

AAOM President's Roundtable Summary Report

AAOM Annual Meeting, Las Vegas, NV October 24, 2004

The Process

The AAOM conducted the 'President's Roundtable' using a unique electronic voting process at the 2004 annual meeting. The free session was offered with NCCAOM CEU's to encourage conference participants to come and contribute ideas and feedback to AAOM's strategic planning process. AAOM leadership elected to pursue this format as a creative way to improve opportunities for democratic participation by members and non-members. Typically the President's Roundtable involves only Presidents of the state organizations. Since the technology provides an ability to sort the opinions of various groups, the AAOM leadership decided to open the process to other parts of the AOM community.

The meeting was co-facilitated by Chuck Anders, president of Strategic Initiatives, and Adam Burke, PhD, LAc, Professor of Health Education/Holistic Health at San Francisco State University. Each participant had an electronic handheld voting device, provided by Strategic Initiatives. As questions were posted on the screen, participants entered a vote on their keypads. These anonymous votes, expressing agreement or disagreement, were then projected back onto the screen. The results of the voting could immediately be broken down by demographics, such as years in practice, region of country, and training. The real-time data analysis and group comparison allowed for dynamic conversations to occur in areas such as herbal access and legislative support for states from the AAOM.

Summary Findings

Participants were asked questions in a number of areas critical to the profession. Results are presented below.

Participant Information

The 60 participants represented a very diverse cross-section of the profession: gender 40/60% female/male; average age of 44; ethnicity-Asian 17% (Korean 2%, 15% Chinese), Black 2%, Hispanic 2%, White 73%, Other 6%. Participants represented the entire US, although a larger percentage were from southwestern states. There were both new and seasoned practitioners in the audience: 0-2 years practice (18%), 2-5 years (10%), 5-10 years (25%), 10-15 years (16%), and 15+ years (31%). Professional training included: LAc 37%, MAc 31%, OMD 16%, MD 5%, RN 3%, PharmD 1%, Other 11%. Approximately 26% possessed some type of doctoral degree, not necessarily AOM related, however. 43% of the participants belonged to various state associations, 37% were AAOM members, and 20% had other AOM professional affiliations. Participation in those professional groups included: 26% board members, 21% presidents, 21% AOM administration and staff, 18% AOM faculty, 9% students, and 4% vendors.

Key Questions

After gathering participant demographic data questions, topics perceived to be critical to the profession were presented. The session facilitators collected questions from AAOM leadership who did outreach to state association members and general AAOM membership via email. The final list of key topics included: professional unification, herb access, reimbursement issues, education, employment opportunities, and professional practice. The primary findings and the final session evaluation information follows.

1. Professional Unification

Participants unanimously agreed that the profession needed a national lobbying presence in Washington (100%). They felt that a national unification process, which allowed all associ-

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ations to communicate effectively and share resources, was very important for the profession (87%). The majority of participants were interested in the professional activities of other states (80%), and they agreed that AAOM assistance in raising state association memberships (83%), and helping to work on state legislative issues (75%), would be helpful. It was a common sentiment that participation in state association activities was generally inadequate (89%), due primarily to "Not understanding the risks" of non-involvement (33%) and "Lacking understanding of how state associations protect the profession" (37%).

2. Access to Herbs

The majority of participants (87%) believed that the AAOM should actively assist individual state associations in adding herbs to their scope of practice. In addition, 68% agreed that the AAOM should work with Federal agencies to protect access to herbs, primarily through negotiation with the FDA.

3. Reimbursement Issues

The majority of participants (82%) believed that the AAOM should use legal, or other means, against insurers who refuse to pay for acupuncture, and that the AAOM should support the bifurcation of the Henchey Bill (73%). (This is a Medicare bill that combines the Federal Employee Benefits packages with Medicare. The audience received explanation on the strategy prior to voting.

4. Education

The majority of participants agreed with the ACAOM Doctoral Task Force recommendation, that the profession would most likely eventually adopt a professional doctoral degree (82%), and, 73% believed that a doctoral title should be the standard title for the profession. In addition, 73% agreed that the AAOM should assist states with legislative efforts to standardize educational requirements in acupuncture and OM as these standards apply to other healthcare professionals who can legally practice acupuncture, such as MDs and chiropractors.

5. Employment Opportunities

The majority of participants believed that the AAOM should establish a process to assist new practitioners with clinical and business practices questions, and also provide online services related to the sale of practices, jobs available, and jobs wanted (78% and 76% respectively).

6. Professional Practice

In this section participants were asked to rank key priorities at the state and national levels. First they ranked key state issues from a list of five common concerns. Second the participants ranked items in a list of AAOM organizational priorities. Finally, they ranked AAOM's performance on these same organizational priorities.

State Issues

AAOM leadership proposed a list of 5 key issues viewed as important state AOM association issues. These items were presented in a list and the participants were asked to rank them in terms of relative importance. The participants' rankings are given here. The percentage following each item gives the percentage of participants who ranked that item as first, third, and so on.

Herb access	72%
Scope of practice	62%
Insurance reimbursement	52%
Doctoral title by license	35%
Licensure reciprocity	26%

Relative Importance of AAOM Organizational Priorities

The participants were then given a list of 15 items that represent possible AAOM organizational priorities. The list was presented and participants were asked to rank one item versus the other. The final prioritized list as selected by participants is given here. The percentages shown reflect the number of participants who ranked that item higher than the others. A visual examination of the data suggested three potential organizing principles (added after analysis): Strength and Visibility, Business Opportunity, and Professional Development.

I. Strength and Visibility

Legislative Representation, at the national level	57.6%
Marketing and PR, promoting state/national public awareness	55.9%
Herbal Practice, promoting, protecting, redefining	55.2%
National Unification, uniting the profession	47.5%
Legislative Representation, at the state level	41.4%

II. Business Opportunity

Protect/Develop Professional Practice, e.g. medical acupuncture, licensure requirements	39.7%
Reimbursement Issues, such as insurance and Workman's Comp	33.9%
Pre-professional Education, such as advocating for doctoral status	33.3%
Research, sponsoring or promoting AOM research initiatives	32.2%
Professional Status, promoting AOM and its professional status within healthcare community	30.5%
Business Development Resources, providing support for successful business practice	28.8%
Employment Opportunities, working to create jobs in healthcare	23.7%

III. Professional Development

Professionalism, promoting the sophistication/maturation of the profession	18.6%
Professional Education, providing CEUs and professional development	17.5%
Improved Communication, between acupuncturists and professional organizations	13.8%

Performance by AAOM on Achieving Organizational Priorities

Finally, the same 15 items were presented to participants who were then asked to rank these items in terms of perceived performance by the AAOM in each of these areas, from most to least effective.

Most Effective

- Professional Education, providing CEUs and professional development
- Herbal Practice, promoting, protecting, redefining

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Pre-professional Education, such as advocating for doctoral status

Professionalism, promoting the sophistication/maturation of the profession

Protect/Develop Professional Practice, e.g. medical acupuncture, licensure requirements

Legislative Representation, at the national level

Professional Status, promoting AOM and its professional status within healthcare community

Improved Communication, between acupuncturists and professional organizations

National Unification, uniting the profession

Research, sponsoring or promoting AOM research initiatives

Legislative Representation, at the state level

Business Development Resources, providing support for successful business practice

Reimbursement Issues, such as insurance and Workman's Comp

Marketing and PR, promoting state/national public awareness

Employment Opportunities, working to create jobs in healthcare

Least Effective

Meeting Evaluation

Finally, a set of questions was posed at the conclusion to evaluate the session, the process, the conference and the AAOM's overall performance. The majority of participants (90%) said that they would like to see more of these types of decision making processes in the future; 74% found the session useful or very useful in exploring issues important 'to your professional future;' 87% found the interactive technology to be useful or very useful; 86% reported that the conference overall was useful or very useful; and the majority of participants (88%) believed that the AAOM was working in the best interest of the profession, with 12% disagreeing.

Conclusion

The interactive session was viewed as an important process in the development of a stronger, more unified profession. The information gathered provides useful preliminary material for strategic planning purposes, and the beginnings of a national vision that reflects the ideas of diverse participants, rather than one or two agendas. It is clear that the group sample was small, and therefore the data does not necessarily reflect AAOM membership or the AOM community at large. The data does, however, reflect a good mix of practitioners, teachers, administrators and students, old and new practitioners, men and

women, and diverse ethnicities from around the country. Although this is a beginning, it is a crucial activity, bringing the profession together to protect what we have and to build an even stronger foundation for the future.

A great deal of attention has been paid in recent years to issues of education, such as the doctoral status question, which is exemplified by California's Little Hoover Commission activities. However, many voiced an opinion that there are more pressing issues facing this profession, specifically, protecting and promoting traditional acupuncture and oriental medicine, as practiced by licensed professional AOM providers. The voice of the participants heard in this process reflects the belief and recognition that there is strength in numbers; that national unification and political vitality are essential; and that we must increase the visibility of our profession and the recognition of its efficacy and essential uniqueness.

AAOM considers this historic event to have served its purpose well. There was a pervasive sentiment from those participating that greater involvement from the diverse interests comprising our profession is essential. Although a humble beginning, this is an important beginning, reflecting what will become a much greater effort to build a cohesive, empowered voice for this profession.

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Featured Event at
AAOM Expo 2005

"Acupuncture and Oriental Medicine into the 21st Century - Envisioning a Unified Future for All"

As a Friday evening (October 21) kick-off event, to be followed by a full weekend of activities, the AAOM will hold "Acupuncture and Oriental Medicine into the 21st Century - Envisioning a Unified Future for All." This forum will build upon the foundation of information established in the President's Roundtable in October 2004. Once again, this event will use hand held devices that allow real time input to be anonymously projected on a screen to facilitate interaction, communication and discussion among the diverse range of practitioners and partners to the profession. Participants are given the opportunity to give their input on a diverse range of topics and issues. To invoke group discussion, the displayed results include the widely varying demographic perspectives of those involved. Comparable to the above, a follow-up report is then published to summarize the collaborative outcomes, as well as serving as a strategic planning tool for formulating policy decisions, and as a foundational tool for carry-on activities. Trained facilitators and futurists will facilitate this workshop.