

***In 2002, SB 577, the California Health Freedom Act, created a 21<sup>st</sup> Century model for the delivery of Complementary and Alternative Healthcare in California.***

***Now AB 1388, a massage practice act, is trying to plow a trench through that model as deep as a river canyon.***

***Staying with SB 577 is a far better plan for California consumers!***

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In 1998, the Pew Health Professions Commission, in a report on moving health care into the 21<sup>st</sup> century, noted that **much strife and wasted time would be avoided by a regulatory model that recognized and more easily allowed overlapping scopes of practice.** <sup>1</sup>

Practice acts, often different from state to state, are the source of considerable tension among the professions; the resulting “turf battles” clog legislative agendas across the country. ... Driven by the professions, new information and technologies, and innovation in the workplace, traditional boundaries – in the form of legal scopes of practice – between the professions have blurred. This trend will continue to pressure the regulatory system to accommodate the demand for flexibility while ensuring that the public’s safety is protected. Decisions regarding scopes of practice and continuing competence requirements therefore must be based on comprehensive evidence regarding the accessibility, quality and cost-effectiveness of care provided to the consumer.

A recent extensive review of scope of practice by the British Columbia Health Professions Council (HPC) noted that *reserving only those acts which present a significant risk of harm ensures that the focus of professional regulation remains public protection and not the enhancement of professional status or control.* <sup>2</sup> The HPC has adopted a new model with overlapping scopes of practice and a specific and limited set of reserved acts – a list very similar to the list of acts prohibited under SB 577.

**Under SB 577**, unlicensed health care practitioners provide safe and noninvasive care to consumers without scope of practice concerns. Multiple complementary practices, as well as at least 70 massage and bodywork practices, benefit from including a component of touch. <sup>3</sup>

**Under AB 1388**, the use of touch therapies are restricted to those licensed as massage therapists, even though medical reports of injuries from massage and bodywork are extremely rare. Objective evidence is lacking that AB 1388 will benefit rather than cost the consumer.

SB 577 provides a suitable framework for provision of noninvasive Complementary and Alternative Healthcare. If necessary, the oversight of those practicing under SB 577 could be strengthened by creating an omnibus board under the Department of Consumer affairs. AB 1388 is an unnecessary impediment to the further development of and collaboration between such practices. **Please oppose AB 1388.**

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<sup>1</sup> Pew Health Professions Commission, 1998: *Recreating Health Professional Practice for a New Century*, pp. 83-86. <[http://www.futurehealth.ucsf.edu/pdf\\_files/recreate.pdf](http://www.futurehealth.ucsf.edu/pdf_files/recreate.pdf)>

<sup>2</sup> Health Professions Council: *Safe Choices: A New Model for Regulating Health Professions in British Columbia*. <<http://www.healthplanning.gov.bc.ca/leg/hpc/review/>>

<sup>3</sup> Knaster, Mirka, 1996: *Discovering the Body's Wisdom*, Bantam. Table of contents listing somatic practices available at <[http://www.ramblemuse.com/articles/types\\_of\\_practice.html](http://www.ramblemuse.com/articles/types_of_practice.html)>.