

## vATEC 2021 Program Information

Live: April 29-May 1

On-Demand – May 2-May31

**Audience** – Athletic Training Educators

**Format** – Virtual

**Pricing:**

<b>Member Rates</b>		<b>Non-Member Rates</b>	
<b>Early</b> Thru April 28	<b>Regular</b> April 29-May 31	<b>Early</b> Thru April 28	<b>Regular</b> April 29-May 31
<b>\$150</b>	<b>\$225</b>	<b>\$450</b>	<b>\$525</b>

### **CEUS**

VATEC Attendees can earn up to 12 CEUs

### **Cancellation Policy**

vATEC 2021, including educational programming, posters, and vATEC exhibits will be available on-demand from the start of the event on April 29 through May 31, 2021. Attendees can access sessions, view the posters, and source athletic training products and services at their convenience for a full 30 days; therefore, NATA will not provide refunds or deferrals for this event.

### **Rules of Engagement**

Those who take part in any NATA meeting or event, whether in-person or virtual, must treat each other with civility, courtesy and respect (both face-to-face and online), regardless of the sex, race, color, national origin, marital status, age, religion, disability, sexual orientation, occupation, line of business, or policy position of other participants.

### **Non-discrimination policy**

NATA does not discriminate on the basis of race, color, national origin, religion, sex, disability, military status, sexual orientation or age. NATA is committed to accessibility and non-discrimination in all aspects of its continuing education activities. Participants who have special needs are encouraged to contact program organizers so that all reasonable efforts to accommodate these needs can be made.

Breakout

**DISCussing Assessment - It's not what you say, it's how you say it**

**\*Session is not eligible for BOC CEUs**

**Speakers**

Susan Norkus, PhD, ATC and Meghan Lewis, MA, ATC

**Abstract**

The DISC® behavioral instrument is based on the work of psychologist William Marston. Marston was interested in how people felt, behaved, and interacted with their environment. The assessment is not a personality test but based on observable behaviors. The DISC is easy to administer, interpret, and helps identify behavioral patterns people exhibit (Dominance, Influence, Steadiness, Compliance). This tool has been used in a variety of ways such as assessing leadership in nursing, as well as to help health professions students understand strengths and limitations regarding their behaviors. Athletic trainers (ATs) communicate with all individuals, therefore learning and reflecting about oneself, as well as how to observe and interpret others, is invaluable. The DISC can provide a framework to help the AT understand their own preferences, identify those of others, and determine the best behaviors for different situations. The AT can be taught how and what to observe and can then learn how to “flex” their core DISC style. Self-awareness and the ability to communicate effectively are highly correlated with emotional intelligence, which has been found to be significantly related to job performance, specifically in the areas of self-motivation and mindfulness, self-regulation, and relating to another person's experience. ATs who can understand the dynamics of their own communication, are better able to understand the dynamics of others. This helps with self-awareness, which is the first step in learning how to adjust and “flex.” This workshop aims to teach participants how to incorporate the DISC into their education program and/or clinical practice.

At the conclusion of this presentation, the attendee will be able to:

- Describe the 4 domains of behavior described in the DISC behavioral assessment tool.
- Identify and describe their own core style of communication.
- Recognize and then identify the core style of others
- Develop strategies for integrating the information into a student learning plan.

## vATEC 2021 Program Information

Breakout

### **Mentoring for Athletic Training Residents and Post-Professional Education**

#### **Speakers**

Pradeep Vanguri, PhD, ATC and Jonathan Harrison, MBA/HRM, ODCC

#### **Abstract**

Mentorship is a key component of success for athletic training professional, yet the complexity of formal programs can be barrier to their implementation in post-professional or residency programs. This session will provide accessible and practical tools that anyone in a supervisory role can use to help ensure proper communication, feedback, goal setting and transfers well in online environment. The focus of this session will be the skills necessary for mentorship, including being present, appropriate mindset, empathic listening, and asking open-ended questions. Participants will be also guided through techniques to implement these strategies within their programs using the GROW Model. Additionally, this session will discuss effective feedback using the SBI Tool and the role it plays in mentorship, and importance of delivery for supervisors through one-on-one meetings. Leadership roles require strong interpersonal skills and effective communication and highlighting the feedback pitfalls in this session will serve to enhance quality of feedback, filter assumptions, and set consistent criteria for mentors. The approaches to mentorship this presentation offers may also help to formalize an undervalued aspect of leadership and service at many institutions.

At the conclusion of this presentation, the attendee will be able to:

- Distinguish tools for communication, feedback, and goal setting in online environment.
- Develop techniques to implement GROW Model strategies within their programs.
- Define effective feedback using the SBI Tool and its use to increase occupational wellness.

#### **Domain**

Domain 1 , Domain 5 , Domain 5

## vATEC 2021 Program Information

Breakout

### **Progressing from Competence to Capability: The Role of Progress Tests in the Formative Assessment of Athletic Training Students**

**\*Session is not eligible for BOC CEUs**

#### **Speakers**

Patrick McKeon, PhD, ATC and Paul Geisler, EdD, ATC

#### **Abstract**

Athletic training educators have long been required to document student proficiency and competency in specific domains of practice. Summative assessment measures like written and practical examinations or clinical proficiencies, and subjective feedback-based student, alumni and employer surveys have long dominated educational practice. Objective outcomes measures are increasingly mandated by regulating bodies and institutions, alike, yet this critical responsibility is often impacted by resources and training. Documentation of clinical competency and readiness for professional practice are required for accreditation, institutional and program compliance, and ethical and civic responsibilities. However, the complexities and challenges of validly assessing clinical competence are well documented, making the job of program directors more complex. As part of our ongoing assessment as learning approach, we have implemented a series of 'no stakes' formative progress tests to track student progress towards our program objectives--nine integrated clinical capabilities. Using Microsoft Forms™, we regularly administer a series of progress tests to assess the "knows" and "knows how" levels of Miller's medical competency pyramid. Modules formatively assess basic and clinical science knowledge, diagnostic & therapeutic reasoning, injury management, and evidence-based practice germane to common conditions in athletic training and representative of our curriculum. We have gained important insights into student learning and progression, and established a mechanism for the provision of deliberate student feedback regarding their progress towards the clinical capabilities. Our goal herein is to provide a blueprint for shifting from an "assessment of learning" to "assessment for and as learning" paradigm in professional athletic training education.

At the conclusion of this presentation, the attendee will be able to:

- Differentiate the concepts of competency and capability as they relate to athletic training professional practice and education.
- Develop questions for progress tests to help their students identify gaps in their clinical knowledge and preparation.
- Construct a framework for developing progress tests based on identified capabilities in their program.

## vATEC 2021 Program Information

Breakout

### **Implementing Case-By-Collaboration Model to Enhance Clinical Reasoning**

#### **Speakers**

Nicholas Grahovec, PhD, ATC, CSCS and Tyler Wood, PhD, ATC

#### **Abstract**

A focus of higher education programs is to present students with discipline-specific skills and teach students how to hone these clinical skills. However, skills such as collaboration, clinical reasoning, information technology, and verbal/written communication are not always targetable and measurable in academic programs. In order to facilitate the development of these skills, the Case-by-Collaboration Model was developed. The CBC Model utilizes in-depth case studies which can be designed to any discipline and target skill. One use of the CBC model is through Creative Medical Investigations (CMI) which involves a creative storyline of medical cases that require stepwise iterations to systematically assess the case presented, be open-minded to twists in the case, have the ability to question the details, and ultimately seek the truth to solve the case. Students work in groups throughout the semester on connected CMIs and are required to create deliverables/artifacts based on the information presented, test hypotheses, and be able to respond to any unforeseen outcome. During the proposed session, we will present the CBC Model and provide examples of how it was adapted to the CMIs. With the presented information, participants will be allowed to generate a creativity think-tank that will facilitate use of the model within their own programs, courses, and assessments. They will be able to lay the framework for their own CBC by identifying a case study, skills the students need to solve the case study, and deliverables that will be produced by the students following each component of the CMI.

At the conclusion of this presentation, the attendee will be able to:

- Describe the key components of the Case-By-Collaboration Model
- Construct Case-By-Collaboration activities to promote clinical reasoning
- Use Case-By-Collaboration as a student learning tool to facilitate patient care and clinical learning.

#### **Domain**

Domain 1, Domain 2, Domain 4, Domain 5

## vATEC 2021 Program Information

Breakout

### **Linking Interprofessional Practice Goals to Programmatic Framework and Assessment**

#### **Speakers**

Ryan Krzyzanowicz, DAT, ATC and Sarah Krzyzanowicz, MEd, ATC

#### **Abstract**

With the implementation of the 2020 CAATE Standards, emphasis has been placed on integration of interprofessional education into the programmatic framework. Our program is housed within a large academic health center, which excels in interprofessional education. Therefore, the program chose to create a goal of immersing students in diverse interprofessional experiences using a three-level approach based off of University of Toronto's framework and IPEC Core Competencies for Collaborative Practice. These developmental levels progress students through exposure, immersion and competency. At the exposure level, students participate in a serious game with students from three other health professions. The goal of the serious game is to develop communication and collaboration skills as well as develop data-driven inquiry and teamwork amongst participants. As a transition between exposure and immersion students participate in two, large interprofessional forums. In these forums students learn with and from each other as it relates to healthcare systems. At the immersion level, athletic training students participate in a disordered eating case with Dietetic Interns with the goal of teaching each profession information as it relates to their respective profession and skill. Athletic training students teach how to perform a nutrition focused physical examination while the Dietetic Interns teach about recognizing and identifying disordered eating. At the competency level, students work in interprofessional teams to provide patient-centered care to participants running in a large-scale marathon. A goal is to promote students' team-based clinical-decision making. The program ensures goals have been met through various assessments including surveys and a micro-credential.

At the conclusion of this presentation, the attendee will be able to:

- Define the levels of interprofessional education values and core competencies.
- Develop programmatic goals that meet the identified 2020 CAATE Standards.
- Design assessments to meet programmatic framework and goals.
- Identify learning opportunities to implement interprofessional collaborative practice goals.

#### **Domain**

Domain 1, Domain 2, Domain 5

## vATEC 2021 Program Information

Breakout

### **Transforming the Core Competencies from Classroom Concept to Clinical Habit**

**\*Session is not eligible for BOC CEUs**

#### **Speakers**

Sara Brown, MS, ATC and Chad Clements, MS, ATC

#### **Abstract**

The incorporation of immersive experiences in professional education presents a tantalizing opportunity to both reshape clinical education expectations and integrate intentional strategies to connect classroom learning to clinical practice. Evidence suggests that crafting assignments that require students to reflect and self-assess promote integration of curricular content into their daily practice. Further, the immersive experience provides an excellent opportunity for learners to apply their knowledge with guided opportunity to reflect on their actions in a 'consolidation process'. This concept is presented by Taylor and Hamdy as the final phase of adult learning theory. In this presentation we will describe student-led, but instructor-guided strategies for purposeful assignments that promote habitual integration as it pertains to the core competencies. The assignments require students to recognize and justify circumstances when they used the concepts embedded in the core competencies in patient care. Faculty feedback encourages the desired behaviors, identifies missed opportunities, and pushes students to reflect. In addition to ensuring that students are incorporating the core competencies in clinical practice, these intentional strategies promote preceptor engagement, quality assessment, and staying connected with students.

At the conclusion of this presentation, the attendee will be able to:

- Understand the potential of immersive experiences to support integration of the core competencies into clinical practice.
- Apply the concepts in the adult learning theory model by Taylor and Hamdy.
- Create assignments that intentionally integrate use of the core competencies
- Recognize the clinical experience as an opportunity to purposefully connect classroom learning to clinical practice

## vATEC 2021 Program Information

Breakout

### **The Limitations of Unconscious Bias, Microaggressions, and its Effect on Athletic Training**

#### **Speakers**

Jaclyn Morrissette, PhD, ATC and Michele Monaco, DSc, ATC

#### **Abstract**

Unconscious bias refers to ways people unknowingly draw upon assumptions about individuals and groups to make decisions about them. Researchers have documented unconscious bias in a variety of contexts and professions. The conscious mind processes 11 million pieces of information every second, while the unconscious mind only processes 40 million pieces of information per second. These studies demonstrate unfavorable impacts underpinning marginalized groups that cause judgments concerning sexism, racism, ableism, classism, ageism, heterosexism. Learning about and striving to counteract unconscious bias points will develop promising leadership within the athletic training profession. The program will identify sociocultural barriers and develop intervention strategies to minimize the bias and prejudice to improve patient care and outcomes. The program will also facilitate deconstructing past trained behaviors to embrace and intertwine recent neuroscience research on best practices concerning how unconscious bias influences athletic training stakeholders, patient care and the medical community. A new proposed CAATE standard focusing on the development of cultural competence and cultural humility will be addressed.

At the conclusion of this presentation, the attendee will be able to:

- Explain the neuroscience behind unconscious bias.
- Recognize the gaps in diversity, equity and inclusion through the lens of unconscious bias and microaggressions to prepare quality interpersonal interaction.
- Identify strategies on how to prevent making unconscious bias that influence personal interactions.
- Develop a strategy on how to interact crossroad unconscious biases and and conscious thought in athletic training education.

#### **Domain**

Domain 1, Domain 5,

## vATEC 2021 Program Information

Breakout

### **Cultural Responsiveness in Athletic Training Education (One Program's Perspective)**

**\*Session is not eligible for BOC CEUs**

#### **Speakers**

Jessica Mutchler, PhD, LAT, ATC and Steven Patterson, Ed.D., LAT, ATC

#### **Abstract**

This Breakout Session would utilize cultural competence issues that one AT program has dealt with over the last few years to discuss cultural responsiveness strategies. In addition to the most recent events that have brought awareness to implicit bias and social injustices, as a program we have addressed book burnings on the university campus that occurred following a discussion on white privilege and racial issues within athletics. Having a diverse program (80% minority, 92% female) allowed the faculty, preceptors, and students to learn how to better communicate and work through issues and concerns related to racial injustice. The session will include insight on the impact of these events on student wellness from the students' perspective, and their expectations of cultural responsiveness within the program. The goal of this session will be for educators to gain strategies that can assist in building better cultural responsiveness and reduce implicit bias within their educational program.

At the conclusion of this presentation, the attendee will be able to:

- Identify cultural competence issues and expectations of faculty from student point of view.
- Discuss strategies that will help educators prepare students for success in dealing with culturally bias situations.
- Develop a plan for cultural responsiveness that creates a safe and positive learning environment for minority students and their majority classmates.

## vATEC 2021 Program Information

Breakout

### **Integrating Patient Reported Outcome Measures into the Curriculum: A Tiered Approach**

#### **Speakers**

Emily Hildebrand, PhD, LAT, ATC and Rich Patterson, DAT

#### **Abstract**

The athletic training community has placed emphasis on patient-oriented evidence that matters (POEM) to ensure the healthcare provider is considering the patient's perspective within the patient care model. To address this need, athletic training curricula must provide future professionals a thorough understanding of the patient reported outcome measure (PROM) instrument essentials and effective strategies for integration in clinical practice. However, effective integration of PROMs within the curricula relies on athletic training educators' content and pedagogical knowledge of POEM, bridging the gap between didactic application, content assessment and clinical implementation. Learning is hierarchical; therefore, for students to learn complex content they must first obtain prerequisite knowledge and then move through subtasks of increasing complexity. With respect to the nature of teaching, educators must decide what to teach and how to sequence that content. The purpose of this breakout session is to offer stakeholders a four tiered approach to teach and assess students' knowledge of PROMs within their curricula. This tiered approach includes: teaching discrete content, teaching application of content, an assignment which incorporates live patient care, and an assessment focused on student reflection of the assignment. The presentation will provide attendees a chance to evaluate their current instructional methods, create assessment tools, and address barriers to dissemination of this content.

At the conclusion of this presentation, the attendee will be able to:

- Illustrate a flow chart for a 4-tiered teaching strategy to include various pedagogical techniques.
- Evaluate your implementation and assessment strategies for PROM assignments (have they met the specific criteria in our flow chart).
- Create peer discussion questions for the use of PROMs in clinical practice.
- Construct barriers to teaching and assessing student knowledge of PROMs.

#### **Domain**

Domain 4, Domain 5

## vATEC 2021 Program Information

Model Practice

### **Facilitating Professional Students' Application of the ICF Model and Patient-Reported Outcome Measures During Patient Care**

#### **Speakers**

Sara Nottingham, EdD, LAT, ATC

#### **Abstract**

The International Classification of Functioning, Health, and Disability (ICF) model and patient-reported outcome measures (PROMs) are concepts that must be addressed in professional education. Adult learners, including professional athletic training students, thrive on learning experiences where they can apply concepts and integrate new knowledge with existing knowledge. Faculty can facilitate the application of the ICF model and PROMs into patient care with a course-based assignment. The objective of this presentation is to describe a class assignment that allows students to integrate the concepts of the ICF model and PROMs into actual patient care. The assignment requires students to use the ICF model as an assessment tool with an actual patient that helps shape their therapeutic interventions. Students recorded baseline and follow-up PROMs with this patient over a time period of at least 3 weeks while documenting their interventions and the patient's change over time. Students addressed reflection prompts in the assignment describing their successes and challenges, in addition to describing their future plans for integrating the ICF model and PROMs into their clinical practice. Students described this assignment to be beneficial, as it helped them treat their patient more holistically. Students self-reported increased knowledge and confidence with using the ICF model and PROMs in their clinical practice. Faculty may consider integrating an applied, patient-based assignment such as this to assess students' application of the ICF model and PROMs. This assignment can also be condensed or expanded to fit different courses, student background knowledge, and assessment of different curricular content standards.

At the conclusion of this presentation, the attendee will be able to:

- Describe how the concepts of the ICF model and PROMs can be integrated into professional education with a patient-based assignment.
- Summarize the clinical advantages of using a course-based assignment to apply the ICF model and PROMs to patient care.
- Use an assignment like this to meet their learners' background knowledge, program assessment plan, and clinical education experiences.

#### **Domain**

Domain 1, Domain 2, Domain 4, Domain 5

## vATEC 2021 Program Information

Model Practice

### **A Method of Assessing Comprehensive Clinical Skills: Fostering Critical Thinking through a High-Stakes Capstone Examination**

#### **Speakers**

Amanda Tritsch, PhD, ATC, CSCS

#### **Abstract**

As transition-to-practice continues to be a topic of focus in athletic training education, moving beyond single competency assessment to a more comprehensive evaluation process may emerge as a potential positive predictor of clinical success. We propose an example of a comprehensive, step-wise, and progressive assessment of autonomous clinical readiness through a week long high-stakes capstone examination. This assessment challenges a student's ability to pass a comprehensive written exam, complete a physical exam on a standardized patient, appropriately document, design a comprehensive treatment plan, and properly implement the treatment plan. This design allows assessment of professional communication and empathy toward patients, in addition to clinical reasoning. Students cannot progress to the next stage of the exam until they pass the previous portion with a satisfactory or better. Objective structured clinical examinations (OSCEs) have been widely utilized in clinical medicine for over 40 years. While OSCE performance itself has been predictive of clinical performance, combining OSCE results with those of a written exam results has been shown to be an even stronger predictor. Additionally, in athletic training, confidence has been previously identified as an important component of successful transition to practice. This assessment will allow athletic training programs to assess various outcomes, including student skills and programmatic areas of improvement, while also demonstrating the student's readiness to practice independently.

At the conclusion of this presentation, the attendee will be able to:

- Design a comprehensive clinical assessment to best fit their program needs.
- Evaluate athletic training students on comprehensive clinical skills.
- Identify trends in programmatic curricular strengths and weaknesses.

#### **Domain**

Domain 2

## vATEC 2021 Program Information

Model Practice

### **The Use of Exploratory Counseling Sessions to Facilitate Mental Health Referral**

#### **Speakers**

Jennifer Ostrowski, PhD, LAT, ATC

#### **Abstract**

The 2020 Commission on Accreditation of Athletic Training Education curricular content standards require programs to educate students about identification and referral for mental health conditions, however professional athletic training students are often hesitant to make this type of referral. In order to increase student comfort with mental health referral our program developed an exploratory counseling session assignment. Students are required to meet with a faculty member or graduate student-intern from the counseling program to engage in an exploratory counseling session in which they would be the patient. The purpose of this assignment is to develop empathy for an individual for whom counseling has been recommended and to gain firsthand experience with attending an on-campus counseling session. Following the counseling session students submit a reflective journaling assignment. Despite national data indicating that university students' attitudes toward seeking mental health services have actually become more negative over the past 40 years, over the 6 years of implementing this assignment, across 2 different institutions, there has been a positive change in perception of students engaging with this assignment. Student reflections of this experience demonstrate that students recognize how this experience will benefit their ability to talk with patients about referral and what to expect as part of a counseling session when these situations arise during their professional career (specific student quotes will be included as part of the presentation).

At the conclusion of this presentation, the attendee will be able to:

- Describe how the exploratory counseling sessions is set up and introduced to students.
- Consider strategies for developing a mutually-beneficial relationship with a College/University counseling academic program.
- Evaluate the impact of the exploratory counseling session on student confidence related to mental health referral to promote comprehensive patient care.

#### **Domain**

Domain 3

## vATEC 2021 Program Information

Model Practice

### **Applying Mental Health First Aid in Standardized Patient Encounters**

**\*Session not eligible for BOC CEUs**

#### **Speakers**

Ashley Gray, DAT, LAT, ATC

#### **Abstract**

The 2020 Commission on Accreditation of Athletic Training Education curricular content standards require programs to educate students about identification and referral for mental health conditions, however professional athletic training students rarely get the opportunity to practice this in authentic, real-time encounters. In order to increase student comfort and confidence in their ability to identify mental health concerns and make appropriate referrals our program developed a two-part activity involving mental health first aid instruction and a standardized patient encounter. Students first participate in the 8-hour mental health first aid training, then work in pairs to interact with an individual in a live simulated clinical encounter involving a mental health crisis. The encounter is video-recorded to allow for student review and reflection. Following the encounter the standardized patient debriefs with the pair of students and shares how he or she felt during various parts of the encounter, and then the whole class debriefs with the course instructor. After the experience, students are required to view their recorded encounter and submit a reflection paper regarding the experience. Student reflections of this experience demonstrate that students value the opportunity to interact with a “real patient,” without a preceptor involved, in a safe space and increase their confidence in their ability to assist a patient in a mental health crisis as part of their clinical practice.

At the conclusion of this presentation, the attendee will be able to:

- Describe how the mental health first aid course and standardized patient encounter are set up and introduced to students.
- Explore strategies for developing standardized patient scenarios related to mental health.
- Evaluate the impact of the participating in mental health first training and a standardized patient encounter session on student confidence related to mental health recognition and referral.

## vATEC 2021 Program Information

Model Practice

### **Use of Situation, Background, Assessment, and Recommendation (SBAR) to Promote Interprofessional Communication**

#### **Speakers**

Sarah Manspeaker, PhD, ATC

#### **Abstract**

Standards of Professional Practice for athletic trainers indicate that establishing working relationships including interprofessional communication with collaborating medical professionals is imperative to clinical practice. As part of the health care team, athletic trainers need to communicate with various providers while making clinically-based decisions. In education, identifying strategies that incorporate opportunities for direct interprofessional communication may be limited. This session will describe an educational approach aimed to enhance athletic training students' confidence in delivering patient information to physician assistant students via the situation, background, assessment, and recommendation (SBAR) technique. The SBAR technique helps to organize patient information into a concise format that facilitates accurate communication and has become widely adopted in health care disciplines. Participants in this session will learn about this clinically relevant, low stakes interprofessional activity that enhances communication as part of the health care team including: summarizing the evaluation process, applying decision-making skills, and making recommendations for a plan of care. This SBAR activity requires minimal resources to conduct and serves as an innovative strategy to bridge the gap between clinical education and actual patient care communication experiences. It is envisioned that participants will be empowered to develop their own activities to infuse the SBAR communication strategy within their own programs.

At the conclusion of this presentation, the attendee will be able to:

- Create and implement the TEAMSTEPPS communication strategy: situation, background, assessment, and recommendation (SBAR), to promote interprofessional communication and collaborative care for learners in their program.
- Identify the resources necessary to implement the situation, background, assessment, and recommendation (SBAR) communication activity within their professional athletic training programs.
- Apply interprofessional communication opportunities that mimic clinical practice for their learners that promote clinical decision-making, collaboration, and teamwork.

#### **Domain**

Domain 2 – Task 0205

## vATEC 2021 Program Information

Model Practice

### **Critical Assessment and Reflection on Experience: Introduction of a novel clinical education tool.**

#### **Speakers**

Meredith Madden, EdD ATC, LAT, ATC

#### **Abstract**

As professional athletic training education continues its transition to a required master's degree, programs may find themselves struggling to fit more curricular content over fewer semesters compared to previous undergraduate program designs. With seemingly less time for instruction and clinical experiences, programs may need to implement innovative strategies to ensure successful student progression through the program and develop competency for clinical practice. One novel strategy for this is the Critical Assessment and Reflection on Experience (CARE) form, which creates an opportunity for students, preceptors, and faculty to reflect holistically on authentic patient encounters and athletic training tasks in which students participate during clinical experiences. The CARE form requires the student to use active learning and reflection, which is supported by contemporary educational strategies for meaningful learning. This focus-shift also places the preceptor in more of a mentoring and debriefing role, lessening the need for the preceptor to contrive scenarios to assess prescribed "check offs." The CARE form has students formally document their encounters, self-reflect on the quality of their care (ie, safety, timeliness, effectiveness, efficiency, equity, and patient-centeredness), and identify principles of patient safety (ie, errors or potential for errors). Students also utilize the form to integrate best practices and evidence to support or correct their knowledge and clinical skills, and identify areas for quality improvement. Additionally, the CARE form can help programs address the core competencies of quality care, quality improvement, evidence-based practice, and patient safety.

At the conclusion of this presentation, the attendee will be able to:

- Apply a novel tool for clinical experience assessment that fosters and improves patient care and clinical practice.
- Explain assessment of educational core competencies, such as quality care, quality improvement, and evidence-based practice.
- Describe the clinical advantages to various stakeholders, including students, preceptors, and program administrators.

#### **Domain**

Domain 2, Domain 2, Domain 3, Domain 4, Domain 5

## vATEC 2021 Program Information

Model Practice

### **Alternative to In-Person Practical Exams in Therapeutic Exercise Course**

**\*Session not eligible for BOC CEUs**

#### **Speakers**

Connie Peterson, PhD, ATC

#### **Abstract**

This presentation will share 3 different online (virtual) exam strategies utilized to assess student knowledge, communication and clinical reasoning skills in a therapeutic exercise course. Traditionally, practical exams were administered by giving students 15 minutes to structure an intervention program for a patient based on the subjective and objective findings from a clinical exam, followed by 15 -20 minutes for patient education and teaching/performing appropriate exercise interventions/manual therapies to a patient and 15 min. to document the plan. In the online platform, alternative option one replaced the in-person teaching of exercises with a telehealth appointment still requiring patient education and therapeutic exercise intervention, but was limited to utilizing equipment found at home (towel, steps, body weight). Alternative option two required students to create an educational video to send to a patient that included patient education and the intervention plan including home treatment options and exercise interventions, again with minimal equipment (added a piece of theraband). The third option built on the home exercise video by adding an additional video critique of a patient performing 5 shoulder rehabilitation exercises some correctly and some incorrectly. Students were required to critique the quality and suggest cues for correction where needed. After each alternative exam, students were required to submit documentation of the encounters. Outcomes were high learner satisfaction, improved verbal communication skills, greater clarity in instructions, a high level of enthusiasm, and incredible creativity in the selection of exercises while still demonstrating knowledge and clinical reasoning skills.

At the conclusion of this presentation, the attendee will be able to:

- Formulate alternative options to in-person assessment of knowledge and skills in Athletic Training Education program.
- Examine desired outcomes from practical assessment exam alternatives.
- Assess if impact of learning experience meets institutional and program needs.

## vATEC 2021 Program Information

Model Practice

### **Use of the ICF Model as a Framework to Develop Clinical Reasoning**

#### **Speakers**

Jessica Martinez, PhD, ATC

#### **Abstract**

The development of clinical reasoning in professional athletic training students is integral to their future success as clinicians. The ICF model allows for students to frame their patient encounters in terms of participation restrictions, activity limitations, impairments as well as patient values, and environmental factors that they need to take into consideration when developing their plans of care for their patients. The creation of a form that uses the ICF model as a flow sheet to help the students identify the aforementioned aspects of the ICF model has helped students give a frame of reference to their patient encounter. Students utilize the form after a standardized patient encounter in order to help them start to process pertinent information from the valuation and also identify potential gaps in their evaluation process as they are able to have a visual from the flow sheet that shows the information gathered from the patient. This process helps the students to identify the aspects of care and potential difficulties of the injury that are meaningful to their patient. The form also allows them to break down the aspects of the injury such as tissue involvement and stages of healing develop multiple differential diagnoses. Students are also asked to identify contextual factors such as healthcare literacy and other social determinants of health that were identified during their evaluation of their patient. As this tool is used more frequently students are able to identify more aspects from the ICF model that are utilized during their patient encounters and began to use these tools during live patient encounters as opposed to standardized patients.

At the conclusion of this presentation, the attendee will be able to:

- Explain the utility of the ICF model for students when reviewing a patient encounter.
- Illustrate how students can utilize the ICF model to assist with developing plans of care and treatment goals for their patients.
- Describe how students develop their clinical reasoning and begin to incorporate patient values into their plans of care.

#### **Domain**

Domain 2, Domain 4

## vATEC 2021 Program Information

Model Practice

### **The Use of Technology to Help Graduates' Develop Skills to Support a Person in Crisis: Embrace Simulation.**

#### **Speakers**

Wanda Swiger, EdD, ATC

#### **Abstract**

The area of psychosocial intervention and referral in athletic training has long been challenging for athletic training educators, preceptors, and students. As students transition to practice, the notion of recognition & referral of mental health has long been self-reported as an area of weakness due to limited practice opportunities in the clinical setting. With new developments in technology allowing educators to deliver programs to learners using synchronous and asynchronous formats, simulation mannequins and avatar (iHuman) programs are now commonly used in health professions education. The purpose of this presentation is to discuss how one program used Avatar simulation programs to provide real life experiences for students to practice clinical decision making under similar conditions as those that occur in clinical practice. These Avatar simulations were embedded to provide additional experiences and formal assessments where traditional Athletic Training clinical education has been problematic. In the area of mental health, each Module allowed students to perform a patient examination to include Subjective, Objective Data collection, Medical Record Documentation and perform a patient handoff using the patient's Situation, Background, your Assessment, and Recommendation in an SBAR hand-off to a preceptor. While students provided positive feedback, formal evaluation led to enhanced knowledge of recognition and referral and improved confidence in transition to practice.

At the conclusion of this presentation, the attendee will be able to:

- Identify the value of implementating AVATAR simulation patients into clinical education to ensure students meet the 2020 Standards for Professional Athletic Training Programs (to identify, refer, and give support to patients with behavioral health conditi
- Develop strategies to incorporate synchronus and synchronius behavioral health education into the curriculum and clinical education.
- Design opportunites for students to practice interprofessional and collaborative practice (IPCP) skills using the SBAR when referring a patient with a behavioral health condition.

#### **Domain**

Domain 1, Domain 2

## vATEC 2021 Program Information

Model Practice

### **Self-Emergency Action Plan to Prepare for Distance Immersive Clinicals**

**\*Session not eligible for BOC CEUs**

#### **Speakers**

Melissa Snyder, PhD, LAT, ATC, CSCS

#### **Abstract**

The purpose of this model practice is to describe an educational technique to help students prepare for distance clinical education experiences. The faculty of a school that uses distance immersive clinicals noticed a lack of preparation for distance immersive clinical education that may affect the experience for the student and the preceptor. Students reported this lack of preparation is not due to clinical knowledge or skills, but instead is related to logistics, such as finding housing and living in a city where they know no one. The self-emergency action plan (SEAP) is divided into five sections that give guidance to prepare for their clinical experience: living, get to know the area, self-care, clinical information, and personal health information. Part of the SEAP helps to establish effective communication between the student and preceptor prior to the start of a clinical education experience to help build better relationships and make the experience more productive. This technique is advantageous because students prepare for their immersive clinical experiences based on their personal situation and their site. This helps mitigate isolation and prepare for financial burden while promoting healthy habits and enhanced preparation.

At the conclusion of this presentation, the attendee will be able to:

- Identify potential issues with distance immersive clinical education
- Evaluate their own program for potential items to add to their institution's self-emergency action plan
- Construct a self-emergency action plan to help students prepare for distance immersive clinical experiences

## vATEC 2021 Program Information

Plenary Session

### **Unlearning: The Component of Evidence-Based Practice That's Never Discussed**

#### **Speakers**

Alicia Lacy, PhD, ATC

#### **Abstract**

Evidence-based practice is a fluid and evolving process, and as the best available evidence adapts over time, so should athletic trainers' practice behaviors. In order for students to fully appreciate how to practice in an evidence-based manner, they must also be educated on the skill of unlearning. Unlearning, in its simplest form, involves moving away from knowledge and skills that are no longer effective. Although commonly confused with deskilling, where knowledge and skills are lost due to lack of use, unlearning is an intentional act whereby individuals make the conscious choice to incorporate an alternative skill, method, or approach into their practice that is better supported by evidence. For example, over the years, healthcare professionals have had to unlearn the use of hydrogen peroxide as a part of wound care management due to emerging evidence regarding the detrimental effects of antiseptics on tissues and healthy cells. Entering a field with a rapidly evolving evidence base, students must be armed with the knowledge and skills to not only search for, interpret, and appraise available literature, but also intentionally and effectively move away from practices that are founded on outdated information. Incorporating unlearning across athletic training curricula will foster life-long learners and prepare students to provide contemporary patient care to improve patient outcomes. The purpose of this presentation is to introduce the concept of unlearning, including its role in promoting evidence-based practice, and provide strategies for educators to incorporate this concept across athletic training curricula.

At the conclusion of this presentation, the attendee will be able to:

- Describe the concept of unlearning and explain its role in athletic training education, particularly as it relates to promoting evidence-based practice and life-long learning among students.
- Identify distinct steps that comprise the unlearning framework (acquire new knowledge, review existing knowledge base, identify existing knowledge to discard, move away from discarded knowledge, implement new knowledge, create usefulness of new knowledge)
- Summarize barriers to unlearning (eg, habit and security, fear of the unknown, fixed mental models and mindsets, lack of awareness) and discuss facilitators (eg, altering mindset about change, working in a high-functioning environment, forming communities)
- Consider strategies to promote the incorporation of unlearning in athletic training program curricula.

#### **Domain**

Domain 1, Domain 5,

## vATEC 2021 Program Information

Plenary Session

### **Developing, Implementing, and Assessing a Multisite, General Medical Learning Experience Through Telemedicine**

**\*Session not eligible for BOC CEUs**

#### **Speakers**

Morgan Bagley, PhD, AT, ATC and Kevin Schroeder, DAT, LAT, ATC, Stephanie Jevas, PhD, LAT, ATC, FNAP

#### **Abstract**

Telemedicine refers to practicing patient care through a virtual platform instead of the provider and patient being physically together. This virtual platform can also be used to teach and assess knowledge and skills regarding health conditions commonly seen in athletic training practice, including behavioral health conditions. Programs face the challenges of limited exposure to both general medical and behavioral health problems during a student's clinical education experiences. Though the use of standardized patients (SPs) can help supplement these experiences, barriers to the use of SPs may include access and cost. Utilizing students from peer institutions can be a cost-effective way to expose students to cases they may not normally see in clinical practice. In addition, the virtual format of this strategy provides a more active learning approach for the student versus a didactic-based lecture. The purpose of this plenary session is to discuss the implementation strategies for developing and executing a general medical-based multisite virtual clinical education experience. This learning experience allows for both inter- and intraprofessional education and practice opportunities for the athletic training student in several domains of the profession, including developing plans of care, use of diagnostics, and appropriate referrals. This session will also provide educator participants with assessment and debriefing tools and lessons learned from conducting a virtual clinical education experience.

At the conclusion of this presentation, the attendee will be able to:

- Discuss implementation strategies for developing and executing a general medical-based multisite virtual clinical education learning experience.
- Identify inter- and intraprofessional learning opportunities present during a virtual clinical education experience for the athletic training student.
- Examine assessment strategies to help the athletic training educator to assess and debrief the athletic training student after a virtual clinical education experience.
- Present athletic training educators with concepts learned from the educator's perspective of executing virtual clinical education experience.
- Discuss how the virtual clinical education learning experience ties into the 2020 CAATE Professional Program Standards.

## vATEC 2021 Program Information

Plenary Session

### **Use of an Inter-Institutional Comprehensive Examination Process for Student and Curricular Assessment**

**\*Session is not eligible for BOC CEUs**

#### **Speakers**

Julie Cavallario, PhD, ATC and Luzita Vela, PhD, ATC

#### **Abstract**

Comprehensive examinations are a longstanding pedagogical and andragogical assessment strategy to determine student learning. In healthcare education, many programs include comprehensive examinations within their curriculum as a method to assess student learning and to prepare students for licensing or credentialing examinations that are often a requisite hurdle to legal, clinical practice. Research indicates that comprehensive examinations can allow the assessor to determine student learning and are predictive of performance on higher stakes credentialing and licensing examinations in other healthcare professions. Comprehensive examinations increase faculty buy-in to the programmatic review process, and can facilitate curriculum assessment to identify weaknesses and guide curricular changes. Over the past year, two institutions with professional, master's athletic training programs have developed a cross-institutional comprehensive examination that has been delivered to athletic training students at various time-points to assess individual strengths and weaknesses. Further, both programs have begun the process of analyzing the data to assess the achievement of each respective program's curricular goals and objectives. The development and implementation of such an undertaking is not without challenges, but with careful planning and some trial and error, the benefits may support the investment of time and effort. This presentation will identify multiple strategies to develop collaborative partnerships across institutions to collectively create comprehensive examinations that can be used to assess both individual student and respective program curriculum strengths and weaknesses. Concrete examples of potential challenges, solutions, and successes, as well as actual data collected, will be provided to enhance the applicability of the content presented.

At the conclusion of this presentation, the attendee will be able to:

- Develop collaborative partnerships across athletic training programs and institutions.
- Evaluate data points from various time periods in a student's progression to determine strengths, weaknesses, and remediation needs.
- Implement quality improvement processes to the respective programmatic curricula based on accumulated comprehensive examination data.

## vATEC 2021 Program Information

Plenary Session

**RIME Descriptive Vocabulary Framework to Evaluate Clinical Progression of Athletic Training Students.**

**\*Session not eligible for BOC CEUs**

### **Speakers**

Alicia Champagne, ATC

### **Abstract**

Within all facets of education, objective evaluation is essential to assess learning. Students, educators, and academic programs rely on accurate evaluations to determine progress. The development of an evaluation tool that is easy to implement in a variety of settings, with a wide range of evaluators, can help programs efficiently determine a student's progression. This presentation will introduce the RIME (Reporter – Interpreter – Manager – Educator) Framework as a solution to evaluation concerns. Preceptors' role strain and conflicting responsibilities make evaluation within the clinical setting difficult, which results in vague or non-specific feedback to students. Along with that, traditional scoring models do not typically provide helpful feedback regarding how to make improvements. RIME is a framework which gives a descriptive vocabulary to clarify expectations for both preceptors and students. The focus on specific, observable behaviors streamlines the process for preceptors, while promoting effective communication with students. The RIME framework provides useful data for all stakeholders. Preceptors utilize a uniform, descriptive vocabulary to evaluate performance, while also providing structure when giving feedback to students. Students know the expectations, how to progress, and can receive more consistent preceptor evaluation. Clinical education coordinators and program directors are able to view how students are progressing throughout their education and can quickly identify students who may need remediation. This presentation will cover the framework descriptions, challenges, implications for use, and practical tips for successful implementation. Specific examples from current use within an undergraduate athletic training program will be shared.

At the conclusion of this presentation, the attendee will be able to:

- Define the evaluation levels of the RIME Framework.
- Explain why a uniform vocabulary is beneficial when providing feedback to students in the clinical setting.
- Discuss potential challenges with implementation of a new evaluation tool.
- Outline ways to implement within a variety of settings.

## vATEC 2021 Program Information

Plenary Session

### **Academic Electronic Medical Records: An Educational Tool to Enhance Patient Documentation and Health Information Technology in Clinical Practice**

#### **Speakers**

Cailee Welch Bacon, PhD, ATC and Kenneth Lam, ScD, ATC

#### **Abstract**

The use of health information technology (HIT) has been a core component of healthcare education and clinical practice for two decades. Yet, evidence indicates athletic training (AT) students have limited exposure to HIT use during clinical experiences. Perhaps the patient care tool most associated with HIT is the electronic medical record (EMR). As highlighted in the AT Strategic Alliance's Prioritized Research Agenda, EMRs are essential to the AT profession as effective EMR use can improve patient care documentation, promote data use to drive evidence-based decisions, and enhance patient care quality. Despite the importance of EMRs, teaching and training students to use EMRs can be challenging. Legal and privacy considerations often restrict students from accessing EMRs during their clinical experiences, limiting the exposure and repetitions needed to establish habitual clinical practice patterns. To address these barriers and prepare students to transition to practice, healthcare professions have used academic EMRs (AEMRs), which mimic the form and function of clinical EMRs but are designed for simulated teaching and learning. AEMRs offer a variety of assignments including patient documentation tasks (eg, document mock patient cases, peer-to-peer record audits), critical reviews of standardized patient cases (eg, evaluation of best practices/evidence use, grand round discussions), and assessments of patient care data for quality improvement efforts. AEMR use in AT is limited but, in a recent survey, 90% of AT program directors indicated interest in using AEMRs. The purpose of this presentation is to discuss the benefits of AEMRs and describe their use as an educational tool.

At the conclusion of this presentation, the attendee will be able to:

- Identify common challenges associated with educating, training, and preparing students for the effective use of EMR during clinical practice (eg, restricted access to EMR due legal and privacy concerns, limited exposure and repetition during clinical experiences).
- Discuss how the use of an AEMR can address common challenges and better prepare students for the effective use of an EMR during clinical practice. For learners, the use of an AEMR may offer an opportunity to develop habitual practice patterns that will easily translate to clinical practice. For programs, an AEMR will offer greater flexibility for educational instruction (in-person or virtual), provide greater accessibility for students (on-site or remotely), and provide similar, life-like experiences of using an EMR during clinical practice.
- Describe educational approaches, active learning strategies, and assignments/assessments that can be employed within an AEMR to cover a range of clinical concepts (eg, patient care documentation, health information technology, evidence-based practice, grand rounds, quality improvement) that can be used to support clinical education.

#### **Domain**

Domain 5

## vATEC 2021 Program Information

Plenary Session

### **Creating Assessments that Align with Future Success: Tangible Tactics to Determine Clinical Readiness of the Athletic Training Student**

#### **Speakers**

Kimberly Mace, DAT, ATC and Kathryn Webster, PhD, ATC

#### **Abstract**

The aim of athletic training education is to develop critically thinking clinicians capable of delivering high quality care that will ultimately meet the needs of their future patients.<sup>1</sup> While many share this common goal, not all assessment practices are helpful in informing student achievement toward it.<sup>2</sup> Ensuring a student's readiness to practice in athletic training can be a challenge, particularly because the skill-based decision making required of clinicians is difficult to ascertain with traditional assessment techniques. This challenge may be more notable now as many programs transitioning to the graduate level extend over just two years. The benefits of utilizing a competency-based education (CBE) model to assess clinician readiness over any time period has been established in the literature.<sup>3</sup> While CBE has gained popularity in concept and language across healthcare fields, many may doubt its merit in their own program.<sup>4</sup> This may be due to the scope of available literature on CBE which is largely focused on theory and potential benefits, but extremely limited in discussion of practical application.<sup>3,5</sup> However, the promising opportunities of CBE shouldn't be overlooked when considering the difficult need for AT programs to ensure student preparedness to practice. The current transition to graduate professional education in athletic training presents an opportunity for exploration and re-imaging of programmatic assessment practices. This presentation purposes to discuss tangible opportunities to incorporate theoretical roots of CBE in assessments utilized within athletic training education programs.

At the conclusion of this presentation, the attendee will be able to:

- Consider how their current assessment strategies map against the aim of ensuring students are ready to begin practice as independent clinicians and offer educational materials for each program that will enhance participant understanding the content and foster application to clinical practice and patient care.
- Develop strategies to assess skill, course, and program objectives with assessments.
- Identify opportunities for integration of competency-based education practices in the creation of written and practical assessments.

#### **Domain**

Domain 2, Domain 5

## VATEC 2021 – On Demand Content

### *\*Courses Taken from Previously Recorded NATA Content*

#### Telemedicine Solutions for Clinical Practice

##### **Speaker**

Zachary Winkelmann, PhD, SCAT, ATC

##### **Abstract**

Telemedicine is the practice of healthcare delivery from a distance. In the practice of telemedicine, patients and providers can connect through various forms of technology for the purpose of immediate triage, musculoskeletal-based assessment, and concussion evaluation. Moreover, telemedicine can be used for interprofessional collaboration focused on therapeutic rehabilitation and patient education to maximize the continuity of care. Athletic trainers should explore the purpose and feasibility of using telemedicine as a supplement, rather than replacement, in their patient care. This presentation will explore best practices of facilitating a telemedicine encounter and provide recommendations to improve telemedicine solutions in one's clinical practice.

##### **Objectives**

- Describe the role of telemedicine within healthcare, specifically athletic training.
- Define the various mediums for telemedicine.
- Recall empirical evidence regarding the effectiveness of telemedicine.
- Identify the current and future role of telemedicine solutions including the best practices in facilitating telemedicine encounters in athletic training clinical practice.
- Describe the ethical and legal principles regarding telemedicine in athletic training.

##### **Domain**

Domain 1, Domain 2, Domain 3

## **Connecting Academic Programs and Clinical Practice Together to Inform System Improvement**

### **Speaker**

Christopher O'Brien, PhD, LAT, ATC and Anthony Breitbach, PhD, ATC, FASAHP

### **Abstract**

Health care system improvement requires shared commitment from academic programs and the healthcare industry. However, developing solutions/strategies collaboratively has logistical challenges. Through original research with an extensive review of the literature, ASAHP's Clinical Education Task Force (CETF) developed 5 recommendations to improve Clinical Education. The CETF then engaged with the ASAHP Professional Education Committee in a Summit designed to provide academic and healthcare industry stakeholder feedback on these recommendations with implementation strategies for academic and clinical settings to inform system improvement and enhance health outcomes. This session details the research methodology and presents recommendations and strategies for athletic trainers' use in education and clinical practice.

### **Objectives**

- Describe the ASAHP Clinical Education Task Force recommendations and implementation strategies.
- Describe the process used to develop these recommendations and strategies.
- Develop processes to improve clinical education, interprofessional collaboration and system improvement in specific athletic training context.

### **Domain**

Domain 1, Domain 3

## **Opioids and our Patients: What an Athletic Trainer Needs to Know**

### **Speaker**

Dana Bates, PhD, ATC

### **Abstract**

Athletic trainers work with patients who frequently are involved in activities that can result in injury and pain which may lead to being prescribed opioids. Assisting and helping our patients manage associated pain and management of opioids is critical to the healthcare provider when considering the well-being of our patients. Case studies and scenarios will be provided to illustrate the role athletic trainers play as a health care provider while looking at current and best practices of prescribing opioids and how to apply the lifesaving drug naloxone.

### **Objectives:**

- Participants will be able to recognize signs and symptoms of opioid misuse and abuse in an active population.
- Participants will be able to summarize physician current and best practices of prescribing opioids.
- Participants will be able to identify the role of an athletic trainer in managing opioid use in an active population.
- Participants will be able to organize and develop an assessment strategy for identifying potential opioid abuse.
- Participants will be able to apply lifesaving drug Naloxone.

### **Domain**

Domain 1, Domain 2, Domain 3, Domain 5

## **Infection Control in Interscholastic and Intercollegiate Health Care Sites Post COVID-19**

### **Speaker**

James Zachazewski, ATC, PT, DPT and Michael Belanger, ATC, PT, MSPT

### **Abstract**

The pandemic caused by COVID-19 has had an adverse impact on the health of the world's population. The development of COVID-19 has created the need for athletic trainers to understand and implement infection control guidelines, policies and procedures in the "traditional" interscholastic and intercollegiate athletic training setting. These infection control guidelines, policies and procedures are similar to those used in health care clinical environments and have not been consistently utilized in the traditional setting. Implementation requires development of a "new normal" concept in the "traditional" interscholastic and intercollegiate athletic training setting. This course will focus on providing the athletic trainer with the knowledge and resources by which to develop guidelines, policies and procedures required for their specific Athletic Health Care Center.

### **Objectives**

- Participants will be able to identify methods of mitigating exposure and transmission of COVID 19 in the Athletic Training Setting.
- Participants will be able to describe possible changes the attendee will need to consider in their Athletic Training Setting to mitigate exposure and transmission of COVID 19 or other infectious diseases.
- Participants will be able to determine policy and procedure changes necessary in their organization that will facilitate practice at a "new normal" level post COVID 19.

### **Domain**

Domain 1

## **Sleep As It Relates to Injury**

### **Speaker**

Jeremy Hawkins, PhD, LAT, ATC

### **Abstract**

Sleep and its role in recovery is a growing area of research. Scientists purport that proper recovery after training and competition enables athletes to return to their pre-workout conditions quickly.<sup>1-3</sup> The benefits of sleep with respect to injury recovery is less well known.<sup>4</sup> The purpose of this presentation is to provide background concerning the role that sleep plays in normal physiological process, as well as recovery from training and competition. Additionally, what is known about sleep and injury healing will be presented, giving attendees clear guidelines to follow with their patients.

### **Objectives**

- Participants will be able to explain the role of sleep in normal physiological processes.
- Participants will be able to explain the role of sleep in recovery from training and competition.
- Participants will be able to discuss the role sleep plays with injury healing.
- Participants will be able to modify a given treatment plan to best utilize adequate amounts of sleep.

### **Domain**

Domain 4

## **Sports Vision Training: A Look Towards Concussion Prevention and Rehabilitation**

### **Speaker**

Tamara Valovich McLeod, PhD, ATC, FNATA

### **Abstract**

Evaluating concussion in the context of a public health approach to study concussion prevention has been a focus of concussion research in the past few years. Concussion researchers have followed public health approaches that tend to emphasize prevention over treatment and engage multiple levels of the socio-ecological framework. Some preliminary data suggest that engaging the visual system through a pre-season sports vision training program may improve peripheral vision allowing student-athletes to anticipate blindside hits, which may prevent some concussions from occurring. While prevention programs may be of benefit as a primary prevention strategy, not all concussions will be prevented, requiring the development of secondary prevention strategies. In the case of sport-related concussion, secondary prevention strategies include appropriate treatment and management of the concussion, education, and post-injury anticipatory guidance. Post-injury deficits in vision or oculomotor function have been identified and specific assessments developed to target appropriate assessments of vision after concussion. Furthermore, some evidence suggests that oculomotor and visual rehabilitation is warranted and successful in some patients. This presentation will discuss the theory behind sports vision training, oculomotor function assessment, pre-season training exercises, and post-injury rehabilitation strategies.

### **Objectives**

- Participants will be able to discuss the role of vision in concussion prevention.
- Participants will be able to develop a pre-season sports vision program.
- Participants will be able to devise a post-injury vision rehabilitation plan.

### **Domain**

Domain 2

## **Clarifying the Functional Design and Consequences of Injury for the Clavicle and Acromioclavicular Joint**

### **Speaker**

Aaron Sciasci, PhD, ATC, PES

### **Abstract**

The intimate relationship between the clavicle and scapula has been recognized as pivotal for shoulder function. Injury to either the clavicle or acromioclavicular (AC) joint has the potential to disrupt that relationship resulting in decreased function and increased impairment. Traditionally, both clavicular fracture and AC joint injury have been viewed as static, 2-dimensional problems, which has driven clinical management to focus on the restoration of realignment without consideration for dynamic function. These static descriptions of the anatomy and biomechanics of the clavicle and AC joint do not provide the context for the most effective understanding of AC joint injuries. Furthermore, as the literature continues to grow on this topic, reports have been consistently showing scapular dysfunction to be at least moderately associated with clavicular and AC joint injury. The consequences of continuing to view these structures 2-dimensionally without consideration for scapular function could have a negative impact on evaluation and treatment outcomes. Therefore, this session intends to provide a more functional description, relating the anatomy to how it facilitates, guides, and optimizes 3-dimensional mechanics of the clavicle, scapula, AC joint, and arm to create motions, forces, and work to accomplish tasks. Functional consequences will be discussed in addition to the most current evidence-based evaluation and treatment recommendations.

### **Objectives**

- Participants will be able to describe the biomechanics of shoulder function when the clavicle and AC joint are intact.
- Participants will be able to describe the biomechanics of shoulder function when the clavicle and AC joint are injured.
- Participants will be able to distinguish between the Rockwood classification system and the ISAKOS classification system of AC joint injury.

### **Domain**

Domain 2, Domain 4

## **Telemedicine and Virtual Care – Considerations for the Athletic Trainer**

### **Speaker**

David Gallegos, MA, ATC, Cert. MDT

### **Abstract**

While Athletic Trainers are well versed in knowledge associated with in person healthcare and administration of such, I believe based on the recent demand and the increase in consumer mentality, there is an opportunity for additional education about telemedicine and the delivery of virtual care. At its core, telemedicine is a clinical delivery model that spans all domains of athletic training practice.

### **Objectives**

- Describe and define telemedicine and virtual care.
- Evaluate the impact of telemedicine on the goals of healthcare reform.
- Assess the threats and risks found in telemedicine.
- Identify industry resources.

### **Domain**

Domain 1, Domain 2, Domain 3, Domain 4, Domain 5

## **Making the Transition from Invaluable to Valuable Demonstrating Your Worth in an Athletic Training Setting**

### **Speaker**

Mike Hopper, MA, ATC

### **Abstract**

Healthcare decisions are often driven by data. Until recently, Athletic Training has lagged in demonstrating value, however, in a world of finite resources, it is imperative that ATs demonstrate value for position creation, sustainability, and improvement. In this presentation, ATs will be shown ways to demonstrate value through data collection and potential cost savings. This demonstration of value is important for stakeholders in order to support the sports medicine program. Using a secondary school setting as an example, the presenter will demonstrate methods that can be used across all settings to validate AT Value.

### **Objectives**

- Participants will be able to apply data collection techniques into their daily practice.
- Participants will be able to illustrate potential cost savings to their employer and patients through medical services rendered.
- Participants will be able to interpret treatment patterns and justify future staffing and facility needs.

### **Domain**

Domain 5

## **Appropriate Medical Care in Secondary Schools - Implementing the Appropriate Care for Secondary School Aged Athletes Standards**

### **Speaker**

Larry Cooper, MS, LAT, ATC, Bart Peterson, MSS, ATC and Jamie Woodall, MPH, LAT, ATC

### **Abstract**

The National Athletic Trainers Association created a task force in 2017 to revise and update the 2003 “Appropriate Medical Care for the Secondary School Aged Athlete” consensus statement. Based upon new research, the previous document was revised to reflect current research, language and current practices. The newly approved standards clearly identify specific areas where organizations should focus their resources and energy to provide best practices athletic health care to their secondary school aged athletes. A case study will be presented showcasing how an athletic trainer used the standards and an online tool to improve the health care at her school and build her athletic training program.

### **Objectives**

- Participants will be able to illustrate the process used to create the document.
- Participants will be able to distinguish the 12 standards and sub-standards identified in this process.
- Participants will be able to analyze and apply the potential uses of the tool in evaluation of their organizations current status.
- Participants will be able to evaluate their organization and recommend changes to the medical care they provide to secondary school aged athletes.

### **Domain**

Domain 5