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Compliance and Regulatory Education:
Best Practices for Athletic Trainer Regulation



Regulatory Implications from the Evolution of AT Education

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Objectives

Upon completion of the presentation, attendees will be able to:

1. Explain the professional education transition to the Master's degree level.
2. Discuss the potential impact of the degree change on the landscape of AT regulation.
3. Discuss the potential impact of the residency training on AT regulation.

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CAATE

Mission • Vision • Values

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OUR MISSION

Serving the public and profession by establishing and ensuring compliance with accreditation standards that facilitate quality outcomes, continuous improvement, innovation and diversity to enhance athletic training education.

OUR VISION

Advancing clinical practice and improving health care outcomes through promotion of excellence in athletic training education.

VALUES

Accountability • Integrity • Leadership • Transparency • Excellence • Collaboration

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2022-24 Strategic Plan

Sustainability & Organizational Excellence

Continually strive toward organizational excellence.

Quality Assurance, Improvement & Innovation

Ensure continuous quality assurance, quality improvement and innovation across accredited athletic training programs.

Diversity, Equity & Inclusion

Foster the CAATE's commitment to equitable representation for all, including students, faculty, staff and stakeholders.



Residency & Fellowship Program Growth

Grow accredited residency and fellowship programs.

Recognition of the Profession

Aid in the promotion of athletic training as a health care profession comprised of diverse, competent and highly educated professionals.

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CAATE Accredited Programs

- Professional Programs
- Post Professional Programs
- Residency and Fellowship Programs

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CHEA Recognized

CAATE's CHEA Scope of Recognition

The Commission on Accreditation of Athletic Training Education (CAATE) accredits professional and post-professional programs in athletic training at the baccalaureate and master's degree levels within the United States. (2023)



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Program Numbers (February 2024)

Accredited Professional Programs: 258

Accredited Post-Professional Programs: 3

Accredited Residency Programs: 13

TOTAL Accredited Programs: 274

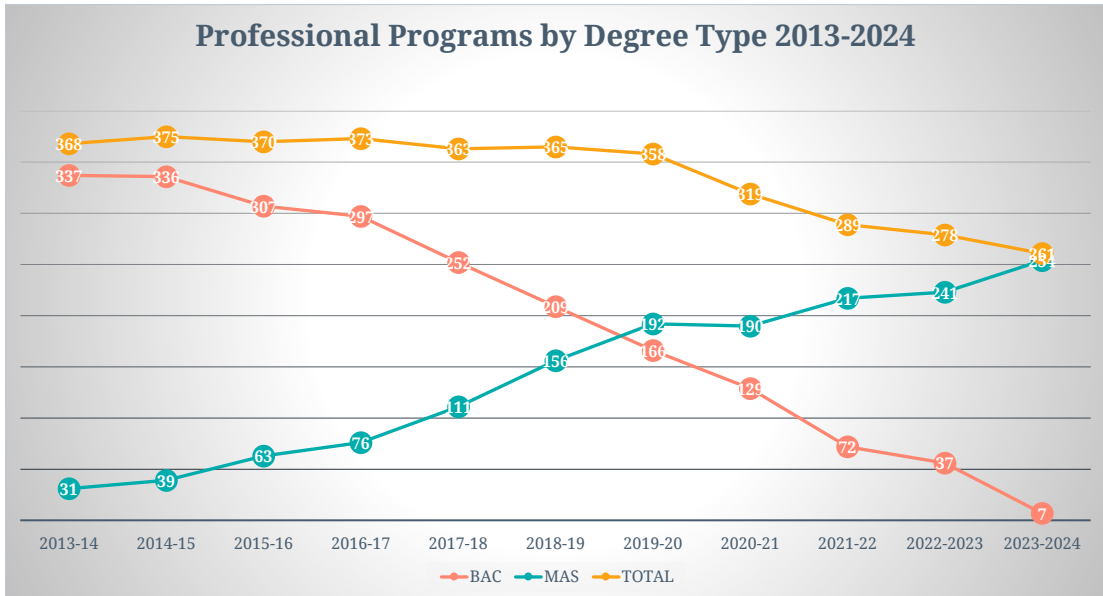
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Professional Programs by Degree Type 2013-2024



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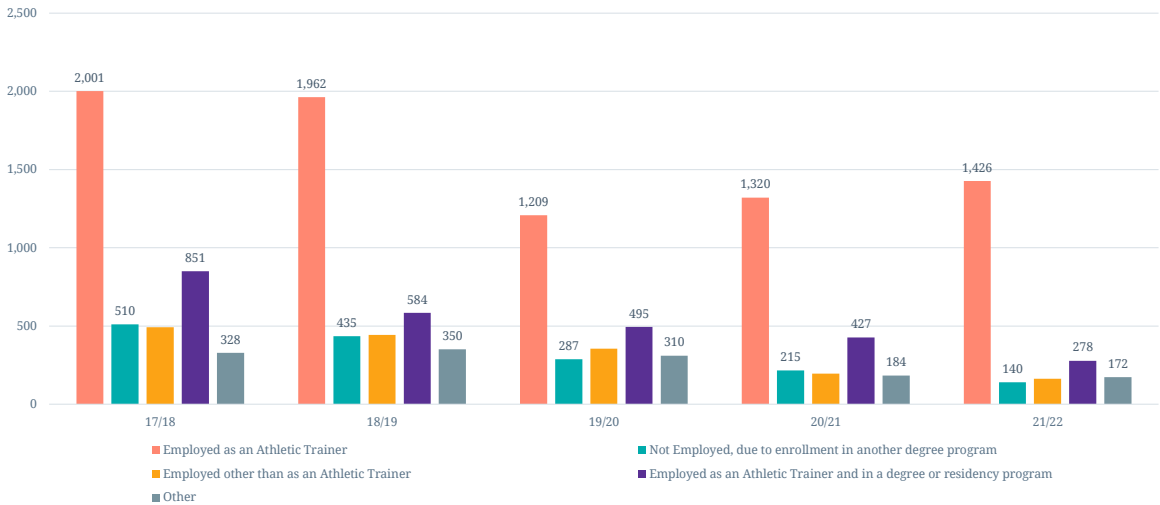
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Admission Capacity and Enrollment: 2017-2023



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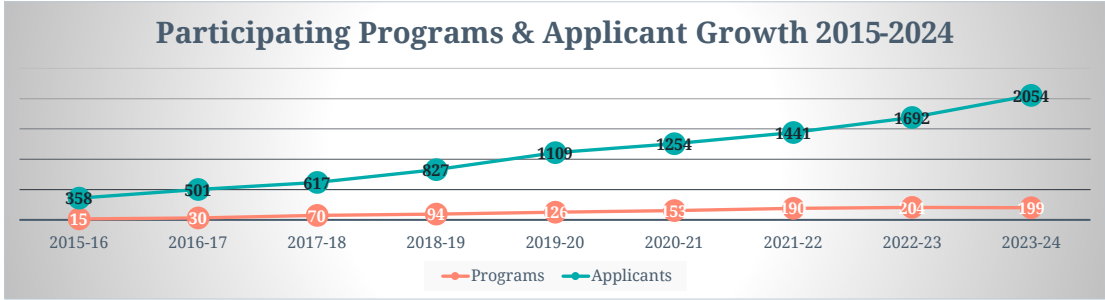
Athletic Trainer Placement as reported by CAATE-Accredited Programs



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Cycle Name	Applicant Count	Application Count	Avg. Applicant Count
2023-2024	2,054	4,389	2.06
2022-2023	1,692	3,497	2.07
2021-2022	1,441	3,214	2.23
2020-2021	1,254	2,631	2.10
2019-2020	1,109	2,042	1.84
2018-2019	827	1,557	1.88
2017-2018	617	1,156	1.87
2016-2017	501	831	1.66



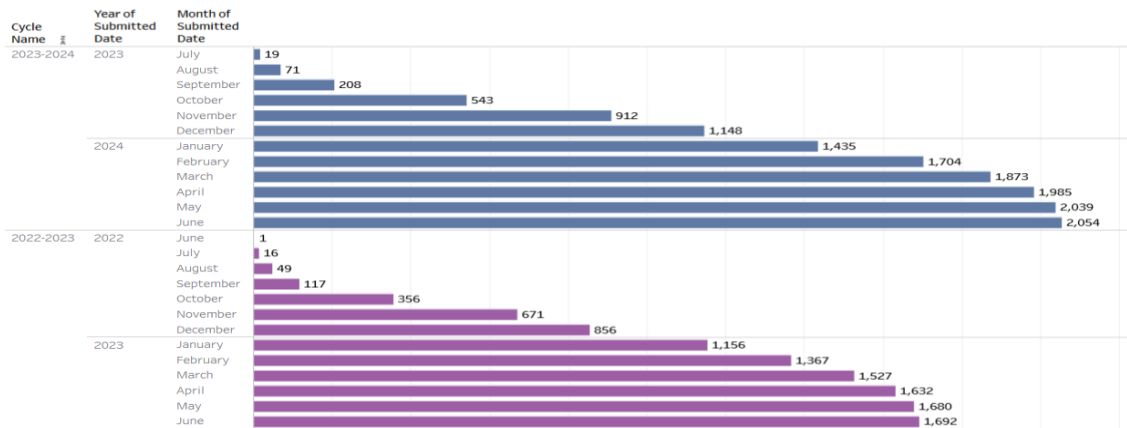
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ATOCAS Applicants

Athletic Training Centralized Application System



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ATCAS Fees Waivers

The CAATE provides application fee waivers for students with an economic need.

2023-24 Cycle:

\$ 6,240 in ATCAS fee waivers to 65 potential students

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Residency & Fellowship Programs

Residency and fellowship positions are full time clinical positions with an academic role (didactic and scholarship) that are designed to build upon and expand the Athletic Trainer's depth and breadth of knowledge.

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CAATE-defined specialty areas

- Orthopedics
- Rehabilitation
- Performance Enhancement
- Behavioral Health
- Pediatrics
- Primary Care
- Prevention and Wellness
- Urgent and Emergent Care

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Residency and Fellowship Environment

- Athletic training residency and fellowship education occur in clinical settings that establish the foundation for practice-based and lifelong learning.
- Certified athletic trainers learn to provide optimal patient care under the structured mentorship of faculty members who instruct and serve as role models of excellence, compassion, professionalism, and scholarship.
- Residency programs build on the foundational knowledge and experience of athletic trainers through clinical development, structured didactic curricula, and specialty area scholarship.

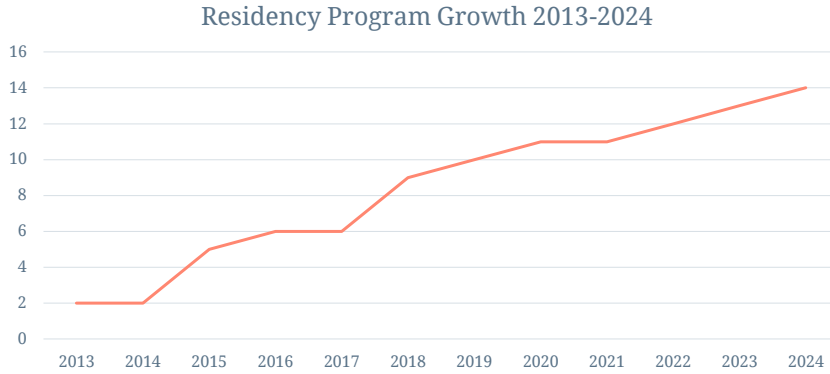
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Accredited Residency and Fellowship Growth: 2013-2023



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
TOTAL	2	2	5	6	6	9	10	11	11	12	13	14

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2020 Professional Program Accreditation Standards

The better predicate for enhanced regulation is likely the new 2020 accreditation standards:

- Program Outcomes (S-4, S-25)
- Varied patient populations (S-17)
- Variety of health conditions (S-18)
- Curricular Content Standards
 - Core competencies (S-56 to S-68)
 - Acute conditions (S-70)
 - Joint mobilizations and manipulations (S-73)
 - Medication administration (S-75)
 - Concussion or other brain injury (S-76)
 - Behavioral health (S-77)
- DEI Standards

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Standards Video Library

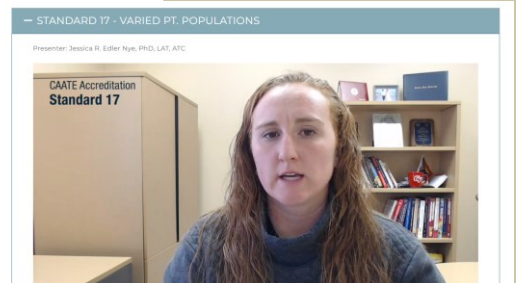
CAATE-led project to provide information to all stakeholders on each of the Professional Program Standards

Each video includes information such as:

- Explanation of the standard
- Requirements to demonstrate compliance
- Commonly cited issues resulting in lacking evidence of compliance

Residency and Fellowship standards library coming soon

<https://caate.net/Quick-Links/Standards/Standards-Video-Library>



Standard 4 – Program outcomes / Continuous QI

Programs must engage in continuous quality improvement... Assessment plans must include program-specific outcomes and benchmarks. Program specific outcomes must include measures of program effectiveness for:

- Student learning
- Quality of instruction
- Quality of clinical education
- Student readiness for independent practice

The following student achievement measures are required with benchmarks at or above the following minimums:

- Graduation rate at or above 75% 3-year aggregate
- Placement rate at or above 70% 3-year aggregate
- Overall BOC pass rate at or above 70% 3-year aggregate

Standard 25 – Outcomes data

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Student achievement measures must be posted publicly.

Note: This data is now hosted directly on the CAATE website. Programs must provide a link to their program’s information on the CAATE website.

<https://caate.net/Search-for-Accredited-Programs>

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Standard 25 – Outcomes data

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BOC Pass Rate

Once a BOC ID is matched to each student in a cohort, and the student has taken the BOC exam, this table will populate from data directly from the BOC. The aggregate pass rate is calculated by the number of graduates taking the exam divided by the number of graduates who pass the exam. Important note: The first time pass rate and total pass rate may be different than what was previously reported by programs from the BOC in the Institution Pass Report. The BOC pass rate on previous reports from the BOC was calculated without regard to student cohort and was based on the BOC exam year (April-February of each year). BOC pass rate data posted on the program’s website MUST match the data on this table.

	3 yr aggregate
Number of students graduating from program.	34
Number of students graduating from program who took examination.	34
Number of students who passed the examination on the first attempt.	27
Percentage of students who passed the examination on the first attempt.	79
Number of students who passed the examination regardless of the number of attempts.	33
Percentage of students who passed the examination regardless of the number of attempts.	97

Program Retention Rate

Measures the percentage of students who have enrolled in the professional program who return to the institution to continue their studies in the program the following academic year. Program retention rate includes the number of students who enrolled in the program, the number of students returning for each subsequent academic year, and the percentage of students returning for each subsequent academic year.

Please note: Our system began automatically calculating the retention rate percentage beginning in 2020-21. Prior year data for the retention rate percentage is not available through our system and will display as n/a. Program retention rates are only calculated and updated one time per year. Program Administrators: Please ensure student cohort information is updated each year to ensure accurate information is reflected in the outcomes tables.

	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
Enrolled Students	n/a	n/a	n/a	n/a	n/a	n/a	25	21	22	27
Retention Rate (%)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	83	100	100

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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 activities),
- who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).

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Standard 17 - Annotation

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 populations.

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Individual Student Clinical Assignment Table (Standard 17)

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Individual Student Clinical Assignment Table Standard 17														
Provide the clinical education plan in reverse chronological order for each student.				Student Name		Graduation Date								
Clinical Site	Course Associated with Experience	Dates of Clinical Experience(s)	Frequency	Experience Type/Description (check all that apply)						Type of Clinical Education			Preceptor and Credential (Provide preceptor name and credentials)	
				throughout the lifespan	different times	different locations	occupational	community-based	inpatient/outpatient	athletic training	simulation	supplemental		
Example: J. Doe College	AT 710	3/1/18 - 5/1/18	Three to four times a week	x	x	x					x			Mary Smith, ATC
Jefferson University	AT780	1/7/2020-5/12/2020	Immersion	x	x	x	x	x		x				Jamie Carlson, MS, ATC, Jacob Taylor, ATC
JK High School	AT 770	11/2/2019-12/20/2019	3-4x's week	x	x	x				x				Amy Jones, ATC
Smith College Football	AT 770	8/5/2019-11/11/2019	2-3x's week		x			x		x				Joseph Larson, MS, ATC
Relia Health Systems	AT 720	1/5/2018-2/1/2018	2x's week									x		Samantha Book, PT
Smith College	AT 720	1/5/2018-5/13/2018	1x's week	x						x		x		James Bradford, PhD, ATC

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Standard 18 – Variety of health conditions

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Excerpts:

Athletic training clinical experience provides students with opportunities to engage with patients with emergent, behavioral (mental health), musculoskeletal, neurological, endocrine, dermatological, cardiovascular, respiratory, gastrointestinal, genitourinary, otolaryngological, ophthalmological, dental, and environmental conditions.

Students must have adequate patient/client interactions to prepare them for contemporary clinical practice with patients with a variety of health conditions commonly seen in athletic training practice.

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Curricular Content Standards

Core Competencies (Standards 56 – 68)

- Advocacy
- Health Literacy and Social Determinants of Health
- Patient education and self-care
- Communication
- International Classification of Function, Disability, and Health (ICF)
- Collaborative practice
- Evidence-based practice
- Quality assurance and quality improvement
- Health care informatics
- Legal and ethical practice
- Professional competence and professional development

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Curricular Content Standards

Evaluate and manage patients with acute conditions (Standard 70)

- Cardiac and respiratory compromise
- Environmental conditions
- Cervical spine compromise and brain injury
- Internal/external hemorrhage (including tourniquet and hemostatic agents)
- Fractures and dislocations (including reduction of dislocation)
- Anaphylaxis (including administering epinephrine using automated injection device)
- Exertional sickling and rhabdo
- Diabetes (glucometer, administering glucagon and insulin)
- Drug overdose (naloxone)
- Wounds (including care and closure)
- Testicular injury
- Other musculoskeletal injuries

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Curricular Content Standards

Select and incorporate interventions (Standard 73)

- Therapeutic and corrective exercise
- Joint mobilization and manipulation
- Soft tissue techniques
- Movement training including gait training
- Functional training
- Therapeutic modalities
- Motor control
- Home care management
- Cardiovascular training

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Curricular Content Standards

Medications (Standard 75)

Administer medications or other therapeutic agents by the appropriate route of administration upon the order of a physician or other provider with legal prescribing authority.

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Curricular Content Standards

Brain injury (Standard 76)

Evaluate and treat a patient who has sustained a concussion or other brain injury

- Examine and reexamine
- Atypical response
- Implement plan of care
- Return to activity
- Referral when needed

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Curricular Content Standards

Behavioral Health (Standard 77)

Identify, refer and give support to a patient with behavioral health conditions. Behavioral health conditions include (but are not limited to):

- Suicidal ideation
- Depression
- Anxiety disorder
- Psychosis
- Mania
- Eating disorders
- Attention deficit disorders

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DEI Standards

The CAATE adopted two DEISJ standards for professional programs:

- DEI 1 (Program Delivery): The program demonstrates systematic diversity, equity, inclusion, and social justice efforts in its development, design, and delivery
- DEI 2 (Curricular Content): Practice cultural humility, foster cultural humility, and demonstrate respect in client/patient care

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Thank you and questions?

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