



# **Executive Summary: Certified Athletic Trainers Succeed as Multi-skilled Hospital Workers**

**by Dondii Cummings, ATC, PA, March 2003**

**A Report from the Council on Employment**

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## **Overview**

The purpose of the primary research survey conducted by the National Athletic Trainers' Association was to determine the current and future job market and skills necessary for certified athletic trainers (ATCs) to work in a hospital work setting. Internal NATA evidence over the past five years had indicated both a growth in the number of and interest by ATCs working in the hospital work setting. Anecdotal evidence indicated that ATCs were attracted to hospitals because of increased job opportunity, career development opportunities, higher salaries and fewer work hours. The survey conducted supports these conclusions.

According to survey respondents, the potential job growth in the hospital work setting for ATCs is positive. Those currently working in the hospital setting indicated that they are using the medical, educational and athletic training specific skills acquired in their academic training. Additionally, ATCs have a diversity in daily job duties, which generally leads to greater job satisfaction because of the variety. The hospital job market will continue to improve as third-party reimbursement becomes more common and if Medicare reimbursement is approved.

The salaries for ATCs in the hospital setting are generally higher than those working in the high school or university athletic setting. Fifty (50) percent of respondents noted that salaries were in excess of \$41,000, and 26 percent reported that their salary was in the \$31,000-\$40,000 range. This compares very favorably to those in the high school and university athletic settings that averaged in the mid- to high-\$30s. The number of hours worked also benefits the hospital-based ATC. More than 60 percent reported working more than 40 hours a week, compared to their athletic setting counterparts who typically work more than 50 hours a week. While most respondents did not report why they preferred working in the hospital setting, 22 respondents noted that improved work hours were an attraction for employment in this setting.

## Summary of Data

The survey was sent to 775 ATCs who listed hospitals as their primary site of employment. Of those, 23 percent ATCs (177 people) responded to the survey. Of the total respondents, 16 percent (28 individuals) were dual-credentialed (ATC/PT). Sixty-seven percent (67 percent or 113 people) had less than five years experience as an ATC. Sixty-three percent of respondents (110) worked more than 41 hours per week, primarily between 41 and 60 hours weekly.

Of those in the hospital setting, 35 percent (62 people) said they were the only ATC at the hospital. Thirty percent (53 people) said there were two or three ATCs at their location, 15 percent (27 people) said there were four or five ATCs at the location. The balance said there were more than six ATCs.

The hospital market is potentially a good source of employment. About 62 percent (110 people) of respondents say there is room for additional jobs utilizing ATCs skills. About 34 percent (60 people) say their hospitals would not hire additional ATCs, and seven did not answer the question.

Salaries are always of interest. Of the respondents, 68 percent (120) are on salary, 27 percent (47) are hourly and the remaining 5 percent were on some other or combined form of compensation. Specific salary range information is:

- 10% reported \$20-\$30,000;
- 26% reported \$31-\$40,000;
- 21% reported \$41-\$50,000;
- 13% \$51-\$60,000;
- 10% \$61-\$70,000; and
- 6% \$71-\$80,000.
- The remaining 23 ATCs either reported under \$20,000 or over \$81,000.

Thirty-nine percent (or 67 people) identified their job duties as “rehabilitation; evaluate and treat; assess and refer; injury prevention; public relations; education—outreach,” while another 29 percent (49 people) listed the same duties as above but also included “triage of musculoskeletal injuries with evaluate and assess inpatients and outpatients.” One might assume that the former are outreach ATCs without physical therapy clinic responsibilities and the latter are more likely to work in the physical therapy clinic setting.

About 50 percent (90) ATCs were between the ages of 26-35, and 48 were between 36-45 years. Of the total respondents, 61 percent were male and 39 percent female. Master’s degrees were held by 60 percent of respondents, Bachelor’s degrees by 36 percent and the balance had Medical Doctor or PhD level degrees.

Only 32 percent (56 people) identified themselves as being state-regulated. This low number is cause for concern since 65 ATCs listed Districts 5, 6 and 9 as their residence and all of the states in those Districts are regulated.

## Comments from Respondents

The survey contained an open-ended question wherein 80 ATCs listed their comments and concerns. The largest area of concern dealt with reimbursement. Thirty-one (31) respondents commented that uniform reimbursement of athletic training services would enhance employment opportunities in the hospital setting. 147 of the 177 respondents noted that ATC utilization would improve with reimbursement. Seven ATCs noted the importance of Medicare recognition and reimbursement.

The next area of concern was the need for educational preparation in diverse topics such as rehabilitation (4 responses), pathophysiology (3), cardiac rehabilitation (3), ergonomics/safety/functional capacity (2), biomechanics, orthopedic technician, CSCS, geriatrics and PT Assistant. Four individuals indicated that dual credentialing was a preferred track to future employment.

Eleven (11) ATCs saw a corollary to diverse educational opportunities with their emphasis on alternative settings. They advocated for ATCs in emergency rooms (3), cast rooms (3), wellness centers (3) and physician offices (2).

Finally, nine ATCs noted that the current lack of awareness and education of hospital administrators, physicians and other allied health professionals regarding the knowledge/skills/abilities of ATCs remained as a barrier to employment in a hospital setting. The ATCs advocated education on the role and potential revenue generating capability of ATCs.

## Methodology

This was a primary research survey performed through the NATA with an internal NATA e-mail notification, Web-based survey and manual compilation of data. The research was designed to identify how certified athletic trainers (ATCs) are employed in hospital environments. The survey documents the actual job duties, employment conditions, necessary job skills and knowledge to secure a hospital job. The survey determined mandatory and optional educational requirements as conditions of employment.

The survey was to determine if and how many ATCs work purely in the outpatient rehab setting vs. some other untapped sources of employment. The survey was developed to mirror previous NATA primary research surveys as well as the original survey begun by Dondii Cummings for a Masters thesis as a physician's assistant.

ATCs were selected through the NATA membership office as those members who had listed themselves as "certified" with the subcategory of "hospital" as the primary work setting. The focus was on ATCs who were not dual-credentialed, although dual-credentialed individuals were included in the survey. The survey was performed through a convenience sample. While the majority of the 775 surveys were e-mailed to members, those with only a physical address were sent the survey via postal service. Results were returned to a special e-mail in-box to NATA and were manually compiled.

The raw data were reported to the Council on Employment Committee, which analyzed the results and wrote this executive summary. While the survey size is relatively small, the response rate is very acceptable. The survey is valid as a trend indicator and a reliable industry segment sample.

About NATA:

Certified athletic trainers (ATCs) are medical professionals who specialize in the prevention, assessment, treatment and rehabilitation of injuries and illnesses that occur to athletes and the physically active. The National Athletic Trainers' Association represents and supports the more than 30,000 members of the athletic training profession through education and research.

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