

**ATEP Meeting**  
4/31/09  
**Accreditation Site Visit Report—Rejoinder**

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- Dr. Clarke and Mark Bohling captured our general strengths very well.
- They support us toward our strategy with the administration by documenting the need for a CEC and for more administrative assistant support.

**Standard D1**

**D1. Facilities D1.1** Physical facilities must include: **D1.13** clinical facilities that are consistent in size and quality with clinical facilities used for similar academic programs at the sponsoring institution, and

**Non-Compliant**

**Evidence of NC with this Standard (if cited):**

The athletic training room at Point Loma High School, an affiliated clinical site provides an inadequate clinical education environment. The athletic training students must enter the room through a boy's locker room. There is no sink or running water located in the room. *To demonstrate compliance with this Standard, the program must submit the following evidence:*

- *Provide evidence that students have been relocated to an appropriate site where learning and practicing clinical skills may occur.*
- *These sites shall be confirmed via an affiliate agreement and agreements with qualified ACI/CIs who are able to appropriately supervise the athletic training student(s).*
- *Submit the completed agreement and documentation of ACI training and BOC cards/state licensure of each new ACI/CI.*
- *Submit completed Tables A4a, B2.2 and B3.2 for the current academic year.*

- **My Summary:** The CAATE suggests that we can't fix the problem by locating another site at PLHS in which to temporarily operate a training room until the new building is built. Apparently we will need to relocate, establish an affiliation agreement, and train a new ACI
- **Options to demonstrate compliance:**
  - Santa Fe Christian high school affiliation
  - 5-week rotation model similar to ATR 493 and many other programs
  - Alternate day rotation model as done at SUHI (not a safe option)
  - Add another CI at PLHS: Megan Schutter?

**Section J: Clinical Education J1.** The athletic training curriculum must include provision for clinical experiences under the direct supervision of a qualified ACI or CI (see Section B) in an appropriate clinical setting. **J1.1** ACI or CI must be physically present and have the ability to intervene on behalf of the athletic training student to provide on-going and consistent education.

**Non-Compliant**

**Evidence of NC with this Standard (if cited)**

Interviews with students and clinical staff reveal that there are times the ATS at PLNU are not under direct supervision and are asked to travel without direct supervision. Students and ACI at PLHS also report that students are not always under direct supervision. There is a First Responder Policy for PLNU, but it is evident that it is not properly followed. At PLHS there is no First Responder Policy. *To demonstrate compliance with this Standard, the program must submit the following evidence:*

• *Please provide a revised First Aider Contract with language modified to indicate the unsupervised experiences are not required and are not a part of the requirements of the ATEP. It is recommended that the ATEP eliminate the First Aider contract as an ATEP document.*

• *Submit a document listing all current Clinical Instructors and ATs, signed and dated by all listed, attesting that they understand that First Aider experiences are not required by the ATEP and that these unsupervised experiences cannot be counted as clinical experiences of students enrolled in the ATEP.*

- **My Summary:** The CAATE recommends that we eliminate the First Responder contract altogether.
- **Options to demonstrate compliance:**
  - Eliminate FR as ATEP document; ATs are independent contractors with PLNU Athletics

### **B3.4 Clinical Instructor (CI) Qualifications**

A CI must:

**B3.41** be a credentialed health care professional as defined by the American Medical Association and the American Osteopathic Association,

**B3.42** be appropriately credentialed **for a minimum of one year**. If a CI is credentialed for less than one year, the program must develop and document the implementation of a **plan for supervision of that CI by an experienced credentialed CI** that ensures the quality of instruction provided to the athletic training students.

**B3.43** not be currently enrolled in the athletic training education program at the institution.

**J1.4** The number of students assigned to an ACI or CI in the clinical experience component must be of a ratio that will ensure effective education and should not exceed a ratio of eight students to an ACI or CI in the clinical setting.

- The General Recommendations cited on page 10 are areas that we can discuss for future growth, some suggestions are very good.
  - Topic 2 answers our question about whether we can alternate students at PLHS (or anywhere else) to insure the 8:1 ratio, the implied answer is “No”.