

2024-2028 Strategic Plan

Adopted: March 22nd, 2024

Prepared by: SOLID Planning Solutions Department of Consumer Affairs

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Board Members

John C. Harabedian, Governor Appointee, Board President, Public Member Yong Ping Chen, Ph.D., Governor Appointee, Board Vice President, Licensee Member Hyun "Francisco" Kim, L.Ac., Governor Appointee, Licensee Member Shu Dong Li, Ph.D., Assembly Appointee, Public Member Dr. Amy Matecki, MD, L.Ac., Governor Appointee, Licensee Member Ruben A. Osorio, Senate Appointee, Public Member

Gavin Newsom, Governor

Tomiquia Moss, Secretary, Business, Consumer Services and Housing Agency Kimberly Kirchmeyer, Director, Department of Consumer Affairs Benjamin Bodea, Executive Officer, California Acupuncture Board

California Acupuncture Board

About the Board

The Board of Medical Examiners (now called the Medical Board of California) began regulating acupuncture in 1972 under provisions that authorized the practice of acupuncture under the supervision of a licensed physician as part of acupuncture research in medical schools.

In 1975, Senate Bill 86 (Chapter 267, Statutes of 1975) created the Acupuncture Advisory Committee under the Board of Medical Examiners and allowed the practice of acupuncture but only upon a prior diagnosis or referral by a licensed physician, chiropractor, or dentist. In 1976, California became the eighth state to license acupuncturists. Subsequent legislation in 1978 established acupuncture as a "primary health care profession" by eliminating the requirement for prior diagnosis or referral by a licensed physician, chiropractor, or dentist.

In 1980, the law was amended to abolish the Acupuncture Advisory Committee and replace it with the Acupuncture Examining Committee within the Division of Allied Health Professions with limited autonomous authority; to expand the acupuncturists' scope of practice to include electroacupuncture, cupping, and moxibustion; to clarify that Asian massage, exercise and herbs for nutrition were within the acupuncturist's scope of practice; and to provide that fees be deposited in the Acupuncture Examining Committee Fund instead of the Medical Board's fund. Most of these statutory changes became effective on January 1, 1982.

In 1982, the Legislature designated the Acupuncture Examining Committee as an autonomous body. Effective January 1, 1990, through AB 2367 (Chapter, 1249, Statutes of 1989) the name was changed to Acupuncture Committee to better identify it as a state licensing entity for acupuncturists. The legislation further provided that, until January 1, 1995, the California Acupuncture Licensing Examination (CALE) would be developed and administrated by an independent consultant, which was later extended to June 2000.

On January 1, 1999, the committee's name was changed to Acupuncture Board (SB 1980, Chapter 991, Statutes of 1998) and the Committee was removed from within the jurisdiction of the Medical Board of California (SB 1981, Chapter 736, Statutes of 1998) becoming an autonomous body under the California Department of Consumer Affairs (DCA).

Mission, Vision, and Values

Mission

To protect the people of California by upholding acupuncture and herbal medicine practice standards through the oversight and enforcement of the Acupuncture Licensure Act.

Vision

A model regulatory framework for the exemplary practice of acupuncture and herbal medicine for the health and safety of the people of California.

Values

- Collaboration
- Consumer Protection
- Excellence
- Integrity
- Professionalism

Goal 1: Licensing and Education

Establishes and maintains requirements to protect consumers through education, examination, licensing, professional competencies, and reasonable access to the profession.

- 1.1 Create a continuing education (CE) policy to accept additional entities' healing arts courses to offer licensees access to more integrative medical education and promote consumer protection.
- 1.2 Collaborate with acupuncture schools and the accreditor to designate fewer degree titles to improve clarity among consumers and allied health professionals.
- 1.3 Pursue statutory authority to establish an educational and training program application and renewal fee to maintain adequate funding.
- 1.4 Develop and implement a continuing education audit component to the Board's online Connect system to facilitate compliance with the ongoing continuing education requirements.

Goal 2: Enforcement

Protects the health and safety of consumers through the enforcement of the laws and regulations governing the practice of acupuncture and herbal medicine.

- 2.1 Develop and implement the enforcement component of Connect to promote efficiency in enforcement operations.
- 2.2 Complete digitization of hard copy enforcement documents to enhance efficiency in operations.
- 2.3 Create a tracking system to identify and monitor complaints related to the new Acupuncture Assistant role and report that information to the Board.

Goal 3: Legislation and Regulation

Advocates for statutes and adopts regulations, policies, and procedures that strengthen and support its mandate, mission, and vision.

- 3.1 Update the continuing education regulations to align with current statute.
- 3.2 Seek legislative clarity and authority over Asian massage and manual therapy to alleviate consumer confusion.
- 3.3 Explore the Board's capability of addressing the prescription of medicalgrade herbs to provide clarity and accountability to consumers and physicians.
- 3.4 Explore the feasibility of requiring that foreign-trained and tutorial applicants that take the licensing exam in a language other than English meet a minimum English proficiency to promote effective communication between practitioners and patients.
- 3.5 Simplify the definitions around cupping and related practices to ensure clarity for consumers and licensees.
- 3.6 Seek statutory authority to allow domestically trained applicants to complete missing education requirements at Board approved educational and training programs.

Goal 4: Outreach and Communication

Educates consumers, licensees, and other stakeholders about the practice and regulation of acupuncture and herbal medicine.

- 4.1 Provide stakeholder meetings to offer licensees and the public opportunities to inquire about Board activities and to gather input about issues of interest arising in the industry.
- 4.2 Collaborate with DCA's Office of Public Affairs to create and utilize social media accounts to engage diverse stakeholders.
- 4.3 Collaborate with other U.S. state regulatory boards to build relationships and engage in discussion about a national standard and license portability.

Goal 5: Administration and Customer Service

Continues to build and maintain an excellent organization through the development of staff, responsible management, strong leadership, and effective Board governance.

- 5.1 Conduct an internal fee study to monitor financial resources and re-assess fees such that, if needed, the Board can show cause for changes in the 2028 Sunset Report.
- 5.2 Partner with DCA to update the Board website to improve access and responsiveness.
- 5.3 Expand and diversify the pool of subject matter experts available to the Board.
- 5.4 Update staff process manuals to reflect the new Connect system.
- 5.5 Explore ways to implement a Customer Relations Management service that allows the Board to create tickets to track and close issues.

Strategic Planning Process

To understand the environment in which the Board operates as well as identify factors that could impact the Board's success in carrying out its regulatory duties, the Department of Consumer Affairs' SOLID Planning Unit (SOLID) conducted an environmental scan of the Board's internal and external environments by collecting information through the following methods:

- Interview was conducted with the executive officer in April of 2023.
- Interviews were conducted with board members in April and May of 2023.
- Online surveys were distributed to staff and external stakeholders in August and September of 2023.
 - During an introduction at the March 2023 board meeting, board members expressed enthusiasm at potential participation in a translation pilot program through SOLID Planning, where strategic planning surveys would be offered in a variety of languages. Due to the Board offering the licensing examination in Korean, Chinese, and English, those languages were included in the pilot program. Spanish was also included, as it is the most commonly spoken language in California after English.

Language of Response	Number of Responses
English	396
Chinese (simplified)	345
Korean	175
Spanish	4

The responses were submitted as follows.

The most significant themes and trends identified from the environmental scan were discussed by Board Members, the Executive Officer, managers, and staff during a strategic planning session facilitated by SOLID on October 27, 2023. This information guided the Board in the development of its strategic objectives outlined in this 2024-2028 strategic plan.

California Acupuncture Board

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Strategic plan adopted on March 22nd, 2024.

This strategic plan is based on stakeholder information and discussions facilitated by SOLID for the California Acupuncture Board on October 27th, 2023. Subsequent amendments may have been made after the adoption of this plan.



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