



BOARD OF CERTIFICATION
FOR THE ATHLETIC TRAINER

Policies & Procedures for BOC Approved Providers

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Stay on Track

As a BOC Approved Provider there are policies and procedures to follow throughout your program development and implementation to maintain your active status. The “Policies & Procedures for BOC Approved Providers” (Policies & Procedures) document clearly outlines the process to stay on track and maintain your active status, as well as defines specific actions that can result in non-compliance. By understanding actions that can lead to non-compliance, the process is simplified for BOC Approved Providers.

The Policies & Procedures are intended to guide BOC Approved Providers and inform BOC Certified Athletic Trainers and members of the public.

Maintaining Compliance

Following policies and procedures during program planning and implementation keeps programs on track to achieve high-quality results, as well as minimize the risk of non-compliance and disciplinary action. A BOC Approved Provider who is found to be non-compliant is placed on probation for a specified time period; usually a period of one year. If a BOC Approved Provider on probation is found to be non-compliant in a subsequent year, expired status is applied.

ACTIONS LEADING TO NON-COMPLIANCE

Most issues of non-compliance are identified through the annual report, which essentially is an audit or a check to ensure each BOC Approved Provider is operating their educational programs in accordance with the “Standards for BOC Approved Providers” (Standards) and Policies & Procedures. To ensure success, BOC Approved Providers should become very familiar with the non-compliant list below and should reference this list when building programs. Another helpful resource is the “Checklist for Compliant Programming” under the Active Providers section of the BOC website.

REASONS

There are a few areas in which BOC Approved Providers could be found to be non-compliant, including annual report, program directory (10-day rule) and complaints (Athletic Trainer (AT) triggered investigation).

1. Annual Report

What is it?

To facilitate your annual report ONE past program will be randomly selected for review. Regardless of whether you had any continuing education (CE) events in the previous calendar year, you are still required to verify this by clicking on "Annual Report" in your BOC Approved Provider dashboard. If you do not click on this link and confirm, your provider account will expire on March 31, the date annual reports are due. Items of non-compliance denote critically important areas relevant in creating quality educational programs. Should a BOC Approved Provider not meet these critical expectations, their annual report will be denied placing them on probation (first offense) or expired status (consecutive second offense). A full explanation of status changes is found below. As you develop your educational programs, keep the items of non-compliance in mind. Non-compliance items listed below are solely related to your annual report.

Study the list below to develop your programs to specification:

Non-Compliance on Annual Report

Previously, there were several administrative requirements identified as items of non-compliance. For example, if a BOC Approved Provider did not include all seven items required for promotional materials or five items required on their certificate, they were marked as non-compliant and penalized, moving status to either probation or expired.

These administrative requirements will remain, but the punitive consequences will be removed. The new focus on compliance will shift from a focus on the administrative aspects of CEU offerings to those items that most impact educational quality, such as the practice gap, learning objectives and participant assessment.

*Note: Items that were formally marked as non-compliant: These items are still required, however, the consequence of omission has been reduced. If items are omitted, BOC will remind BOC Approved Providers of the requirements, recognizing this to be a learning opportunity rather than a punitive event.

These items are STILL required to appear, but do not carry punitive consequences.

- a. **Program Evaluation** - This is related to Standard 10 “Evaluation,” Essential Element A “Target Areas.” (Question 10 on the annual report) The program evaluation must include questions that target these areas:
 - Program content was practically useful, appropriate and adequately in-depth
 - Achievement of stated learning objectives
 - Effectiveness of teaching and learning methods
 - Quality and effectiveness of faculty
 - Usefulness of educational materials
 - Perception of bias or commercialism
- b. **Promotional Materials** - This is related to Standard 18, “Promotional Materials”. Promotional materials must include:
 - Learning Objectives (three to five)
 - Schedule and format
 - Fee(s)
 - Cancellation/refund policy
 - Program faculty and credentials
 - Number of contact hours/continuing education units (CEUs) that will be made available
 - Sponsors (if applicable)
 - Required materials and equipment
- c. **Operations Manual** - Must include the following:
 - Joint providership policy
 - Conflict of interest policy
 - Copyright policy
 - Nondiscrimination policy
 - Record keeping policy
 - Fee/cancellation/refund policy
 - Faculty payment
- d. **Certificate** - This is related to Standard 19 “Certificate.” (Question 17 on the annual report).
*Please note: If there is a discrepancy of CEUs between the certificate and promotional materials greater than one CEU, this is considered non-compliant and may result in Probation or Expiration. For example, if the promotional materials stated an AT could earn up to four CEUs, but the certificate said the AT earned five CEUs, this is grounds for non-compliance. If the discrepancy is less than one CEU, a warning will be issued. The certificate must include:
 - Participant name
 - Program title
 - Completion date
 - BOC Approved Provider name, number and logo
 - BOC Approved Provider CE statement, including number of CEUs

CE Statement of Credit for Certificate

This is the statement that must appear on certificates disseminated to ATs:

Company Name (BOC AP#: PXXXX) is approved by the Board of Certification, Inc. to provide continuing education to Athletic Trainers (ATs). This program is eligible for a maximum of (#)hours/CEUs. ATs should claim only those hours actually spent in the educational program.

Previously inconsequential items that will now put a BOC Approved Provider in a non-compliant status are:

- e. **Practice Gap** - This is related to Standard 1 “Evidence”, Essential Element A: Practice Gap, which states, “Identify the professional practice gap and/or educational need the content addresses.” The gap should answer: What is it that ATs do not know or what are they not doing?
- f. **Clinical Bottom Line** - This is related to Standard 1 “Evidence”, Essential Element C: Clinical Bottom Line, which states, “Provide a clinical bottom line or a summary of the evidence (three to four sentences) that identifies the clinical recommendation outlined in the learning objectives.”
- g. **Measurable Learning Objectives** - This is related to Standard 1 “Evidence”, Essential Element B: Objectives, which states, “Develop measurable learning objectives that define the knowledge and/or skills the AT is expected to acquire through completion of the program (e.g. written to most current edition of Bloom’s Taxonomy).” Learning objectives should follow the acronym, “M.O.V.” which means objectives should be: measurable, observable and visual. Avoid words that do not satisfy M.O.V. such as “learn”, “understand”, “know”, etc. Each program should have three to five learning objectives.
- h. **Participant Assessment** - This is related to Standard 6 “Participant Assessment” to both Essential Elements A & B. There must be a clear alignment between what you are asking learners to do (the learning objectives) and how you are measuring their ability to complete or demonstrate progress or mastery (the assessment). *Please note: The Initial Application and Annual Report will ask for the actual participant assessment used for a specific CE event. The assessment does not need to be completed by a participant. BOC only needs the questions on the assessment.

2. Program Directory

What is it?

The program directory provides an easy and effective method for ATs to find CEUs they need for certification. Every Category A program available to ATs can be found in this searchable directory. Visit the program directory on the BOC website at bocatc.org.

Non-Compliance Result

Failure to upload programs to the directory at least 10 calendar days prior to the start of the program will result in discipline. The program directory will not allow a BOC Approved Provider to upload programs with a start date that is less than 10 calendar days away. At this point, a BOC Approved Provider must contact the BOC for assistance. This instance will be documented in the BOC Approved Provider’s profile. If this occurs twice in a calendar year, the BOC Approved Provider will be placed on probation.

3. Complaints

In the event the BOC receives a complaint from an AT or other person(s) or discovers information indicating that a violation of the standards or requirements may have occurred, an investigation will begin. The investigation protocol is stipulated below.

Filing A Complaint

ATs and BOC Approved Providers that have access to the portal can file a complaint by accessing the portal and following the steps outlined there. A member of the public or other person who does not have access to the portal can contact the BOC at provider@bocatc.org to begin the process; paperwork will be sent to them. To prepare, BOC will collect the following: BOC Approved Provider name/number alleged to be involved, any facts concerning the alleged conduct, and any available documentation.

Investigation Protocol

The BOC shall notify a BOC Approved Provider of an investigation and will require a response within 15 calendar days from the date notification is sent. The BOC may extend this period up to 15 calendar days upon request. The notification shall provide instruction on the materials needed from the BOC Approved Provider to conduct the investigation. The BOC shall notify the BOC Approved Provider of the outcome within 30 calendar days of receipt.

Issues of non-compliance are not the only reason a status may become expired. A status may become expired due to missed deadlines. See the next section “Status Changes” for more explanation.

Status Changes

A status may be changed to probation due to non-compliance. An expired status may be issued due to non-compliance or because of missed deadlines. It's important to understand what this means for you as a BOC Approved Provider and what your responsibilities are to ATs.

STATUS TYPES

A BOC Approved Provider can have one of three statuses: active, active - probation and expired.

1. **Active** illustrates a BOC Approved Provider in good standing: 1) annual fee paid 2) annual report completed and 3) programs uploaded to the program directory within 10 calendar days of start date.
2. **Active - Probation** is merely a warning status. BOC Approved Providers in this status may still offer CEUs for the year. The BOC does not require an action or response by the BOC Approved Provider at the time of decision. It is highly suggested a BOC Approved Provider reviews non-compliant items to ensure future programs are adjusted accordingly. Note: ATs do not see your probation status. BOC Approved Providers will see this status when logging into the portal only.

A BOC Approved Provider will enter into probation immediately upon a BOC decision based on non-compliance. This status remains until a successful outcome of a subsequent annual report. For example, if a provider is found to be non-compliant on the annual report in early 2021, the probationary status will remain until the following annual report. If the annual report is accepted without any items in non-compliance, status will revert back to active in early 2022 upon BOC decision to approve the annual report.

3. **Expired** status means a provider may not offer Category A CEUs and may not upload programs to the program directory (access is revoked).

EXPIRED (FORMER) PROVIDERS WHO OFFER CEU

If as an expired provider (i.e. not BOC approved) you deliver CEUs to ATs the BOC will send you a cease and desist letter and require the following steps be completed:

1. Contact all affected ATs providing notification of this error.
2. Retract the invalid CEU certificate and reissue a new one to attendees without the BOC logo and CE statement.
3. Send the BOC a copy of the message sent to ATs, along with an example of the new certificate (for an actual affected participant) to the Senior Manager of Professional Development, who will maintain records in the provider account.

To ensure the ability to offer Category A CEUs going forward, we encourage you to reapply to become a BOC Approved Provider.

CONDITIONS

A number of conditions will prompt expired provider status:

Condition 1: A BOC Approved Provider is on probation from a previous year and is found to be non-compliant on a subsequent annual report.

Condition 2: The annual fee was not paid within the November to December 31 window.

Condition 3: The annual report was not completed within the November to March 31 window.

Recourse: If you are in expired status, your courses are not eligible for Category A. Please see the category explanation to identify whether your course is eligible for a different category. As recourse, a provider may re-apply for accreditation by completing an initial application and paying the initial application fee. A provider may do this immediately as there is no waiting period.

Appeals

In the event a BOC Approved Provider's status changes to probation or expired, they may elect to appeal the BOC decision. The appeal process is completed in BOC360; it must be in writing, and we will not hold any phone conversations or email conversations regarding appeals. Everything must be documented in BOC360 under the "appeal" form, and the below procedure is all done within BOC360 (all deadlines are automatically handled by the system). There are strictly defined grounds for appeal (see below under Qualified Reasons).

TIMING/STEPS

Submit within 30 days: A provider will have 30 days once a decision has been made to make a formal, written, appeal. Note that this 30-day window begins on the day of decision which will be automatically sent to the primary provider contact(s). This 30-day window does not begin upon receipt of the decision.

1. **BOC reply within seven days:** The BOC will review qualified reasons for appeal (see below) and will return a response within seven days. The decision will either be "Yes, your reason is qualified" OR "No, this does not qualify as a valid reason for appeal." IF the decision is "NO", then the appeal process will end. It will not advance.
2. **Submit evidence within seven days:** If your appeal is filed under a qualified reason, you will then have seven days to submit supporting documentation and evidence to support your claim.
3. **BOC decision within seven days:** The BOC will examine the evidence and will return a decision to either grant or deny your appeal. If granted, provider status will revert back to active. If denied:
 - a. **Submit appeal to CEO within seven days:** If the appeal is denied by BOC staff and you wish to continue to appeal, you may do so through the portal, in writing to the CEO.
 - b. **Final decision of the CEO within seven days:** Once the decision is given by the CEO, the appeal process is officially closed and no further communication will be given by any member of the BOC on this specific matter.

An appeal may be made based on a qualified reason. All qualified reasons are listed below.

1. BOC staff have missed something or overlooked something in an initial review such as the annual report.
2. BOC staff have provided inconsistent feedback that either misleads and/or does not align with the "Standards for BOC Approved Providers."
3. A provider that receives a decision of probation or expiration may request an appeal when it feels that the evidence it presented to the BOC justifies a different decision.

If the appeal does not meet one of these conditions, it cannot be considered.

Reasons that do not qualify:

*Please note: The appeal process is not a place to contend with the “Standards for BOC Approved Providers.” If there is an area of ambiguity in the standards wherein upon you do not feel you understand what is expected of you as an BOC Approved Provider, ask questions prior to the development of your program(s) and prior to beginning an annual report.

*The appeal process is not a place to contend with the Policies & Procedures. To ensure fairness among BOC Approved Providers and to uphold the highest ethical standard, the BOC will operate in accordance with the published Policies & Procedures.

*Appeals are not a place for providers to submit additional material that was omitted previously. Only material which was considered at the time of the initial review, such as in the annual report, may be reviewed upon reconsideration.

*Note that non-accreditation decisions (when your status becomes expired) delivered as a result of administrative issues such as failure to submit fees are not eligible for the appeals process.

Policies Outside of Non-Compliance

REFUNDS

1. Initial Application - If denied, the BOC will refund the application fee but \$50 is held for processing.
2. Renewal Fee is Non-Refundable - The renewal fee must be paid, regardless of whether a BOC Approved Provider elects to offer CE programs during the current year. No refund will be issued.

COMMERCIALISM/BIAS/SALE OF GOODS

BOC Approved Providers may NOT withhold a participant survey/assessment/program evaluation/certificate to a participant on the requirement the participant view or listen to a sales pitch or buy goods/services. A sponsor's name should not be used in the title of the program either as this lends to suggestive selling.

ELECTRONIC DOCUMENTS REQUIRED

Electronic records are expected to be kept that include but are not limited to participant certificates, participant assessments, participant rosters and program evaluations. All BOC Approved Providers are expected to retain program records, of each occurrence, for at least five years. In the case of an audit, you will be expected to produce the program documents listed above. In the case of the annual report, which occurs each year, you will be expected to provide these documents (*The annual report will involve a program that occurred within that current year).

INITIAL APPLICATION FEE

Beginning July 1, 2022, the initial application fee will be \$325 (rather than \$300).

INITIAL APPLICATION

Applicants will have only two opportunities for revisions if an application is sent back. There can only be a total of three submissions with the original submission counting as one. An application will be denied if the second round of revisions do not satisfy the standards. For example:

1. Original submission = one
2. Responds to revisions at the request of a reviewer = two
3. Responds yet again to revisions at the request of a reviewer = three (*From here, no other revisions can be made. A final decision will be made and will result in either approval or denial of the initial application. If denied, the applicant may elect to pay the initial application fee and apply again.)

EXTENSIONS

In the rarest of cases, an extension may be granted to complete an initial application, annual report or pay a fee. The circumstances are related, but not limited to, a global pandemic, a life/death situation impacting an entire organization, a financial crisis impacting an entire organization or a health crisis impacting an entire organization. Extensions will be authorized only by the Senior Manager of Professional Development at BOC and will be issued in writing with a clear deadline in accordance to the sensitivity and severity of the circumstances impeding the ability of the BOC Approved Provider to comply with BOC basic responsibilities. This (new) deadline will not be further extended.

WHAT PROVIDERS CAN EXPECT FROM THE BOC

Previously, policy changes were made on a rolling basis. Beginning July 2021, **changes to AP program policies will only be made twice a year: January and/or July**. Any changes will be thoroughly communicated to stakeholders in January and/or July, as appropriate. However, changes will not go into effect until the following year (January and/or July) but no earlier than one year. For example, if a policy change is announced in January of 2022, it will not go into effect until January 2023.