Secondary School Value Model
Principles and Best Practices for Defining Worth and Value of Athletic Training Services in the Secondary School

Published January 2021


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### Disclaimer

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Overview
There are several key terms that all athletic trainers (ATs) need to know, understand and implement in their daily practices throughout their careers. Unfortunately, business terms are sometimes intimidating, forgotten or not a top priority. While it is not necessary that all ATs know how to run a business, it is imperative that they understand four basic terms and their impact on daily practice.

The terminology below will help ATs in the secondary school setting build a basic foundation of business knowledge. This will be especially important with the evolving health care spectrum that will influence consumers, schools and communities. For ATs looking to advocate for employment, expand a role or request a raise, these concepts are critical for understanding and integration into discussions and requests to employers.

Terminology

- **Worth**: The monetary cost of a service.
- **Value**: The extent to which a service’s worth is perceived.
- **Revenue**: Compensation associated (directly or indirectly) with providing service.
- **Reimbursement**: Payment for providing an athletic training service.

Purpose
The purpose of the Secondary School Value Model is to:

- Quantify, articulate, provide outcomes and objectively demonstrate why ATs are vital health care service providers.
- Educate ATs on the importance of putting a worth to their services by outlining regional and national industry norms for service.
- Educate ATs on the importance of building a positive perception in the value of their services within the community once there is a “worth” attached to those services.
- Provide resources for ATs in the secondary school setting that will outline worth of services, value assessments and opportunities for growth.
- Provide the basic principles with which secondary school ATs can quantify and articulate their value within their schools and communities.
- Provide a presentation template to help secondary school ATs educate administrators, schools, communities, outreach program personnel and parents on the worth and value of athletic trainers in this setting.
- Provide an educational resource for Athletic Training Education Programs (ATEPs) to give athletic training students a better understanding of their worth and value as ATs and health care providers.
- Demonstrate a need for outcomes and evidence-based practice in the secondary school setting that will ultimately provide standards of care, revenue and reimbursement within health care.
PART ONE: UNDERSTANDING THE BASICS OF WORTH

Having solid monetary “worth of services” is necessary in setting the basic standards of payment. Once there is an understanding of the “going rate” for service within the industry, then discussing contracts, hours within the contracts and services being provided will lead to an understanding of the “typical payment” associated with these services.

While most schools will not pay $93,600 ($45/hr/FTE) per year for an AT, understanding worth will give the AT an edge in negotiating a salary above $30,000 ($11.54/hr/FTE). Doing so helps to build the school’s perceptions of AT service, which will help schools determine the “value” they are willing to place on, and subsequently pay for, such services.

Medical Hierarchy

As an allied health care provider, it is important for ATs to differentiate themselves from others within the athletic department. Are there other allied health care providers within the school or school district? Could a reporting structure be established so that the AT reports to a health care provider and not to someone inside of the athletic department?

Job Description

A comprehensive job description is an easy way for ATs to share the value they bring to an organization. It is recommended that ATs review their job description annually and update to reflect any new or additional job responsibilities as part of their role. The addition of new responsibilities to the AT’s job description provides opportunities for the AT to request increased compensation.

A template job description for the secondary school AT can be found here.

Considerations for Job Descriptions (should include, but is not limited to the following list):

- Qualifications for the athletic training position such as Board of Certification number, state licensure number and valid NPI number (as required).
- Assist in evaluation, treatment and physician referral for all student-athletes at practices, games and tournaments (high school and junior high).
- Provide emergency care for patient injuries.
- Provide, develop and implement rehabilitation protocols for injured patients as well as protective techniques and devices as needed.
- Attend athletic practices and games as assigned and help with the day to day operation of the athletic training facility.
- Assist with pre-participation exams as required.
- Assist with concussion protocols/testing and record keeping to maintain accurate records regarding patient progress.
- Maintain accurate electronic medical records (EMR) regarding student progress and injury reports.
- Establish and maintain effective communication with students, parents, staff and other stakeholder groups.
- Ability to recruit, train and supervise student athletic training aides.
- Ensure personal accessibility for “on call” support as assigned.
- Maintain a clean and organized professional working environment.
- Participate in school wide professional development and faculty meetings.
• Provide professional development opportunities or trainings.
• Other duties as assigned.
• Organize and maintain sufficient supplies to support program needs.
• Electronic medical record system to maintain accurate records regarding patient progress.
• Establish and maintain effective communications with team physician.
• Develop, implement and practice emergency action plans (EAPs) with stakeholders. Keep documentation of drills and annual review of EAPs. See NATA’s Position Statement on Preventing Sudden Death in Sports; guidelines for development of a mental health EAP; and additional resources on emergency action planning in secondary schools.
• Create and implement a policies and procedures manual or operations manual.
• Teach CPR classes to coaches or to all faculty.
• Use the Secondary School Value Model to enhance worth and re-examine the current program for opportunities to strengthen the AT’s worth and value.
• Bi-annually participate in the Athletic Training Location and Services Project (ATLAS) to contribute data for research and advocacy in the secondary school setting.
• Utilize NATA’s Program Assessment for Safety in Sports (PASS) as a resource to evaluate the status of your facilities and procedures to inform use of resources and focus efforts going forward.
• Initiate involvement with risk management or campus safety team. Work with administration for safety measures school wide or within athletic department. Examples include: infectious disease protocols, concussion return to school policies, emergency response procedures, etc.

Setting the Worth Standards
The AT is their own greatest resource when it comes to promoting their services as a health care professional. The categories and best practices outlined in this document will help the AT create a position that meets their individual needs and the needs of the school. These concepts will also help ensure quality health care is available for patients while giving the AT an understanding of how to prove worth and eventually assign value to their services.

Considerations for setting worth standards include third party reimbursement, secondary insurance contracts and cost of medical care that is being provided. National average for services varies across the country. ATs should reference their local health care billing averages to acquire hourly rates for event medical coverage.

Services – “Not for Free”
As a professional, the AT needs to take a stand on the importance of service and the value the AT brings to consumers. It is imperative that the AT respect their knowledge and educational certifications and abide by their state licensure/registration standards. Therefore, it is also necessary that the AT assign worth to athletic training services and the value ATs bring to individuals, schools, communities and businesses.

Remember, services that have no worth to someone are of no value. Each time an AT agrees to “give away” services, whether in coverage, skills, knowledge or hours, it becomes more difficult to show a true value of expertise.

Considerations for ATs employed at schools/school districts to present to administration include a tiered salary similar to teaching salaries. Consider opportunities to unionize similar to teachers. Use the
NATA Salary Survey for comparable salaries within your district. If stipend pay is an option in a school district, ATs should request a three-season stipend, similar to teachers who coach multiple sports and receive multiple stipends. Another consideration is the volume of teams for which the AT will be responsible. Stipends are typically distributed by team, so if athletic training responsibilities will be for multiple teams, consider requesting multiple stipends per season.

Regardless of how the AT is paid, they should be sure to compute their hourly rate and ensure they are at fair market value for their time as compared to their pay. Keeping track of hours worked may be used to show any employer the actual time spent in attending to job responsibilities, which may be more than the employer expected or is aware of.

Overtime – Time and a Half; “Not for Free”
Most workers are classified as either exempt or non-exempt, depending on their salary and the type of work they do. The federal Fair Labor Standards Act (FLSA) requires that, in addition to paying at least the minimum wage, employers also must pay overtime to employees who work more than 40 hours in a given workweek, unless they meet certain exceptions. To complicate matters further, many states have wage and hour laws that may have more requirements than the FLSA. Employers must make sure they abide by both federal and state wage and hours laws to avoid legal trouble.

Timesheets are the easiest and most effective way to keep track of your hours worked and generally provided by the employer. For additional documentation purposes, consider keeping track of what you were doing during that time, whether it is administrative work, rehabilitation, practice coverage or event coverage, etc.

Definition of a Non-Exempt Employee:
Most employees are entitled to overtime pay under the Fair Labor Standards Act. These workers are considered non-exempt. Employers must pay them one-and-a-half times their regular rate of pay when they work more than 40 hours in a week.

The biggest problem most employers have with non-exempt employees is miscalculating how much overtime pay workers are owed.

Definition of an Exempt Employee:
The Fair Labor Standards Act contains dozens of exemptions under which specific categories of employers and employees are exempted from overtime requirements. The most common are exemptions for administrative, executive, and professional employees; computer professionals; and outside sales employees. There is also a lesser known exemption for certain retail or service organizations. The primary advantages of classifying employees as exempt are that you don’t have to track their hours or pay them overtime, no matter how many hours they work.

Obviously, this is an appealing scenario for employers. However, exemptions from the overtime requirements of the FLSA are just that — exceptions to the rule. They are very narrowly construed, and the employer will always bear the burden of proving that employees have been correctly classified as exempt.
Contracts – How to Write and Stay within Contract Specifics

Outlining each service provided to the school will bring a better understanding of the hours needed to offer the elite services necessary to keep the school’s patients safe. It will also allow the school to determine how to pay for these services. For example, if an AT is providing morning rehab to patients, it may be an opportunity for the school to look at ways to collect reimbursement on that service line. This will help the AT continue to show the worth of their position and, eventually, demonstrate more value.

Contract Considerations:

- Outline each service provided, such as:
  - Concussion testing
  - Documentation/record keeping
  - Rehabilitation
  - Assessment
  - Injury prevention
  - Treatment
  - Education
  - Game preparation
  - Event/practice on-site medical care
  - Administration work – weekly, monthly, seasonal trends, etc.
  - Teaching classes
  - Oversight of student club
  - Performance enhancement training
  - Off-season conditioning

- Assign a worth to each service listed – check local industry standards to determine this amount.

- Consider requesting other employer-provided benefits such as tuition assistance, reimbursement for continuing education and membership dues. These are tangible things that benefit both you as a professional and the school by supporting your professional growth, ensuring you have access to the latest resources and that you are abreast with the most up-to-date best practices in health care.

- Reference the CPT codes most often used by ATs when billing for services. Use these codes to compare hourly rate for comparable professionals in your area or region. What is the cost savings to have an AT at the school versus a PT or other health care provider?

- Another thing to consider is length of contract – are you employed and paid for the entire calendar year or is your contract a 10-month contract? Are your paychecks issued for 10-months only or spread across the 12-month year?

References

Documentation – Logs, Statistics

Documentation, aside from providing a record of evaluation findings, status notes and legal record of actions taken, is an important tool in demonstrating value. Implementing basic documentation and tracking standards to outline athletes, volumes, treatments, seasons, sports and budgets will allow for a better understanding of daily, monthly, seasonal and annual services that are being provided. Once those statistics are available, putting a worth to the individual service is easier and allows for specific and global worth.

There are many programs, devices and web-based services (see Documentation Resources below) that can allow for efficient documentation processes and standards. Whether using programs or manual data collection, it is imperative that all records meet standards set by your overseeing physician. Clean and detailed data are the most efficient ways to assign a “worth of service.” Appropriate record keeping is necessary to show value to the athletic training services that are provided. While investigating an appropriate record keeping process, areas to consider should include:

- Daily sign-in sheets
- Injury evaluations
- Communication logs
- Treatment logs
- Hours worked
- Hydration logs
- Weight logs
- Daily injury notes
- Coaches’ notes
- Parents’ notes
- Nurses’ notes

Documentation Resources:

- ATs can complete documentation at no cost simply using Excel or Google Sheets.
- Documentation the Fuels Research:
  - High School Recording Injuries Online (RIO)
  - Datalys High School National Athletic Treatment, Injury and Outcomes Network (NATION)
- There are many paid platforms that ATs can use to document. Consider budget and needs to determine the best fit.

References:

- Best Practice Guidelines for Athletic Training Documentation
- Position Improvement Guide, Chapter 12 – Improving Policies/Procedures in your Athletic Training Program.

Outcomes – Telling the Story

Health care is an outcomes-driven market. Consumers will continue to drive the need for outcomes data to explain why they value a service. ATs have not only an obligation, but an opportunity to tell the story of the efficiency in their services, care and outcomes. Comprehensive documentation and statistics are necessary in telling that story.
Secondary school outcomes will be encompassed in areas that provide the most value to the school and community: decreased absenteeism, decreased lost game days, increased participation in school, decreased parental concerns and increased student/athlete plan compliance, just to name a few.

Showing the data and outcomes of athletic training services creates an opportunity for others to better understand the scope of health care provided by ATs, which will lead to “value added” services.

**Industry Standards – Service, Worth & Opportunities**

Refer to the *Position Improvement Guide* for more details on actual worth standards. This is a document that is housed separately in the SSATC Toolbox on the NATA website, as it is continually evolving.

**PART TWO: BEST PRACTICES FOR DEMONSTRATING WORTH OF THE SECONDARY SCHOOL ATHLETIC TRAINER**

Secondary school ATs provide comprehensive athletic health care services, not just “coverage” at athletic events and practices. Furthermore, it is imperative that ATs not only understand the worth of their services, but also communicate this to school administrators.

Consider, what do others across the country do to demonstrate their adherence to best practices? What do ATs charge for the services that are provided to patients in the athletic training facility? What is the comparable worth of the services provided at school throughout the year if the students had to go off campus to receive the same services? These are important questions to ask each month, semester, season and year. Knowing others’ services, best practices and rates will allow ATs to understand how their rates compare and then how to improve their worth and value.

The individual AT is their own greatest resource when it comes to promoting their services as a health care professional. The categories outlined below can help ATs accomplish the objectives outlined above.

**References:**

- This value model infographic could be of benefit when reporting AT value to your school district.
- Watch and Learn - *Making the Transition from Invaluable to Valuable: Demonstrating Your Worth in an Athletic Training Setting Webinar*
- *Appropriate Medical Care Standards for Organizations Sponsoring Athletic Activity for the Secondary School Age Athlete*

**Demonstrating Worth through Medical Services**

**Injury Evaluation, Treatment, Rehabilitation and Reconditioning**

Within the secondary school community, the AT is often seen as the primary health care provider. In today’s secondary schools, ATs are approached by active patients, out-of-season patients, coaches, faculty, regular students and club sport athletes for all conditions from acute injuries to sore throats. The AT is unique in that they can be helpful in the secondary school setting to treat the diverse patient population effectively.
Performing services during the school day (during the athlete’s gym class, study hall, etc.) allows for decreased absenteeism, increased compliance, as well as family “buy in,” resulting in fewer absences, reduced out-of-pocket expenses and added family convenience. This is a measurable way to demonstrate worth of athletic training services.

**Best Practices:**

ATs should track patient encounters, showing money saved, improved class attendance, providing injury care by the right provider, which in turn will decrease absenteeism, increasing compliance, etc. ATs can calculate conservative cost savings using CPT codes on a traditional Medicare Fee Schedule. Show improved class attendance by tracking injury care “in-house.”

- Documentation of population served, utilizing the same documentation standards for all patient sectors:
  - Active patient
  - Faculty/staff members and family
  - Club sport athletes
  - Intramural participant
  - Physical education student
- Documentation should include:
  - Injury evaluation
  - Number of evaluations per month/season/school year
  - Time loss vs non-time loss
- Economic impact on parents and employers.
- Value as perceived by parents, student, administrators, coaches.
- Data analysis of on campus cost as compared to local health care providers.
- Worth of services provided for injury rehabilitation and reconditioning on campus.
- Value of providing injury rehabilitation and reconditioning on campus.

**Injury and Crisis Management**

In secondary schools, the AT and school nurse should work together to provide a continuum of health care services for the student population. ATs should take an active role in helping during episodes of campus-wide health matters with any infectious disease including, but not limited to, MRSA, influenza, COVID-19 or meningitis. Many ATs serve on school safety or risk management committees and can sometimes be seen as the primary health care provider in secondary schools that do not have a “traditional” school nurse. Being the only health care provider for patients after school hours, including weekends and holidays, ATs need to have a full working knowledge of all crisis management strategies and should provide input on how to decrease potential risks.

**Best Practices:**

- Develop and utilize an emergency action plan (EAP).
- Design and implement venue-specific EAPs for athletic facilities and population.
- Consultation on public health concerns such as:
  - Skin infections related to athletics
  - Infectious diseases
  - MRSA
  - Hydration
  - Performance enhancing supplements
• Development of infectious disease policies and procedures for athletic population.
• Triage of simultaneously-occurring emergency injuries.

**Care Coordination**

ATs are asked by the many populations that they serve for referrals to other medical professionals for services. This creates a network of health care providers who students, staff and associated personnel can rely on. Because ATs are skilled at coordinating medical care in addition to providing it, they are a valuable resource to the patients under their care. Working directly with their appointed medical advisory board may be one way to show worth of services. It is important to come up with a process to utilize other health care professionals on campus and determine at what point these services should be considered as a referral outside of the school. Utilization of school nurse, administration or counselors is imperative to showing value to the school.

**Best Practices:**

- Understanding standard fees versus contracted fees.
- Facilitate appointments and referrals for the following:
  - Nutritional counseling
  - Mental health
  - Psychological counseling
  - Grief counseling
  - Family relations
  - Group counseling
  - Catastrophic event counseling
  - Dental services
  - Vision screening
  - Glasses/contacts
  - Cardiac screening
  - Massage services
  - Chiropractic services
  - Long-term concussion treatment
  - Vestibular rehabilitation
  - Neuropsychological counseling

**Injury Prevention Programs**

ATs in secondary schools develop injury prevention programs tailored to many different medical conditions for the populations that they serve. In these efforts, the AT plays an essential role, as it is their duty to keep athletes healthy and on the field, which enables these athletes to have a higher quality of life and academic experience by limiting doctor visits, surgeries and associated medical costs. Prevention is a key area where the secondary school AT contributes to the well-being of the student, the athletic department and the school.

**Best Practices:**

- Educate students, staff and parents about injury prevention.
- Facilitate strength and conditioning programs in partnership with (if available) a qualified strength coach. Rehabilitation programs would be directed and supervised by the AT.
- Ensure safety equipment fitting, maintenance and education is completed appropriately.
- Provide information about dental protection (mouth guards; custom, boil & bite).
• Perform preventative taping and/or bracing.
• Fit helmets and related protective equipment and padding (football shoulder pads, lacrosse equipment, hockey, etc.).
• Ensure all athletes undergo a comprehensive medical screening/PPE prior to the first practice.
• Create cardiac screening protocols.
• Offer orthopedic and movement screening.
• Offer functional analysis.
• Develop ACL prevention programs.
• Perform body composition testing.
• Perform Concussion Baseline Neurocognitive testing.
• Create and implement programs for heat illness prevention.
• Oversee weight management programs/certifications.
• Develop and oversee infectious disease prevention protocol with regards to athletics and athletic arenas/equipment/personnel.
• Conduct facility safety review.
• Attend preseason athletics meetings to introduce yourself and the AT profession.
• Educate coaches, parents, patients and others through safety education programs.
• Provide CPR/AED/first aid training.
• Develop concussion education programs.
• Offer steroid and performing enhancing drug (PED) education.
• Create and implement injury prevention strategies.

Pre-Participation Physical Exam and Medical History
The secondary school AT helps ensure the continued health of the patient. This is accomplished by:

• Verifying all medical clearance paperwork is compliant with state and local standards;
• Performing a thorough review of each athlete’s medical history;
• Documenting new injuries or illnesses that the athlete’s report.

Once reviewed, documentation and implementation of programs and processes to rectify concerns is necessary and demonstrates the importance of preventative measures for everyone’s health care needs. This will be tracked via documentation that should include medical history, general medical and orthopedic assessment. The patient should also have concussion baseline testing prior to practice/competition, in accordance with state law.

Best Practices:
• Utilize the American Academy of Pediatrics (AAP) Pre-participation Physical Evaluation Monograph for guidelines.
• Mitigate risk by reviewing each patient’s information, noted on-going health concerns and risk factors, and communicating these with appropriate persons. Ensure necessary response medications are readily available.
• Comply with local and/or state athletic/activity association requirements.
• Comply with professional standards.
• Identify predisposition for injuries/illnesses, which could lead to athletic and educational time-loss. Develop protocols to minimize risk.
• Identify pre-existing unidentified injuries/illnesses (asthma, previous injuries, etc.). Ensure appropriate measures are taken to respond appropriately.
• Manage and comply with HIPAA/FERPA regulations.
• Conduct neurocognitive baseline testing.
• Complete hydration testing and wrestling weight certification.

Emergency Action Plans (EAPs)
The secondary school AT should serve as the liaison between the athletics department, school administration and local governmental authorities to set protocols for medical emergency management. The AT should ensure that every member of the athletics department staff understands how every conceivable medical emergency will be addressed.

Best Practices:
• Work with appropriate sports medicine team, secondary school personnel and public safety agencies to create and implement venue-specific EAPs.
• Coordinate regular reviews and training of EAPs. Document when training is completed and who attended.
• Ensure compliance with professional standards, local law, state practice acts, etc., as they are relevant.
• Mitigate risk by thinking through swift and thorough responses to a variety of emergencies, potential barriers or scenarios that would pose barriers, and reviewing the process each time the EAP is used.
• Coordinate emergency medical services (EMS) event coverage.
• Verify appropriate EMS access in new facility designs.

Injury Records
Within the secondary school environment, the AT is the individual best suited to recognize injury trends. Proper record keeping will assist in justifying suggested changes in training, practicing, warm up or even competition techniques for each sport program. Proper documentation of records will justify the treatments provided, needs for equipment, needs for change and even needs for compliance.

As health care progresses further in accountable care organization, evidence-based medicine and outcomes driven care, it is imperative that the AT set, review and react to these documentation standards and records.

Best Practices:
• Be aware of risk management strategies and standards.
• Practice evidence-based medicine.
• Ensure positive sports medicine team relations and communications.
• Establish athlete support group communications that include parents, coaches and school nurse.
• Develop, utilize and annually evaluate/update appropriate standing orders.
• Ensure compliance with state medical and educational regulations.
• Utilize injury records for injury surveillance to identify:
  o Injury trends
  o Drills and techniques with increased risk
  o Risk related facilities
  o Proven outcomes
Team Physician Services
Forty-nine states have regulation(s) in place which shape the parameters of the athletic training profession. Oftentimes patients require medical procedures that are beyond the scope of an AT. In these situations, the AT coordinates referral of patients to outside physician/physicians, including orthopedists, surgeons, general medicine physicians and others. Often, the AT is responsible for cultivating these relationships and ensuring that team physicians provide timely, effective and efficient medical care to the students, staff, and associated personnel. Without these relationships and resources cultivated by the AT, the patient and others may not receive the same quality of care. These relationships with local physicians will allow better access to physicians and, at the same time, will help reduce wait times for appointments, eliminate unnecessary visits, reduce missed class time, etc.

Diagnostic Testing
In many cases, ATs can utilize their evaluation and communication skills to prevent unnecessary diagnostic testing. When diagnostic tests are necessary, aligning school districts and athletic departments with outside medical providers can prove beneficial. This can be accomplished either with informal, mutually beneficial agreements or legally binding contracts to provide services. In such instances, ATs can become a large part of, or in some case the exclusive school representative for the negotiations. This creates an atmosphere of teamwork that is mutually beneficial for both athletes and the medical professionals, further strengthening the sense of community that is so important in the secondary school setting.

Best Practices:
- Refer for radiologic services.
- Create weekend/non-business hour service availability.
- Facilitate STAT readings.
- Work with imaging companies for a contract rate for MRI/x-ray.
- Refer to appropriate labs for blood screening.
- Develop school wide drug/alcohol testing.

Exclusive Medical Provider Contracts - Another Way to look at the AT Position
In an opportunity to demonstrate worth and value, communicating with local companies, businesses and providers to bid for the appropriate services with the appropriate worth becomes necessary for future health care providers. Challenging them to not “give away” services is also important while trying to demonstrate worth and value to the athletic training position.

Health care providers benefit schools in many ways. Developing relationships with outside medical providers and bringing them into the school to showcase their fields allows for more consistency of care, access to specialty services as well as opportunities for the school to potentially receive reimbursement for services. Examples include:

- Local hospitals
- Orthopedic services
- Emergency services (local EMS, EDs)
- Physical therapy/rehabilitation clinics
Organizational and Administrative Duties
Organizational and administrative concepts and strategies are the backbone for assigning worth and value to what a secondary school AT completes on a daily basis. In addition to topics discussed above, these duties may include:

- Manage injury records for all athletes through electronic medical records (EMR) system management.
- Manage professional credential and ensure it remains current.
- Know and educate players and coaches about a sport’s rules and regulations, established by the state’s athletics governing body.
- Ensure positive sports medicine team relations and communications.
- Manage the athletics program’s health and liability insurance.
- Ensure quality control measures are established and in place for the athletic training facility, supplies, equipment, etc.
- Oversee substance abuse education and state/district drug testing programs.
- Ensure HIPAA/FERPA compliance.

Ensure Credential Maintenance
The secondary school AT must maintain current certifications and licenses (as dictated by state practice acts) and display their professional credentials. Also, in many instances, the secondary school AT will coordinate training for individual coaches’ health, safety and sportsmanship certifications to meet state standards and requirements.

Best Practices:
- Maintain current athletic trainer(s) license/certification to allow practice according to state law.
- Complete professional development activities to expand knowledge base and earn continuing education units, which are essential to maintaining the AT’s professional credential.
- Understand the Board of Certification and its requirements for ongoing certification.
- Understand your state athletic training practice act and its requirements for ongoing compliance.
- Offer first aid/CPR training for athletics department staff.
- Provide education on topics such as concussion awareness and heat illness for parents, coaches and athletes, per state and national guidelines.
- Provide additional health and safety education for parents, coaches and athletes as determined by national, state and/or local governing bodies.

Insurance
The secondary school AT is in a unique position to serve as a liaison between individual physician and hospital billing departments. The AT can serve as an advocate for the injured patient relative to the possible financial hardships associated with athletic injuries.

Best Practices:
- Advise athletic administrators and business staff on topics related to appropriate athletics insurance coverage.
- Monitor utilization of athletic department insurance benefits.
- Work with providers to utilize practice methods that can decrease expenses.
• Assist with procurement of discount arrangements with outside medical/allied health services providers.
• Assist and/or manage filing of insurance claims.
• Serve as the initial point of contact with each school’s catastrophic insurance plan.

References:
• For more information on the ATs role in insurance read Insuring Athletes, Ensuring Value.

Quality Control
The secondary school AT has a responsibility to ensure that each patient receives the best possible quality of care. This may include continuing education, implementation of new injury protocols relative to evidence-based research or working to implement academic modifications as injuries may dictate.

Best Practices:
• Continually assess, together with other sports medicine team members, whether care being provided meets current standards utilizing evidence-based practice guidelines when available.
• Evaluate clinical results of other sports medicine team members.
• Ensure sports medicine team is following appropriate professional standards/position statements relevant to the provision of quality care.
• Work with administrators to implement injury protocols for conditions that have effects in the classroom setting. (i.e., concussion protocols that may necessitate 504 accommodations).
• Work with counselors to address psychosocial needs of the patients.

Drug Testing
The secondary school AT is in the unique position of not judging a patient. If a drug testing program is instituted the AT, as a licensed health care professional, is the most logical choice to oversee the program.

Best Practices:
• Assist in creation of drug testing policy.
• Coordinate drug testing program with testing agency/compliance office.
• Serve as point of contact for school’s drug testing program.

Demonstrating Worth through Risk Mitigation
Injury Prevention and Care Policies
Participating in any activity carries a risk. Although rare, sudden death can occur in youth sports. Having qualified medical personnel, such as an AT, onsite allows for immediate response if a life-threatening situation arises, and can facilitate swift and immediate treatment to help prevent sudden death from occurring.

ATs are able to take the lead in working cooperatively with coaching staffs, administrators and other school district staff to minimize the risk of injuries to patients, coaches and community spectators to ensure all possible steps are taken to keep them safe. The AT’s primary focus is on the needs of the patient. The secondary school AT must consistently monitor students, facilities, activities and daily procedures to ensure that any injury that can be preventable injury is avoided.
Best Practices:
Establish policies and procedures to prevent injuries and to provide care for patients, coaches and community members as appropriate. When injuries occur, provide care with consideration for all populations.

- Create, sign and implement standard operating procedures (SOP) with the team and/or school physician, outlining duties of an AT at that school. This should include:
  - Concussion (SOP)
  - Hydration
  - Heat acclimatization
  - Infectious Diseases and Illnesses
  - Skin infections
  - Blood borne pathogens
  - Lightning
  - Performance enhancing substances
- Create, practice and implement a venue-specific EAPs.
- Educate coaches, athletes, administrators and parents on injury prevention, standards of care, return to play protocols, etc.
- Design and help implement injury prevention programs.
- Create, implement and provide education and ongoing health screenings.
- Create and implement an environmental safety monitoring program that addresses both indoor and outdoor facility and environmental factors.
- Provide functional movement assessments.
- Identify and assess pre-existing conditions.
- Offer mental health counseling (within the AT’s scope of practice) and referral.
- Provide nutritional counseling and referral.
- Create safe facilities.
- Offer first aid and CPR training for coaching staff.
- Create and implement policies and procedures that address protective equipment selection, fitting and use.
- Create policy and procedures for dealing with infection control.
- Develop policies for recognizing specific health-related concerns involving minors and their parents/guardians.

Medical Referral
ATs are the main communicators of patients’ health care needs in the secondary school setting. They are also able to identify patients who require medical referrals. These students may need to be appropriately referred based on multiple factors, including parent/guardian preference and health insurance requirements. These efforts may save family time and money and can efficiently provide families the coordinated care by the AT during the patient health care process.

Developing a medical advisory board for your school brings a multi-dimensional approach to the care of patients and provides another opportunity to demonstrate your worth. The board can include specialists in the areas of concussion, mental health, internal medicine, orthopedic injuries, dentistry and cardiology. It can provide opportunities for relationship development between health care providers and families, students and coaches prior to the occurrence of an injury.
**Best Practices:**
Be able to appropriately identify patients in need of medical referral by understanding each individual’s unique health care needs.

- Create and develop a school-approved medical advisory board to give guidance on all health care concerns within the school-based population.
- Create an appropriate medical referral system with consideration to include but not be limited to, the parent/guardian’s desires and the patient’s personal health insurance requirements.
- Review epidemiologic and current evidence-based research to foster clinical decision-making.
- Facilitate pre-participation physical exams.
- Facilitate communication and proper documentation of medical and other allied health care providers’ instructions.
- Work cooperatively with the school nurse to identify patient health issues.
- Work with school nurse to refer student injuries to proper specialist.

**Practice and Competition Management**
Appropriate practice and competition management is one of the most critical risk mitigation techniques an AT can provide to a school or district. The secondary school AT is uniquely positioned in the health care field to provide the best practice and competition management for a school’s athletics program.

**Best Practices:**
Minimize risk by constantly evaluating the patient’s medical needs, environment and facilities, as well as events in and around practice and competition where patients are present, to promote a safe environment.

- Make, document and track appropriate return-to-play decisions.
- Provide medical management of practices and competitions.
- Use communication and interpersonal skills to create trust between patients, coaches, administrators, parents, athletic training staff and other medical professionals.
- Continually evaluate facilities and situations to promote a safe environment. Consider applying to become a [Safe Sports School](#).
- Utilize the [BOC Facilities Principles](#) to ensure your facility is compliant.

**Ancillary Risk Management Strategies**
Not all risk management strategies involve the AT being in a particular place at a specific time. Some involve forward-thinking and recognition of potential problems before they occur. ATs are unique because they are able to recognize potential problems and initiate a plan of action to ensure that the problem does not occur.
Best Practices:

- Minimize risk by being innovative and attempting to change existing thoughts, rules and accepted practices that are not beneficial to the patient.
- Develop knowledge of and recommendations for institutional risk management policies and procedures – including liability insurance. Utilize your school district representative with this process.
- Identify and demonstrate strategies to decrease risk and increase compliance with policies.
- Possess knowledge of and recommendations for institutional and governing body drug testing:  
  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3465038/

Demonstrating Worth through Cost Containment

Insurance Premiums

Keeping the school district’s liability insurance premiums low by having standard prevention protocols in place will allow greater justification for AT services provided by the school. Field inspections and having a proper EAP in place (with periodic review) are recommended prevention and safety protocols. Also, carrying secondary insurance for students versus primary will aid the school district in cost containment.

Best Practices:

- Tracking Insurance claims and following up with patients.
- Maintain EAPs with a bi-annual review with pertinent staff, monthly facility inspection for hazards.

Staffing and Workload Management

AT often try to shoulder the world and be all to and do all for everyone. At the secondary school level it is common to have only one AT and they may not be full time. Allowing others to assume tasks not clearly medical can allow more time for the medical aspects of athletic training.

Best Practices:

Track every encounter on paper to clarify workload; be aware of instances where the AT’s workload negatively impacted a patient (i.e., the patient had to seek services off-campus that the AT is capable of providing if time allowed, the AT was not able to handle an acute incident due to game coverage, etc.).

- Be vocal about successes with return to play, etc. so “outsiders” see the benefits of athletic training services.
- Provide data and statistics to administrators at the end of the academic year.
- Present data in terms of teacher to student ratio, nurse to student ratio or coach to student ratio; that is a language administrators and school board members understand.
- Utilize student aides/team managers, as much as permitted by law, to relieve your time of mundane tasks (i.e., water and ice delivery to practices, etc.)

Budget Management

Utilize academic programs in the school, such as vocational classes like woodworking or art classes to assist with upgrades and repairs. Seek parental involvement to tap unknown skills and increase support for your program. Consider non-traditional avenues for revenue and supplies. This can reap big rewards.
and establish relationships within the community that may have long term benefits for athletic departments. Know when to request school board or other approval for budgetary needs.

**Best Practices:**

- Minimize expenses wherever possible. Prioritize needs over wants, items that serve the largest purpose or number of patients, etc.
- Utilize a bid process to ensure the best deal. (Many high schools require bid process only when item is greater than $10,000.)
- Apply school district’s tax exemption status where possible.
- Utilize maintenance staff and tech education programs for “in house” repairs and renovations on non-medical equipment in the athletic training facility. Seek appropriate medical equipment repair personnel when possible rather than replace equipment.
- Foster relationships with outside resources such as physicians’ offices, hospitals, clinics, local college or professional sports organizations. They may be willing to provide supplies or equipment or donate items when they replace theirs.
- Seek funding from booster clubs, physician groups and/or other civic organizations, who typically donate money for the purchase of capital goods in the athletic training facility, which services a large percentage of the patients rather than those in one particular sport.

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**Demonstrating Worth through Academic Success**

**Student Academic Success**

In the secondary school community, the AT fills a unique, unbiased role. Their primary focus is on the needs of the patients. The secondary school AT may be the only person who provides a non-judgmental environment for some patients. In many cases the AT may be the first to alert administrators and coaches to potential problems that individuals or teams may be facing.

**Best Practices:**

- Recognize and communicate potential problems and issues inhibiting student athlete learning such as
  - Trouble in classes,
  - Concerns with teachers,
  - Learning disabilities.
- Liaise with and refer to campus services such as guidance counselors, tutors, behavioral experts, etc.
- Be an impartial observer whose job is not based on win/loss records. Patients seek ATs out for advice beyond injury management and rehabilitation.
- Assess potential risks to academic progression/retention.

**Life Skills**

Many secondary school ATs will have repeated, daily contact with students. In some cases, the AT may be providing a rare stable adult presence for the students. Students will often confide in these ATs due to the trustful relationship that has been forged. Many states mandate the school employees notify administrators if the employee has information of sexual, mental or physical abuse of an individual student.
**Best Practices:**

- Serve as a mentor, role model and instructor on healthy lifestyle choices.
- Recognize, communicate and refer potential problems and topics related to life skills.
- Offer input on higher education/work decisions.
- Provide strategies for general health care and well-being.
- Encourage life balance by offering strategies for time management, stress management and dealing with life challenges/tragedies.
- Encourage loyalty/commitment.
- Address peer pressure topics, such as drinking, bullying/hazing, etc.
- Explain the possible negative consequences from social media.
- Connect athlete to campus services (i.e., guidance counselors, administration, and teachers) for specific matters like sexual, mental or emotional abuse.
- Refer for care of non-sport related conditions that can impact play, personal health and continued academic engagement such as depression, eating disorders and self-harm.
- Offer education and resources for self-disclosed or test-revealed substance use/abuse issues.
- Relationships between patients and the AT rely on personal interaction and continued interaction much like that of an academic advisor.

**Conditions Affecting Learning**

ATs frequently have access to medically and academically relevant information. As a result, the AT is uniquely positioned to bridge the gap between the athletic and academic realms within the school community, facilitating collaboration and communication between medical and school professionals.

**Best Practices:**

- Be aware of learning disabilities and how they may affect the student and his or her demeanor and responses to direction. Acknowledge that medication for such conditions may also affect the student’s interactions and tolerance.
- Liaise and follow-up with MD and school services.
- Assess the impact of prescribed medication’s side effects on athletic participation and academic success.
- Explain the impact of illegal drug use, alcohol abuse and smoking on athletic participation and academic success.
- Minimize absences by providing a full complement of rehabilitation and evaluation services after school so the student does not need to leave during the school day.
- Collaborate with teachers, counselors and administrators to support students with concussions by promoting effective cognitive rest.

**Counseling**

ATs provide a safe environment in which patients feel that their well-being is primary to the AT’s interests. This confidence allows the athlete to confide in the AT regarding subjects other than just injuries related to their sport. Because of the medical background of ATs, patients will seek counsel from AT on all types of topics related to the body and/or health. In addition, AT’s are often viewed by athletes as parental figures. Consequently, athletes may confide in ATs about personal problems and/or questions. As a school official, and oftentimes a teacher, athletes may also go to ATs seeking academic help and/or advice.

**Best Practices:**
• Mentor as a non-peer, non-coach, non-parent resource with insight in human growth and development.
• Recognize potential problems and concerns such as:
  • Relationship matters (dating, roommates, family, friends)
    o Eating disorders
    o Psychological/emotional problems
    o Sport psychology
    o Performance issues
    o Injury related topics
    o Grief management
    o Crisis management
• Refer to coaching staff as appropriate.
• Refer to campus and other professional services when necessary.