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- I have relevant relationships regarding the content discussed in this presentation.

 - Commission on Accreditation of Athletic Training Education (CAATE)

 · I have a nonfinancial relationship as a Commissioner. I do not receive compensation for this role.

 · Views expressed here are my own and do not reflect those of the Commission unless they are explicitly stated policies/standards of the Commission.

Presentation Objectives

- Discuss the professional education transition to the Masters degree level.
- Discuss the potential impact of the degree change on the landscape of AT regulation.
- Discuss the potential impact of the residency training on AT
- Discuss the potential impact of international accreditation on AT regulation.

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Degree Transition

- Degree Transition
 - Timeline for Compliance with Standard: Baccalaureate programs may not admit, enroll, or matriculate students into the athletic training program after the start of the fall term 2022
 - Programs still producing baccalaureate degree holders into 2026-28
- Substantive Change
 - Must have institution, (state, regional accreditor, etc.) approval prior to submitting intent to change
 - 5 review cycles a year

CAATE – Program Numbers*

- Professional Programs = 373/358
 Bachelors = 239/224
 15 voluntary withdrawal/closing by June 30, 2019
 Masters = 134
 15 substantive change (between June 2019-February 2020)
 19 seeking (2 international)
- Post-Professional Degree Programs = 9
- Residency Programs = 10 (3 seeking)

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District	Total	BAC	MAS	Degree Change	\w	Total by State (BAC, MAS, Degree Change, VW)	Seeking
1	27	14	7	3	3	CT-5, MA-10, ME-4, NH-5, RI-0, VT-3	0
2	42	18	17	1	6	DE-1, NJ-5, NY-11, PA-25	4
3	46	21	13	3	9	DC-0, MD-3, NC-17, SC-6, VA-13, WV-7	1
4	81	38	25	1	17	IL-12, IN-12, MI-14, MN-7, OH-26, WI-10	4
5	60	24	20	0	16	IA-12, KS-13, MO-13, ND-5, NE-5, OK-4, SD-5	1
6	25	9	10	2	4	AR-4, TX-21	2
7	13	8	2	0	3	AZ-2, CO-4, NM-2, UT-5, WY-0	1
8	16	7	5	2	1	CA-14, HI-1, NV-1	1
9	49	19	17	1	12	AL-7, FL-15, GA-7, KY-8, LA-3, MS-1, TN-9,	3
10	12	2	9	0	1	AK-0, ID-3,MT-2, OR-4, WA-3	0
*VW doe	s not inclu	de progran	ns who clo	sed before S	eptembe	r 1, 2018 As of 05,	/15/2019

Degree Transition

- From the Strategic Alliance:
 The NATA Board of Directors and the Commissioners of the CAATE, with the full support of the Board of Certification and the NATA Research & Education Foundation, have agreed to establish the professional degree in athletic training at the master's level.
 - A critical link to acceptance in the broader health care arena is the ATs level of professional preparation.
 - This decision to shift the degree level is essential to ensuring our future ability to meet the expectations of the health care team, to continuing to improve patient outcomes, and to keeping our profession sustainable for generations to come.

Degree Transition and AT Regulation

- Regulation is frequently predicated on education
- Eventually, regulators will be able to claim that AT education occurs at the masters degree level
- · What will that mean?

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Degree Transition and AT Regulation

- The better predicate for enhanced regulation is likely the new 2020 accreditation standards:
 - Varied patient populations (S-17)

 - Lifespan, socioeconomic status, non-sport activities)
 Prerequisite courses and foundational knowledge (S-54 & 55)
 - Core competencies (S-56 to S-68)
 - Joint mobilizations and manipulations (S-73)
 - Medication administration (S-75)
 - Concussion or other brain injury (S-76)
 - Behavioral health (S-77)

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Accredited Residency Programs

- The mission of a post-professional residency advances preparation of an athletic training practitioner through:
 - a planned program of clinical and didactic education
 - · in a specialized area
 - utilizing an evidence-based approach
 - to enhance patient care.



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Residency Education and AT Regulation

- The question has been raised about whether or not 'specialists' should have greater practice capacity
- Would require differential regulation = highly complex and problematic
- Advocating instead for advanced individual 'privileging' within local health systems governed by uniform regulation

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International Accreditation and AT Regulation

- 2 program in application phase
- Interest from a variety of countries
 Canada, China, England/UK, Ireland, Japan, South America, Spain
- Substantial Equivalency (2012 Standards) CAATE
 - Working on Substantial Equivalency document for 2020 • Standards

International Accreditation and AT Regulation

- Very slow and deliberate growth expected in this arena
- Adequate English language skills required for passing the BOC
- Consider regulatory language specific to licensure eligibility:
 Graduate of a CAATE Accredited Program = MRA implications and state-to-state mobility implications for legacy internship graduates?
 - Graduate of a program in the US = CAATE and MRA implications?
 - Consider language around an appropriately approved educational program

 CAATE accredited in US or international

 - MRA country accredited/approved programs Historical internship programs leading to BOC eligibility

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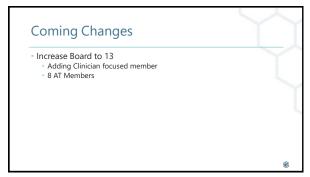




CAATE Goal Statement: Value of Accreditation • Accreditation is valued by key stakeholders. • Goal Statement: AT Education Metrics of Success • CAATE has a process to determine effectiveness of accreditation to the AT profession. • Goal Statement: Clinical Specialist Pathways • CAATE has established valuable education and training pathways to create and promote the growth of AT clinical specialists.







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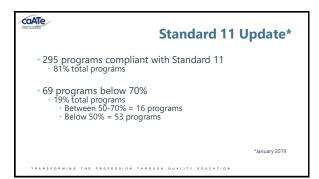


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CAATE – Program Numbers* Professional Programs = 373/358 Bachelors = 239/224 15 voluntary withdrawal/closing by June 30, 2019 Masters = 134 15 substantive change (between June 2019-February 2020) 19 seeking (2 international) • Post-Professional Degree Programs = 9 • Residency Programs = 10 (3 seeking) *May 2019 **®**

	2018-2019	2019-2020	2020-2021	2021-2022	2022-202
Professional Programs	22	22	18	13	5
	2				
Post-Professional Degree Programs - 80 confirmed profe	-	 os (closina after			

District	Total	BAC	MAS	Degree Change	\w	Total by State (BAC, MAS, Degree Change, VW)	Seeking
1	27	14	7	3	3	CT-5, MA-10, ME-4, NH-5, RI-0, VT-3	0
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10	12	2	9	0	1	AK-0, ID-3,MT-2, OR-4, WA-3	0
*VW doe	s not inclu	de program	ns who cla	sed before S	eptembe	r 1, 2018 As of 05 _j	15/2019





	# Citations	# Programs	
Professional Programs*	0	16	
• 54 site visits	1	10	
• 145 citations	2	9	
	3	4	
	4	2	
	5	2	
	6	5	
	7	2	
	8	2	



2018-2019 Commonly Cited Standards

 Standard 57 (min/max hour policy)
 9% 13 programs cited 7 programs cited Standard 6 (assessment measures) Standard 10 (data analysis) 7 programs cited Standard 23 (CEC release time) 7 programs cited 5% • Standard 9 (collect the data) 3% 5 programs cited Standard 4 (comprehensive assessment plan) 4% 6 programs cited Standard 12 (action plan) 6 programs cited 4% Standard 50 (clinical education experiences) 3% 5 programs cited Standard 51 (clinical sites evaluated) 5 programs cited

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Professional Programs 2020 Standards

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2020 Professional Program Standards

- Implementation Date July 1, 2020
 eAccreditation available ~July 1, 2019 for 2020-2021 site visit
 - Delayed implementation for Standard 41
- All sections (I-IV) apply to Master's degree programs
 - Section IV: Curricular Content applies to baccalaureate programs as well

 - Replaces separate NATA Educational Competencies document
 Crosswalk document helps programs transition currently enrolled students.
- Total Number = 94

Foundation Philosophy Standards are a living document Ongoing review as warranted More narrative, less check-boxes Greater program flexibility & institutional autonomy Implementation & Guide to the CAATE 2020 Professional

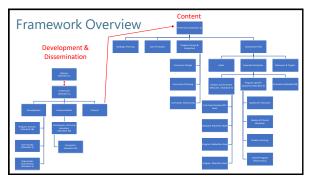
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Standards

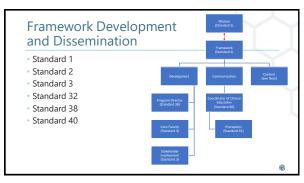
• Advance notice of compliance statements

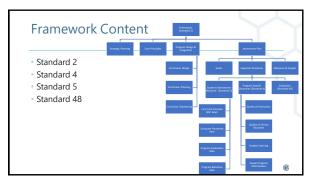
Identification of minimum elements

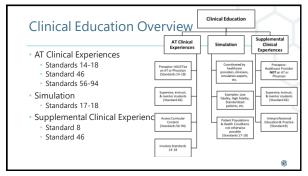
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Standard 17 – Varied Patient Populations

- A program's clinical education component is planned to include clinical practice opportunities with varied client/patient populations. Populations must include clients/patients
 - throughout the lifespan (for example, pediatric, adult, elderly),
 of different sexes,

 - with different socioeconomic statuses,
 - of varying levels of activity and athletic ability (for example, competitive and recreational, individual and team activities, high- and low-intensity
 - who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).

Stanc	lard	17 -	Δnno	tation

- These clinical practice opportunities should occur in athletic training clinical experiences with real clients/patients in settings where athletic trainers commonly practice. When this is not possible, the program may use simulation to meet portions of this standard. Students must have adequate real client/patient interactions (athletic training clinical experiences) to prepare them for contemporary clinical practice with a variety of patient
- Note: Patient interactions in supplemental clinical experiences cannot be used to meet this standard.

Standard 17 – Varied Patient Populations

- · How to Address This Standard
 - ow to Address I his Standard

 Describe how the programs clinical education component is designed to include clinical practice opportunities with varied client/patient populations, and how the program ensures that each student obtains these experiences. Describe how the program determines that students have adequate real client/patient interactions to prepare them for contemporary clinical practice with a variety of patient populations.

 If applicable, describe how and why the program utilizes simulation or other patient-based education opportunities to meet portions of this standard.
- Uploads

Individual Student Clinical Assignment Table

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Individual Student Clinical Assignment Table (Standard 17)

Contemporary Expertise

- Standard 37
- Standard 39
- Standard 42
- Standard 45
- Knowledge and training of current concepts and best practices in routine areas of athletic training, which can include prevention and wellness, urgent and emergent care, primary care, orthopedics, rehabilitation, behavioral health, pediatrics, and performance enhancement.
- · An individual's role within the athletic training program should be directly related to the person's contemporary expertise.

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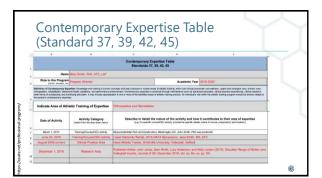
Contemporary Expertise

- Achieved through mechanisms such as:
 advanced education,

 - clinical practice experiences,

 - clinical research, other forms of scholarship,
 - and continuing education.
- It may include specialization in one or more of the identified areas of athletic training practice.
- Program should determine activities and areas
 Commission has been asked about timeline for activities (currently no timeline identified, will discuss and report back if updates)

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	Faculty Workland Table Standard 43		,	-	
ne of Core Feoulty Member South Jones		Academic Year	0519-0000		
to the Program (program dractor, coordinator of clinical education, etc.)	(Program Citocler	1			
Institution's Standard for Full-time Faculty Load (n.		edislocadenic poer)	15 credts a serie	nteri di credita per s	ummer term
Leegth of Core Fa	suity Member's Contract (e.g. 9 receits	13 month, 12 month)	Proonth plus Sur	mer contribut	
Complete the falls	wing table for the individuals holding core	Souty positions.			
Responsibilities (Let course teaps, administratory raise, subdaying and service back, and other responsibilities)	Assigned Load	Indicate:	Semester/Terr	NQuarter Activ	ty Occurs
Academic Responsibilities		Fall Semester	Spring Servester	Summer I Term	Surrener II Term
ACT TO Common Assessment I ACT TO Common Assessment I ACT TO Sense M. Ref and a sequence ACT TO Asses, Training Senses		i	- ;		
Administrative Responsibilities Popper Study	105				
Bshowship.	XX		-		
Service	9%		-		
Other Responsibilities					

Standard 55 – Foundational Knowledge

- Students must gain foundational knowledge in statistics, research design, epidemiology, pathophysiology, biomechanics and pathomechanics, exercise physiology, nutrition, human anatomy, pharmacology, public health, and health care delivery and payor systems.
- Annotation
 - Foundational knowledge areas can be incorporated as prerequisite coursework, as a component of the professional program, or both.

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Standard 55 – Foundational Knowledge

- How to Address This Standard
 - \bullet Describe how the program incorporates each of the foundational knowledge areas.
 - if foundational knowledge is incorporated as prerequisite coursework, describe how the program determines that the content is sufficient for entry into the program.
- Uploads
 - Table of Courses that have foundational knowledge and criteria to determine successful completion of courses
 - Curricular course sequence
 - Course syllabi for all courses in the professional program that incorporate foundational knowledge areas

Standard 55			
))		
	,		
4 4	0	¢	0
		tandards Course Table	
		Academic Year	2019-2020
Citif of courses where the foundational knowledge is being	g tought by listing the course number a	nd course name under appropriate o	okes.
Foundational Knowledge	Preveguialle coursework outside the institution	Prerequiable coursework at your institution	Component of professional program
Statistics			AT 700 Research Methods
Research Design			AT 700 Research Methods
Epidemiology			AT 735 Epideviology
Pathophysiology			AT 712 Puthophysiology
Biomechanics and Pathomechanics	×		
Exercise Physiology		HES 450 Exercise Physiology	
Nutrition		HES 221 Nutrition	AT 759 At Vatic Training Topics
: Human Anatomy	X		
A Pharmacology			AT 730 Pharmacology
s Public Health			AT 732 General Medical Conditions
s Health Care Delivery and Payor Systems			AT 770 Health Care Administration

Curricular Content Standards 56-94
The professional program content will prepare the graduate to do the following:
How to Address This Standard Describe the learning experiences (didactic and athletic training clinical experience) associated with this standard and how student performance is assessed. Provide examples (didactic and athletic training clinical experience) of outcome data used to verify an acceptable level of student performance.
Uploads Syllabus (or syllabi); highlight the course objective(s) and/or the daily/weekly schedule associated with this standard
 Assessment tool(s) that verifies that students are prepared to practice in this content

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Curricular Content Standards 56-94

- Also required of undergraduate programs as of July 1, 2020
- There is an expectation for rolling implementation of these Standards within programs, meaning that full implementation is expected for any cohorts enrolled after July 1, 2020, but that previously admitted cohort(s) should experience adjusted curricula in the applicable courses remaining in their plan of study.
- For example, if a Site Visit were to occur in the Fall of 2020, the senior cohort must be learning curricular content within their current courses, but the program would not be expected to retroactively teach curricular content Standards for material in courses that those students have already taken and passed.

Updates to 2020 Standards

- · Living Document
- eBlast with updates in July

 - Watch your email
 Also will be posted on website

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Post-Professional Degree Ad Hoc Committee

- Charge is to provide bulleted recommendations surrounding the post-professional degree space. This includes degrees at both the masters and doctoral level, related to viability, longevity, and key indicators of quality assurance related to the accreditation process of post-professional degree programs.
- Submitted Report this week will be forwarding to the Commission
 - · More information coming



Residency Committee

- The Residency Committee is responsible for the identification, recommendation, and support of residency activities by CAATE. This includes the evaluation, development, and progression of the Residency Standards to ensure quality athletic training education.
- Standard revision started
 - Anticipate open comment summer 2020

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Call Commissioners

- Forrest Pecha elected by Programs eBlast went out Friday
- Clinician Call Applications Open Now
- Professional Program Call Late Summer/Early Fall
- Public Member Late Summer/Early Fall

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CAATE Talks

- District Talks (SWATA)
- 2019 Accreditation Conference
 - October 11-12, 2019
 Atlanta, GA

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Site-Visitor Training

- Updated training required for ALL Site Visitors
 New & Seasoned Site Visitors on 2020 Standards
- New training and implementation fall 2019
 Hybrid: online & in-person training

