card
EMS Safety
First Aid
The holder of this card has successfully completed the training requirements for certification in the course(s) specified. Training is consistent with the 2010 American Heart Association® CPR and ECC Guidelines and the International First Aid Science Advisory Board, and meets or exceeds the requirements by Federal OSHA for the designated workplace responder. If BBP is marked "YES", the holder of this card has completed training in bloodborne pathogens in the workplace to satisfy OSHA's annual awareness training requirement (BBP Standard 29 CFR 1910.1030).
Student Name
Instructor Name (Print)
Instructor #
Yes No
O O Basic First Aid
O O Advanced First Aid
O O BBP (Valid for 1 year)
O O Oxygen Administration
Issue Date
Expiration
Instructor Phone
Instructor Email
www.emssafetyservices.com/student
(800) 215-9555
www.emssafety.com

EMS Safety Services, Inc.
1046 Calle Recodo Suite K. San Clemente, CA 92673
www.emssafety.com • info@emssafety.com • (800) 215-9555 • Fax (949) 388-2776

November, 2014

To Whom It May Concern:

RE: CPR/AED for Community Rescuers

The following information is an overview of the content, certification requirements and general information related to the *CPR/AED for Community Rescuers* training course.

This course is designed for citizen-rescuers at work, home or out the community. The content includes CPR/AED information for all ages. The course is approved by numerous agencies and organizations throughout the United States.

CPR/AED Guidelines from EMS Safety reflect the 2010 International Consensus on CPR and ECC Science and the International First Aid Science Advisory Board.

Topics:

- Chain of Survival
- CPR Overview
- C-A-B Sequence
- Recovery Position
- CPR Barriers
- Adult, child and infant CPR+
- Using an AED*
- Special CPR Considerations
- Special AED Considerations*
- AED Safety*
- Responding to Emergencies
- Legal Issues
- Protection from Infection
- Heart Attack
- Stroke
- Adult, Child and Infant Choking+

+ Child/Infant CPR and choking topics are required for child or infant CPR certification
**Optional Topic required for AED certification*

Course Delivery:

- DVD
- Instructor lecture and skills demonstration
- Skills review and practice
- Written and skills testing required for certification

Certification Card:

- Issued to passing students only
- Valid for two years after issue date
- Identifies instructor's name and instructor number
- Has a unique control number

Course Hours

- 4-6 hrs

Training Ratio:

- Instructor-to-Student Ratio (maximum): 1:12
- Manikin-to-Student Ratio (recommended): 1:2
- AED Trainer-to-Student Ratio (recommended): 1:3

Requirements for Passing:

- Course participation and skills practice
- Written testing with a minimum passing score of 80%
- Successful skills testing required in:
  - Adult CPR
  - Child CPR**
  - Infant CPR**
  - Adult/child choking
  - Infant choking**
  - Disposable glove removal
  - AED use*

*** Optional Skills required for Child and/or Infant CPR Certification*
**Optional skill required for AED certification*

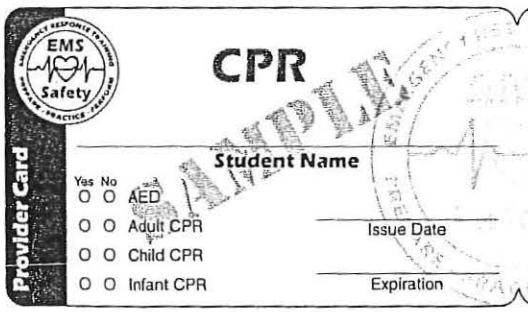
Please let us know if you require any other information about our program, or would like a sample of our training material. We are available to address any comments or questions by phone at (800) 215-9555 or via email at info@emssafety.com. Thank you for your consideration.

Sincerely,

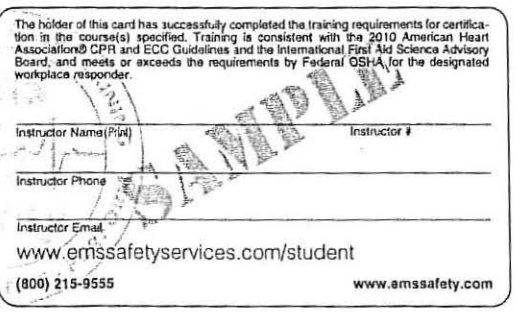
EMS Safety Services, Inc.
Teaching Skills for Life

Sample Image, Course Completion Card:

Front



Back



EMS Safety Services, Inc.
1046 Calle Recodo Suite K. San Clemente, CA 92673
www.emssafety.com • info@emssafety.com • (800) 215-9555 • Fax (949) 388-2776

September, 2010

RE: EMS Safety Medical Direction and Equivalency

To Whom It May Concern:

The purpose of this letter is to inform you of my role as the physician Medical Director for EMS Safety Services. As Medical Director, I have reviewed and approved EMS Safety's emergency response training curriculums including CPR, First Aid, Automated External Defibrillator (AED) and Bloodborne Pathogens.

EMS Safety's emergency response procedures are based on guidelines from the 2010 ILCOR International Consensus on CPR and ECC Science with Treatment Recommendations. The courses are instructor and video mediated using video, lecture and hands-on practice to improve long term retention of critical skills. Written and skills testing is required for certification.

The emergency response curriculums are consistent with the current standards of the American Heart Association for the use of an AED and the provision of CPR, rescue breathing and foreign body airway obstruction as they pertain to the lay provider, health care provider and professional rescuer.

The First Aid curriculum is consistent with the First Aid program offered by the American Red Cross and standards of the International First Aid Science Advisory Board.

The curriculums also conform to the standards set forth by OSHA, the Department of Transportation and the United States Coast Guard.

If you have any questions I can be reached at (800) 215-9555.

Sincerely,

Dr. Scot Jones, MD
Medical Director
EMS Safety Services, Inc.
Prepare. Practice. Perform.

Save-a-Life Educators

Pacific College of Oriental Medicine

April 10, 2015

To Whom It My Concern:

I am writing to endorse Vicki Igou, CEO of Save-A-Life Educators and her excellent staff and program that they offer in CPR and First Aid. I recently took her course myself to update my own certification and was pleasantly surprised by the high quality of instruction, engaging presenters and amount of practical applications offered. Her teaching experience as well as her professional experience as a Fire Captain and EMT-D in addition to her co-teacher's experience both made the training relevant, engaging and highly educational.

Over the past 21 years in practice as an acupuncturist, educator and administrator, I have had the opportunity to participate in many similar trainings on Health and Safety. I can say with integrity that Vicki and Save a Life Educators provide top-notch training that provide students with proficiency in dealing with emergent and urgent care issues.

Sincerely,

Gregory Lane, LAc.
Director of Clinical Services
Pacific College of Oriental Medicine

San Diego Campus: 7445 Mission Valley Rd., Ste. 105 • San Diego, CA 92108 • 800/729-0941 • 619/574-6909 • Fax 619/574-6641
New York Campus: 915 Broadway, 3rd Floor • New York, NY 10010 • 800/729-3468 • 212/982-3456 • Fax 212/982-6514
Chicago Campus: 65 E. Wacker Pl., 21st Floor • Chicago, IL 60601 • 888/729-4811 • 773/477-4822 • Fax 773/477-4109
www.PacificCollege.edu

SAVE-A-LIFE EDUCATORS, INC

13695 Alta Loma Lane, Jamul, CA 91935 619-669-9911

www.savealifeeducators.com

December 12, 2014

To: Acupuncture Board Members
Subject: CPR/AED/First-aid training approval

To whom it may concern:

It has come to my attention that The State Board of Acupuncture is only accepting AHA, ARC and Board approved CPR/AED/First-aid training programs only. I am asking to be put on the list of "Board Approved Providers" for the CPR/AED/First-aid training.

I have attached, current approvals letters from State agencies that have looked at my program to make sure it meets the National Standards, like AHA and the ARC. I also have attached my Lesson Plan's and Skills Assessments Sheets for your review. The following are attached:

- Cover letter
- San Diego County Emergency Medical Services Authority Approval (EMSA) for CPR/AED program
- State of California EMSA Approval for CPR/AED/First-aid
- US Department of Homeland Security Coast Guards Approval for CPR/AED/First-aid
- California State Community College Teaching Credential
- Completion card (front and back)
- AHA Course Matrix of their CPR/AED/FA program timeline (5-7 hours)(your approved standard)
- Lesson plans and skills assessment sheets
- Ilcor and EMSA guideline/standards

I have been in business for over 20 years and affiliated with American Heart. I am a retired Firefighter and have performed CPR/AED and first-aid daily on real people. I take great pride in providing a quality training program according to the "National Standards". I have been providing these trainings to Pacific College of Oriental Medicine for over 7 years. Today, I received a call from one of PCOM's students indicating my program was unacceptable. It's important for you to understand the results of your refusal to accept my CPR/AED/First-aid training program. It will have negative repercussions for my business. It sends a message to our clients and to prospective clients that my company is not acceptable and that we are not providing the proper training. This is far from the truth. If I am not accepted as an approved provider of this training with your organization I will lose business with the colleges and other organizations. This will create an extreme hardship. When our clients submit their completion card from our company to your organization for documentation of completing the CPR/AED/First-aid training and are told this card is not acceptable, our clients are very upset and angrily calling us requesting a refund. Not only do I lose them as a client, but they spread the word to others which results in a bad reputation for my company. I am hoping this letter will help you understand the magnitude of your decision. Your refusal to accept my trainings could have devastating consequences for my business. I keep my company small so I can monitor and regulate all aspects of it. I am a certified/verified WBE (Women Business Enterprise). I would hope that your organization is actively supportive of small businesses like mine. I am hoping you take the

time to see we are a good, reliable, respectful company and know that your current and prospective licensee's does get the proper training with my company.

Please let me know in writing on your decision on whether you will add us to your list of acceptable "Board Approved" vendors to provide the CPR/AED/First-aid trainings.

Please feel free to contact me for any further information, questions, or concerns.

Thanks, I appreciate your consideration.

Respectfully,

Vicki Igou
Owner

U.S. Department of Homeland Security
United States Coast Guard

Commanding Officer
United States Coast Guard
National Maritime Center

100 Forbes Drive
Martinsburg, WV 25404
Staff Symbol: NMC-2
Phone: (304) 433 3720
FAX: (304) 433-3408

16721

Ref: SAVEAL-196, 10, 134

DEC 13 2010

Ms. Vicki L. Igou
Save-A-Life Educators
1365 Alta Loma Lane
Jamul, CA 91935

Dear Ms. Igou:

We write in response to your letter of October 20, 2010, requesting renewal of the acceptance of Save-A-Life Educators courses to satisfy training requirements for merchant marine licenses.

We have determined that the following Save-A-Life Educators First Aid course meets or exceeds the standards of the American Red Cross *Standard First Aid and Emergency Care* or *Multimedia Standard First Aid* courses and will satisfy the first aid training requirements of 46 CFR 11.205(e)(1)(i) for a merchant mariner license:

1. Save-A-Life Educators First Aid (SAVEAL-196)

We have determined that the following Save-A-Life Educators CPR courses meet or exceed the standards of the American Red Cross or American Heart Association CPR courses and will satisfy the training requirements of 46 CFR 11.205(e)(2)(iv) for a merchant mariner license:

1. Save-A-Life Educators Adult/Pediatric CPR (SAVEAL-10)
2. Save-A-Life Educators CPR/AED (SAVEAL-134)

This determination is effective December 1, 2010, and expires on December 31, 2015. Subsequent five-year renewals may be granted upon written to this office at least 30 days before this approval expires.

Sincerely,

ROBERT L. SMITH III
Chief, Mariner Training and Assessment Division
U.S. Coast Guard
By direction

Copy: All RECs

RECEIVED
DEC 15 2010
MARINE SAFETY LA/LB, CA
REGIONAL EXAM CENTER

For the latest information on merchant mariner credentialing, visit our web site at http://www.uscg.mil/nmc.
The National Maritime Center is an ISO 9001:2008 Compliant Organization.

STATE OF CALIFORNIA
PETE WILSON, Governor

COMMISSION ON TEACHER CREDENTIALING
1812 Ninth Street
Sacramento, California 95814-7000
(916) 445-0233
FAX (916) 327-3166
CERTIFICATION, ASSIGNMENT AND WAIVERS DIVISION

February 28, 1995

Vicki L. Igou
Save-a-Life Educators
1711 Sea Pines Road
Rancho San Diego, CA 92019

Dear Ms. Igou:

We have reviewed the materials which you have provided on behalf of Save-a-Life Educators and have concluded that the program meets the requirements of Education Code Sections 44259(c)(1), 44260.3, and 44277(d). The Commission on Teacher Credentialing will accept evidence of the successful completion of this program submitted with applications for the Multiple Subject, Single Subject or Designated Subjects teaching credentials. Similarly, the Commission will accept the time used while participating in the Save-a-Life CPR course toward meeting the 150 hours of professional growth required for the renewal of a teaching credential.

Please feel free to contact me if you have any questions about the Commission's action.

Sincerely,

Ruth A. Collier

Ruth A. Collier, Supervising
Certification Officer

RAC/kj

County of San Diego

RODGER G. LUM, Ph.D.
AGENCY DIRECTOR

GAIL F. COOPER
PUBLIC HEALTH ADMINISTRATOR

NANCY L. BOWEN, M.D., M.P.H
PUBLIC HEALTH OFFICER (Acting)

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES
1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417
(619) 515-6583 . FAX (619) 515-6707

EMERGENCY MEDICAL SERVICES
6255 Mission Gorge Road
San Diego, CA 92120-3599
(619) 285-6429 Fax: (619) 285-6531

Children, Youth & Family Health Services
Disease Control/Epidemiology
Disease Prevention/Health Promotion
Emergency Medical Services
HIV/AIDS Services
Medical Quality Assurance
Public Health Laboratory
PH Nursing/Border Health
TB & STD Control
Vital Records

February 20, 2003

Vicki Igou
Save-A-Life Educators
13695 Alta Loma Lane,
San Diego, CA 91935

Dear ~~Ms. Igou~~: Vicki

Congratulations! After review of the Save-A-Life Educators CPR-AED program, you have been approved for use in San Diego County.

As per Title 22 of the California Code of Regulations, please submit a copy of the final exam.

Please feel free to contact me at any time for any questions or concerns, or any other issues dealing with San Diego County EMS. I can be reached by phone at (619) 285-6429 or via Email at steven.leapley@sdcounty.ca.gov .

Steven Leapley

STEVEN LEAPLEY
EMS Specialist

SL

Certificate of Training Program Approval

Save-A-Life Educators, Inc.
Training Program

Vicki Igou
Program Director

This certifies the program named above has met the requirements of the State of California EMS Authority to provide Child Care Provider First Aid and CPR Training as specified in the Health & Safety Code and the California Code of Regulations.

97-0731-DC
Program Number

March 31, 2013
Issue Date

March 31, 2015
Expiration Date

Howard Backer, MD, MPH, FACEP
Director

Certificate of Training Program Approval

Save-A-Life Educators, Inc.
Training Program

Vicki Igou
Program Director

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97-0731-DC
Program Number

Howard Backer, MD, MPH, FACEP
Director

March 31, 2015
Issue Date

March 31, 2017
Expiration Date

Sinkovich, Terry@DCA

From: vicki igou <savalif@sbcglobal.net>
Sent: Monday, December 15, 2014 12:22 PM
To: tery.sinkovick@dca.ca.gov
Subject: Information for Board approval for CPR/AED/First-aid training
Attachments: Letter to DCA for approval.doc; approval County of SD 001.jpg; approval State of CA EMSA 001.jpg; approval State of CA EMSA ccp 001.jpg; approval State of CAcommission of teacher credentialing 001.jpg; approval US Dept of Homeland Security 001.jpg; completion card FACPRAED 001.jpg; Teaching Credential State of CA 001.jpg; lesson plan CPR AED 2014.doc; lesson plan for first-aid 2014.doc; 2014 skills Assessment check list CPR & AED.doc; ilcor and emsa standards.docx

Hello Tery,

I really appreciate you taking the time to talk with me today about getting "Board Approval" . I have attached a lot of information for you and others for review.

Additionally, the Grossmont/Cuyamaca Community College District hires me to provide my training program for their Continuing Education Department. I have been providing my training program for them approximately 15 years. Additionally, my program has gone through the Community Colleges approval process in order for me to be able to teach my program for them. I can give you their contact person's name and number if requested.

Please feel free to contact me if you need any more information or have questions. Additionally, if you would like any references of companies that hire us to do trainings for them.

Vicki L. Igou
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Adult/Child CPR/AED Course Lesson Plan

Lesson 1: Introduction

- What is CPR?
- Mechanics of Artificial Life Support & circulatory system
- Heart Disease
- Steps Necessary to Increase a Person's Survival
- Scene Safety
- Establishing Unresponsiveness
- Activating 911/EMS
- C-A-B's of CPR

Lesson 2: Adult CPR (ages 9 years and up or puberty)

- Scene Safety
- Steps of CPR
- C-A-B's of Adult CPR

Lesson 3: Adult/Child Obstructed Airway (ages 1 year and up)

- Scene Safety
- Abdominal Thrusts
- Pregnant or Too Wide
- If you are alone
- Person Becomes Unconscious

Lesson 4: Child CPR (1 to 8 years)

- Scene Safety
- Steps of CPR
- C-A-B's of Child CPR

Lesson 7: Special Considerations

- Bloodborne Pathogens
- Good Samaritan Law
- Moving accident victims
- Positioning the victim
- Rib fractures
- Gastric Distention
- If Breaths Do Not Fill the Lungs
- Agonal Respirations
- Chest Compressions without Breaths

Lesson 8: Introduction to the AED

- What is an AED?
- Why use an AED?
- AED Statistics
- Laws Governing AED's

Lesson 9: Considerations before applying pads

- Pediatrics
- Implants
- Water
- Medication Patches
- Hairy Chest
- Sweaty Chest

Lesson 10: AED Safety

- Maintenance
- Deployment
- Check Pad Prompt
- Electrode Pad Placement
- Supplies in AED Carrying Case

Lesson 11: AED Operation

- Protocol on AED Use
- Power on AED
- Attach Pads
- Analyze Rhythm
- Press "Shock" Button

Lesson 12: Steps in Utilizing the AED

- C-A-B's of CPR

Practical - Skills Assessment
***Optional – written exam and Infant CPR**

TIMELINE – 3 – 4 hours

First-aid Course Lesson Plan

Powerpoint, Lecture, Practice

Lesson 1: Introduction

- What is first-aid
- Activating 911/EMS
- Good Samaritan Law
- Scene Safety

Lesson 2:

- Universal precautions
- Bleeding control
- Wound types – lacerations, abrasions, punctures, internal, amputations, impaled objects
- Shock
- Fainting

Lesson 3:

- Eye Injuries
- Nose bleeds
- Tooth Knocked out – chipped, hanging
- Bites – snakes, spiders, animals, ticks, ants

Lesson 4:

- Burns
- Carbon monoxide poisoning

Lesson 5:

- Allergic reactions
- Bee stings
- Asthma

Lesson 6:

- Heat Emergencies
- Cold Emergencies

Lesson 7:

- Strains and sprains
- Fractures
- Head injuries
- Broken back
- Moving a person with neck /back injuries

Lesson 8:

- Heart Attack
- Seizures
- Stroke
- Diabetes

Lesson 9:

- Poisoning
- Poison Ivy, oak, sumac
- Pregnancy Emergencies

Lesson 10:

- First-aid kit supplies
- Sudden Illness assessment
- Injury assessment

PRACTICAL SKILLS

TIME LINE – 3-4 hours -Optional Written test

SAVE-A-LIFE EDUCATORS

CPR/AED SKILLS ASSESSMENT CHECK SHEET

ADULT/PEDIATRIC (all ages)

		Check
Scene Safety	Verbalize	
Universal Precautions	Verbalize	
Establish Unresponsiveness	Gently shake & shout Instructor states, "Unresponsive"	
Call 911 & get AED (adult victims, if alone call 911)	Eye contact, Call 911 & get AED	
Observe for Breathing	Look for no breathing or agonal respirations 5 -10 seconds Instructor states, "not breathing"	
Start CPR Hand Position	Firm/Flat hard surface. Bare the chest. Place the heel one hand over the sternum, center of the chest, lower half of sternum, place the other hand on top. **Child** - Heel one <u>or</u> two hands **Infant** -. 2 fingers just below the nipple line, compress the sternum 1/3 the depth of chest, about 1 ½ inches	
Chest Compressions	Compress the sternum at least 2 inches. Child - about 2 inches, Infant - about 1 ½ inches. **Child/Infant-** compress the sternum 1/3 the depth of chest. 30 compressions at a rate of at least 100 per min	
Open Airway	Head tilt chin lift –jaw line perpendicular to ground Moderately for Infant	
Give 2 Breaths	With open airway, give two full breaths. Pinch the nose. Use barrier. The breaths should be no more than 1 sec ea. Watch the chest rise. Infant – your mouth over their nose & mouth	
Chest Compressions	Compress the sternum. 30 compressions at a rate of at least 100 per min	
Give 2 Breaths	Open airway & give two full breaths	
AED ARRIVES ON SCENE		
Turn on AED	Open lid or power-on	

Attach pads to victim	Proper pads (adult or pediatric) Upper right/ lower left	
Clear to analysis	"All clear", must visually and verbal Check to make sure no one is touching victim	
Shock advised	Verbally/Visually say "all clear", press shock button	
Start CPR	Start with chest compressions. 30 compressions, 2 breaths. AED will re-analysis in 2 minutes.	
Continue until 911 arrives, or until victim shows signs of life.	Continue 30 compressions, 2 breaths until 911 gets on scene, or until victim shows signs of life.	

NAME: _____

DATE: _____

Different Scenarios/depending on industry
Scenarios include special considerations.
Hairy chest
Wet Chest
Medication patch
Implant
Metal Surfaces

Accident victims
Drowning
Sudden Collapse
Difficulty Breathing
Choking

Proposed regulatory changes to 1399.434(f) (3) and 1399.436(a) (14)

STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.

ACUPUNCTURE BOARD
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(916) 515-5200 FAX (916) 928-2204 www.acupuncture.ca.gov

DATE	May 29, 2015
TO	Education Committee
FROM	Terri Thorfinnson Executive Officer
SUBJECT	Proposed Regulatory Changes to California Code Regulations (CCR) Section 1399.434 (f) (3) and 1399.436 (a) (14) Regarding Certification Level, Renewal and Hours

Problem: The Board's current regulatory standard specifies eight hours of coursework, but it does not specify what certification level, nor that the certification be current or renewed. Since Acupuncturists are health care providers, the required certification level should be the level required for "health care providers" and not non-health care providers. The regulation is silent as to whether it requires current certification or renewals. The intention of having such training is to be able to protect the public which would imply that the requirement should require "current" certification and that it be renewed to remain currently certified while practicing.

Finally, the regulations specify that the course be a minimum of eight hours and be taught by the American Red Cross (ARC) of the American Heart Association (AHA). However, both of these organizations recently redesigned their courses to be taught in less than eight hours, so students are having difficulty finding a certification course that meets the Board's requirement.

Background: CCR 1399.434 (f) (3), which is the curriculum standard for training taken after 2005, requires eight hours and specifies either the ARC or AHA or an organization approved by the Board. CCR 1399.436 (a) (14), which is the curriculum standard for training taken prior to 2005, requires eight hours and specifies either the ARC or AHA or an organization approved by the Board. This year, the Board has been made aware by students, ARC and AHA that they have reduced their coursework to below eight hours for the non-health care provider course. This has created a problem for exam applicants who have difficulty finding Cardio-Pulmonary Resuscitation (CPR) and first aid courses that are eight hours.

A separate issue that emerged when verifying CPR and first aid training is that there is no requirement that certification is current or renewed. Although many applicants are currently certified, some applicants are not and cannot be denied for not being currently certified.

Discussion: The eight hours were included to ensure minimum competency course work. However, perhaps the more important standard is that the required coursework should be for health care providers regardless of the hours. The higher standard for health care providers would replace the eight hour requirement. From a quality of training and public safety perspective, the certification level

matters more than the number of hours. Health care providers should be required to take the health care providers' certification for CPR and first aid rather than the lower lay person's standard that requires less medical knowledge. With the higher standard, the hourly requirement would not be needed.

The purpose of requiring CPR and first aid training is in case of medical emergencies an acupuncturist could save the life of the patient. This training would further increase their medical competency and protect public safety. For such training to save lives, it must be renewed and be required to be current. Other professions require health professionals to remain current with their health provider CPR and first aid. It makes sense that the Acupuncture Board's CPR and first aid requirement should mirror other health care providers in maintaining current certification.

Making all three changes would solve the initial problem of the change in hours and also strengthen the licensure requirements and curriculum training requirements to better protect public safety.

There are several options for where the changes could be made. Eliminating the hourly requirement and specifying that it be health care provider certification could be added in the above mentioned curriculum sections. The requirement for renewing the certification could be placed in the licensure renewal session and as a condition of licensure section of the Business and Professions Code section 4938 Licensure Requirements.

Recommendation: The Committee recommend to the Board that it adopt the following regulatory changes:

- That CPR and first aid requirement should require the Health care provide certification level and not allow the lay person certification.
- Eliminate the eight hour requirement in favor of the health care provider certification from Board approved organizations.
- Require that applicants and licensees maintain current CPR and first aid health care provider certification, and that they must renew it each time it expires as long as they are licensed or applying for licensure. This should also apply for those seeking to be re-issued new licenses as well pursuant to Business and Professions Code section 4967 (b).