Vision Quest Background, Mission and Process

Vision Quest was initiated in 2010 to create an aligned vision and set of goals for the athletic training profession. The vision and goals will be implemented through both coordinated and individual strategic activities undertaken by the four major stakeholder groups of the profession – the National Athletic Trainers’ Association, the Board of Certification, the Commission on Accreditation of Athletic Training Education and the NATA Research and Education Foundation. The Vision Quest charge was to be aspirational yet grounded in reality, and provide unqualified direction for the future of the profession into the 2020 decade. The consensus process was designed to address some of the most complex questions facing the profession in the dynamic field of health care delivery in the United States.

Vision Quest is critical to the future success of the profession. Equally imperative was that the Vision Quest thoughtfully review and address the profession’s historical roots and how those roots integrate into the future. The Vision Quest Group comprised individuals in key leadership positions who could represent and speak for all facets of the profession and others who had unique perspectives on the profession because of present or past contributions. The group worked to develop a complete, specific visionary plan for the athletic training profession, a values statement for the profession’s future, and an action plan that will guide the stakeholder groups with their individual strategic plans.

Vision Quest evolved over a 14-month period during which the VQ Group attended seven webinars, one face-to-face meeting and a final action-planning meeting attended by the leaders of the four stakeholder organizations. A final VQ Group webinar meeting was held Feb. 4, 2011, at which the full report was approved. The webinar was open to all board members of the stakeholders groups. The final report was subsequently sent to the stakeholder boards for their consideration. The VQ process was guided by Edward O’Neil, PhD, MPA, FAAN, of O’Neil & Associates. O’Neil was chosen for his extensive expertise in the health and nursing
professions and health care delivery system under the challenges of health reform. O’Neil’s credentials can be found in the complete report.

O’Neil provided the VQ Group with an environmental scan of the changing health care and educational environment. He designed the consensus process for considering these changes by the athletic training profession’s leadership and constituents, and then assisted the VQ Group in translating these considerations into individual yet coordinated plans for strategic action.

A primary guiding question facilitated the development of the integrated action plan: “Can the broad vision be achieved within the scope of practice that defines the profession today?” The broad vision was defined as positioning athletic trainers in health care delivery models where they can fully utilize their knowledge, skills and abilities.

**Report Highlights**

1. Vision for the athletic training profession:

   *Athletic trainers are integral members of the health care, wellness and sport communities, fully utilizing their knowledge, skills and abilities in the delivery of athletic training services that benefit the health and wellness status of our nation.*

2. Vision Quest recognized that the identification of the degree associated with professional preparation is within the domain of the individual institutions housing the educational programs. Some baccalaureate programs may choose to transition to an entry level master’s program. Regardless of the degree offered, professional preparation must involve an educational program that is responsive to changes in both curriculum content and professional practice.

3. Because of the Accountable Care Act of 2010 (i.e. health care reform), increasing value is attributed to clinical athletic trainers **gaining additional practicum certificates that provide employers and patients additional value** and which sustain a new emphasis on patient-centered care. Other post-professional specialties, whether obtained through residencies, narrowly focused skills certificates or certifications outside of the AT profession, are supported. This premise embraces the profession’s culture of life-long learning.

4. Master’s degrees in athletic training may become focused on specialties while others may remain entry-level. For example, specialties may be: pediatric, seniors or performing arts patient populations; physician extender or wellness specialties; or some injury- or disease-based specialties.

5. **The title of athletic trainer will remain until the 2020 decade.** Athletic trainer is not a completely satisfactory descriptor, yet there is no agreement among our constituents on what other name terminology would be better. While an acknowledged misnomer, the athletic trainer title is ingrained in state practice acts and continues to gain national recognition among consumers, policy makers and employers.
Identified Vision and Strategic Priorities

The Vision Quest Group focused on four strategic goals with each goal having broad strategic priorities. As a result of the VQ process, which was intended to have ample time for reflection and interaction, four priorities were identified as necessary to secure the future of the profession in this and the 2020 decade.

**Strategic Goal #1: Scope of practice and appropriate terminology**

First and foremost, athletic trainers are health care professionals. This topic has multiple layers and complexities because of the profession’s history, culture and transformation. Extensive consideration was given to the profession’s place in sports medicine and its practice relationship with physicians. Patient population and work settings were thoroughly discussed. The current scope of practice is generally sound but more emphasis should be placed on serving all patients across the age span. In particular this means senior persons, and patients and clients not typically considered athletes.

Strategic Priorities:

- Harmonize state practice acts using common language.
- Ensure athletic trainers can practice to the fullest extent of their scope of practice.

**Strategic Goal #2: Degree requirements and quality of the athletic training education programs.**

The professional degree must be based on and consider patient needs, content changes and market needs. The baccalaureate degree meets these needs at present. According to a recent Institute of Medicine report, “…educators and accreditation, licensing and certification organizations should ensure that students and working professionals develop and maintain proficiency in five core areas: 1) delivering patient-centered care; 2) working as part of interdisciplinary teams; 3) practicing evidence-based medicine; 4) focusing on quality improvement; and 5) using information technology.

Strategic Priorities:

- Athletic training education programs produce qualified, health care providers sought out and valued for their unique skill set.
- Athletic trainers are prepared to provide health care services throughout the continuum of care and age span.
• Post-professional education and specialty certificates will support the education and training of advanced practice clinicians and athletic training scholars.
• Degree requirements will be continually evaluated and revised contingent upon the health care market.

**Strategic Goal #3: Practice position, employment, and reimbursement**

Four athletic training practice models will exist concurrently. The models are: 1) the school-based/team-based model; 2) third-party payer model; 3) employer-based model; and 4) cash model. For each model, the profession must continue to define—or redefine in some cases—the culture of the profession so that athletic trainers identify themselves as health care professionals and others around them acknowledge this identity first and foremost. Creating a stronger, more unified identity will move the profession toward parity with other health care professionals and improved access for patients. This enhanced, more unified professional identity supports efforts surrounding scope of practice and appropriate terminology issues. If there is unified agreement among the stakeholder groups and every athletic training professional, the scope of practice and terminology issues become less ambiguous to the external world of patients, employers, policy makers and competitors.

**Strategic Priorities:**

• Remove barriers and solidify positions of athletic trainers as health care professionals among employers, patients and public.
• Improve patient and client access to athletic trainers.
• All U.S. high schools with athletic programs have an appropriate number of full-time athletic trainers to meet the health care needs of the respective school enrollment and programs.
• Increase/improve the value of athletic training services to patients, clients, employers.

**Strategic Goal #4: Clinically relevant research as an integral part of practice and practice model development**

The Vision Quest Group places a high value on research, which it believes is an absolute requirement for the profession to succeed in this and the next decade. Both individuals and stakeholder groups agree that research is critical to the practice and growth of the athletic training profession.

**Strategic Priorities:**

• Focus on comparative effectiveness research and evidence-based practice.
• Establish the infrastructure to support research.
• Establish regional research partnerships.
• Assess and pursue grant opportunities and other relevant activities.
Conclusion

The stakeholder leaders called for a consensus approval from the Vision Quest Group on its final Webinar on Feb. 4, 2011. With a few modifications, which are included in the final report, consensus was reached, and the final report was officially referred to the boards the National Athletic Trainers’ Association, the Board of Certification, the Commission on Accreditation of Athletic Training Education and the NATA Research and Education Foundation. It is anticipated that the four boards will review the final report in the spring 2011, and approve directions and actions. Implementation of the recommendations and action plans may begin after each board has provided its approval and directions.

Signed below as a sign of consensus and with great respect and gratitude to the individuals on the Vision Quest Group who made this project and document a reality.

Most sincerely,

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