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1. Do you currently provide opportunities for students to gain experience in any of the below emerging settings? (Check all that apply.)	% of Respondents	Number of Respondents
Physician's office	31.56%	89
Hospital	15.96%	45
Performing arts	3.55%	10
Military	3.19%	9
Healthcare administration	4.26%	12
Public Safety	1.42%	4
Industrial	3.55%	10
Clinic—rehabilitation	31.91%	90
solidifying industrial in next months	0.35%	1
I do not consider these "emerging" settings. ATCs have practiced in these settings for a long time already.	0.35%	1
working on performing ARTS we just opened this Oct a brand new State of the Art Performing arts center, so working with the director to see if we can work something out but not as of yet.	0.35%	1
Experience needs to be operationalized. Do you mean observational or hands-on?	0.35%	1
highschool and university athletic training settings	0.35%	1
Chiropractic	0.35%	1
Action Sports / Rodeo / Surgical Observation	0.35%	1
Chiropractor	0.35%	1
Student Health Center	0.35%	1
professional sport teams, we have guest speakers from the performing arts (Rocketts) discuss their experience.	0.35%	1
intercollegiate athletics	0.35%	1
College Health Services	0.35%	1
Campus Student Health Center	0.35%	1
Number of respondents		102
Number of respondents who skipped this question		0

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2. Please identify any of the below emerging settings for which you would like to provide opportunities. (Do not include those identified above.)	% of Respondents	Number of Respondents
Physician's office	3.77%	11
Hospital	9.93%	29
Performing arts	21.58%	63
Military	19.52%	57
Healthcare administration	7.53%	22
Public Safety	14.04%	41
Industrial	18.84%	55
Clinic—rehabilitation	3.08%	9
again working on performing arts, also we have a College of Criminal Justice and Safety and the State Police Training Center is on our campus including driving and mock prison, so trying to work with our Dean of that college and training center staff to create an experience	0.34%	1
Emergency Medical Service (EMS)	0.34%	1
Emergency Care	0.34%	1
None	0.34%	1
Professional sports	0.34%	1
Number of respondents		102
Number of respondents who skipped this question		0

3. What kind of assistance (if any) do you need to establish a clinical rotation in an emerging setting?
1. Knowledge of experiences other educators & student have had working in these settings that include both positives, negatives, pitfalls, and precautions.
2. Help in areas of time and load would be the biggest issue
3. Access. Ideas on how to 1) have time to get students there (actual time).. 2) time within the curriculum.
4. Be in a different geographical location---its all about access
5. Nothing national. Just local connections.
6. Our rural location makes accessibility to these areas difficult. We would need to have an allied health care professional working in the performing arts setting in our area.
7. My limits in several settings are geographical locations. I have utilized all available settings.
8. TIME and MONEY! With all of the requirements set in the standards, to add another experience is considered excess. The economy in California and the extremely limited budget in the state university system has limited class offerings for students and having another option which requires time and travel (and cost for gas and parking) is not possible at this time.
9. To have ATs employed in those settings already
10. Collaboration with the setting administration. Currently we are trying to setup a clinical rotation with Professional sports team and they are not that open to providing that opportunity to people outside their organization.
11. I do not believe there is any external assistance that would help. To add a rotation in the industrial setting, we would need to have a business or company add a certified athletic trainer or allied healthcare professional to their staff. As far as the performing arts goes, we do not have a large enough performing arts center in town to support the need for a certified athletic trainer or allied healthcare professional.
12. Willingness of AT in that setting to agree to take on students or even summer interns.
13. Funding for students to drive (most likely over an hour each way) to emerging settings or an emerging setting AT closer to our campus.
14. Currently the settings do not exist where there is already a healthcare provider affiliated within the setting.
15. I need to identify clinical instructors in those settings and develop them.
16. There are no ATs employed in any of these settings, with the exception of "clinic-rehabilitation" within 50 miles of our school. Unless you have a way of transporting my students to the sites 50 miles away or bring these jobs to the areas surrounding my school, I don't see how we can offer these rotations for my students.
17. Not sure.
18. it would help to have the names of Athletic Trainers who work in those setting in our area. It would also be helpful to know if they are willing to have students work with them.
19. 1) Ideas for fundraising in order to provide students with gas money. We are limited as to where we can send students because of our rural setting. 2) Names of individuals who would be willing to act as liaisons or assist with contacting these settings. 3) Suggestions for how to establish connections.
20. Primary injuries in the settings, typical /customary treatment processes or protocols used in these settings; success stories
21. Finding settings in local areas

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22.	Develop clinical setting contracts, have clinical instructors become ACIs and to find a clinical instructor who is willing to entertain numerous AT students in a formal clinical rotation throughout an academic semester or year.
23.	This cannot be mandated by the EC, nor will any assistance help. It depends on availability in the area of the ATEP. Personally, I refuse to require any time in many of the 'emerging settings' listed above. Our undergrad students have enough on their plates without including details of settings such as "public safety" or "industrial". We need to help our students learn the basic, entry-level AT skills and knowledge, then let THEM or the CAOs in the future provide them with the myriad details of the hundreds of possible 'settings' they could potentially be employed in. We're (ATEPs) are spread TOO thin already. It's not even an "inch deep and a mile wide", as we're closer to 1/2 an inch deep and two miles wide with the current content. PLEASE quit adding new peripheral competencies - such as Business Planning....
24.	gas money, funds, opportunity
25.	Identifying health care professionals in those settings willing to take students on to educate them. Informing non-AT practitioners how an AT student might learn in their settings and why that is important.
26.	descriptions of current situations that programs are utilizing
27.	Certified working with those groups in the area.
28.	connections to establish these affiliations, funding to pay CI to complete supervision
29.	Contacts in the immediate area of the university
30.	Closer proximity to those settings
31.	required payment of clinical instructors
32.	There are currently no industrial ATC's in our area. I had a military site set for my students, however, the University and the Department of the Navy could not agree on the contract.
33.	Staff supervision of the student
34.	Introductions to individuals in those settings.
35.	Tools/packets that can be sent to physicians and administrators at different locations to assist in educating them on the role of athletic trainers and the benefits of a collaborative relationship.
36.	There are no additional opportunities in the other settings listed in this region.
37.	Need help finding what clinical opportunities are geographically close to our campus and need help finding those that are willing to supervise students.
38.	The largest challenge is the availability of such sites close to our location. It is difficult to manage sites and ACIs from a distance due to the nature of affiliation agreements, site requirements, ACI training, etc. If the standards made it easier to establish distance sites, there would be many more opportunities to offer these non-traditional experiences.
39.	ATs in the area who practice in these settings.
40.	Just establishing a relationship.
41.	A clearinghouse of regional contacts in these settings would be useful. Development of summer internships at these setting would also be of interest to our students.
42.	none. we are limited to access based on where we are located
43.	financial resources, (faculty and/or clinical AT)
44.	How to overcome HIPPA and privacy laws in a restricted state.
45.	General Medical settings provide the biggest challenge due to privacy issues with patients.
46.	Biggest challenge is that our hospitals will not sign an affiliated site contract to allow our students onsite. Having a designated contact person at that site and communication with the CEC of the ATEP but not requiring a contract for students that just observe at a hospital ER room would allow us to expose our students to this setting.
47.	There has to be someone who can act as an ACI. Without that, it's no help to our program.
48.	contacts for mentoring people in like locations
49.	location, location, location - not much can be done if no one is practicing in that setting at a location near our institution, our we don't have access to that setting near our institution
50.	We are unlikely to establish a clinical rotation in those settings but rather bring the clientele to us as we have done in the past.
51.	identifying sites willing to work with us and deal with affiliation agreements
52.	Access to key people willing to supervise the athletic training students for no compensation.
53.	I have no access to either of the desired settings in my area. There should be no move to require these different settings for accredited programs either. That would shut down a lot of programs. These opportunities are nice if available, but not necessary to educate future athletic trainers. Not to mention the main focus of athletic training education should be on traditional settings.
54.	understanding on the part of potential providers that our students are health care students just like other professions
55.	More healthcare providers in these settings.
56.	We are simply trying to establish a contact person.
57.	contacts in the area - AT's practicing in that setting.
58.	Difficult to find appropriate clinical sites within a realistic distance to campus. Working to find funding for more focuses field experience opportunities that could be made available during semester breaks and summers where students could have a shorter more intensive experience. Strictly field experience with supervision - would not assess clinical learning in these settings.
59.	Do not really need assistance just need to find a close site to place students
60.	acceptance of athletic trainers as health care professionals by groups that have traditionally discriminated against us.
61.	Availability.
62.	Biggest need is to first get a staff position at both of those sites the State police training center and our criminal justice and safety which is a Program of Distinction in our State that means no other state University can have that college. So funding a Full time AT or several GAs for the officer training division would be great. Performing arts also need to find a way to integrate student experience however currently the new state of the art facility just opened and not a regular home to a ballet or other performing group. But I am working and opening lines of communication with the centers director. I am also reaching out to the groups coming like Cirque to see if their AT could do a guest lecture and back stage tour for our AT students as a start.
63.	Willing CI/ACIs and willing businesses

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64.	Qualified health care professionals that work in these settings in our rural area	
65.	We have a lot of competition with other local ATEPs who have already established relationships with some emerging settings and we aren't allowed "in."	
66.	I am looking for a place to find people names and contact information so I can talk with them and see if it is possible to set up a clinical contract in these settings.	
67.	None: there are no opportunities in this setting within our geographic region. If this is added as a clinical rotation, our program would struggle significantly to meet this requirement.	
68.	Non traditional settings are unaware of the AT profession and our scope of practice, and therefore hesitate or refuse to agree to a contracted affiliation. We need to better promote the profession and scope of practice in non traditional settings	
69.	Participation from facilities and patients Proximity of sites to schools	
70.	It would be support at the local level. Schools that don't have a specific setting located in their area have a greater challenge. Maybe setting up an exchange network where schools could 'swap' settings for winter intersession, summer, etc exchanges?	
71.	Contact and opportunity	
72.	Certified Athletic Trainers that currently work in the setting. For example - Industrial setting - there is no current ATC working for the setting, therefore I cannot place a student within the setting. Fort Leonard Wood - I attempted multiple times to set up a site agreement, but then the shooting at Fort Hood took place - they then denied our agreement. They since have had a change in leadership, and the new Colonel doesn't see the need. There will be 14 programs in Missouri, and there is only 2-3 bases in Missouri.	
73.	Position statements or data showing the benefit of an Athletic Trainer in those emerging settings.	
74.	The primary limitation is geographical (industrial and performing arts). Regarding hospital experiences, it would be helpful for the NATA to target hospital administrators for education regarding the AT profession. Our rural hospital does not feel that AT students should be allowed to be there mainly because they don't understand the profession.	
75.	Helping us identify specific emerging clinical settings within our immediate geograhic region (i.e., 50 mile radius) that employ properly trained and credentialed healthcare personnel in those areas I identified in question #2 above.	
76.	Willingness of health care administrators and availability of an AT in the industrial setting that is willing to teach our students.	
77.	We would need to be located close enough to an industry or to a professional sport team for students to get to that venue.	
		Number of Respondents
		77
		Number of respondents who skipped this question
		25