

How Community Clinics Can Transform Acupuncture

by Pamela O'Malley Chang, LAc

Community acupuncture clinics are proving to be viable for-profit businesses. By making acupuncture affordable, these clinics can bring Chinese medicine into the mainstream of US healthcare.

More than twenty community acupuncture clinics have sprung up in Northern California alone in the past two years. Working Class Acupuncture in Portland, Oregon developed the community acupuncture model and, in 2006, created the Community Acupuncture Network (CAN). CAN's workshops, writing, and on-line support have helped hundreds of new and veteran acupuncturists across the US adopt the CA business model.

This article will discuss: 1) a brief overview of the community acupuncture business model, 2) how community acupuncture treatment differs from what we learned in TCM school, 3) why acupuncturists choose community acupuncture, 4) why clients choose community acupuncture, and 5) how the spread of community acupuncture clinics will affect the acupuncture profession. My perspective is that of a recent TCM graduate and co-founding partner of a community acupuncture clinic. Tatyana Ryevzina LAc and I opened Sarana Community Acupuncture in Albany, California in March, 2008.

The Community Acupuncture Business Model

Community acupuncture is a way to profitably offer low-cost acupuncture by treating several clients per hour in a group setting. Most community acupuncture clinics have a number of reclining chairs in a common treatment space. The shared area enables the practitioner to streamline treatment and monitor several clients simultaneously. Except for the initial visit, which may include a longer intake interview, clients are scheduled at 10-20 minute intervals. After checking in and paying for treatment, a client settles herself in a recliner, has a short, whispered conversation with her practitioner, and then receives acupuncture – usually at arm, leg, and head points. In addition to speeding the treatment process, the group setting allows flexibility for

“If our profession is to continue to grow, we need to reach people who cannot always afford who cannot always afford higher priced private treatments.”

length of treatment. Clients who wish to have needles removed after 15 minutes can be accommodated as easily as those who want to sleep for over an hour.

Fees for community acupuncture clinics are typically on a sliding scale basis with possible additional charges for initial paperwork, extra consultations, or herbs. The sliding scale fee is left to the client's discretion. Community acupuncture clinics typically do not process insurance reimbursements or seek grant funding, freeing the acupuncturist to focus on treatment rather than paperwork. The low fees enable more people to try acupuncture or to experience the benefits of frequent or long-term acupuncture care. The practitioner, thus, can more readily build up a high-volume business.

How Community Acupuncture Differs From What We Learned in TCM School

TCM schooling teaches differential diagnosis in accordance with the patterns of Traditional Chinese Medicine. To arrive at a diagnosis, we are taught to ask the “10 Questions” and make detailed notes of our client's chief complaint, other ailments, appearance, sleep, digestion, preference for hot or cold fluids, etc., before looking at the tongue and feeling the pulses. During my internship, intake interviews, even for returning clients, often took twenty minutes or more and frequently digressed into lifestyle recommendations or a client's psychosocial status before we made our diagnosis and selected appropriate acupoints and/or herbs. Treatment itself might take the intern another twenty minutes or more, particularly if it involved front and back needles, cupping, moxa, tuina, or electrostimulation. In total, a client could expect to spend over an hour in a private room and receive about half an hour of the acupuncturist's full attention. Implicitly, what I learned from my internship was that, unlike Western doctors, we offered an attentive review of a client's whole being at each visit, not just an impersonal diagnosis and prescription.

Community acupuncture, by contrast, occurs in a setting and timeframe where lengthy conversation is impossible. If clients are to return, they need to be convinced that 10-15 minutes of their practitioner's attention is sufficient and that the acupuncture in itself is effective. For the acupuncturist, quick diagnosis and selection of treatment methods that require minimal manipulation and little privacy are essential.

For myself, I've found that community acupuncture requires skills beyond what I was taught in school. I am learning to speed my intakes and rapidly focus my client's conversation on chief complaint and changes since the last treatment. Tongue observation and pulse taking become much more important for showing a client's over-all health than answers to the “10 Questions.” I am finding non-verbal ways - extra eye contact and quick response to a client's discomfort, for example – to make my clients feel well-cared-for within the group setting. And I find myself looking far beyond typical TCM for fast ways of selecting effective acupoints. Consequently, scalp and ear acupuncture are more useful to me now than when I was a student. I sometimes use *jingei* pulse diagnosis, a CAN-recommended method of comparing the widths of the carotid and radial pulses to determine which meridian is most in need of treatment. What has been most useful for me so far has been Master Tung-style acupuncture as taught by Susan Johnson, Richard Tan and others. As a novice, I can use Tung or Tan point prescriptions recipe-like, or I can easily apply this meridian-based methodology to select effective points. In either case, clients often feel a reduction of pain immediately after needle insertion.

What I have learned from community acupuncture is that five or ten minutes of conversation per visit is enough time to gain rapport and build a comfortable relationship with a client. What my clients and I are learning is that acupuncture can be remarkably effective in itself without private treatment rooms or extensive demands on the practitioner's time.

Why Acupuncturists Choose Community Acupuncture

"In my [standard] practice, I felt like I had to be someone I'm not, and the only people who could afford me were people I didn't know," said Nora Madden LAc of Grassroots Acupuncture Project in Santa Cruz, California. "I felt uncomfortable charging enough to make it worthwhile, much less marketing myself at those rates.

In an informal survey I made of community acupuncturists in Northern California in May 2008, the ability to offer affordable acupuncture was the primary attraction of the community acupuncture business model. Like Madden, we may want to charge fees that our friends could afford. Or we may see low fees as the key to making acupuncture part of an everyday approach to healthcare.

"I got into community acupuncture because at my very core, I have a life's mission to bring TCM into the mainstream, to bring this medicine to people who might otherwise never try it," said Kristine Buckley LAc of Body in Balance Community Acupuncture Center in Pleasanton, California. "Most of the people who come through my door have never had acupuncture."

"The healthcare system in the United States is seriously flawed," said Barbara Chapman LAc of Sebastopol Community Acupuncture in California. "More than 50 million Americans are uninsured or underinsured. This has to change. Community acupuncture is an attempt to address this need through a sustainable business model that offers affordable healthcare to most people in the community while enabling the acupuncturist to make a living."

Beyond altruism, community acupuncture benefits the practitioner. "Affordability makes community acupuncture a viable business model. My previous practice did not have enough patients to pay for the rent and other expenses," writes Ali Nematbakhsh LAc. I closed the practice and went into teaching." In December 2007, Nematbakhsh opened Affordable Quality Acupuncture in Irvine, California. In May 2008, he reported treating an average of 40 clients per week. "This is still my second job, but business is picking up."

Lumiel Kim-Hammerich LAc of Three Treasures Oriental Medicine in San Rafael, California reports that, in her space, which has only room for treating only four patients at a time, she is seeing 50 clients per week, a 300-400% increase from her

previous practice. Despite a drop in fees, the increased client volume has increased her profitability.

The community acupuncture model may be particularly attractive to new acupuncturists who want to rapidly gain confidence in their professional skills through a high-volume practice. This was true for Roselle McNeilly LAc and Whitney Thorniley LAc, 2007 graduates of Acupuncture and Integrative Medicine College, Berkeley, who opened Oakland Acupuncture Project in February 2008. Three months later they were treating over 60 clients per week.

Finally, community acupuncture can be deeply satisfying. Thuy Nguyen LAc of Berkeley Community Acupuncture says that her work now is more interesting with a more varied clientele and better pacing than her previous non-CA practice.

"I'm much busier than I ever was, and much more fulfilled," says Nora Madden. "I feel like I'm contributing to the community in a way that I didn't before. And the patients are just wonderful. They tell everyone they know [about us]; they bring in friends and family. Last week, a young woman who works on a farm brought us two pints of fragrant, fresh, perfectly ripe strawberries, in addition to paying! We shared them with the other patients who came in that day – it was like a little celebration of spring!"

Why Clients Choose Community Acupuncture

First, who are community acupuncture clients? My clients at Sarana Community Acupuncture are retirees and graduate students, part- and full-time employees, people on disability, yoga instructors, artists, musicians, office workers, solar panel installers, psychotherapists, and others. They learn of us via notices we have posted on bulletin boards at the library, the local Y, and elsewhere, or more likely, through recommendations from friends and relatives. Referrals have come from exercise class instructors, classes at a local alternative pharmacy, a cancer support network, and, most notably, other acupuncturists. Practitioners send us people who cannot afford standard fees or whose insurance does not cover enough acupuncture. We also receive referrals from – and give referrals to – other community acupuncture clinics.

Affordability is first and foremost why clients try community acupuncture. Affordability may also be a primary reason why clients keep returning, yet clearly, they



come to value their community acupuncture treatments. Some of our clients have had considerable prior experience with standard acupuncture or they may be seeing other acupuncturists concurrently, perhaps alternating insurance-covered treatments with community acupuncture treatments. Beyond economy, community acupuncture offers some advantages over standard practices.

"Over the years (31+) I've had acupuncture in many different situations," says Sarana client Jude V. "My experience at Sarana compares favorably with treatment elsewhere. In fact, in many ways, it exceeds my expectations. I feel blessed to be able to afford to come two times a week, to be in charge of how long my session lasts, to be able to get the attention of my practitioner easily if I need to. And, also, for me, it is actually more comfortable to relax in a reclining chair than...on a massage table. Never before have I fallen asleep during treatment as I do almost every time now!"

Some of our clients have commented that in the group setting, "seeing other clients "blissed-out" makes them feel safe and less nervous.

By de-emphasizing the role of the acupuncturist, community acupuncture seems to be putting responsibility for healthcare back within reach of the client. Vito, a Working Class Acupuncture client, sees his treatments as "taking myself in for a tune-up. It's managed healthcare with me in the driver's seat."

Sarana client Lauren M. echoes this feeling, saying, "I had tried acupuncture in the past, here and there, in settings that felt more like conventional doctors' offices.

continued on page 24

Community Acupuncture continued from page 23

Sarana Acupuncture was my first experience with longer term treatment. I had a hard time relaxing on my first visit, not knowing what to expect and feeling distracted by other people being in the same space. Now when I go for treatment, I feel completely relaxed and fall into deep sleep. I couldn't imagine keeping up with care in a more sterile environment... In other settings sometimes there is a pressure to get treatment and 'be healed,' but here I feel as though I can come and go at my own pace, and allow myself a time and space in which to relax [for] perhaps preventative therapy!"

How Community Acupuncture Clinics Will Affect the Acupuncture Profession

In his commencement speech at Oakland's Academy of Chinese Culture and Health Sciences (ACCHS) in 2007, acupuncturist John Nieters described my class as the third-wave of the acupuncture profession in the US. In the first wave, pioneers brought Chinese medicine to the awareness of the Western world. In the second wave, a generation of US-licensed acupuncturists con-

"What my clients and I are learning is that acupuncture can be remarkably effective in itself without private treatment rooms or extensive demands on the practitioner's time."

vinced the Western medical establishment of Chinese medicine's validity. The role of third-wave practitioners is to bring Chinese medicine into the mainstream of US healthcare.

Community acupuncture has an essential part to play in making acupuncture commonplace here. If our profession is to continue to grow, we need to reach people who cannot always afford higher priced private treatments. This is not to detract from conventional clinics. Conventional clinics target a different market. The two types of clinics are fully complementary. Yet in a recession economy where 28% of California workers are uninsured or dependent on publicly funded health programs and "[n]ationwide, 16% of working adults lack health insurance"¹, community acupuncture, with its low sliding scale fees, addresses a growing and barely-tapped economic niche.

Further, community acupuncture can make acupuncture competitive with many of the self-care therapies that people use for non-emergency health maintenance and coping: drugstore remedies, dietary supplements, alcohol, or antidepressants, for example. Lisa Rohleder, co-founder of Working Class Acupuncture, wrote in the March 2006 *Acupuncture Today*: "Imagine the impact of a[n acupuncture] clinic in every neighborhood: patients getting off expensive pain medication they can't afford, uninsured asthma patients no longer needing to go to the ER, overwhelmed working parents no longer yelling at their kids or drinking to escape from the stress of their lives – because they have an alternative. Imagine acupuncturists being integral to every community and acupuncture being the medicine everyone uses and values."

continued on page 27

Blue Poppy

... your prescription for success.

Clinical reference texts • Quality herbal products

Live, CD, and Online continuing education • FREE web resources

Call us anytime or visit our website.

1•800•487•9296

www.bluepoppy.com

Community Acupuncture continued from page 24

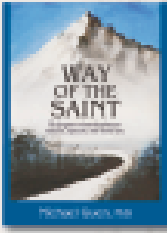
Finally, community acupuncture exposes a lot more people to acupuncture. The more that people try acupuncture or know others who have benefited by it, the quicker they will recognize our medicine as a plausible therapy. In this way, community acupuncture will certainly help build the critical mass needed to tip acupuncture into the mainstream of US healthcare.

Pamela O'Malley Chang, LAc, MSTCM, is a 2007 graduate of the Academy of Chinese Culture and Health Sciences in Oakland, California, and co-founder of Sarana Community Acupuncture in Albany, California, online at www.SaranaCommunityAcupuncture.com.



Receive training in -
**Therapeutic Techniques of
 TCM Spiritual Psychology**

One year to complete
 Powerful counseling
 and body centered
 techniques
 Instructor-guided
 training & role playing
 Transform your
 business through
 deepened relating



10% CE Book

Seven Weekend Modules:

- Posture and Character
- Soma, Emotions & Consciousness
- Soul Purpose in Relation to Life Patterns and History

Introductory workshop:
 Anatomy of an Orthodox
 Chinese Mystery System:
 Roots of TCM Spiritual Psychology

Nov. 1-2, 2008 Jan. 30 - Feb. 1, 2009
 AIMC Berkeley ACTCM San Francisco

Taught by:
 Dr. Michael Guen 707-815-4014
WWW.WASAHINSTITUTE.COM

Seminars/CEUs

PRACTICAL CLINICAL NUTRITION FOR ACUPUNCTURISTS:

Integrating classical & modern nutritional concepts in clinical practice. **Key subjects:** trends in degradation of the food supply, essential nutrient deficiency symptoms, whole food nutrition treatments, nutritional & food allergy testing, simplified supplement prescribing. **Dec. 7, 2008**, Redondo Beach CA. \$150 early registration by Nov 15, \$200 after. Students 1/2 price.

For full course details and registration, visit
www.southbaytotalhealth.com/Acupnutrition.htm.
310-803-8803. 8 CE units.

Acupuncture & Integrative Medicine College, Berkeley

November 1-2, 2008

Anatomy of an Orthodox Chinese Medicine Mystery System: Roots of TCM Spiritual Psychology

Michael Guen, Ph.D., L.Ac.
 15 CEU's Pending

American College of Traditional Chinese Medicine (ACTCM)

January 31-February 1, 2009

Anatomy of an Orthodox Chinese Medicine Mystery System: Roots of TCM Spiritual Psychology

Michael Guen, Ph.D., L.Ac.
 15 CEU's Pending

Comparing the Digestion Diets

Andrew Gaeddert, one of the most experienced practitioners in treating digestive disorders, discusses the elimination diet and how it helps practitioners treat clients with digestive disorders. We compare the elimination diet with the Gottschall diet, a clinically effective approach to treating IBD, as well as the TCM, medicated and antifungal diet.

Continuing Education Distance Course

4 CA CE Units / 4 NCCAOM Points

Registration: \$99.00

To register or for more information about Health Concerns Continuing Education Courses, call 1-800-233-9355



Membership in CSOMA benefits...
 your practice,
 your patients,
 your profession.

Join CSOMA today!

Visit csomaonline.org for an application.

CSOMA. Your partner in practice.