



ACUPUNCTURE & ACUPRESSURE

Synergy Doesn't Happen in Silos: Acupuncture in Hospitals and Other Healthcare Settings

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As acupuncture and traditional East Asian medicine continue to intersect and integrate with biomedical approaches, the conversation about integration expands and becomes richer. One forum for these conversations is the Academic Consortium of Complementary and Alternative Health Care (ACCAHC).

ACCAHC, founded in 2004, envisions and is involved in co-creating a system of health care that is multidisciplinary and dedicated to health and healing. Based on mutual respect among all providers, ACCAHC works toward creating an environment of collaboration that is based on patient-centered care.

ACCAHC's mission is to enhance the health of individuals and communities. Valuing diversity of practice, institutional members include the Council of Colleges of Acupuncture and Oriental Medicine (CCAOM), the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM), and the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM), as well as 14 other educational, accrediting, and testing bodies associated with Ayurvedic medicine, chiropractic, homeopathy, massage, midwifery, naturopathic medicine, and yoga. Working groups within ACCAHC include members focused on clinical care, education, research and policy.

ACCAHC's strong commitment to professional education has been reflected in many of its projects, including a recent webinar on the role of integrative health in influencing patient outcome and experience called the Power of Choice in Patient Experience Improvement: The Critical Role for Integrative Health.



John Weeks, Executive Director of ACCAHC and publishing editor of the Integrator Blog, is a strong proponent of patient-centered care. He notes that much of what is called health care in this country is actually "a medical industry which unfortunately thrives on disease." Because of his concern about health professionals working in silos, without communication or collaboration, Weeks is gratified to witness the increasing level of integration that acupuncture has achieved in the hospital environment, particularly in the Veterans Administration system with which he shared various ACCAHC resources on acupuncture and other disciplines when he was invited to advise in 2014.

Weeks' spoke about "active diplomacy" on the part of acupuncturists and other integrative health care providers as we play more visible roles in hospitals and other community health settings. He stated that because acupuncturists are "part of a team approach to care, acupuncturists bring a unique perspective to patient care, one that, to be most effective, must be both grounded in modern day biomedical research and evaluation as well as in the 'evidence of the old masters.'"

In 2007, Weeks and colleagues produced a document entitled "Survey of MDs/Administrators of Integrative Clinics to Gather Information on Competencies of Licensed Acupuncturists for Practice in Hospitals, Integrated Centers and Other Conventional Healthcare Settings." This document was produced by the National Education Dialogue to Advance Integrated Health Care and ACCAHC for the Integrated Healthcare Policy Consortium and sponsored by NCCAOM. Surveys were completed by ten respondents (nine MDs and one RN). The core themes related to determining appropriate competencies for acupuncturists identified by the survey were:

- AOM practitioner has a passion for integration, not merely advocating their professional discipline.

- AOM practitioner can work within the context of a system that has its own ways of functioning and time frames.
- AOM practitioner is loyal to healthcare setting's process, and may need to dispense with use of practices not acceptable to the institution (e.g. use of moxa).

Additional themes of interest included routine meetings of the healthcare team; mentorship of acupuncturists; learning the appropriate medical language and documentation process; training in hospital procedures, such as safety, cleanliness, and medical records. The survey concluded that having written or web-based teaching materials or review courses for acupuncturists entering the integrated practice environment would be desirable for best practices.

The document can be accessed via the search engine of your choice at: Competencies of licensed acupuncturists for practice in MD-dominated settings. Acupuncturists interested in preparing themselves may also find useful ACCAHC's subsequent document, endorsed by CCAOM, called Competencies for Optimal Practice in Integrated Environments.

Maria Broderick EdD, LicAc, is the Program Director for the Program in Integrative Medicine and Healthcare Disparities at Boston Medical Center (BMC). BMC has a strong program in integrative medicine which was started ten years ago and is housed in the Family Medicine Department of the hospital.

In her role at BMC, Broderick sees a critical role for acupuncturists in helping MD's understand our scope of practice within the context of team-based care. Similar to ACCAHC, the Integrative Medicine Program focuses on clinical care, research and education. Informing physicians, nurses, and medical students about acupuncture, as well as the other modalities offered (massage, yoga). In this capacity, Broderick and her colleagues "rely on our connection with the New England School of Acupuncture for its expertise" developed over the past 40 years in building bridges with other healthcare professionals. She yearns for more networking opportunities with other acupuncturists who work in hospital environments.

There is a critical role and need for cross-professional education for students in any healthcare profession. Adam Burke PhD, MPH, LicAc, is Director of the Institute for Holistic Health Studies and a professor of Health Education at San Francisco State University (SFSU). SFSU's Holistic Health Studies program offers a wide array of self-care oriented classes to students. Courses offered in holistic health Studies have become increasingly popular on campus.

Burke sees "an important role for Traditional Medicine perspectives in higher education at the undergraduate level." For example, given the high use of complementary medicines in the general population, "inclusion of relevant information about acupuncture is important as part of undergraduate nursing education." Burke and colleague Uma Bhatnagar DAOM teach a course on Eastern healing perspectives. "This highly popular course includes students enrolled in pre-health majors as well as many seeking knowledge for their own well-being", Burke explained. He described another relevant course being taught by Anthony Swanner RN, MSTCM, who provides a full semester course on Traditional East Asian Medicine to undergraduate nursing students.

Cross-cultural and cross-professional communication is clearly becoming more vital to our practice. In order to create effective energetic synergies among health professionals working together in hospitals or other multi-practice environments, the need for meaningful communication is pivotal. Communication means an ongoing exchange of information and inter-personal cooperation. A

commitment to this type of collaboration can create a win-win situation for patients, the public, our healthcare colleagues and our profession of traditional East Asian medicine.

If you are an acupuncturist interested in working in a hospital setting, additional helpful information can be found in our previous columns: "[Successful Strategies in Integrating Acupuncture and Shiatsu in a Hospital Oncology Program](#)" (April 2014); "[Hospital Integration: The Art of Contracting](#)" (May, 2007); "[Hospital Partnership: Q & A](#)" (Sept, 2005); "[Working in a Hospital Setting, Part Two](#)" (May, 2005).

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