

# Bethune-Cookman University



**Master of Athletic Training**

**Academic**

**&**

**Clinical Education**

**Handbook**



# BETHUNE-COOKMAN UNIVERSITY

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# BETHUNE-COOKMAN UNIVERSITY

## Introduction:

The faculty of the Master of Athletic Training Education Program (MAT program) would like to welcome you to Bethune-Cookman University (B-CU). We are pleased that you have chosen to pursue your career in Athletic Training and have chosen to do so within this unique program. We are certain that the next two years will prove to be both challenging and rewarding.

This handbook has been developed as a guide for the MAT program. We hope that it will serve you well throughout your tenure as a student. Additional information regarding student life and University policies and procedures can be found in the University Catalog. **The handbook is subject to change as policies and procedures need to be updated.**

## The B-CU Catalog:

[http://catalog.cookman.edu/preview\\_program.php?catoid=30&poid=3094&returnto=1906](http://catalog.cookman.edu/preview_program.php?catoid=30&poid=3094&returnto=1906)

## Bethune-Cookman University:

### *Mission*

The mission of Bethune-Cookman University is to educate a diverse community of learners to become responsible, productive citizens and solution seekers through the promotion of faith, scholarship, creative endeavors, leadership and service.

(Revised and approved by the Bethune-Cookman University Board of Trustees, January 17, 2020)

### *Vision*

Bethune-Cookman University will define new standards for academic excellence and student success by educating and empowering learners who will seek their own solutions; advocate opportunities for all citizens to improve their quality of life; and inculcate global perspectives and realities to people worldwide.

### *Values*

Bethune-Cookman University is guided by its core values: F.I.R.S.T.

**FAITH:** We recognize and uphold the Christian tradition while welcoming the diversity of faiths.

**INTEGRITY:** We live in a way that reflects our deepest convictions.

**RESPECT:** We recognize the inherent dignity and worth of each person.

**SERVICE:** We seek social justice through civic engagement.

**THIRST FOR KNOWLEDGE:** We are engaged in the continuous pursuit of learning that transforms us and the world.

**Approved by the Board of Trustees, October 2013**



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## *History*

In 1904, a very determined young black woman, Mary McLeod Bethune, opened the Daytona Educational and Industrial Training School for Negro Girls. The school underwent several stages of growth and development through the years. In 1923, it became a co-ed high school as a result of a merger with Cookman Institute of Jacksonville, Florida. A year later, the school became affiliated with the United Methodist Church, evolved into a junior college by 1931 and became known as Bethune-Cookman College.

In 1941, the Florida State Department of Education approved a four-year baccalaureate program offering liberal arts and teacher education. Mrs. Bethune retired in 1942, at which time James E. Colston became president. He served until 1946, when Mrs. Bethune resumed the presidency for a year.

Dr. Richard V. Moore, Sr. became president in 1947 and served until 1975. In 1970, under his tenure, the College was accredited by the Southern Association of Colleges and Schools. Later, the college joined the United Negro College Fund as well as other academic and professional organizations. The curriculum expanded, student enrollment increased, and new buildings were constructed for residential housing and classrooms.

Oswald P. Bronson, Sr., Ph.D., an alumnus of the College, served as the fourth president of the college from 1975 to 2004. During his tenure, increases in student enrollment led to continuous development and expansion of the college. A rapidly increasing student enrollment led to construction of more student housing and classroom buildings. Major fields of study increased from 12 in 1974 to 37 by 2003. In addition, seven Continuing Education sites for students began operating throughout the state. While maintaining accreditation by SACS, the Florida State Board of Education, and the United Methodist Church Board of Higher Education, the College added new accreditations in the Nursing and the Teacher Education programs.

Trudie Kibbe Reed, Ed.D. was appointed to the presidency in August 2004. Dr. Reed was the first woman to serve as president since Dr. Mary McLeod Bethune and under her leadership the institution launched its first Masters degree program in 2006 and achieved university status in 2007. The University also expanded and improved the school's physical plant with the purchase of nearby properties and construction, which included the Michael and Libby Johnson Center for Civic Engagement, the L. Gale Lemerand School of Nursing Building, Lee Rhyant Residential Life Center, and the Alexis Pugh Scholarship House. Lastly during her nine-year tenure Dr. Reed led successful efforts to increase enrollment and the University's endowment, helping ensure the continued mission and financial stability of the institution.



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After a one-year interim position Dr. Edison O. Jackson became the 6th president of Bethune-Cookman University during his October 2013 inauguration. During his tenure he increased philanthropic giving to the University, and maintained accreditations with SACSCOC, the Florida State Board of Education and the United Methodist Church Board of Higher Education. Dr. Jackson also remodeled the dining hall, renovated Gertrude Heyn Memorial Chapel, and added four additional floors to the Harrison Rhodes Memorial Social Science Building. Dr. E. LaBrent Chrite was President from 2019-2021 making strides throughout his short tenure.

Since 1943, the University has graduated more than 19,000 students who continue to support the institution. Traditionally, the University has maintained intercollegiate athletics programs, instrumental and choral groups which have achieved national recognition. Many alumni are employed in the fields of education, medicine, business, social science, politics, government, religion, communication, athletics, science and technology.

### **Accreditation Status:**

Bethune-Cookman University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award baccalaureate and master's degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Bethune-Cookman University.

The University is also accredited or approved by the following bodies:

### **Professional Accreditation:**

- Accreditation Commission for Education in Nursing, Inc. 3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326. Phone (404) 975-5000, <http://www.acenursing.org/>
- Accreditation Commission for Programs in Hospitality Administration
- Accreditation Council for Business Schools and Programs
- Council for the Accreditation of Educator Preparation
- The Engineering Accreditation Commission of ABET, <http://www.abet.org>.
- National Association of Schools of Music, <https://nasm.arts-accredit.org/>
- The Council on Education for Public Health
- The Commission on Accreditation of Athletic Training Education

### **Approvals:**

- Florida State Board of Nursing
- Florida State Department of Education
- The University Senate General Board of Higher Education and Ministry of the United Methodist Church



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## **College of Nursing & Health Sciences:**

### ***Mission***

The establishment of a College of Nursing and Health Science that will be dedicated to achieving wellness in diverse communities through education, community engagement, research, and professional preparation is being proposed. Collaborative efforts among the units that will be housed under this umbrella will assist in the elimination of health disparities, while promoting health equity among local, regional and global communities. The goal is to empower, engage and educate health professionals who will lead their fields to best to serve the health and well-being of a global community. In doing so, citizens will be encouraged to advocate for opportunities to improve their quality of life. This is congruent with the mission of the university which provides a “faith-based environment of academic excellence and transformative experiences that educates and empowers people to seek their own solutions, to advocate for opportunities for all citizens to improve their quality of life; and to inculcate an international perspective that would facilitate a keen appreciation of new global realities.” Creating a College of Nursing and Health Sciences will allow for the expansion of health care program offerings, while promoting a hub for campus health initiatives, and the creation of a brand for the University. The units comprising this area will work in collaboration in the provision of a work ready education to students, as well as provide for the health and safety of the campus. The units will engage in interdisciplinary activities such as course collaboration by teaching courses across disciplines, as well as collaborate in research initiatives. The units will also collaborate to promote the health of the campus and the local community.

### ***Vision***

The College of Nursing & Health Sciences is dedicated to achieving wellness in diverse communities through education, community engagement, and relevant research.

## **Master of Athletic Training Program:**

### ***Mission Statement***

The mission of the MAT program is dedicated to professional instruction and clinical experiences through education, research, professional preparation and collaborative interprofessional engagement. Through didactic preparation, clinical education, and student-faculty interactions, the MAT program will promote critical thinking, develop interprofessional collaboration, appropriate professional dispositions, encourage life-long learning, focus on ethical and evidence-based practice in an ever-changing healthcare environment. The goal is to empower, engage, educate and develop exceptional clinical practitioners who will recognize their role and lead their field to best serve the health, well-being and quality of life of the patients they encounter. Professional preparation will be under the framework of a “faith-based” environment of academic excellence and experiences that is congruent with the mission of Bethune-Cookman University.

### ***Vision Statement***

The Athletic Training Program at Bethune-Cookman University will provide advanced instruction and clinical experiences that focuses on knowledge, skills and dispositions in athletic training. The College of Nursing & Health Sciences is committed to becoming the leader in the area of Rehabilitation Sciences and Athletic Training amongst all Historically Black Colleges and Universities and small liberal arts colleges.

## **Goals and Objectives of the MAT program:**

**Goal 1:** To prepare athletic training students with ample experiences in the cognitive, psychomotor, and affective domains to succeed in the MAT program.

### **Objectives:**

1. Create innovative classroom, laboratory, and practicum experiences to improve learning through the use of various technological and instructional tools.
2. To prepare athletic training students to demonstrate professional and ethical conduct.
3. Assess future student needs via assessments and student outcomes



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**Goal 2:** To prepare athletic training students with various clinical experiences to develop their skills.

**Objectives:**

1. Provide quality clinical experience through upper and lower extremity, general medical, and equipment intensive clinical settings.
2. Structure learning opportunities that integrate the classroom, laboratory, and practicum experiences into the clinical setting.
3. Provide athletic training students with diverse athletic training knowledge, skills and experiences.

**Goal 3:** To prepare athletic training students for the BOC certification examination as well as future careers in the athletic training profession.

**Objectives:**

1. Review of educational competencies and clinical proficiencies matrix within the MAT curriculum.
2. Monitor ongoing changes with the CAATE, BOC, and NATA.
3. Develop the athletic training students' awareness and knowledge of the Role Delineation Study.
4. Adhere to and review the NATA Code of Ethics.

**Non-Discrimination Policy:**

B-CU does not discriminate on the basis of race, color, national origin, religion, gender, age, veteran status, political affiliation, sexual orientation or disability. The AT Program also does not discriminate on any of the above bases, however, enrollment in the AT Program does require the ability of the student to meet the Technical Standards for the duration of the program (see Technical Standards section of the Handbook).

## **I. ACADEMIC POLICIES AND PROCEDURES**

**Description of the Profession:**

Athletic trainers (ATs) are highly qualified, multi-skilled health care professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education, training and the state's statutes, rules and regulations. As a part of the health care team, services provided by athletic trainers include primary care, injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions.



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## Practice of Athletic Training:

Most states require some form of governmental regulation for one to practice Athletic Training. This regulation can be in the form of licensure, state certification, or state registration. While a student in the B-CU MAT Program, students **MUST** be aware that providing Athletic Training services in the absence of a Preceptor is in violation of the State of Florida Practice Act for Athletic Trainers. Once certified by the Board of Certification (BOC), in most cases, achieving state regulation simply involves an application and application fee. In some states the completion of a rules examination or knowledge examination is also required. It is also important to be aware that having a history of a criminal record, such as a felony, may prevent one from obtaining a license to practice Athletic Training in certain states.

## Classroom Attendance Policy:

Regular classroom attendance is required of all students. Students should attend class as a healthcare professional. This means arriving **on-time** and ready for class. Students will be asked to leave class and forbidden from attending the assigned field experience that day for any actions that do not demonstrate those of a healthcare professional.

## Retention Standards:

As a student in the Athletic Training Program you must:

- Enroll as a full-time student.
  - Maintain a cumulative grade point average of 3.0 or higher.
  - Achieve satisfactory evaluations in each Clinical Experience course before progressing.
  - Successfully complete coursework in the sequence indicated by the program of study unless approved by Athletic Training Program Director.
  - Abide by the Code of Ethics of the University, the College of Nursing & Health Sciences and those established by the National Athletic Trainers' Association and the Board of Certification
  - Obtain all vaccinations or proof of immunity as indicated on verification form prior to clinical experiences.
  - Maintain CPR and bloodborne pathogens training throughout the program
  - Maintain personal professional liability insurance throughout the program.
- \* Failure to meet the above standards may result in dismissal from the program.



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## **Academic Progression:**

Students proceed through the program in cohorts and are required to complete all the required courses each semester with a grade of “B “or better in order to progress to the next semester. Failure to earn a B in any course requires the student to retake the course when it is offered the next year. The student is NOT allowed to progress with clinical experiences until the course is remediated.

Students must maintain a 3.0 GPA in the Athletic Training courses each semester. Failure to meet the 3.0 GPA will result in the student being placed on academic probation. Probation includes the development of a study plan and progress meetings with the Program Director and may include attending mandatory study sessions. Two consecutive semesters on probation may result in the student being dismissed from the program. Students who do not complete the requirements will be dismissed from the program and may re-apply for the next cohort. If a student is dismissed due to academic performance, academic progress will be delayed by at least one year.

## **Remediation:**

In the case that a student does not maintain a 3.0, they must undergo remediation. Remediation may consist of additional content assessments and meetings with Faculty. Remediation contracts will be set up with Faculty on an individual basis. Failure to meet the terms of the contract will result in dismissal from the program. Assessment of clinical skills is done via practical exams in various courses. Failure to earn a 70% or better on a practical exam does not demonstrate competence of that clinical skill. In the event that a student fails to earn a 70% on any practical exam, they must be re-evaluated on that clinical skill until they demonstrate competence. Their final grade for that exam will be the average of the non-passing and passing scores.

## **Capstone/Cumulative Exam:**

Prior to sitting for the BOC exam, all students must successfully complete a week-long Capstone Exam with a Satisfactory or better. Components of the exam will include a comprehensive written exam, a simulated patient interaction, and design and implementation of a treatment plan. Day 1 of testing will consist of the written exam. Day 2, students will interview and assess a standardized patient. Days 3 and 4 students will design a comprehensive treatment plan for the patient and implement said treatment plan on Day 5. Failure to complete any component of the exam with a satisfactory will result in remediation of that portion of the assessment and may delay the ability to sit for the BOC exam.



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## **Graduation Requirements:**

- Maintenance of 3.0 GPA
- Completion of all Clinical education hours
- Completion of 60 credits
- Successful completion of the Comprehensive Exam
- Satisfactory completion of Proficiencies
- Preceptor Evaluations of Satisfactory or better

## **Students with Disabilities:**

Graduates must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. The B-CU MAT program acknowledges Section 504 of the 1973 Vocational Rehabilitation Act and PL 103-336, the Americans with Disabilities Act (ADA), but ascertains that the above minimum standards must be present for Athletic Training candidates.

B-CU is committed to the principles of Equal Educational and Employment Opportunities without regard to disabilities. Students with disabilities apply under the same guidelines as other students. If a student feels a disability has had an impact on grades, course choice or standardized admission test scores, the student may request consideration of this in the admissions process. Documentation of the disability and its relationship to the failure to satisfy a specific B-CU requirement should be submitted with the application for admission.

The Office of Student Disability Services coordinates learning assistance to eligible students with disabilities. Course related assistance and accommodations such as reader services, alternative exam administration, note takers and adaptive equipment are available through this office.

## **Professionalism Guidelines:**

As an allied health care profession recognized by the American Medical Association (AMA), B-CU's MAT program promotes and encourages behaviors that reflect the values, standards and codes of practice for which its membership will be held accountable. As such, the B-CU Athletic Training Program faculty encourages the Athletic Training students to acquire and exhibit desirable professional attributes. This assessment of professionalism will be left to the discretion of the professor. Students should refer to examples below, the Board of Certification (BOC) Code of Ethics, and other documents related to professional behavior. Examples may include, but are not limited to, unexcused or excessive absences, unexcused or excessive tardiness, classroom disruption, inappropriate use of technology in the classroom,



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not being prepared for classroom discussion, inappropriate dress, etc. If you have any questions regarding professional behaviors please discuss your concerns with the professor of the class.

## Attendance and Tardiness:

**Attendance at all classes is expected!** Formal attendance will not always be taken in class, but excessive tardiness and/or absences may result in further disciplinary action. If you are aware of an impending absence, you must inform your instructor proactively. Failure to inform the instructor ahead of time is unprofessional. Students are expected to be in class or clinicals ready to start at the assigned time. Tardiness is unprofessional and will not be tolerated.

## Communication:

**Communication is extremely important in health service professions.** You will have the opportunity to interact with numerous professionals on a daily basis either in person or through electronic communication. It is extremely important that you communicate properly. Physicians and faculty should be addressed as Dr. XXXX in written and verbal communications unless instructed otherwise by that individual. E-mail communication must remain professional. Introductions, such as “hey” etc., are unprofessional. Remember, you are representing not just you, but the Program, the University, the Faculty and the profession of Athletic Training. Be aware that inappropriate postings on social networking sites that depict you, the program or the profession in less than a professional manner will not be tolerated and is a violation of the professionalism policy.

## Dress and Grooming:

MAT students are a part of the College of Nursing & Health Sciences. At all levels of education and training, students are expected to maintain a proper professional image in their behavior and personal appearance at all times. During pre-clinical time, students are expected to wear clean, appropriate apparel to all academic functions and on the premises of the campus. Any time students have contact with patients in the non-athletic setting shorts are not to be worn. The B-CU Athletic Training polo and slacks may be worn, or appropriate professional attire such as slacks and a shirt or blouse and close-toed shoes may be worn. Conservative attire is a must. People express themselves in many different ways, and the recent trends in body piercing, tattooing, and unique hairstyles certainly fall under self-expression. The faculty enjoys the diverse backgrounds of the students in the program. However, because the clinical sites are classified as medical facilities and athletic training students are pursuing an education in a professional medical field, self-expression should be restricted while working with patients. All students must practice proper personal hygiene



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during clinical rotations. Good personal hygiene involves keeping all parts of the external body clean and healthy. Hair should be kept neat and out of the way.

### **Outside Employment:**

Outside employment is DISCOURAGED while you are in the Athletic Training Program. Students WILL NOT be excused from class or clinicals for outside employment. Outside activities cannot interfere with academic performance.

### **Enrollment in Other Programs:**

While in the Master of Athletic Training Program, a student's priority must be on the Athletic Training Classes and Athletic Training Clinical Experiences. This is not a pre-professional program for other educational programs such as physical therapy, occupational therapy, or physician assistant. Although it is commendable that students may want to pursue other degrees, or participate in other student organizations, the Athletic Training Program WILL be the priority during the two years the student is enrolled. Students will NOT be excused from class or clinicals to take pre-requisite courses for other programs.

### **Use of Technology in the Classroom:**

Technology is a wonderful tool and students will have access to the B-CU wireless network in the classrooms. Often times students will utilize laptop computers to complete assignments in class; However, inappropriate use of technology can hinder learning. Inappropriate use of technology (surfing the web, Facebook, texting, playing on-line games, etc.) is disrespectful to both the presenter and your classmates and is unprofessional. This will not be tolerated and you may be asked to leave the items outside of the classroom.

### **Cell Phone Policy:**

Students are not allowed to use cell phones in class. Please turn them off as you enter the classroom and keep them stored out of sight in your backpack, purse, or pocket. Texting during class is considered unprofessional.

### **Academic Integrity of Students:**

Athletic Training students are awarded the Master of Athletic Training degree in recognition of successful completion of course and clinical work. Each individual is expected to earn his or her degree on the basis of personal effort. Consequently, any form of cheating on examinations or plagiarism on assigned papers constitutes unacceptable deceit and dishonesty.



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Disruption of the classroom or teaching environment is also unacceptable. Unprofessional behaviors cannot be tolerated in the university community and will be punishable, according to the seriousness of the offense in conformity with established rules and procedures.

Academic integrity is the foundation of the B-CU system's commitment to the academic honesty and personal integrity of its University community. Academic integrity is grounded in certain fundamental values, which include honesty, respect and fairness. Broadly defined, academic honesty is the completion of all academic endeavors and claims of scholarly knowledge as representative of one's own efforts. Knowledge and maintenance of the academic standards of honesty and integrity as set forth by the University are the responsibility of the entire academic community, including the instructional faculty, staff and students.

Sanctions for Academic Dishonesty will depend on the seriousness of the offense and may include:

- An "F" or "Zero" grade on the subject paper, lab report, etc.
- An "F" in the course or activity in which credit may be earned.
- An "F" in the course (leading to expulsion from the University).
- Academic Dismissal for any violations of academic dishonesty policies or regulations.
- Revocation of the degree or Graduate Certificate following a thorough investigation

## **Grievance Policy:**

Students who wish to file a grievance may do so at any time. Such a grievance should be placed in writing within 30 days of a specific circumstance and given directly to the Athletic Training Program Director. If a grievance is not necessarily related to a single event, but rather a compilation of events, then a summary of such events should be presented in writing to the Athletic Training Program Director in a timely manner that is deemed reasonable by the Program Director. A compilation of events should preferably follow verbal attempts to resolve any concerns in a timely manner. The Program Director will review the grievance, gather all necessary facts and speak with all parties of interest, and make a decision, provided in writing to the student. A student may appeal a decision within 10 days in writing to the Dean of the College of Nursing & Health Sciences at which time the Dean will determine the appropriate steps to take. If the original grievance involves the Athletic Training Program Director, then the student may file a written complaint directly to the Chair of the Department, under the same guidelines previously described for filing a written grievance.

## **Interprofessional Education (IPE)**

Interprofessional Education (IPE) helps prepare health profession students to provide patient care in a collaborative team environment. Through interprofessional learning opportunities students from two or more professions learn with, from, and about each other to improve collaboration and quality of care. As part of the educational experience, all MAT students will be required to participate in IPE, collaborating with other health care professionals, and students within the College of Nursing and Health Sciences and other allied healthcare professionals



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## Masters in Athletic Training Curriculum (Subject to change)

Course #	Name	Credit Hour	Term	Professor
ATR 510	Foundations of Athletic Training	4	Summer I	Williams
ATR 512	Sport and Exercise Performance	3	Summer I	Mirtz
ATR 511	Nutrition in Sports	3	Fall I	JOW
ATR 521	Assessment and Management of Lower Extremities and Lumbar Spine	4	Fall I	DuBose
ATR 570	Clinical Education I	4	Fall I	CP
ATR 522	Assessment and Management of Upper Extremities and Cervical Spine	4	Spring I	DuBose
ATR 520	Psycho-social Aspects of Athletic Training	3	Spring I	JOW
ATR 571	Clinical Education II	3	Spring I	CP
ATR 542	Medical Conditions	4	Spring I	Williams
ATR 541	Modalities in Athletic Training	3	Summer II	DuBose
ATR 540	Rehabilitation in Athletic Training	3	Summer II	DuBose
ATR 531	Organization and Assessment of Athletic Training	3	Summer II	JOW
ATR 550	Research and Statistical Methods	3	Fall II	Mirtz
ATR 553	Current Issues and Management in Athletic Training	3	Fall II	Williams
ATR 572	Clinical Education III	3	Fall II	CP
ATR 573	Clinical Education IV	4	Spring II	CP
ATR 561	Capstone in Athletic Training	5	Spring II	Dubose
ATR 562	Culmination Experience in Athletic Training	2	Spring II	JOW
<b>TOTAL</b>		<b>60</b>		

Prerequisites	Admissions Requirements
Biology I w/Lab	BS, BA Degree from an accredited institution
Human Anatomy w/Lab (300 or 400 level)	3 Letters of recommendation from: 1 faculty, 1 AT and 1 person of your choice
Human Physiology w/Lab	Submitted GRE Score
Nutrition or Sports Nutrition	Minimum GPA: 2.75
Gen. Physics w/lab	Minimum 50 AT shadowing hours
Intro. to Statistics	Interview with MAT panel
Gen. Psychology	All prerequisites passed with at least a "C"
Gen. Chemistry w/lab	Written goals statement
	Pass a level II background check
	Meet the technical standards for admission



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## II. CLINICAL EDUCATION POLICIES AND PROCEDURES

### Clinical Education I-IV in Athletic Training

**3.3.5.3 credit(s)**

Once the Clinical Education Coordinator has decided on a location for the clinical rotation the student should follow these procedures:

1. Confirm that an affiliation agreement exists or is currently in-process.
2. Read and fill out all forms located in this handbook (see Appendices) & on ATrack.
3. Gather all the necessary signatures.
4. Attend all orientations/training sessions and needed requirements of the site.
5. Take care of all needed items for the clinical rotation including initial evaluation.

### **Annual Requirements: (Costs are due at the beginning of Summer/Fall semester each year)**

Students must complete the following items annually once accepted to the MAT Program:

- BLS Certification (American Heart Association BLS \$75 on-site training) (Every 2 years)
- Blood-borne Pathogens Certification (\$45 on-site training) (Annually)
- Liability Insurance Certificate (HPSO, NATA, etc.) (~\$38-\$100) (Annually)
- Complete a TB screen & Hep B vaccinations (Call SHS 386-481-2920 or your own physician)
- NATA Membership (NATA.org) (~\$80) (Annually)
- ATrack Membership (atrackonline.com) (~\$45 annually/~\$90 lifetime) (Annually)
- Immunizations up-to-date (copy) (Call SHS 386-481-2920 if needed)
- National Provider Identifier ([https://www.nata.org/sites/default/files/apply\\_npi\\_instructions.pdf](https://www.nata.org/sites/default/files/apply_npi_instructions.pdf))
- HIPAA & FERPA training & Form (onsite training) (Annually)
- Halifax Fingerprinting & Urine Drug Screening (<https://mycb.castlebranch.com/>)(Good for 5 years) (~\$38 Drug Test, ~\$49.25 FBI Level II Background Fingerprint live scan)
- Volusia County Fingerprinting (\$55)
- Diocese of Orlando Fingerprinting (\$50)
- Halifax Orientation (When assigned to the site)
- Student Orientation with B-CU (Annually)
- All related paperwork (Annually)
- Clothing: Polo Shirt (3/\$25), nametag (1/\$20)
- Medical Kit \$90, Penlight \$20, Patch \$10-\$20
- Prices are through 3<sup>rd</sup> party companies and are subject to change
- Each site requires a background check so you may be subject to multiple background checks in 1 year

**\*\*\*\*\*All items must be completed BEFORE the student can start the clinical rotation\*\*\*\*\***

### **B-CU Clinical Education Supervisors:**

Dr. Torrance Williams  
Program Director  
Master of Athletic Training  
Bethune-Cookman University  
640 Dr. Mary McLeod Bethune Blvd.  
Daytona Beach, FL 32114-3099  
Phone: 386-481-2103

Dr. Jyl O'Brien-Williams  
Clinical Education Coordinator  
Master of Athletic Training  
Bethune-Cookman University  
640 Dr. Mary McLeod Bethune Blvd.  
Daytona Beach, FL 32114-3099  
Phone: 386-481-2864



**Grading:** See individual course syllabi

### III. CLINICAL EDUCATION OVERVIEW

The faculty and staff in the College of Nursing & Health Sciences and the Master of Athletic Training Program at B-CU make every effort to promote educational and positive learning opportunities for athletic training students. Classroom education experiences provide the solid foundational knowledge that students will incorporate into their clinical settings. Clinical education experiences provide an opportunity for the athletic training student to integrate the knowledge learned in the classroom into the clinical setting. To benefit maximally from the classroom and the clinical education settings, athletic training students should communicate regularly with their instructors and other members of the MAT Program team. Regular interaction with instructors helps the instructors to identify strengths and weaknesses for each student, thus students can be further challenged in their strong areas, and provided additional assistance in their weaker areas. Likewise, the clinicians enhance the ability of the athletic training student to utilize psychomotor, cognitive, and affective skills related to athletic training proficiencies. Regular communication with preceptors, therefore, promotes the greatest amount of learning and growth.

Clinical education will follow a logical progression that allows for increasing amounts of clinically supervised responsibility leading to autonomous practice upon graduation. The clinical education plan outlines the sequence of formal instruction of athletic training knowledge, skills, and clinical abilities, including clinical decision-making.

Clinical education will provide students with authentic, real-time opportunities to practice and integrate athletic training (AT) knowledge, skills, and clinical abilities, including decision-making and professional behaviors required of the profession in order to develop proficiency as an Athletic Trainer. Clinical education will allow students opportunities to practice with different patient populations, health care providers, and in various health care settings relative to B-CU-MATP mission statement.

All students enrolled in clinical education courses will be required to gain clinical experience in a variety of patient populations, care providers, and healthcare settings as a criterion for successful completion of the clinical education course(s).

The B-CU MAT program clinical education component includes clinical practice opportunities with varied client/patient populations. Students gain experience with patients with a variety of health conditions commonly seen in athletic training practice. Populations must include clients/patients in the following, but not limited to, areas:

- throughout the lifespan (for example, pediatric, adult, elderly),



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- of different sexes, with different socioeconomic statuses,
- of varying levels of activity and athletic ability (for example, competitive and recreational, individual and team activities, high- and low-intensity activities),
- who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).

**All of the above are required components for successful completion of all clinical education courses. All students must complete BLS, BBP, HIPAA/FERPA Training before starting their clinical rotation sites.**

The program defines clinical experiences with a variety of patient populations as, but not limited to a setting that includes team and individual sports, sports requiring protective equipment, different sexes, non-sport and non ortho patient populations.

The program defines a variety of care providers to include, but not limited to: general practitioners, family physicians, AT, PT, massage therapists, strength and conditioning coaches, and specialists.

The program defines a variety of healthcare settings to include, but not limited to the following settings high school, college, physical therapy clinic, physician's office, and hospital.

The program defines a non-sport experience as, but not limited to contact with patients at the physical therapy clinic, hospital, and primary care office.

The program defines experiences with conditions other than orthopedic as, but not limited to internal medicine, primary care, dermatological, general medical and illness.

Each Fall and Spring semesters students will be assigned to a clinical education site.

#### **IV. CLINICAL EXPERIENCES**

Clinical experiences are concurrent with Athletic Training Practicum Courses (ATR 570, ATR 571, ATR 572, & ATR 573) which span the length of over two academic years. Experiences will occur during fall and spring semesters. Athletic training students must be officially enrolled in the B-CU MATP, have completed all clinical health and safety requirements, and be registered in the respective practicum course, prior to beginning clinical experiences and performing skills on patients.

Each athletic training student will be assigned to a Preceptor, who will instruct, guide and mentor the AT student, and who will be physically present on-site for all assigned clinical experiences. Distinction must be made that the AT student is assigned to a Preceptor, not to a



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location or to a sport. Clinical experiences will occur each semester in accordance to the progression within the curriculum and in compliance to the CAATE guidelines. The MAT student has the responsibility for travel to assigned clinical sites both on-campus and off-campus. A reliable mode of transportation is required.

Clinical education assignment designation will not discriminate based on sex, ethnicity, religious affiliation, or sexual orientation. Students will gain clinical education experiences that address the continuum of care that would prepare them to function in a variety of settings with patients engaged in a range of activities with conditions described in athletic training knowledge, skills and clinical abilities, Role Delineation Study and standards of practice described for a certified athletic trainer in the profession. Examples of clinical experiences will include, but are not limited to:

- Individual and team sports
- Sports requiring protective equipment (e.g., helmet and shoulder pads)
- Non-sport patient populations (i.e., outpatient clinic, emergency room, primary care office, industrial, etc.)
- Conditions other than orthopedics (e.g., primary care, internal medicine)

### **Parameters of Clinical Education Experiences:**

Experiences must be supervised and must be educational in nature, reflecting responsibilities and opportunities representative of an athletic trainer.

- Students must be instructed on AT clinical skills prior to performing those skills on patients
- Students must have a minimum of one (1) day off in every seven (7)-day period
- Students will not and cannot receive any monetary remuneration during clinical education experience, excluding scholarships (in other words, for any official B-CU MATP clinical education experience, students cannot get paid for assisting in the delivery of health care)
- Students will not and cannot replace professional athletic training staff or medical personnel (see supervision section)
- Clinical education hours are not to exceed maximum hours without permission (see Clinical Hours)
- Clinical Hours are determined by 1 semester credit is equal to 100 Clinical hours



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## Criteria for Progression through Clinical Experiences:

The AT student must receive a grade of a "B" or higher to progress into the next sequenced practicum course. Each practicum course syllabus will describe the components used to determine the grade, but in general, a student must complete the following requirements:

- Accrue required clinical experience hours
- Submit required course assignments
- Professionalism throughout the clinical rotation & satisfactory performance evaluations from Preceptors
- Submit required evaluations forms (SCORES, Ortho eval etc.) (ATrack)
- Complete the psychomotor skills and/or clinical proficiency evaluations required for the respective practicum course (See Appendix C)
- Abide by all items of the clinical handbook and syllabi

## **V. CLINICAL/IMMERSION SITE PLACEMENT**

To provide a well-rounded clinical education experience, we have affiliation agreements with area high schools, colleges, physical therapy clinics, hospitals, and physician offices. Affiliated sites must meet specified standards, and clinical & immersion hours can only be accrued at these affiliated sites. All clinical/immersion education sites are evaluated by the B-CU MATP on an annual and planned basis. These evaluations are used to identify strengths, weaknesses and areas of improvements at each clinical site as part of our overall comprehensive evaluation plan. It is the students' responsibility to meet with their preceptor at the beginning of their clinical/Immersion experience to go over their goals form to map out their approximate schedule for that rotation (i.e. approximate schedule, days off, and potential scheduling problems such as exams or classes). In addition, students must review the emergency action plans and BBP policies of their assigned venue and review all professional behavior or policy expectations with their preceptor at the beginning of each clinical/immersion rotation.

### **First Year:**

Initial clinical placement is affiliated with the ATR 570 – Athletic Training Fall Practicum course. The AT student must hold current BLS CPR/AED certification (Healthcare Provider through American Heart Association), Bloodborne Pathogens Certification, have successfully completed all of the health and safety requirements, orientations and have successfully completed all assigned skill evaluations prior to beginning this clinical experience. This will ensure that the AT student has obtained a basic skill level necessary to begin clinical



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education. The following lists contain the requirements, goals and objectives for the MAT student enrolled in the ATR 570 course in Fall I.

## **Fall I:**

Upon successful completion of this course students will be able to demonstrate the appropriate knowledge and skill base to understand the basic principles of:

1. Demonstrate proper recognition, care, and treatment of athletic injuries and medical conditions related to emergency care.
2. Identify and demonstrate proper use of adjunct basic airway with or without supplemental oxygen for emergency procedures and regulations for use.
3. Perform appropriate emergency evaluation of critically injured or ill patient including vital signs, primary assessment, secondary assessment and appropriate response.
4. Perform proper fitting of and removal of equipment utilized in various stages of athletic participation.
5. Perform proper taping and wrapping techniques for acute and chronic injuries.
6. Perform proper techniques while moving and transporting an athlete, including spine boarding and splinting.
7. Identify and demonstrate appropriate development of pre-participation physical exam as well as identification of at-risk individuals including prevention strategies.
8. Demonstrate and explain principles of environmental illness including prevention, identification, and implications.
9. Demonstrate the ability to complete proper documentation and communication with medical professionals.
10. At the conclusion of this course, students will have completed the competencies and proficiencies associated with the following courses: ATR 510, ATR 512, ATR 511, ATR 521.

## Professionalism:

The student will:

- Be on time for all clinical assignments. Set up and ready to go by the scheduled time, not walking in the door at the scheduled time.
- Demonstrate reliability and responsibility at all times.
- Dress, practice proper personal hygiene and behave appropriately during clinical rotations. (see dress code specifications)
- Display a positive attitude.
- Display an initiative to learn. Do not wait for the preceptor to ask.
- Complete all assigned tasks in a timely manner and to the satisfaction of the preceptor.



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- Follow all policies and procedures of the preceptor, the clinical site and the MAT handbook.
- Be familiar with OSHA, HIPAA/FERPA, and EAP standards.
- Comply with all OSHA, HIPAA/FERPA, EAP standards and policies and procedures of the site.
- Communicate effectively with the athletic training staff and athletes/patients.
- Communicate effectively with the Clinical Education Coordinator. **Major decisions or events need to be brought to the CEC first and then to the preceptor.** If you are unsure speak with the CEC first.
- Make all requests of the site or preceptor in person and not through text message or email. (days off, schedule changes, additional hours, working with other sport etc.)
- If you are going to be late or can't make it to your clinical you need to call the preceptor and message the Clinical Education Coordinator.
- Use appropriate medical terminology and language.
- Not speak with the athletes about personal problems or issues with others.

### Clinical Skills and Proficiencies:

The student will:

- Apply tape, wraps and braces to the lower extremity that meet entry-level standards and are effective and safe for the athlete/patient.
- Perform first aid skills as needed.
- Apply heat modalities as needed.
- Apply cold modalities as needed.
- Participate in game and practice set-up.
- Participate in hydration of athletes during practice and games.
- The student shall display entry-level proficiency in these areas by the end of the clinical rotation.

### Policies & Procedures:

The student will:

- Complete 300 clinical observation hours with a minimum of 20 hours a week. Max 25 hours per week with permission.
- Become familiar with the policies, procedures, BBP policy, EAP and the layout of the assigned clinical site. This is to include all sport medicine supplies, equipment and location of EMS during events.
- Complete a mandatory orientation and goals sheet with preceptor(s) at the beginning of each semester.



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- MAT students will complete all mid-term and final site, self and preceptor evaluations, SCORES report, hour logs, patient encounters and Orthopedic evaluation forms in the ATrack system by the due date.
- Preceptors will complete all mid-term and final student evaluations, SCORES report, and Orthopedic evaluation forms in the ATrack system by the due date.
- Review all competencies/standards with the assigned preceptor(s) related to each course.
- Review and receive signatures for the competencies/standards sheet(s).
- Keep clinical education coordinator abreast of any issues during clinical sessions.
- Review all items learned in courses with preceptors.
- Be prepared to learn, observe and be hands on in many different types of weather conditions. If needed, the student is to acclimate themselves before the clinical rotation begins. It is the student's responsibility to come prepared to their clinical rotation. You will not be excused due to weather unless there is imminent danger.
- Ask questions of preceptors and schedule regular feedback sessions.
- Observe all injury and illness evaluations until the preceptor is comfortable enough for you to evaluate on your own.

Students complete rotations of on-campus and off-campus experiences with Preceptors in a variety of health care settings, working with sport and non-sport populations. Specific placement for students is randomized to ensure fair and equal opportunity for all students. Experiences are designed to address the requirements set forth by the CAATE for the variety necessary to prepare students to work with diverse populations in diverse settings. The following lists contain the requirements, goals and objectives for the MAT student enrolled in the ATR 571 course in Spring I.

### **Spring I:**

Upon successful completion of this course students will be able to demonstrate the appropriate knowledge and skill base to understand the basic principles of:

1. Demonstrate the knowledge of Goniometry and Anthropometric Measurements.
2. Demonstrate the ability to perform comprehensive evaluations of the Lower Extremity (Posture, Back, Hip, Knee, Ankle, and Foot).
3. Demonstrate proper referral techniques.
4. Demonstrate knowledge of return to play criteria and functional assessment for the Lower Extremity.
5. Demonstrate proper techniques for basic airway maintenance including supplemental oxygen.
6. Demonstrate knowledge of nutritional considerations for the physically active including patient education, basic recommendations, current guidelines, pre and post activity recovery, body composition, weight management.



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7. Demonstrate development of prevention strategies related to injuries and illness related to the physically activity.
8. At the conclusion of this course, students will have completed the competencies and proficiencies associated with the following courses: ATR 510, ATR 512, ATR 511, ATR 521, ATR 522, ATR 520, ATR 542

### Professionalism:

The student will:

- Be on time for all clinical assignments. Set up and ready to go by the scheduled time, not walking in the door at the scheduled time.
- Demonstrate reliability and responsibility at all times.
- Dress, practice proper personal hygiene and behave appropriately during clinical rotations. (see dress code specifications)
- Display a positive attitude.
- Display an initiative to learn. Do not wait for the preceptor to ask.
- Complete all assigned tasks in a timely manner and to the satisfaction of the preceptor.
- Follow all policies and procedures of the preceptor, the clinical site and the MAT handbook.
- Be familiar with OSHA, HIPAA/FERPA, and EAP standards.
- Comply with all OSHA, HIPAA/FERPA, EAP standards and policies and procedures of the site.
- Communicate effectively with the athletic training staff and athletes/patients.
- Communicate effectively with the Clinical Education Coordinator. **Major decisions or events need to be brought to the CEC first and then to the preceptor.** If you are unsure speak with the CEC first.
- Make all requests of the site or preceptor in person and not through text message or email. (days off, schedule changes, additional hours, working with other sport etc.)
- If you are going to be late or can't make it to your clinical you need to call the preceptor and message the Clinical Education Coordinator.
- Use appropriate medical terminology and language.
- Not speak with the athletes about personal problems or issues with others.



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## Clinical Skills and Proficiencies:

The student will:

- Apply tape, wraps and braces to the upper extremity that meet entry-level standards and are effective and safe for the athlete.
- Provide wound care as requested by the preceptor.
- Provide on-field and/or emergency care as requested by the preceptor.
- Apply therapeutic modalities as requested by the preceptor.
- Evaluate and document athletic injuries as needed.
- Participate in game and practice set-up.
- Participate in hydration of athletes during practices and games.
- The student shall display entry-level proficiency in these areas by the end of the clinical rotation.

## Policies & Procedures:

The student will:

- Complete 300 clinical observation hours with a minimum of 20 hours a week. Max 25 hours per week with permission.
- Become familiar with the policies, procedures, BBP policy, EAP and the layout of the assigned clinical site. This is to include all sport medicine supplies, equipment and location of EMS during events.
- Complete a mandatory orientation and goals sheet with preceptor(s) at the beginning of each semester.
- MAT students will complete all mid-term and final site, self and preceptor evaluations, SCORES report, hour logs, patient encounters and Orthopedic evaluation forms in the ATrack system by the due date.
- Preceptors will complete all mid-term and final student evaluations, SCORES report, and Orthopedic evaluation forms in the ATrack system by the due date.
- Review all competencies/standards with the assigned preceptor(s).
- Review and receive signatures for the competencies/standards sheet(s).
- Keep clinical education coordinator abreast of any issues during clinical sessions.
- Review all items learned in courses with preceptors.
- Be prepared to learn, observe and be hands on in many different types of weather conditions. If needed, the student is to acclimate themselves before the clinical rotation begins. It is the student's responsibility to come prepared to their clinical rotation. You will not be excused due to weather unless there is imminent danger.
- Ask questions of preceptors and schedule regular feedback sessions.
- Observe all injury and illness evaluations until the preceptor is comfortable enough for you to evaluate on your own.



**Second Year:**

Students will complete rotations designed to allow the AT student to be mentored by a preceptor for an entire sport-season to become fully integrated into the daily health care of athletes. Placements are determined by the Clinical Education Coordinator (CEC) following consultations with students, preceptors and the B-CU MATP Director. Although student requests are considered, it is important for students to understand that satisfying student preferences comes secondary to satisfying the CAATE accreditation standards.

The following additional factors are also taken into consideration:

- Didactic and clinical performance in the B-CU MATP
- Previous clinical experiences in the B-CU MATP
- Personal attributes of the AT student
- Previous disciplinary actions

**Fall II: Clinical Immersion**

The following lists contain the requirements, goals and objectives for the MAT student enrolled in the ATR 572 course in Fall II

Upon successful completion of this course students will be able to demonstrate the appropriate knowledge and skill base to understand the basic principles of:

1. Demonstrate a thorough understanding of the principles associated with therapeutic modalities selection, application, and evaluation based on evidence-based guidelines.
2. Demonstrate the ability to perform comprehensive evaluations of the Upper Extremity (Hand, Wrist, Elbow, Shoulder, Cervical, Spine, and Head).
3. Demonstrate knowledge of return to play criteria and functional assessment for the Upper Extremity.
4. Identify and demonstrate proper referral for patients with disordered eating.
5. Demonstrate knowledge of strength and conditioning including identifying and describing the standard tests, testing equipment, and testing protocols that are used for measuring fitness, body composition, posture, flexibility, muscular strength, power, speed, agility, and endurance.
6. At the conclusion of this course, students will have completed the competencies and proficiencies associated with the following courses: ATR 510, ATR 512, ATR 511, ATR 521, ATR 522, ATR 520, ATR 542, ATR 540, ATR 541, ATR 531, ATR 550, ATR 553



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## Professionalism:

The student will:

- Be on time for all clinical assignments. Set up and ready to go by the scheduled time, not walking in the door at the scheduled time.
- Demonstrate reliability and responsibility at all times.
- Dress, practice proper personal hygiene and behave appropriately during clinical rotations. (see dress code specifications)
- Display a positive attitude.
- Display an initiative to learn. Do not wait for the preceptor to ask.
- Complete all assigned tasks in a timely manner and to the satisfaction of the preceptor.
- Follow all policies and procedures of the preceptor, the clinical site and the MAT handbook.
- Be familiar with OSHA, HIPAA/FERPA, and EAP standards.
- Comply with all OSHA, HIPAA/FERPA, EAP standards and policies and procedures of the site.
- Communicate effectively with the athletic training staff and athletes/patients.
- Communicate effectively with the Clinical Education Coordinator. **Major decisions or events need to be brought to the CEC first and then to the preceptor.** If you are unsure speak with the CEC first.
- Make all requests of the site or preceptor in person and not through text message or email. (days off, schedule changes, additional hours, working with other sport etc.)
- If you are going to be late or can't make it to your clinical you need to call the preceptor and message the Clinical Education Coordinator.
- Use appropriate medical terminology and language.
- Not speak with the athletes about personal problems or issues with others.

## Clinical Skills and Proficiencies:

The student will:

- Administer testing procedures to obtain baseline data regarding a patient's level of general health. Use this data to design, implement, evaluate and/or modify a program specific to the patient's health goals.
- Instruct patients in the proper performance of an exercise program to improve their health.
- Explain the role of exercise in maintaining overall health.
- Educate patients to effect health-related change.
- Recognize the signs and symptoms of potential injury and/or illness that may occur during exercise.



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- Refer to other medical and health professionals as needed.
- Select, apply, and evaluate standard protective equipment.
- Apply taping, wrapping, bracing, padding or other custom devices for the patient to prevent and/or minimize the risk of injury to the:
  - Head
  - Torso
  - Spine
  - Lower extremity
  - Upper extremity
- Develop, implement and monitor prevention strategies for at-risk individuals.
- Obtain and interpret data related to potentially hazardous environmental conditions, monitor body functions and make the appropriate recommendations for individual safety and activity status.
- Select and integrate appropriate psychosocial techniques into a patient's treatment or rehabilitation program to enhance rehabilitation adherence, return to play and overall outcomes.
- Demonstrate the ability to recognize and refer at-risk individuals and individuals with psychosocial disorders and/or mental health emergencies.
- Develop an appropriate management plan that establishes a professional helping relationship with the patient, ensures interactive support and education and encourages the athletic trainer's role of informed patient advocate in a manner consistent with current practice guidelines.

### Policies & Procedures:

The student will:

- Complete 400 clinical observation hours over a 10-week period.
- Become familiar with the policies, procedures, BBP policy, EAP and the layout of the assigned clinical site. This is to include all sport medicine supplies, equipment and location of EMS during events.
- Complete a mandatory orientation and goals sheet with preceptor(s) at the beginning of each semester.
- MAT students will complete all mid-term and final site, self and preceptor evaluations, SCORES report, hour logs, patient encounters and Orthopedic evaluation forms in the ATrack system by the due date.
- Preceptors will complete all mid-term and final student evaluations, SCORES report, and Orthopedic evaluation forms in the ATrack system by the due date.
- Review all competencies/standards with the assigned preceptor(s) related to each course.
- Review and receive signatures for the competencies/standards sheet(s).



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- Keep clinical education coordinator abreast of any issues during clinical sessions.
- Review all items learned in courses with preceptors.
- Be prepared to learn, observe and be hands on in many different types of weather conditions. If needed, the student is to acclimate themselves before the clinical rotation begins. It is the student's responsibility to come prepared to their clinical rotation. You will not be excused due to weather unless there is imminent danger.
- Ask questions of preceptors and schedule regular feedback sessions.
- Observe all injury and illness evaluations until the preceptor is comfortable enough for you to evaluate on your own.

### Spring II:

The following lists contain the requirements, goals and objectives for the MAT student enrolled in the ATR 573 course in Spring II

Upon successful completion of this course students will be able to demonstrate the appropriate knowledge and skill base to understand the basic principles of:

1. Demonstrate the ability to perform comprehensive evaluations of the Lower Extremity and Upper Extremity.
2. Demonstrate proper referral techniques for general medical conditions as well as psychosocial intervention.
3. Perform clinical evaluation and proper referral procedures for general medical conditions including, abdominal, pulmonary, cardiac, vision, ENT, urinalysis, and dermatological.
4. Identify and demonstrate prevention strategies for leading causes of sudden cardiac death.
5. Recognize and identify at-risk individuals and utilize psychosocial intervention technique including personality, motivation, and appropriate interactions.
6. Demonstrate principles of pharmacology for common medications related to the physically active population, administrative procedures and effects on healing.
7. At the conclusion of this course, students will have completed the competencies and proficiencies associated with the following courses: ATR 510, ATR 512, ATR 511, ATR 521, ATR 522, ATR 542, ATR 540, ATR 541, ATR 531, ATR 553, ATR 551, 561, ATR 562

### Professionalism:

The student will:

- Be on time for all clinical assignments. Set up and ready to go by the scheduled time, not walking in the door at the scheduled time.
- Demonstrate reliability and responsibility at all times.



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- Dress, practice proper personal hygiene and behave appropriately during clinical rotations. (see dress code specifications)
- Display a positive attitude.
- Display an initiative to learn. Do not wait for the preceptor to ask.
- Complete all assigned tasks in a timely manner and to the satisfaction of the preceptor.
- Follow all policies and procedures of the preceptor, the clinical site and the MAT handbook.
- Be familiar with OSHA, HIPAA/FERPA, and EAP standards.
- Comply with all OSHA, HIPAA/FERPA, EAP standards and policies and procedures of the site.
- Communicate effectively with the athletic training staff and athletes/patients.
- Communicate effectively with the Clinical Education Coordinator. **Major decisions or events need to be brought to the CEC first and then to the preceptor.** If you are unsure speak with the CEC first.
- Make all requests of the site or preceptor in person and not through text message or email. (days off, schedule changes, additional hours, working with other sport etc.)
- If you are going to be late or can't make it to your clinical you need to call the preceptor and message the Clinical Education Coordinator.
- Use appropriate medical terminology and language.
- Not speak with the athletes about personal problems or issues with others.

### Clinical Skills and Proficiencies:

The student will:

- Perform a comprehensive clinical examination of a patient with an injury to the following areas:
  - Upper extremity
  - Lower extremity
  - Head
  - Neck
  - Thorax
  - Spine

The exam should incorporate clinical reasoning in the selection of assessment tools and procedures.

- Interpret findings from clinical examination in order to formulate a diagnosis, determine underlying impairments, activity limitations and participation restrictions.
- Based on assessment data and consideration of patient goals, provide appropriate initial care and establish overall treatment goals.



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- Create and implement therapeutic interventions that may include therapeutic modalities, medications and rehabilitation.
- Integrate and interpret various forms of standardized documentation.
- Make recommendations about activity level based on patient-oriented and clinician-oriented outcomes measures.
- Make return-to-play decisions and maximize patient outcomes and progress in a treatment plan.
- Perform a comprehensive clinical examination of a patient with a common illness or condition.
- Determine if patient referral is needed.
- Identify potential restrictions in activity.
- Formulate and communicate the appropriate return to activity protocol.
- Clinically evaluate and manage a patient with an emergency injury or condition. Include an assessment of vital signs, level of consciousness, and activation of emergency action plan, secondary assessment, diagnosis, and provision of appropriate emergency care.
- Utilize documentation strategies to effectively communicate with patients, physicians, insurers, colleagues, administrators, parents or family.
- Use appropriate medical terminology in documentation.
- Comply with statutes that regulate privacy of medical records.
- Use a comprehensive patient-file management system for documentation, risk management, outcomes and billing.

### Policies & Procedures:

The student will:

- Complete 300 clinical observation hours with a minimum of 20 hours a week. Max 25 hours per week with permission.
- Become familiar with the policies, procedures, BBP policy, EAP and the layout of the assigned clinical site. This is to include all sport medicine supplies, equipment and location of EMS during events.
- Complete a mandatory orientation and goals sheet with preceptor(s) at the beginning of each semester.
- MAT students will complete all mid-term and final site, self and preceptor evaluations, SCORES report, hour logs, patient encounters and Orthopedic evaluation forms in the ATrack system by the due date.
- Preceptors will complete all mid-term and final student evaluations, SCORES report, and Orthopedic evaluation forms in the ATrack system by the due date.
- Review all competencies/standards with the assigned preceptor(s) related to each course.



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- Review and receive signatures for the competencies/standards sheet(s).
- Keep clinical education coordinator abreast of any issues during clinical sessions.
- Review all items learned in courses with preceptors.
- Be prepared to learn, observe and be hands on in many different types of weather conditions. If needed, the student is to acclimate themselves before the clinical rotation begins. It is the student's responsibility to come prepared to their clinical rotation. You will not be excused due to weather unless there is imminent danger.
- Ask questions of preceptors and schedule regular feedback sessions.
- Observe all injury and illness evaluations until the preceptor is comfortable enough for you to evaluate on your own.

### **Non-Sport Patient Populations:**

To ensure that students are exposed to conditions other than orthopedic, each student may complete rotations within, but not limited to: family practice, hospital Emergency Department, and other non-athletic health care settings. For those times when the clinical rotation site may be unavailable, simulation will be substituted.

### **VI. SUPERVISION AND RELATED POLICIES**

***The B-CU MATP Clinical Supervision Policy is compliant with the CAATE Accreditation Standards and the Florida Athletic Training Practice Act***

Students will have the opportunities to interact with a variety of medical and health care personnel. An athletic trainer, certified by the Board of Certification (BOC, who currently possesses the appropriate state athletic training practice credential, will supervise (serve as a preceptor) the majority of the student's clinical coursework (i.e., clinical education experiences). The remaining clinical coursework may be supervised by any appropriately state credentialed medical or health care professional (Physician or AT to count hours).

### **Direct supervision:**

Direct supervision (physically present) describes the supervision required of students during clinical experiences. The Preceptor must be physically present and have the ability to intervene on behalf of the patient and the AT student. This requirement, however, is not synonymous with preventing students from making clinical decision. Students are strongly encouraged to make clinical decisions, commensurate with their progression in the program, in consultation with the Preceptor or other qualified health care professionals.



**Graded (Direct) Supervision:**

The B-CU MATP incorporates a graded method of supervision, which initially involves close monitoring (key words: “hip pocket”), but progresses to supervised autonomy, once a student demonstrates proficiency. This level of supervision positions students to learn maximally at all times, while still allowing for timely feedback and prompt correction of potentially unsafe behaviors/techniques. Direct supervision, when properly implemented, should encourage clinical decision-making during actual patient/client care.

**Parameters of Supervision:**

- Students must be directly supervised by a preceptor during the delivery of athletic training services.
  - The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient
- The number of students assigned to a preceptor in each clinical setting will be a ratio that is sufficient to ensure effective clinical learning and safe patient care
- There will be regular communication between the B-CU MATP and the preceptor

**What to do When a ‘Supervised’ Activity becomes ‘Unsupervised’:**

If a situation arises that leaves a student unsupervised (e.g., Preceptor leaves to take a phone call or use the restroom and no other health care professional is present), the student must leave the area until the Preceptor, or other health care professional, returns. Unsupervised experiences will not be mandated or allowed for any student.

If the AT student voluntarily chooses not to leave the area during the temporarily unsupervised period, the student is required to function only as a CPR/First Aid trained individual would function and must not be referred to as an “Athletic Training Student”. In these situations, students are allowed to apply only those skills deemed appropriate by the CPR/First Aid certifying agency (First Aid/CPR Agreement). At no time should the student utilize athletic training skills related to: evaluation to determine participation status, therapeutic modality and/or exercise application, or taping and wrapping skills (unless involved in emergency wound care situations). See First Responder Policy page 37.

These unsupervised incidences must immediately be reported to the B-CU MATP Director or Clinical Education Coordinator. Unsupervised time is not authorized by the B-CU MATP and will not be considered in the recording of clinical experience hours.



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### Breach of Supervision Policy:

Adherence to the supervision policy is the responsibility of both the Preceptor and the Student. The student may be subject to disciplinary action for failing to comply with the policy and/or failure to report the incident. Utilization of the Preceptor may be discontinued. Each incident, and any subsequent disciplinary action, will be reviewed on a case-by-case basis.

### Travel Policy:

**It is a privilege to travel with a team and the preceptor.** While traveling with a team, the athletic training student is to carry themselves professionally and abide by all team rules and regulations, including conduct, punctuality, and dress code. When traveling with a team, the athletic training student is expected to conduct him/herself in a manner that will reflect positively on the University, the team, and the individual. **Athletic training students are not allowed to have athletes in their hotel rooms or be in the athlete's room to provide treatment without a preceptor present.** Athletic training students are not allowed to travel without a supervising Preceptor and will never be used to replace a Certified Athletic Trainer in this respect. The B-CU MATP Student Policy Academic and Clinical Handbook, Clinical Education Plan, and the B-CU Code of Student Conduct are in effect for the duration of the enrollment at B-CU.

In addition, students planning on traveling with a team should *request* permission from their professors to miss class in order to travel. Students should never simply *tell* a professor they will be missing a class. The request should be done in person and with plenty of advanced notice whenever possible. Faculty members have the right to deny the request or count it as a class absence. Students are expected to submit any assignments that are due prior to departure. As well, it is the student's responsibility to make up missed work or assignments immediately upon return. You will not get travel time for any home event.

### Student Transportation to Clinical Sites Policy:

Students will be given the opportunity to gain clinical experience at a variety of locations, including on- and off-campus locations. In the case of off-campus clinical education experiences, students will be responsible for traveling to and from their primary clinical site at their expense. Bethune-Cookman University will not provide the student with transportation to these sites, nor will the University or program pay for the student's expenses related to traveling to those sites. In some cases, the student's clinical education experience will relocate (e.g., for an athletic event) based on the schedule at that site. It is the responsibility of the student to travel to and from the designated site per the arrangements made with the student and preceptor. Students will be responsible for any



tickets, accidents, etc. they may incur while driving to these clinical sites. Therefore, students must have insurance and drive responsibly.

**Student Travel to Clinical Sites in Adverse Weather Policy:**

In the event of bad weather or hazardous road conditions, each individual student must determine if they feel they can safely travel to the clinical education site. If a student determines it is unsafe, they need to inform his/her preceptor in as much of advance as possible. Students should not abuse this policy or tempt fate. In a nutshell, if the student feels they can arrive and return safely then they should. If the student is unsure of their safety, then they should not drive. The student should ride with a safe driver or call the preceptor and inform him/her of the planned absence. It is the student's responsibility to reschedule the missed experience if possible. If the clinical education site is closed due to bad weather, the student is not required to attend the clinical education experience.

**Student Transportation of Injured/Ill Patients Policy:**

**Under no circumstance should a student transport an injured/ill patient in any vehicle for off-site emergency care, physician appointments, or any other reason. Under no circumstances should a student have the phone number to or be communicating with a current athlete.**

Preceptors should not ask or expect students to provide such services in their own, a preceptor's, or the institution's vehicle. The issues involved with such actions expose the student, preceptor, and institution to great potential liability. Just as it is the preceptor's responsibility to avoid placing students in such situations, it is also the student's responsibility to inform the program director or clinical education coordinator of any instance in which the student feels they were placed in a compromising situation. If the preceptor has planned to transport an injured/ill patient for medical care or a physician appointment, and the student volunteers to accompany the preceptor and patient, the student must be cleared through Bethune-Cookman University's Transportation Services in order to be covered from a liability standpoint to travel in a university vehicle. In this case, the student would count those hours towards clinical education.

**First Responder Policy:**

The B-CU MATP does not support unsupervised clinical education experiences for students. Utilization of students as 'First Responders' conflicts with the mission of the B-CU MATP, violates the CAATE Standard, and violates the Florida Athletic Training Practice Act. To protect students, patients, preceptors, and the respective institutions, AT students are only assigned to supervised clinical experiences and therefore cannot be used as First Responders during B-CU MATP related clinical experiences.



## VII. CLINICAL HOUR POLICY & RELATED POLICIES

The clinical hour policy requires that the total number of hours in Clinical Education Courses I, II, IV must not exceed 20 hours/week without permission. Clinical Hours are determined as 1 semester credit hour is equal to 100 clinical hours.

**Minimum clinical hours per week= (20 hours Clinical Education Courses I, II, IV)**

**Maximum clinical hours per week = (25 hours Clinical Education Courses I, II, IV)**

**Minimum clinical hours per week= (40 hours Clinical Education Course III)**

**Maximum clinical hours per week = (45 hours Clinical Education Course III)**

Failure to continue to attend the clinical experience once the minimum number of clinical hours has been achieved or falsifying hours may result in disciplinary action or even dismissal from the program for unprofessional behavior. If any hours are missed due to an absence the student must have a note excusing the absence and make the hours up before the end of the semester. A student may not go above the maximum or below the minimum hour requirements without written approval from the Clinical Education Coordinator. Upon request, students performing well academically will be allowed to exceed the maximum hour requirement (all requests must be presented directly to the CEC)

Students will be given a failing grade for the course and may be removed from the program if the minimum hour requirement is not met by the end of the semester. Students will be allowed 1 unexcused absence per semester all others will require proper documentation to be qualified as an excused absence. Each additional unexcused absence from the clinical rotation will result in a deduction of the final letter grade. Documentation must be approved by the Clinical Education Coordinator stating why hours were not completed. Students are allowed to complete clinical hours at other locations if they will be short for the week or semester. Please speak to the CEC before completing hours at another clinical education site. It is your responsibility to keep track of all hours BEFORE there are issues. **All hours from excused/non-excused days will need to be made up before the end of the semester.**

### **First Summer Semester/Pre-Season/Orientation:**

All new students accepted into the athletic training curriculum are required to take part in an orientation (course) and clinical experience that will occur during the month of May or August. During this time, athletic training students are formally introduced to policies and procedures related to the B-CU academic and clinical environments, as well as take part in significant learning opportunities and clinical experiences. While the exact date each may or August may not be determined until mid-summer, students should always be prepared to report around end of July, beginning of August each year.



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Note: All in-class sessions for summer courses will be completed by the start of the fall clinical education experience with B-CU athletics.

### **First Fall Semester:**

Each AT student will complete a minimum of 20 hours/week and a maximum of 25 hours/week of clinical experience.

Note: This semester is very challenging academically; therefore, the B-CU MATP limits clinical hours to facilitate success in the classroom. Upon request, students performing well academically will be allowed to exceed the 25 hour/week maximum (all requests must be presented directly to the CEC).

### **Remaining Semesters:**

Maximum clinical hours are 25 for Clinical Courses I, II, IV. Clinical Immersion (III) will require a minimum of 40 hours a week for the allotted weeks.

Minimum clinical hours, for Clinical courses I, II, IV will be 20 hours/week

### **Recording and Submitting Clinical Hours and Patient Encounters:**

Hours and patient encounters will be submitted weekly for all students. Hours and patient encounters must be documented on the ATrack System. Recorded times should be correct to the nearest quarter hour. Hours and patient encounters should be entered on a daily basis. You can only record 5 days prior in ATrack. If you forget to log hours and the date is longer than 5 days ago, you will not be able to count that day/those hours. The supervising Preceptor must approve the student's hours and patient encounters weekly (daily with rotating Preceptors) and ensure that the descriptions of all activities (i.e., activity, location, number of hours) are recorded accurately. Preceptors should also record any pertinent information regarding the student's behavior/performance (praises or concerns).

As stated previously, all students must have one (1) day off every seven (7) days. No exceptions. The student must monitor their hours and make adjustments before there is a scheduling issue. The Coordinator may import student hours into a database and provide reports to the B-CU MATP Director each semester if needed. Monitoring will also be utilized to ensure that equal and fair opportunities exist for all AT students in compliance with the CAATE Standards.

### **ATrack:**

Forms, handbook items, evaluations, and other helpful information can be found on ATrack. All AT Program students and AT Program faculty, staff and preceptors should have access to



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ATrack. If you do not have access to this site, please contact Dr. Jyl O'Brien-Williams (CEC MAT Program – obrienwilliamsj@cookman.edu) to have your name added.

### Absence from or Conflicts with Attending Clinical Education Policy:

Presence at clinical rotations is a critical component of the educational success of the athletic training student. The student's first academic responsibility is to attend all major, minor, and elective courses the student enrolls in each semester. Students may not voluntarily miss or be required to miss classes, especially athletic training major course, to engage in clinical education or for any other activity (e.g., job, extracurricular activity, etc.). Excused absences for these class sessions may only be granted by the instructor for the specific course. If there is a conflict between the scheduled time of a required class and a clinical education experience, it must be resolved with the program director and/or clinical education coordinator, as well as the preceptor the student is assigned to, prior to the start of the clinical education experience.

The student's second academic responsibility is to attend all scheduled clinical education experiences. Therefore, students are expected to attend their clinical assignments according to their pre-determined schedule **set by the preceptor** during their initial conference with the student. **Schedules must be sent to the CEC by Sunday of each week.** Students should expect to attend practices and competitions for the team/preceptor to which they are assigned. When selecting class schedules, students should avoid classes that meet during traditional clinical times (after 1:30 pm) whenever possible. Students should communicate regularly with their preceptor to determine their schedules and potential conflicts with classes. The preceptor may not grant an excused absence for any course. The preceptor has the authority to determine excused absences from clinical education for assigned students (e.g., day(s) off, personal illness, and family emergencies only). A copy of the students schedule needs to be sent to the CEC each week. Failure to send a schedule will result in a lowering of the final grade.

Students will need to discuss reasonable clinical arrival/departure times with their preceptor so they do not jeopardize class times. **The preceptor is in charge of the final schedule and the student may not make changes without discussing it with the preceptor.** A student is not allowed to make changes to the schedule due to work, extracurricular activities or personal events. The preceptor must give the student reasonable time to grab a bite to eat between class and their clinical assignment.

If an emergency situation arises that a student cannot attend a scheduled clinical experience, he/she should contact his or her preceptor and the Clinical Education Coordinator and notify them of the situation *immediately*. Repeated absences or tardiness will not be tolerated and



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will be reflected in the Practicum evaluation and, therefore, the Practicum grade. Excessive tardiness or absence may result in probation, dismissal from the clinical site and/or an “unsatisfactory” grade in the Practicum. Students will be allowed 1 unexcused absence per semester all others will require proper documentation to be qualified as an excused absence. Each additional unexcused absence from the clinical rotation will result in a deduction of the final letter grade. Documentation must be approved by the Clinical Education Coordinator. If it is noted that the student has excessive excused and unexcused absences a meeting will be called with the student to determine if the student is in violation of the policies and procedures of the MAT handbook and may be dismissed from the program. **Missed hours must be made up before the end of the semester.** Students will be given a failing grade for the course and may be removed from the program if the minimum hour requirement is not met by the end of the semester.

### Pre/Postseason, Holidays, University Closures, and Volunteer Hours Policy:

Fall pre-season times may be linked to the clinical practicums, thus all incoming students assigned to preceptors with August pre-seasons are required to attend pre-season camps. Students assigned to off-campus sites during August (i.e. high schools or colleges) should plan on arriving around ~August 1st. Exact start dates will be determined according to the start of the site’s pre-season practices. Start dates must be approved by the clinical education coordinator (i.e. **a student should not negotiate a different start date with the preceptor without first approving that altered start date with the clinical education coordinator**).

Students assigned to preceptors with a holiday break (i.e. fall break or spring break) may need to continue their clinical assignments during these times. Students assigned to preceptors with winter break or postseason responsibilities are strongly encouraged to participate in these opportunities but will not be required to stay for them, unless you have not completed hours or will be short hours.

Clinical experiences during holidays or times when the University is officially closed are not required. If the AT student chooses to obtain clinical experience during these times, he or she must, in advance, notify the CEC. These hours are voluntary, must be supervised, and will not count towards the required hours per week, but will count for the overall total.

### Volunteer Opportunities Policy:

Opportunities to acquire additional clinical experience may occur during the summer between the first and the second year in the B-CU MATP or over holiday breaks. These opportunities are voluntarily chosen by the student and are not a required part, nor will be representative of the B-CU MATP or B-CU. The hours for any volunteer clinical rotation



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outside of the MAT program do not count towards program hours. To be covered under the student liability insurance, and to remain compliant with the state of Florida Athletic Training Practice Act, a credentialed healthcare professional must supervise voluntary clinical experiences.

### **Intercollegiate Sports Participation and Athletic Training Policy:**

Due to the time commitment required for athletic training, it is extremely difficult to simultaneously participate in an intercollegiate sport during the AT curriculum. To be able to perform to the best of one's ability, sports participation will not be possible.

### **Club/Intramural Sports/Extra-curricular Activities and Athletic Training Policy:**

Club sports and intramurals are considered extracurricular events that are encouraged for all students at B-CU. It should be noted, however, that the Athletic Training Program will require many hours of your time. When selecting extracurricular events, keep your time commitments in mind and avoid overextending yourself. As with all extracurricular events, they should not interfere with your Athletic Training clinical assignments.

### **Outside Employment and Athletic Training Policy:**

Outside employment during the AT Program is very difficult. Athletic training requires many hours in the classroom as well as in the clinical setting. Athletic training students are expected to make athletic training a priority. We do not prohibit outside employment; however, we suggest students limit outside employment to a maximum of 10 hours per week. Outside employment must not interfere with assigned athletic training clinical rotations. **Requesting time off from your assigned clinical rotation for the purposes of outside employment will not be tolerated and can be cause for dismissal from site or program.**

### **Work Study, Scholarships, and Funding Policy:**

Students can seek on-campus work study positions, scholarships, or other forms of available funding to assist with college expenses. These forms of funding, however, cannot include athletic training-related skills, services or departments. To prevent the potential conflict of interest, athletic training students, therefore, are not assigned to employment positions associated with the athletic training department or the athletics department.

If the student is unsure if the work-study employment is in violation of the policies and procedures of the Master of Athletic Training program the student needs to contact the Clinical Education Coordinator before accepting the position. If a student accepts



employment within athletics they will be removed from the program due to the CAATE violation.

## VIII. PRECEPTOR RESPONSIBILITIES, QUALIFICATIONS AND EXPECTATIONS

### Preceptor Responsibilities:

- Supervise students during clinical education;
- Provide instruction and assessment of the current knowledge, skills, and clinical abilities designated by the CAATE; mentor and guide students through the program;
- Provide instruction and opportunities for the AT student to develop clinical integration proficiencies, communication skills, and clinical decision-making during actual patient/client care;
- Provide assessment of AT students clinical integration proficiencies, communication skills and clinical decision-making during actual patient/client care;
- Facilitate the clinical integration of skills, knowledge, and evidence regarding the practice of athletic training;
- Demonstrate understanding of and compliance with the program's policies and procedures.
- Provide needed documentation to the MAT Program and items through ATrack in a timely manner. Preceptor Training is on an annual basis.
- Provide a clear and defined designation of the difference in duties and responsibilities between Master of Athletic Training Students and student helpers or additional volunteer/paid help within athletics.
- Report any issues to the CEC in a timely manner.
- All items needing calibration must be calibrated and have maintenance performed according to the manufacturer's guidelines.

### Preceptor Qualifications:

- Be credentialed by the state of FL in a health care profession;
- Not be currently enrolled in the B-CU MATP at B-CU or other school;
- Receive planned and ongoing education from the B-CU MATP to promote a constructive learning environment as well as contemporary expertise.

### Additional Requirements:

- There must be regular communication between the B-CU MATP and the preceptor.
- The number of students assigned to a preceptor in each clinical setting must be of a ratio that is sufficient to ensure effective clinical learning and safe patient care.



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- Provide students with access to PPE's and means for sanitation precautions.
- Students must be directly supervised by a preceptor during the delivery of athletic training services. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient.

### Preceptor Expectations:

- Model the Foundational Behaviors of Professional Practice.
- Uphold the policies and procedures contained within the B-CU Athletic Training Program Academic and Clinical Education Handbook.
- Abide by the *NATA Code of Ethics* and the *BOC Standards of Professional Practice*.
- Communicate any schedule changes, tardiness, or unforeseen situations (e.g. illness, personal emergency with the student(s) as soon as possible.
- Communicate any disciplinary issues with student to the CEC.
- Have a positive attitude, mentor and guide the students through the program.
- Provide constant physical supervision. As the student progresses through the program, they can be afforded greater responsibility and autonomy, but always under supervision.
- Complete confirmation of hours in a timely manner. This should be performed in a weekly manner. All hours are documented on ATrack.
- Sign off on all competencies in a timely manner. The student should discuss convenient times with the preceptor and should not wait until the last minute. Preceptor is not obligated to sign off if student has waited until the last minute.
- Complete all clinical evaluations of students in a timely fashion. **All clinical evaluations should be discussed in person with the student prior to submission.**
- Orientate the student to the clinical site, which includes the following: location of bloodborne pathogen barriers and control measures, practice and review of the site's Emergency Action Plan, location of all emergency equipment (e.g. AED) and Policies and procedures manuals, location of athletic venues, location of medical supplies and introductions to key personnel at that site.
- Complete Preceptor training annually through the online system.

### **IX. ATS's ROLE AND EXPECTATIONS IN CLINICAL EDUCATION**

The student is responsible for being pro-active in the clinical education as well as the didactic component of the program. Students are often very organized in the classroom setting, with dates and objectives clearly established. However, once in the clinical settings,



students tend to become passive and wait for the learning to come to them, thereby not optimizing experiences.

Clinical experiences provide vast opportunities for learning. Students must not expect the Preceptor to make these opportunities happen. Although these supervisors are, in part, responsible for facilitating the clinical education experience, it is the student's responsibility to be organized and set specific objectives outlining what goals and objectives for that experience. The Preceptor has many other responsibilities in addition to student education; therefore, assurance of student learning cannot realistically be expected to be a constant top priority. Setting clear objectives for each experience and sharing those objectives with the assigned Preceptor is strongly recommended and will take place at the start of the clinical experience with the Goals Assignment.

### Student Expectations:

- Model the Foundational *Behaviors of Professional Practice*.
- Uphold the policies and procedures contained within the *B-CU Athletic Training Academic and Clinical Program Handbook*, including professional dress at all times when providing patient care (see dress code section).
- Abide by the *NATA Code of Ethics and the BOC Standards of Professional Practice*.
- Be punctual to clinical education experiences. **Arriving on time is to be late.**
- Communicate any schedule changes, tardiness, or unforeseen situations (e.g. illness, personal emergency) with your preceptor and CEC as soon as possible.
- Continued unprofessional behavior, tardiness or absence from a clinical rotation will result in disciplinary action and possible removal of the student from the program.
- Be an active learner and have a positive attitude.
- Refrain from applying skills during clinical education that have not been formally instructed and evaluated by either the classroom instructor or the preceptor.
- Expect and understand the need for constructive criticism.
- Communicate all things related to patient care to the Preceptor. The Preceptor is responsible for the care of the patient, so it is vital that you communicate results of assessments, changes in health status, or other medically-related situations to the preceptor. Furthermore, seek approval from the preceptor prior to changing the patient care plan. **All important matters related to the clinical site need to be communicated in person and not through text or email.**
- Bring your Clinical Competencies Check-off Sheet with you to all clinical education experiences. Have them signed off in a timely manner. Waiting until the last minute is not only disrespectful, but may result in the Preceptor being too busy to check off any of the items. This will result in a failing grade for the clinical site.



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- Log all hours in ATrack on a daily basis. Follow up with the Preceptor to have hours checked off each week.
- **Complete weekly reflection papers, evaluations and ALL ATrack items in a timely manner.**
- Continued communication with the Clinical Education Coordinator throughout the clinical rotation. If any issues arise you must inform the Clinical Education Coordinator immediately. Failure to do so will result in disciplinary action or removal from the program if the offense is deemed in violation of the handbook, B-CU or the CAATE policies and procedures.

### General Professional Conduct:

- Be professional at all times while in the athletic training room or at assigned sports venue. This includes such practices as where/how to sit/stand during idle time. **Please avoid lying on the treatment tables or bleachers, etc. to avoid an unprofessional appearance.**
- Stay alert at practices. Students should not be sleeping, conversing excessively, **studying**, messing around, **playing on cell phones**, etc. during practices. Watch practice activities or find ways to help. This is also a great time to gather more knowledge from the preceptor or to quiz fellow students on athletic training knowledge. Be proactive, inquisitive and interested while at the clinical site. If unsure, ask for something to do, practice something previously learned, work on clinical proficiencies, etc.
- Use professional and ethical conduct in all clinical settings, in classes, and in life in general. All of your actions are being watched by others. Please keep all actions professional, honest, legal, moral, ethical, and respectful. Think before you do things ... **don't do anything to make people question your integrity or character.**
- Be quick to ask the visitors who enter the clinical site if you can help them. Don't ignore people entering. Even though you may not be able to help them directly, acknowledge them, ask how you can help them, then find someone who can help them. **Make them feel at home!**
- Be careful about where you air your gripes. **If you have a difficult time with someone, go to that person only.** If it is something that cannot be resolved between you, discuss the issue with your supervisor. Do not discuss the issues with other students or athletes as this creates disunity and unprofessionalism. Such actions will not be



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tolerated and can result in dismissal from your clinical site. **Removal from a clinical site does not guarantee placement in a new site.**

### Communication/Language/Conversation:

Athletic training students should practice communication skills in a manner that separates him/her from the athlete. Common courtesy and respect are “musts.” Discipline in the area of communication and respect must be maintained in the athletic training room at all times. There are times when an athlete may demonstrate inappropriate behavior. The athletic training student should not tolerate such behavior. Any problems in dealing with communication between you and the athlete or the coach should be directed to the Preceptor or one of the staff athletic trainers immediately. Please do not discuss any issues or life problems with clients. **These are your patients and you need to keep a professional relationship at all times.**

### Guidelines for Athletic Training Students are as Follows:

- No foul or crude language is to be used in the athletic training room or at any clinical sites. *This includes words as mild as “hell” and “damn.”* We want to promote an atmosphere of professionalism and higher education. Crude language promotes neither. (Try to gain a reputation of not using that kind of language outside the clinical/classroom setting too). Vulgar language by athletes is also not appropriate in the athletic training room and should be addressed and curtailed immediately and in an appropriate manner.
- Avoid sexist, racist, or otherwise discriminating remarks or anything that could be taken as sexist/racist/discriminating by someone. Any inappropriate comments or actions will be addressed immediately with the individual(s) involved and could result in dismissal from the program. Do not participate in the behavior or tolerate this behavior from athletes.
  - Sexual harassment: Student-athletes, equipment managers, athletic training students, and staff alleging harassment by a coach, staff member, or another student-athlete/athletic training student should follow the policy in the Student Handbook (see B-CU Student Handbook). Immediate reporting of alleged incidents is imperative. Any harassment should be reported to the immediate supervising athletic trainer, the Clinical Education Coordinator, and/or AT Program Director.



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- Discrimination: B-CU's Division of Intercollegiate Athletics/Athletic Training Curriculum does not discriminate on the basis of race, color, national origin, religion, gender, age, veteran status, political affiliation, sexual orientation or disability (in compliance with the Americans with Disabilities Act) with respect to employment or admissions or in connection with its programs or activities. Inquiries or requests for reasonable accommodation may be directed to the CEC, the appropriate university office, AT program, or the Office of Affirmative Action. (See AT Program Technical Standards regarding AT-specific accommodation).
- Refrain from conversations involving personal matters (i.e. dates, parties, etc.) while in the athletic training room or while working in any of your clinical settings. Inappropriate conversations may result in dismissal from the clinical experience.
- Care for your athletes as you would want to be cared for. Be considerate, respectful, and patient. Do not talk about another athlete, a fellow student, or staff member to other individuals ... unless you are giving the person praise.
- Be considerate and respectful to all with whom you interact, including athletes, staff, faculty, coaches, team officials, and fellow students. At no time should the athletic training student challenge or otherwise become disrespectful to a staff or faculty member or game official. Failure to maintain respectful composure may result in disciplinary action.
- Students within the second year of the AT program may work with first year students at the clinical sites. Second year students should always treat the first-year students respectfully. Second year students should act as a student mentor by showing the students around the clinical site, politely challenging their current knowledge level, and introducing them to the profession of Athletic Training. Failure to facilitate a respectful relationship may result in disciplinary action.

### **Smoking/Tobacco Policy:**

We cannot dictate if students smoke (or chew) or not, but remember, students are in a health care profession. It is preferred that if students currently smoke/chew, they would stop ... for their own health. We will do whatever we can to help the student achieve that goal. If the student chooses to smoke/chew, however, they must follow these guidelines for athletic training:

- You cannot smoke/chew at any time when you are with a team or at a clinical site. This includes practices, at half-time, when you are on the road at the hotel, etc. Leave cigarettes/tobacco home to avoid temptation.



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- Make sure you are “aired out” before you come into the athletic training room. If we can smell smoke on you (new or stale) or if we see tobacco in your teeth, you will be excused from your clinical site.
- Covering up the smell of cigarettes/tobacco with perfumes, gum, etc. doesn’t always work and often creates a more potent odor. If others are affected by those smells, you may be asked to leave.

### Alcohol and Drug Policy:

When traveling with athletic teams, certified athletic trainers and athletic training students are responsible for the healthcare of all student-athletes during the entire trip. As such, a **zero-tolerance policy is in effect with respect to alcohol consumption and drug use so that sound, rational decisions can be made at all times.** This includes prescribed or over the counter medications as well. If you are taking a prescribed or over the counter medication that may impair your judgement you are to inform the Clinical Education Coordinator immediately. **Any athletic training student violating this policy may be dismissed from the clinical site and/or the entire Athletic Training Program.**

A similar policy is in effect for AT classes, labs, and clinical activities. Students should not report to classes, labs, or clinical sites under the influence of alcohol or drugs. Students smelling of alcohol or under the influence of alcohol or drugs during classes, labs or clinical sites will be asked to leave immediately and will be disciplined, which could include immediate probation or expulsion from the program.

In addition, students must remember that there are responsibilities associated with the Athletic Training Program. Thus, if a student chooses to socialize on his/her own time, it is expected that he/she will be responsible enough to be present **and functional** at scheduled classes, labs, or clinical assignments. Students should not wear any clothing that identifies the MAT program or the Bethune Cookman University athletics department when out socializing. Failure to do so may result in a reprimand or dismissal from the AT Program.

### Cell Phone Usage Policy:

The use of personal cell phones is permitted for **emergency purposes only** while at clinical sites. It is clearly recognized that some individuals will use their cell phones as a means of communication for emergency purposes, and, therefore, they will be allowed to carry their phones and keep them on. However, if it is determined that an individual is using a cell phone inappropriately (personal phone calls, text messaging, etc.) during clinical times,



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personal cell phone usage will be revoked from that individual and disciplinary action may occur for repeated violations. **Cell phones should be turned onto vibrate while you are on duty at your clinical site.** Again, DO NOT receive or send any personal phone calls or text messages while at your clinical site.

## Social Media Policy:

Students are *highly encouraged* to set all social media sites to private to avoid any potential issues in the clinical setting or classroom environment. Athletic training students who are currently enrolled in a clinical practicum should not be friends with or following the preceptors or student-athletes that are on the team that they are currently assigned to on any form of social media which includes, but is not limited to, Facebook, Twitter, Snap Chat, Instagram, FaceTime, etc. Any situation that is deemed as an unprofessional act on social media is subject to action by the AT Program that may result in probation or dismissal from the program.

## Dress Code Policy:

The American Medical Association recognizes Athletic Training as an Allied Health Care profession. Each athletic training student is expected to present him/herself in a manner that promotes a professional physical appearance and represents B-CU in a highly professional manner. All students must practice proper personal hygiene during clinical rotations. Good personal hygiene involves keeping all parts of the external body clean and healthy. It is important for maintaining both physical and mental health. In practicing poor personal hygiene, the body provides an ideal environment for germs to grow, leaving it and others vulnerable to infection. At no time may any athletic training student inappropriate clothing when representing the athletic training curriculum. **Acceptable dress when assigned to B-CU clinical experiences is as follows: Khaki pants/shorts, polo shirt, athletic shoes and nametag (Further details below).** These are the **minimum** acceptable standards; however, a preceptor may require that you comply with higher standards.

- **Shirts:**
  - B-CU Sports Medicine collared shirts or plain polo in the colors of the specified clinical rotation site are to be worn for events (practices, games, treatment times, etc.) and at all times in any of the athletic training venues (athletic training rooms, fields, courts, etc.). A minimum number of shirts will be required to be purchased by athletic training students.
  - Shirts must fully cover the chest, abdomen and back at all times, must be tucked in, should be relatively wrinkle-free, and must not fit too snugly or too baggy. Perform the squat test if unsure of proper length.



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- B-CU Sports Medicine T-shirts are **only allowed during pre-game and post-game times whereby conditions exist that would make it difficult to maintain a clean and professional shirt** (i.e. pre-game taping, post-practice/event whirlpool or cooler cleaning).
- Teams will often times issue shirts with their respective sport logo. While the athletic training student may wear this in an unofficial capacity, it is important to remember that he/she represents the sports medicine department in his/her role, and he/she is **expected to wear sports medicine related shirts or plain polo shirts in the site colors when in the clinical setting.**
- **Sweatshirts/Sweater:**
  - B-CU Sports Medicine Sweatshirt/Sweater may be worn.
  - B-CU Logo Sweatshirts/Sweaters which do NOT advertise a fraternity/sorority or other University organization that is not affiliated with athletic training may be worn, but a sports medicine logo is preferred if the athletic training student is working an event.
  - A plain sweatshirt in the colors of the clinical rotation site may be worn.
- **Jackets/Parkas:**
  - B-CU Sports Medicine jackets are preferred as outerwear.
  - In the event one does not own or have access to a B-CU Sports Medicine jacket, personal jackets may be worn when environmental conditions permit as long as they advertise nothing beyond the manufacturer of the jacket. All other logos or emblems are unacceptable. Must wear nametag on jacket.
- **Shorts/Pants:**
  - Khaki, navy, gray, or black chino style shorts/pants may be worn.
  - NO “short-shorts” will be allowed.
  - NO jeans, “cut-offs,” or otherwise tattered clothing will be allowed.
  - Pants must fit appropriately – excessively baggy pants/shorts or tight-fitting pants/shorts are not allowed. **Student should be able to bend or squat without exposing underclothing or skin.**
- **Shoes:**
  - Solid toe shoes with socks should be worn and shoes must fully cover the feet.
  - Sport sandals, slides, furry slippers/slides, flip flops, summer sandals, and bare feet will NOT be allowed.



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- **Hats:**

- May **NOT** be worn in any indoor athletic training venue.
- May be worn at outdoor practices only (usually not at games).
- If worn, hats must advertise B-CU and/or specifically the sport to which the athletic training student is assigned.
- May **NOT** advertise a fraternity/sorority, other University organization not affiliated with sports medicine, or any other product or logo.
- If hats are worn outside, they must be worn with the brim squarely facing forward (i.e. do not wear hats backwards or twisted to the side).

- **Jewelry/Tattoos:**

- Jewelry must be kept to a minimum and should not interfere with duties.
- **NO** body piercing jewelry is allowed to be worn other than standard earrings (i.e. no eyebrow, nose, lip or tongue piercings that are visible, or earrings beyond small posts or small hoops)
- Jewelry, piercings, or any other non-traditional form of body wear or image (i.e. tattoos) is not acceptable and will result in removal from the clinical setting.
- Students may be asked to cover tattoos or piercings while in the clinical settings if they are inappropriate or distracting. **If tattoo is visible it MUST be covered.**

- **Hair/Nails:**

- Hair must be clean and maintained so as not to come in contact with an athlete or interfere/cause visual disruption while assisting an athlete.
- Facial hair must be well-groomed and maintained.
- **Fingernails must be short and kept clean at all times.**
- **No artificial nails will be allowed during clinical education.**

- **Identification:**

Athletic training students will be required to wear an identification badge/name tag so as to be easily identified in specific clinical settings. The AT Program will issue one name tag for all students. The name tags should be worn on the shirt or jacket/sweater but must be readily visible to coaches, student-athletes, preceptors, fellow students or others who interact with the Sports Medicine Department personnel. Failure to wear a name tag may result in dismissal from the clinical setting.



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- **Game Day Attire: (unless otherwise stated)**
  - Collared B-CU Sports Medicine shirt or plain polo for curriculum students
  - Chino style, Khaki pants or shorts
  - Athletic shoes and nametag
  - Students should check with their preceptor to determine appropriate game day attire. Basketball and volleyball usually require stricter dress for game days (i.e. shirts and ties, nice blouses or sweaters).
- **Travel Attire:**

Travel dress code is specific to the sport assigned. **Important:** If dress clothes are worn for travel/game day attire, you must look neat and professional - crop/ halter tops, low cut tops, slides, sweatpants, form-fitting/shear tops, short hemlines, tight fitting or overly baggy suits etc. are **NOT** acceptable. A good rule of thumb is there should be no skin showing on the back, belly, chest, or upper thighs, nor should clothing fit very snugly or be baggy. Minimum standards apply at all times unless higher standards are required (Khaki shorts/pants, polo shirt and athletic shoes).

- **Inclement Weather Dress:**

On occasions when the environment is not conducive to the previously stated dress code, alternative attire will be acceptable. Conditions that warrant such acceptance might include, but are not limited to extreme cold exposure, extreme heat exposure, and rain. While the safety of all sports medicine department staff and students will take priority in terms of “dressing down” or “dressing up,” a professional, modest and respectful appearance should still be portrayed. Always check with your Preceptor and CEC.

- **Sport-Specific Attire:**

Some coaches will require specific dress codes for all staff and students associated with their teams. As such, we will abide by the dress codes requested so that we demonstrate our commitment as part of a team and uphold ourselves to the highest level of professionalism. No exceptions to this dress code will be tolerated. **If the athletic training student is in doubt about any portion of the dress code referred to within these guidelines or perhaps something that is not directly addressed, it is his/her responsibility to inquire as to what is acceptable attire.**



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- **Off-Duty Attire:**

B-CU Athletic Training/Sports Medicine apparel should only be worn when a student is representing him-herself as an athletic training student in assigned clinical settings. Official athletic training room clothing should not be worn to social events on/off campus.

It is important for all athletic training students to recognize that their appearance is a representation of our entire Sports Medicine Department. As such, the dress code will be followed strictly at all times. **Even if the athletic training student is “just passing through,” or “only assisting in the treatment of one person,” the perception left on others who pass by even for short periods of time is important.** Therefore, the athletic training student should plan accordingly.

- **Off-Campus Clinical Setting Dress Code:**

Dress code expectations are similar at off-campus clinical sites as on-campus unless the dress code policies are stricter. In that case, students must dress according to the stricter dress code policy. At no time should students attend clinical sites in jeans, sweatpants, short shorts, or low-cut tops, etc., no matter what the off-campus clinical site’s policy is. Additionally, students will be required to wear their name tags at all times while at their off-campus clinical sites. Failure to comply with these standards can result in disciplinary action, removal from the clinical site, or “unsatisfactory” in the practicum class.

***\*Any questions regarding appropriateness of dress wear of any kind will be decided by the supervising preceptor and Clinical Education Coordinator, if needed. Students who do not wish to abide by established dress codes will be asked to leave the clinical setting\****

### **Equipment Issue:**

On occasion, the University may issue equipment for athletic training student use (i.e. rain jackets, fanny packs, goniometers, etc.). The athletic training student is expected to care for all issued equipment properly and to return all equipment after its use. The athletic training student is financially liable for all equipment that is damaged or not returned.

### **Conduct with Athletes:**

**Athletic training students must understand that athletes they meet during clinical experiences are their patients.** Both in and out of the clinical setting, a professional demeanor should be exercised at all times.



**Dating/Fraternizing with Athletes:**

Athletic training students dating or fraternizing with athletes (i.e. their patients) can lead to compromising situations and is **prohibited** while enrolled in the MAT program. The student-athletes and patients at BCU and any of our affiliated clinical sites are your **PATIENTS**. They are NOT your peers, NOT your social group, and NOT your dating pool. They can sometimes be your friends, but YOU must maintain the boundaries of such friendships so that you do not compromise your professional relationship. You must earn the respect of your patients in order to be effective care providers to them. The person who is your drinking buddy or date will almost never trust you to be the person who takes care of their serious healthcare needs. Understand that the nature of your relationship with your patients is a professional one first and a friendship second.

You are NOT in their chain of contact for emergencies and you **ARE NOT PERMITTED to provide them care outside of your supervised role as a student**. If a student athlete calls you personally to request care for a problem (whether it occurs in athletics or outside of athletics) you should advise them to seek care in an AT facility or in the emergency room as is appropriate and you should also notify your supervisor at the first opportunity to do so. **You should not have the contact info of or be in personal contact with a current athlete**. You should never provide private “after hours” or “off the books” care that circumvents the healthcare plan that we have put in place for our student-athletes and patients. **Doing so is both unethical and illegal**. This includes providing medial care as an RA in the dorms.

In the event an athletic training student is dating an athlete or has a relationship beyond the professional level, **this relationship should be disclosed immediately**. The Clinical Education Coordinator or Program Director must be made aware of such relationship immediately so that appropriate actions can be taken (removal from clinical site) to avoid potentially contentious circumstances. Under NO circumstance should the relationship manifest itself (i.e. physical, verbal, emotional) while in the athletic training room, at clinical venues, while traveling with the team, or while otherwise engaged in AT-related activities with the team. Failure to comply with this policy could mean dismissal from the program. Removal from the clinical site does not guarantee placement at another location.

**Dating/Fraternizing with AT Graduate Assistants or Staff/Preceptors:**

The graduate assistant and staff athletic trainers are in supervisory roles over athletic training students. This supervision includes completing evaluations, assigning evaluation scores, providing mentoring, etc. Athletic training students should not date or closely fraternize with the graduate assistants or staff members/preceptors since these relationships can lead to compromising situations. If a situation arises where the professional relationship is



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compromised, actions will be taken to avoid further potentially contentious circumstances. The athletic training student will be removed from that clinical setting. Removal from a clinical setting does not guarantee placement at another setting therefore potential delayed progression in the program could occur. **Additional sanctions may be placed on the student and the graduate assistant or staff member for breaching this policy.**

### Discrepancies involving Preceptors and/or the Clinical Experience:

The student has the responsibility to present all concerns, issues, etc., directly related to the assigned preceptor and associated clinical experiences, first to the preceptor. If issues are not adequately resolved and the student still has concerns, then the student is to report the concern/issue to the Clinical Education Coordinator. The CEC will present issues that are still not resolved to the B-CU MAT Program Director. The B-CU MATP faculty members are first and foremost, student advocates; however, resolving issues for students, that possibly could be resolved by the students and the other involved party, would be a disservice to the students in preparing them for developing productive professional relationships.

### Dishonesty:

Athletic training students are held to a high standard in regard to honesty and integrity. Any student found to be dishonest with regard to academic or clinical work will be dealt with firmly, most likely resulting in dismissal from the AT Program. This includes logging of hours that were not actual hours spent in clinical education.

### Dismissal from Clinical Site:

Dismissal from a clinical site does not guarantee you placements at other clinical sites. Students cannot graduate from the athletic training program without meeting their clinical education requirements.

### Clinical Education Student Misconduct Procedures:

In the event that students are behaving inappropriately (e.g., violating dress code policy, making patient care decisions without discussing the situation with the preceptor, engaging in inappropriate conversations while in the presence of patients, students, staff, or others, displaying a poor attitude, etc.) while engaged in clinical education, the following procedures are to be followed:

- Preceptor meets privately with the student to verbally discuss the behaviors that are inappropriate. The preceptor will discuss the facts surrounding the misbehaviors



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(dates, setting, patients/others involved, specific behaviors identified). The preceptor will give suggestions to the student regarding how the behaviors can be rectified.

- If the preceptor is a graduate assistant athletic trainer, the preceptor will inform his/her supervising staff athletic trainer of the student misconduct.
- If misconduct on behalf of the student continues, the preceptor will meet privately with the student to verbally discuss the behaviors that are inappropriate. The preceptor will document the facts surrounding the misbehaviors (dates, setting, patients/others involved, specific behaviors identified), and discuss these facts with the student. The preceptor and the student will both sign the document, indicating that the student has been informed of the facts surrounding the misconduct. The preceptor will forward the signed document to the clinical education coordinator, so that a record can be maintained in the student's file.
  - If the preceptor is a graduate assistant athletic trainer, the preceptor will inform his/her supervising staff athletic trainer of the student misconduct, and the written document will need to be signed by the supervising staff athletic trainer.
- If the behaviors that are considered misconduct continue, the preceptor will document the facts surrounding the continued misbehaviors (dates, setting, patients/others involved, specific behaviors identified). The preceptor will inform the student that the behaviors are still present, and notify the student that further actions will need to be taken. At this time, the preceptor will initiate a formal meeting to discuss the situations and behaviors with the clinical education coordinator and/or program director. The purpose of this meeting is to discuss the documented instances of misconduct and the steps taken by the preceptor to correct the misconduct, the student reaction to feedback regarding the misconduct, and the remediation or disciplinary actions that may need to be taken to correct the misconduct.
- The student will then be required to participate in a meeting with the preceptor, supervising staff athletic trainer (if the preceptor is a GA), the program director and/or clinical education coordinator. The meeting will again discuss the facts involved in the student misconduct, as well as inform the student of the disciplinary or remedial actions that will need to occur in order for the student to continue to be engaged in clinical education.

***Please note:*** All cases of misconduct will be taken on a case-by-case basis and are dependent on the magnitude of the misconduct. If a behavior/action is considered professional misconduct, as identified by a violation of the *NATA Code of Ethics* or the *BOC Standards of Professional Practice*, then a student may be immediately removed



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from clinical education experiences until the incident is investigated. Instances of professional misconduct may result in immediate probation or dismissal from the program, as determined by the Program Director in conjunction with the Retention Committee.

### **Appeal/Grievance Process:**

After disciplinary decision (academic, clinical, or professional) has been imposed, a student may file an appeal. Procedures are listed below.

The appeal/grievance process for the AT Program is as follows:

- The student must make his/her appeal/grievance in writing to the CEC and AT Program Director within *two weeks* of being notified of disciplinary action. The student must state the basis for the appeal and include all materials that may substantiate the appeal.
- Once an appeal is received, a committee will be assembled. The committee will be formed on an as-needed basis and will be comprised of five members. Members will include Athletic Training faculty, department faculty, and/or clinical preceptors. The committee will review the appeal within two weeks from the date of receiving the appeal/grievance and will notify the student of their decision in writing within one week of the meeting date.
- If the student disagrees with the committee's decision and wishes to take further action, the student must then appeal, in writing, to the Dean of the College of Nursing & Health Sciences within five days of receiving the AT Appeals Committee's decision. The Dean will issue a decision within an acceptable amount of time after receiving the student's appeal. AT Faculty will review continuance within the academic program or clinical education during the appeal process on a case-by-case basis.

## **X. PROGRAM TRAINING & POLICIES**

### **Family Educational Rights & Privacy Act (FERPA) Training:**

All students are required to complete annual FERPA Training. This training is provided through the Athletic Training Program. A quiz follows the training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the program's student academic record.



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## Health Insurance Portability and Accountability Act (HIPAA) Training:

All students are required to complete annual HIPAA Training. This training is provided through the Athletic Training Program. A quiz follows the training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the program's student academic record.

## Confidentiality of Records Policy:

**Confidentiality of the student-athlete's medical records must be maintained at all times, as these are considered legal documents.** Records are not permitted to leave the Department of Sports Medicine. Any questions or concerns from the press, professional scouts, or others must be directed to the Director of Sports Medicine. If medical records are needed for a case study, then the athletic training student must fill out a Student Athlete Medical Records Release Form and have it approved by both the athlete and the Director of Sports Medicine **prior to** accessing or using any information obtained from such records. This form gives the athletic training student access to the medical records only of the athlete noted on the form. The records still may not be taken out of the facility or photocopied under any circumstances. Anyone associated with access to documents that are the property of the Department of Sports Medicine will fully comply with all regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA). **Athletic training students must remember that discussing the status of a student athlete with other student-athletes or students is forbidden. This is considered a breach of confidentiality.** The athletic training student must be aware of his/her surroundings at all times when the health status of a student-athlete is being discussed. This is perhaps one of the most serious violations that can occur and will result in circumstances that may not only remove one from the clinical environment, but could ultimately result in a suspension or dismissal from the athletic training education program. (See Appendix B).

## Clinical Education Infectious & Communicable Disease Policy:

If a student becomes ill with something that is highly contagious (flu, chicken pox, mononucleosis, conjunctivitis, etc.), they are to notify their supervising preceptor and the Clinical Education Coordinator so precautions can be taken to prevent infecting others. Arrangements will also be made to alter their clinical experience as is appropriate. We do not wish to infect patients or other athletic trainers, so, depending on the nature of the student's illness, they may be excused from the clinical rotations until they are no longer contagious. The Bethune Cookman University Athletic Training Program Infectious Illness Policy is designed to ensure the safety of the patient and protect the student. See Appendix D for



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details on the Infectious Illness Policy. Upon admission into the program, all students are required to read and sign the Infectious Illness Policy.

### **Bloodborne Pathogens Policy and Exposure Protocol Policy:**

The Bethune-Cookman University Athletic Training Program requires students to receive formal education and re-training in the area of bloodborne pathogens and biohazardous guidelines on a yearly basis. This training is required prior to students engaging in directed observation or clinical education experiences. To this end, the program has a written policy related to bloodborne pathogens and an exposure plan. These policies are designed to eliminate or minimize exposure to bloodborne pathogens, as well as define reporting and follow-up procedures in the case of an exposure incident. This plan is developed based on OSHA's (Occupational Safety and Health Administration) bloodborne pathogens standard. A quiz follows the online training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the student's clinical education record. See Appendix F for the *Bethune-Cookman University Athletic Training Program Bloodborne Pathogens Policy and Exposure Protocol*.

Bloodborne pathogens are microorganisms present in blood or other body fluids that can cause diseases including AIDS, Hepatitis B, and Hepatitis C.

To protect yourself from exposure to these disease agents:

- Obtain the Hepatitis B vaccination series
- Follow Standard Precautions
- Treat all human blood, tissue, and body fluids as infected.

### **Therapeutic Equipment Safety Policy:**

The Bethune-Cookman University Athletic Training Program requires that therapeutic equipment at all clinical sites be inspected, calibrated, and maintained according to the manufacturer's recommendations. This is required to safeguard the health of the patient and the safety of the student and clinician. Please see Appendix I for details regarding this policy.

*Students are to abide by these policies while at all B-CU venues and use this Handbook as the "gold standard" for behaviors and policies for all off-campus clinical sites. These standards are the minimum standards for students. If off-campus sites incorporate higher standards, the student is to abide by those higher standards set by the clinical site. Alternatively, if an off-campus site's standards are more lenient than B-CU's, students must follow the standard maintained at B-CU. Failure to abide by professional standards or any item in this handbook may result in dismissal from the clinical site, failure of the associated Practicum, and/or dismissal from the AT Program.*



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# XI. APPENDICES



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## Appendix A

### Bethune-Cookman University Master of Athletic Training Program

#### Definition of Terms per the CAATE

**Athletic Trainer-** Health care professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the state's statutes, rules, and regulations. As a part of the health care team, services provided by athletic trainers include primary care, injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions. An athletic trainer is state credentialed (in states with regulation), certified, and in good standing with the Board of Certification.

**Athletic training clinical experiences:** Direct client/patient care guided by a preceptor who is an athletic trainer or physician. Athletic training clinical experiences are used to verify students' abilities to meet the curricular content standards. When direct client/patient care opportunities are not available, simulation may be used for this verification. Simulation may be facilitated by a preceptor in a clinical environment or may be completed in a class environment when directed by a faculty member.

**Clinical education:** A broad umbrella term that includes three types of learning opportunities to prepare students for independent clinical practice: athletic training clinical experiences, simulation, and supplemental clinical experiences

**Clinical site:** A facility where a student is engaged in clinical education.

**Evidence-based practice:** The conscientious, explicit, and judicious use of current best evidence in making decisions about the care of an individual patient. The practice of evidence-based medicine involves the integration of individual clinical expertise with the best available external clinical evidence from systematic research. Evidence based practice involves the integration of best research evidence with clinical expertise and patient values and circumstances to make decisions about the care of individual patients.

**Immersive clinical experience:** A practice-intensive experience that allows the student to experience the totality of care provided by athletic trainers.

**Patient-centered care:** Care that is respectful of, and responsive to, the preferences, needs, and values of an individual patient, ensuring that patient values guide all clinical decisions. Patient-centered care is characterized by efforts to clearly inform, educate, and communicate with patients in a compassionate manner. Shared decision making and management are



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emphasized, as well as continuous advocacy of injury and disease prevention measures and the promotion of a healthy lifestyle.

**Preceptor:** Preceptors supervise and engage students in clinical education. All preceptors must be licensed health care professionals and be credentialed by the state in which they practice. Preceptors who are athletic trainers are state credentialed (in states with regulation), certified, and in good standing with the Board of Certification. A preceptor's licensure must be appropriate to his or her profession. Preceptors must not be currently enrolled in the professional athletic training program at the institution. Preceptors for athletic training clinical experiences identified in Standards 14 through 18 must be athletic trainers or physicians.

**Professionalism:** Relates to personal qualities of honesty, reliability, accountability, patience, modesty, and self-control. It is exhibited through delivery of patient-centered care, participation as a member of an interdisciplinary team, commitment to continuous quality improvement, ethical behavior, a respectful demeanor toward all persons, compassion, a willingness to serve others, and sensitivity to the concerns of diverse patient populations.

**Supervision:** Supervision occurs along a developmental continuum that allows a student to move from interdependence to independence based on the student's knowledge and skills as well as the context of care. Preceptors must be onsite and have the ability to intervene on behalf of the athletic training student and the patient. Supervision also must occur in compliance with the state practice act of the state in which the student is engaging in client/patient care. If the patient/client care is occurring via telehealth or telemedicine, the preceptor must concurrently monitor the patient/client care through appropriate telecommunication technology.

**Supplemental clinical experiences:** Learning opportunities supervised by health care providers other than athletic trainers or physicians. See also Clinical education.

**Technical standards:** The physical and mental skills and abilities of a student needed to fulfill the academic and clinical requirements of the program. The standards promote compliance with the Americans with Disabilities Act (ADA) and must be reviewed by institutional legal counsel.

**Telehealth:** Telehealth is an umbrella term that encompasses the use of telecommunication technology for non-clinical health-related purposes. Some uses of telehealth include enhancing and supporting clinical services and providing individual or public health education.



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**Telemedicine:** Telemedicine involves the delivery of patient/client care remotely using appropriate information and communication technologies. Patient/client care provided via telemedicine must occur in compliance with all local, state, and federal laws.

## Use of Athletic Training Professional Terminology

The field of Athletic Training is frequently misunderstood among other allied health care professionals/professions regarding our educational preparation, roles and responsibilities, credentials, etc. Examples of proper terminology include the following:

Professional/Appropriate Terminology	Incorrect or Unprofessional Terminology
“Athletic training department or facility”	“training room”
“Athletic trainer” or “certified athletic trainer”	“trainer”
“Master of Athletic training students”	“Student athletic trainers” or “student trainers” “ATS” (not a legal credential)
“BOC” examination	“NATABOC” examination
“CAATE accreditation”	“CAAHEP accreditation or JRC-AT accreditation”
“Clinical education experience”	“work”
“Athletic trainer” or “certified athletic trainer”	“ATC” (ATC is a credential)
“Preceptor”	“ACI” or “CI”
“Master of Athletic Training Program” or “MATP”	“Athletic Training Education Program” or “ATEP”



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## Appendix B

### Bethune-Cookman University Master of Athletic Training Program HIPAA/FERPA Confidentiality Acknowledgement and Agreement

***Please read the following and sign below stating that you are aware of the confidentiality policy and agree to abide by the governance of this policy***

As part of your interaction with those seeking coverage and care by your Preceptors (through the Department of Sports Medicine or at off-campus sites), you will be exposed to information regarding individual's medical record, health status and educational record. All of this information is considered to be confidential and remains the private rights of the individual being treated.

By signing this document, you are agreeing to keep confidential between only you and your immediate supervisor all interaction, knowledge, communication, and exposure that you have with student athletes and patients as the information relates or has the potential to relate to their education information, health status, previous medical history or potential prognosis regarding any situation.

Only under circumstances whereby a student athlete and/or patient has granted specific written permission to divulge information as it relates to a specific illness and/or injury and designates to whom such information can specifically be shared are allowed to disseminate any information, formal or informal regarding one's health status. Furthermore, any interaction that you have with any medical provider or other entity that includes verbal, written or any other form of information sharing must be done in compliance with the Health Insurance Portability and Accountability Act of 1996 and FERPA.

Any breach of confidentiality and/or privacy will not be tolerated and will result in your immediate removal from any clinical rotation permanently. This may include being banned from the athletic venue permanently. Additional penalties may also be imposed, including, but not limited to, those administered by Bethune-Cookman University and the United States Federal Government.

My signature below indicates that I, as a student in the Athletic Training Program at Bethune-Cookman University, in compliance with *HIPAA*, *FERPA*, the *NATA Code of Ethics*, and the *BOC Standards of Professional Practice*, recognize that I have an obligation to myself, the athletes, patients, coaches with whom I work, preceptors, and to Bethune-Cookman University, to withhold from anyone, other than my immediate supervisors or other appropriate medical health professionals, any information I acquire professionally or personally which is considered confidential. This includes any information about a patient's



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medical condition, the treatment of a medical condition, any information which I may acquire in locker rooms, classrooms, CEC or PD office, athletic training facilities, physician's offices or otherwise which is considered to be non-public information.

The unique opportunity that I have to engage in clinical education as a student will be jeopardized if I violate this confidentiality, may irrevocably destroy the rapport I establish with athletes, patients, coaches, and physicians, and may result in my immediate dismissal from my clinical education assignment, the athletic training program, and/or Bethune-Cookman University. I also understand that I represent the Bethune-Cookman University Athletic Training Program at all times, and, as a result, I will conduct myself in a professional manner at all times. I understand that if I fail to abide by this professional conduct statement and the statutes included in the *NATA Code of Ethics* and the *BOC Standards of Professional Practice*, I will incur consequences for my actions and accept that penalty.

I, \_\_\_\_\_ (print name), have read the above stated information regarding compliance with confidentiality and privacy of information regarding student athletes and patients during my interaction and exposure with B-CU Department of Sports Medicine and educational resources.

By signing below, I am acknowledging that I have read, understand and will abide by all rules and regulations set forth here within. I agree that if I have any questions regarding confidentiality and/or privacy issues that I will address such questions with appropriate supervisors to assure proper action at all times.

\_\_\_\_\_  
Student Name (Printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
CEC

(Appendix B: HIPAA/FERPA Confidentiality Acknowledgement and Agreement)



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## Appendix C

### Bethune-Cookman University Master of Athletic Training Program Guidelines for Technical Standards for Admission, Academic Progression and Graduation of the Master of Athletic Training Program

*Taken/adapted from the NATA Education Council Guidelines*

#### History and Rationale:

The landmark Americans with Disabilities Act of 1990, P.L. 101-336 (“ADA” or “the Act”), enacted on July 26, 1990, provides comprehensive civil rights protections to qualified individuals with disabilities. The ADA was modeled after Section 504 of the Rehabilitation Act of 1973, which marked the beginning of equal opportunity for persons with disabilities. As amended, Section 504 “prohibits all programs or activities receiving federal financial assistance from discrimination against individuals with disabilities who are ‘otherwise qualified’ to participate in those programs.” With respect to post-secondary educational services, an “otherwise qualified” individual is a person with a disability “who meets the academic and technical standards requisite to admission or participation in the recipient's education program or activity.”

Given the intent of Section 504 and the ADA, the development of standards of practice for a profession, and the establishment of essential requirements to the student's program of study, or directly related to licensing requirements, is allowable under these laws. In applying Section 504 regulations, which require individuals to meet the “academic and technical standards for admission,” the Supreme Court has stated that physical qualifications could lawfully be considered “technical standard(s) for admission.” Institutions may not, however, exclude an “otherwise qualified” applicant or student merely because of a disability, if the institution can reasonably modify its program or facilities to accommodate the applicant or student with a disability. However, an institution need not provide accommodations or modify its program of study or facilities such that (a) would “fundamentally alter” and/or (b) place an “undue burden on” the educational program or academic requirements and technical standards which are essential to the program of study.

The following guidelines embody the physical, cognitive, and attitudinal abilities an Entry-Level Athletic Trainer must be able to demonstrate in order to function in a broad variety of clinical situations; and to render a wide spectrum of care to athletes and individuals engaged in physical activity. **The guidelines serve to recognize abilities essential to the development of these Entry-Level abilities.** Further, the guidelines reflect the necessary and required skills and abilities identified for the Entry-Level Athletic Trainer as detailed in the CAATE 2020 Standards and the BOC, Inc., Role Delineation Study.



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## I. Overview

The Athletic Training Program (ATP) at Bethune-Cookman University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the Commission on Accreditation of Athletic Training Education (CAATE).

Applicants to this program are asked to verify that they understand the demands of the program and that they understand they will be required to complete the tasks, with or without reasonable accommodations, associated with performance as an athletic training student. Reasonable accommodation refers to the way in which Bethune-Cookman University can assist students with disabilities to accomplish these tasks (i.e. providing extra time to complete an examination, enhancing the sound system in a classroom or providing a push cart for a student who may not have the strength to carry a heavy item for moderate distances). Reasonable accommodation does not mean that students with disabilities will be exempt from certain tasks; it does, however, mean that the athletic faculty/staff will work with students with disabilities to determine whether there are ways to assist the students towards completion of these tasks while continuing to maintain the integrity of the Athletic Training Program and protecting the safety of all involved. After acceptance into the program, a student who needs reasonable accommodation for disability must make a formal request to the MAT Program Director and must be prepared to provide documentation substantiating the claimed disability to the Office of Disabilities. A student may be administratively withdrawn if it becomes apparent that the student cannot complete essential tasks even with stated accommodation/s, the accommodations needed are not reasonable and would cause undue hardship to the program and institution, or that fulfilling the functions would create a significant risk of harm to the health or safety of others. Students who have questions about this document or who would like to discuss specific accommodations should make an inquiry both with the Clinical Education Coordinator and the Program Director of the MAT program.



## **II. Admission/Retention Requirements**

The following abilities and expectations must be satisfied by all students admitted to the Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation; the student will not be admitted into or retained in the program. Compliance with the program's technical standards does not guarantee students eligibility for the Board of Certification exam.

**The following are considered Essential Tasks required of the MAT students to complete the Athletic Training Program:**

### **Intellectual & Communication:**

A student must have sufficient intellectual competence and communication skills to complete the following essential tasks:

- Students must meet class standards for course completion throughout the curriculum.
- Students must communicate honestly.
- Students must be able to read, write, speak, and understand English at a level consistent with successful course completion, having the ability to communicate with athletes and successfully complete medical records.
- Students must complete readings, assignments and other activities outside of class hours.
- Effective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.
- Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- Students must gather decision-making pieces of information during an injury assessment activity in class or in the clinical setting without the use of an intermediary such as a classmate, Graduate Assistant, or certified athletic trainer.
- Students must perform treatment and rehabilitation activities in class or in the clinical setting by direct performance or by instruction and supervision of intermediaries.
- Students must apply critical thinking processes to their work in the classroom and in the clinical setting, and must exercise sound judgment in the class and in the clinical setting.
- Student must possess the ability to make and execute quick, appropriate and accurate decisions in a stressful environment.
- Student must be able to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.



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- Students must be able to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this include, but is not limited to, the ability to establish rapport with patients, communicate judgments and treatment information effectively
- Students must be able to record the physical examination results and a treatment plan clearly and accurately
- Students must be able to multitask and perform a daily schedule of classes and clinical rotations per hour requirements

### **Motor Function & Sensory:**

A student must have sufficient motor function, neuromuscular strength, coordination, sensory awareness, and stamina to complete the following essential tasks:

- Students must be able to sit and stand for long periods in various types of weather conditions on a daily basis.
- Students must be able to ambulate indoors and outdoors over various terrains.
- Students frequently stand and walk while providing support to an injured patient.
- Students must frequently independently lift equipment or provide lifting support to an injured patient.
- Students frequently exert force to push or pull objects, sometimes while ambulating long distances.
- Students must be able to frequently twist, bend, and kneel on the floor for extended periods.
- Students frequently coordinate verbal and manual activities with gross motor activities.
- Students must use auditory, tactile, and visual senses to receive classroom instruction and to evaluate and treat injured patients.
- Students may work within an electrical field.
- Students must have adequate vision to correctly see activities across the field, mat, or court.
- Students must have basic neurological function to perceive hot, cold, change in contour of surface/body part.
- Students frequently need bladder and bowel control to perform assigned duties.
- Students must have sufficient postural and neuromuscular control, sensory function, and strength and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely, and efficiently use equipment and material during assessment and treatment of patients.



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## **Behavioral & Emotional:**

A student must possess the ability to act professionally and have the emotional and mental health required to complete the following essential tasks:

- Students must maintain professional standards set in place by B-CU and the B-CU Athletic Training Program in addition to State and National ethical and professional standards of conduct.
- The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
- The ability to record the physical examination results and a treatment plan clearly and accurately.
- Students must follow safety procedures established for each class and clinical setting.
- Students must attend classes and clinical assignments punctually.
- Students must have the capacity to maintain composure and continue to function well during periods of high stress and varying weather conditions.
- Students must be able to remain focused and demonstrate emotional stability in the academic and clinical setting.
- Students must have the perseverance, diligence and commitment to complete the athletic training program as outlined and sequenced.
- Students must demonstrate affective skills (i.e. emotions and attitudes) and appropriate demeanor and rapport that relate to professional education and quality patient care.
- Students must be able to maintain professional relationships with program constituents (patients, fellow students, faculty, staff, preceptors, graduate assistants, etc.).
- Students must respect the rights, welfare, and dignity of all program constituents and not display discriminatory practices.
- Student's behavior during class and clinical education must not be a distraction to other program constituents.
- Students must maintain personal appearance and hygiene conducive to the classroom and clinical setting.
- Students must be substance free when attending all classes and clinical assignments.
- Students must be able to multitask and perform a daily schedule of classes and clinical rotations per hour requirements



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### III. Student and Health Care Provider Verification

Candidates for selection to the Athletic Training Program will be required to verify they have read and understand these technical standards and that they believe that they can meet (with or without accommodation) the technical standards tasks as outlined above. If a student or the program later identifies actual or potential mental, psychological, or physical difficulties in meeting the standards established for the program, the student, with assistance from the Office of Disabilities, will use this information to determine if the student can meet the technical standards with reasonable accommodation; this review will take into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all course work and clinical education experiences deemed essential to graduation.

The student must inform the program director of any changes in health status which may impact the ability to meet the technical standards. Compliance with the program's technical standards simply allows continued enrollment in the MAT Program and does not guarantee a student's eligibility for the Board of Certifications certification exam.

### IV. Certification

At the time of formal application to the program, the student will read and sign the following statement of understanding:

I certify that I have read and understand the technical standards listed above and recognize that they must be satisfied in this education program. If I need an adaptation or accommodation for this program based on a disability, I will make an appointment with the Office of Disabilities for review of that request.

---

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

---

Applicant Name (Printed) \_\_\_\_\_

---

CEC \_\_\_\_\_

(Appendix C: Guidelines for Technical Standards)



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## Appendix D

### Bethune-Cookman University Master of Athletic Training Program Infectious and Communicable Disease Policy

Athletic training students have a small but real health risk during their clinical education experiences. They frequently come into contact with patients/athletes who are ill with potentially infectious or communicable diseases, and they often are required to tape or bandage wounds that present the potential for contact with blood-borne pathogens. In addition, athletic training students who are ill with an infectious or communicable disease may present a health risk to patients/athletes. The Bethune-Cookman University Athletic Training Program aspires to prevent disease exposure to staff, athletic training students, and patients/athletes.

Athletic training students must use universal precautions to limit the exposure to blood-borne pathogens. OSHA blood-borne pathogen training (or other acceptable training) for medical workers will be conducted annually for athletic training students prior to students engaging in clinical education in the fall. Institutional and program infection control policies will also be reviewed at this time.

The Center for Disease Control (CDC) provides specific guidelines for reporting communicable and infectious disease, see <http://www.cdc.gov/nhsn/PDFs/CMS/CMS-Reporting-Requirements.pdf>. These guidelines are designed to provide for the uniform reporting of diseases of public health importance within the community, in order that appropriate control measures may be instituted to interrupt the transmission of disease, and will be followed by the B-CU Athletic Training Program.

Athletic training students must realize that ill health care workers present some risk to the patients/athletes they treat and with whom they come in contact. To limit this risk, the following steps will be followed:

1. Hand washing and good personal hygiene techniques are two of the best measures to prevent communicable diseases. Hand washing should occur after contact with each patient. Additionally, hand washing is encouraged at all times when in contact with a patient or not. In the absence of immediate hand washing with soap and water, antibacterial hand sanitizer may be used. Hand washing with soap and water should occur as soon as possible, however.
2. If an athletic training student is ill, the student will be examined by a physician (or other licensed health care provider) of his/her choice. The physician will determine the appropriate treatment and the amount of time the student will be absent (if applicable) from clinical education experiences.



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3. If it is determined that the athletic training student may have a potentially infectious disease, he/she will be asked to relate that information to their preceptor and the Clinical Education Coordinator before their next scheduled clinical education experience.
4. The Clinical Education Coordinator, in consultation with the Program Director, will determine if the athletic training student requires further physician (or other related licensed health care provider) consultation/examination before he/she returns to clinical education experiences. The physician may schedule an examination, bar the athletic training student from reporting to their clinical setting, or permit the athletic training student to report back to their clinical setting.
5. Preceptors may require that an athletic training student who appears ill, be examined by either a physician (or other licensed health care provider) of the athletic training students' choosing.
6. A physician (or licensed health care provider) must examine an athletic training student who misses any clinical education experience due to infectious illness before they are allowed to resume the clinical experience.

By signing below, I agree that I have read, understand and will abide by the Infectious Disease Policy

---

Signature of Student

Date

---

Print Name

---

CEC

(Appendix D: Infectious and Communicable Disease Policy)



# BETHUNE-COOKMAN UNIVERSITY

## Appendix E

### Bethune-Cookman University Master of Athletic Training Program

#### Hepatitis B Declination

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been strongly advised to obtain the Hepatitis vaccine.

\_\_\_\_\_ I decline the Hepatitis B vaccination at this time.

\_\_\_\_\_ I have received the Hepatitis B vaccination series. Date \_\_\_\_\_

\_\_\_\_\_ I will receive the Hepatitis B Vaccination series. Date \_\_\_\_\_

I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can do so at any time.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CEC



# BETHUNE-COOKMAN UNIVERSITY

## Appendix F

### Bethune-Cookman University Master of Athletic Training Program Bloodborne Pathogen Policy and Exposure Protocol

#### **Part I: Blood borne Pathogen Policy**

The Bethune-Cookman University Athletic Training Program's Bloodborne Pathogen Policy is intended to prevent transmission of bloodborne diseases within the clinical education environment. This policy is developed from and is in alignment with Bethune-Cookman University's Bloodborne Pathogen Exposure Control Plan.

Training and education will be provided on a yearly basis for all students prior to beginning clinical or directed observation experiences. The training, as well as the guidelines/policies below, is based off of the Occupational Safety and Health Administration (OSHA) bloodborne pathogens standard through the American Heart Association. All students are required to utilize electronic resources (power point, video presentation) to review the material prior to taking a quiz. Students must earn 80% or better on the quiz before engaging in clinical education experiences. Documentation of training is maintained in your file.

All students admitted into the program are required to obtain the Hepatitis B vaccination, if not already vaccinated. The vaccine is given by injection on three separate dates. Usually, the first two are given 1 month apart, and the third dose is administered 5 months after the second. After these three doses, the Hepatitis B vaccine is 85-95% effective in preventing Hepatitis B infection in those whom receive the vaccinations.

#### **Be aware of the following bloodborne pathogen guidelines when engaging in clinical education:**

- The most serious infections spread through blood and body fluids are Hepatitis B (HBV), Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV; the virus that causes AIDS). Hepatitis B vaccine will protect you from contracting Hepatitis B.
- These infections are caused by exposure to blood or other body fluids.
- The most common exposure for athletic training students is treating bleeding and/or open wounds without protective barriers.
- The use of personal protective equipment (PPE), such as gloves, gowns, masks, and protective eyewear, is the best way to avoid exposure to bloodborne pathogens.
- Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing visible blood, or other body fluids to which universal precautions apply. Use antibacterial sanitizer if hand washing is not available.
- Clinical education sites (e.g., athletic training facilities) have various PPE and other engineering controls available for student use such as: Gloves, masks, protective



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eyewear, gowns, gauze pads, biohazard bags, sharps containers, biohazard containers, absorbent materials, and approved disinfectant/cleaning supplies.

- Disposable articles contaminated with blood or other body fluids should be placed in a suitable biohazard container for storage. Tables and other surfaces should be washed immediately with an appropriate disinfectant.
- All sharp objects such as scalpel blades and razor blades should be disposed of in the designated disposal containers (sharp's container/box).
- Bloodborne Pathogen Guidelines and Exposure Protocols are posted in clinical education sites (e.g., athletic training facilities) as appropriate. These procedures must be strictly followed.

### **Universal Precautions: Procedures for Handling Spilled Blood and Body Fluids**

1. Apply disposable gloves.
2. Use paper towel or other absorbent material to absorb spill.
3. Place used towel/absorbent material in biohazard container or leak-proof plastic bag.
4. Flood area with 1:9 bleach solution, alcohol or sanitary absorbent agent, or other approved cleaning solution.
5. Clean area with paper towels, vacuum (dry or wet), or broom and dustpan.
6. Place used towel, vacuum cleaner bag, or waste in a biohazard container or a leak proof plastic bag.
7. Remove gloves properly (pull inside out).
8. Place gloves in biohazard container or biohazard bag and tie.
9. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.

### **Wound Care Procedures**

1. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.
2. Apply gloves, inspect for rips or holes.
3. Place sterile gauze pad over wound; apply direct pressure to control bleeding.
4. Elevate wound site above heart level 5-10 minutes.
5. Clean wound with approved cleaner; use a circular outward spiral pattern to remove debris/bacteria.
6. Apply appropriate wound dressing/closure (e.g., Band-Aid, non-adherent pad, Steri-Strips). Ensure dressing is securely applied.
7. Dispose of all contaminated materials in a biohazard container.
8. Wash work surface with approved cleaner.
9. Remove gloves - pull inside out.
10. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.



## Part II: Bloodborne Pathogen Exposure Protocol

Upon exposure to bloodborne pathogen proceed as follows:

1. Wash exposed skin with soap and water. Flush eye or other mucous membranes with water for 15 minutes. Provide immediate first aid to the area, clean and dress as necessary. Exposure incident means that blood or other potentially infectious materials made contact with:
  - a) Eye, mouth, or other mucous membrane
  - b) Non-intact skin or parenteral contact
2. Inform clinical site preceptor and complete *Bloodborne Pathogen Exposure Incident Form* and/or any other necessary documentation for that clinical site. Kept in file.
3. Contact the Head Athletic Trainer and Clinical Education Coordinator as soon as possible but no longer than 24 hours after exposure.
  - a) The Clinical Education Coordinator must contact B-CU's appropriate administrator either the same or next business day to report the exposure.
4. Determine (through your medical records) your Hepatitis B immunization status to take to your healthcare provider.
  - a) Each athletic training student must have the Hepatitis B vaccine, be in the process of attaining the series at the time of acceptance into the program.
  - b) Documentation of the vaccine will be on file with the Athletic Training Program.
5. Make an immediate appointment with the Student Infirmary. If during the weekend, seek attention with primary care physician or an urgent care facility. Contact the Student Infirmary on Monday. Blood should be tested for HBV, HCV, and HIV as soon as it is feasible through your health care provider; within 72 hours of incident is best. Your healthcare provider will then assess the need for any post-exposure treatment, and you should follow-up as requested.
  - a) Understand that your health insurance may or may not cover these expenses. However, it is for your benefit to follow through with the recommended procedures.

By signing below, you are stating that you understand and will follow the blood-borne pathogen policy guidelines and requirements.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Print: \_\_\_\_\_

\_\_\_\_\_  
CEC  
(Appendix F: Bloodborne Pathogen Policy and Exposure Protocol)



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## Bethune-Cookman University Master of Athletic Training Program Bloodborne Pathogen Exposure Incident Form

Student Name: \_\_\_\_\_ Student DOB: \_\_\_\_\_

Preceptor Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Give a detailed description of how the incident occurred.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of source individual (if permission granted; if permission not granted or not known, write "unknown"):

\_\_\_\_\_

Device(s) being used during the incident:

\_\_\_\_\_

Personal protective equipment used during the incident:

\_\_\_\_\_

Actions taken (first aid, clean-up, reporting, etc.):

\_\_\_\_\_

\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This report is to be kept in the student's file at the Bethune-Cookman University MATP CEC Office. A copy may be given to student or his/her department as requested and consent given.**



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## Appendix G

### Bethune-Cookman University Master of Athletic Training Program

#### Acknowledgement of Program Standards

Please read and initial each condition and sign and date the document at the bottom. The following conditions must be met to remain in good standing in the Athletic Training Program (ATP).

1. A 3.0 overall grade point average and a B or above in each required major/support course. Students must demonstrate clinical progression as documented via clinical evaluations, annual performance review, and comprehensive exams. Students not in good standing may be placed on probation or suspension. It is the student's responsibility to understand and comply with all retention, probation and program termination policies.

\_\_\_\_\_ **Initials**

2. Proof of Immunizations or a Waiver must be signed and on file with the Clinical Education Coordinator.

\_\_\_\_\_ **Initials**

3. The student must understand that all costs associated with travel to clinical courses are the responsibility of the student. These travel costs are not part of course or program fees. In addition, the student should maintain their own personal liability, auto, and health insurance policies during the course of their time in the MAT.

\_\_\_\_\_ **Initials**

4. A passing score of minimum 75% must be attained on all clinical comprehensive exams (within 3 attempts) or the grade for the clinical course will be an automatic "C". Students who cannot pass the comprehensive exam will have significant remediation and possibly placed on program probation. Students must pass Exit Exam with 75%.

\_\_\_\_\_ **Initials**

5. Bloodborne Pathogen Training, Confidentiality Agreements, BLS training and other additional program requirement forms must be updated annually prior to starting clinical experiences.

\_\_\_\_\_ **Initials**



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6. Athletic training students must comply with MAT conduct requirements (academic and clinical), the College Student Handbook, the NATA Code of Ethics, BOC and the CAATE standards. Not complying with any of these established guidelines may jeopardize continued enrollment in the MAT.

\_\_\_\_\_ **Initials**

7. Athletic training students must understand that each clinical site may have specific requirements of the student. These site requirements may differ from the MAT program requirements. The B-CU MAT program sets the standard, but if the site is of a higher standard the student is to comply with the site. If a conflict arises the student must contact the CEC immediately.

\_\_\_\_\_ **Initials**

8. The student must read and understand all of the MAT policies and procedures.

\_\_\_\_\_ **Initials**

9. Prior to starting any clinicals, students must meet all financial requirements, complete their clinical contract and show proof of review of the site's EAP. In addition, the student acknowledges the hour guidelines for clinical experiences.

\_\_\_\_\_ **Initials**

10. The student must maintain professionalism, open communication with preceptor and professors at all times and be punctual to classes and clinical rotations.

\_\_\_\_\_ **Initials**

11. By signing below, I agree to abide by all policies, procedures and expectations of the Master of Athletic Training Program at Bethune-Cookman University.

\_\_\_\_\_ **Initials**

Print Name \_\_\_\_\_

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

CEC

(Appendix G: Acknowledgement of Program Standards)



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## Appendix H

### Bethune-Cookman University Master of Athletic Training Program

#### Assumption of Risk

Prior to the start of the program the AT Student is expected to acknowledge an “Assumption of Risk”. Participation in the clinical experience exposes students to potential risks including, but not limited to:

- being struck by a flying object (ball, puck, bat, stick, shot-put),
- colliding with participating athletes, patients or clients,
- contacting harmful chemicals (bleach, Virex, etc.),
- contacting blood or other bodily fluids or infectious materials,
- accidents on playing surface, and/or
- injury associated with lifting and moving equipment,
- exposure to radiation
- Varying weather conditions

Steps that minimize these risks should be discussed both in the classroom and by your preceptor at the beginning of each experience. An awareness of situations that are potentially harmful is crucial in this process. Any student concerns should be expressed proactively with the preceptor.

I, \_\_\_\_\_ understand the risk of participation as an Athletic Training Student. In addition, I acknowledge that it is my responsibility to discuss situations proactively with my preceptors, faculty and staff of the ATP. If any concerns arise, I understand that my duty is to bring these concerns to others’ attention as soon as possible.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director/CCE

\_\_\_\_\_  
Date

\_\_\_\_\_  
CEC



# BETHUNE-COOKMAN UNIVERSITY

## Appendix I

### Bethune-Cookman University Master of Athletic Training Program Therapeutic Equipment Safety Policy

The Bethune-Cookman University Athletic Training Program requires that therapeutic equipment at all clinical sites be inspected, calibrated, and maintained according to the manufacturer's recommendations. The purpose of this policy is to safeguard the health of the patient and the safety of the student and clinician.

#### Maintenance of Therapeutic Equipment

1. A qualified technician will annually inspect and calibrate applicable therapeutic equipment at all clinical sites. This includes all sites at Bethune-Cookman University and all off-campus clinical sites where athletic training students are placed.
  - a) All pieces of therapeutic equipment (e.g. hydrocollator, ice machine, paraffin bath, exercise bike) that have electrical power should be inspected annually for safety.
  - b) All therapeutic modalities that have electrical power and are used to administer specific dosage-based treatment (e.g. ultrasound, electrical muscle stimulation) should be inspected for safety, as well as calibrated.
  - c) Sites accredited by the Joint Commission, Accreditation Association for Ambulatory Health Care, or other recognized external accrediting agencies are exempt from this requirement but are expected to follow the policies of those agencies.
2. The preceptor(s)/staff at each clinical site must arrange inspection and calibration for the therapeutic equipment.
3. The preceptor(s)/staff at each clinical site must arrange payment (if required) for the inspection and calibration. B-CU is not responsible for payment or reimbursement for inspection and calibration at clinical sites.
4. Verification of inspection and calibration will be maintained as follows:
  - a) Hard or electronic copies of inspection and calibration records by the preceptor(s) at each clinical site; the method may be determined by the site but the information must be readily accessible at any time by the preceptor(s) for presentation to the Clinical Education Coordinator/Athletic Training Program.



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- b) Visible notification (e.g., sticker, signage) on applicable therapeutic equipment is ideal but not required.
5. The preceptor(s) at each clinical site are also responsible for ongoing maintenance of therapeutic equipment. Any equipment that appears to be unsafe for patient or clinician use shall not be used and shall be clearly marked as not for use until it can be properly inspected and calibrated.
6. The Clinical Education Coordinator will verify regular inspection and calibration of all applicable therapeutic equipment at each clinical site during routine site visits and/or prior to placement of athletic training students at a site.

## Procedures for Safe Use of Therapeutic Equipment by Athletic Training Students

1. Athletic training students must be instructed in and must demonstrate competence in the use of specific therapeutic equipment before using said specific therapeutic equipment in the treatment or care of any patient.
  - a) Instruction and evaluation shall occur in the classroom/laboratory setting.
  - b) If a learning opportunity arises, where the student may gain experience with therapeutic equipment but formal classroom/laboratory instruction has not yet taken place, the preceptor may instruct the student on the knowledge and skills associated with the therapeutic equipment so that the student may benefit from that situation.
2. Athletic training students will only use therapeutic equipment while under direct supervision of a preceptor.
3. Athletic training students will only apply therapeutic equipment according to manufacturer guidelines or applicable federal, state, and local laws, and according to accepted clinical practice standards

By signing below, you are stating that you understand and will abide by the therapeutic standards policy.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Print

\_\_\_\_\_  
CEC

(Appendix I: Therapeutic Equipment Safety Policy)



# BETHUNE-COOKMAN UNIVERSITY

## Appendix J

### Bethune-Cookman University Master of Athletic Training Program Athletic Training Student's Commitment to Excellence

The Athletic Training Program at Bethune-Cookman University is committed to providing students with the best education possible. An important component of the acquisition of learning includes the clinical education experiences in which a student partakes. As such, each athletic training student enrolled in the program plays a key role in determining one's own success. In an effort to assure learning over time transcends from the classroom to the clinic, each student must accept his/her role in the clinical education component of the athletic training program.

In order for optimal clinical learning environments to take place, it is the belief of the Athletic Training Program that each of the following must occur between the athletic training student and preceptor:

- *Initial establishment of expectations, roles, responsibilities and limitations*
- *Introduction of policy and procedure for respective facilities*
- *Identification of student's clinical education goals and plans to meet such goals*
- *Recognition of student's current level of knowledge and agreement that students clinically practice only those skills previously completed in formal classroom settings*
- *Constant visual and auditory supervision of the student by the preceptor in order to intercede on behalf of the athlete and student*
- *Regular, ongoing, constructive feedback appropriate to situations at hand*
- *Formal and timely written mid-term and final evaluations discussed between student and preceptor*
- *Open and honest communication when potential conflicts may arise*
- *Delivery of truthful, accurate and factual information related to both clinical content and professionalism*
- *Mutual respect for one another on both a personal and professional basis*

By signing below, I, \_\_\_\_\_ (print name) acknowledge my support to Bethune-Cookman University's Athletic Training Program's Student's Commitment to Excellence and agree to do everything that I can to assure each of the aforementioned items take place between myself and any preceptor to whom I am assigned.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_ CEC



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## Appendix K

### Bethune-Cookman University Master of Athletic Training Program Orientation & Handbook Acknowledgement

I have completed my academic and clinical orientation and have reviewed a copy of the current Bethune-Cookman University *Athletic Training Program Academic & Clinical Education Handbook*, and understand that I am responsible for knowing and understanding the information contained within the handbook whether it was discussed in orientation or not. I understand if I have a question about the policies in the handbook, it is my responsibility to seek clarification from the Clinical Education Coordinator or Program Director of the Bethune-Cookman University Master of Athletic Training Program before my clinical rotation begins or before an issue arises. I agree to abide by the written policies and procedures including, but not limited to:

- Academic and program retention requirements
- Clinical education policies, expectations, and professional conduct
- Infectious Disease Policy
- Bloodborne Pathogen Policy and Exposure Protocol
- Confidentiality Policy
- Technical Standards
- All items contained within the *MAT Program Academic & Clinical Education Handbook*
- All other related policies, procedures and standards

If I do not follow these policies, procedures and standards I understand that I may face disciplinary action including, but not limited to: removal from the clinical education rotation, removal from the MAT course and/or removal from the program.

---

Student Name (Printed)

Date

---

Student Signature

CEC



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## Appendix L

### Bethune-Cookman University

### Goals Form

**Student Section:** Please fill out the top portion of this contract

**Student:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**Clinical Preceptor:** \_\_\_\_\_ **Site:** \_\_\_\_\_

**Clinical:** \_\_\_\_\_

**Minimum Hours Required for Clinical Rotation:** \_\_\_\_\_

**Classes Completed/Enrolled:** Check each class that you have completed or write the word “now” on any class in which you are currently enrolled

- |  |                                      |
|--|--------------------------------------|
| _____ ATR 510 Foundational of AT           | _____ ATR 540 Rehab                  |
| _____ ATR 512 Sport & Exercise Performance | _____ ATR 541 Modalities             |
| _____ ATR 570 Clinical Education I         | _____ ATR 531 O&A                    |
| _____ ATR 511 Nutrition in Sport           | _____ ATR 550 Research & Statistics  |
| _____ ATR 521 Lower Eval                   | _____ ATR 551 Advanced Ortho Assess  |
| _____ ATR 522 Upper Eval & Cervical        | _____ ATR 572 Clinical Education II  |
| _____ ATR 571 Clinical Education II        | _____ ATR 573 Clinical Education III |
| _____ ATR 520 Psychosocial                 | _____ ATR 561 Capstone in AT         |
| _____ ATR 542 Medical Conditions           | _____ ATR 562 Culmination Exp.       |

**Clinical Requirements/Assignments (see syllabus):**

**Clinical Preceptor & Student:** Meet and fill out this portion of the contract together

**General Rotation Schedule (Days of week, hours per day)**

**Expectations for the student (from Clinical Preceptor) - minimum 3**



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## Expectations for the Clinical Preceptor (from the Student)- minimum 3

### ATS Clinical Goals (minimum 3)

Where is the bloodborne pathogen disposal equipment located (for practices & games):

Where is the bloodborne pathogen protective equipment & supplies located (indoor & outdoor):

CP please sign below or fill in the blank to indicate that the topic has been completed or discussed with the MAT Student (or date of anticipated completion)

- Review department or organizational policies and procedures \_\_\_\_\_ initial
- Review Emergency Action Plan/Emergency Supplies \_\_\_\_\_ initial
- Where is nearest AED and EAP: \_\_\_\_\_
- Introduction to relevant Medical or Staff Personnel involved in the direct patient care plan \_\_\_\_\_ initial
- Tour of primary and any ancillary site/facility \_\_\_\_\_ initial
- Introduction to patients/clients (if appropriate): \_\_\_\_\_ initial
- Review paperwork & documentation system: \_\_\_\_\_ initial
- What documentation system is used, and student's role: \_\_\_\_\_

This contract is designed to facilitate discussion between the clinical preceptor and the athletic training student. Both parties are responsible for knowing the clinical requirements; however, it is ultimately the athletic training student's responsibility to ensure that the requirements are completed as assigned (see course syllabi). Please sign below indicating that you have reviewed and agreed to the information presented on this clinical contract.

\_\_\_\_\_  
Clinical Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
ATS Signature

\_\_\_\_\_  
Date

### ***Acknowledgement of EAP:***

***Students, please list the online link to the site EAP as your proof of understanding how to immediately access the clinical site EAP in an emergent situation.***

(Appendix L: Goals Form)



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## Appendix M

### NATA Code of Ethics

*Taken from the NATA website*

#### Preamble

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer, but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole.

When a conflict exists between the Code and the law, the law prevails.

#### **1. MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELFARE, AND DIGNITY OF OTHERS**

1.1 Members shall render quality patient care regardless of the patient's race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.

1.2. Member's duty to the patient is the first concern, and therefore members are obligated to place the welfare and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.

1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

#### **2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS' ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS**

2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.



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2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.

2.3. Members shall refrain from and report illegal or unethical practices related to athletic training.

2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.

2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

## **3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES**

3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.

3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.

3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such



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educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

**3.5.** Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

**3.6.** Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

### **4. MEMBERS SHALL NOT ENGAGE IN CONDUCT THAT COULD BE CONSTRUED AS A CONFLICT OF INTEREST, REFLECTS NEGATIVELY ON THE ATHLETIC TRAINING PROFESSION, OR JEOPARDIZES A PATIENT'S HEALTH AND WELL-BEING.**

**4.1.** Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.

**4.2.** All NATA members, whether current or past, shall not use the NATA logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

**4.3.** Members shall not place financial gain above the patient's welfare and shall not participate in any arrangement that exploits the patient.

**4.4.** Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

**4.5.** Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

September 2005, Revised 2018



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## Appendix N

### BOC Standards of Professional Practice

*Taken from the BOC website*

**Implemented January 2019**

#### **Introduction**

The BOC Standards of Professional Practice is reviewed by the Board of Certification, Inc. (BOC) Standards Committee and recommendations are provided to the BOC Board of Directors. The BOC Standards Committee is comprised of 5 Athletic Trainer members and 1 Public member. The BOC Board of Directors approves the final document. The BOC Board of Directors includes 6 Athletic Trainer Directors, 1 Physician Director, 1 Public Director and 1 Corporate/ Educational Director.

The BOC certifies Athletic Trainers (ATs) and identifies, for the public, quality healthcare professionals through a system of certification, adjudication, standards of practice and continuing competency programs. ATs are healthcare professionals who collaborate with physicians to optimize activity and participation of patients and clients. Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities.

The BOC is the only accredited certification program for Athletic Trainers in the United States. Every 5 years, the BOC must undergo review and re-accreditation by the National Commission for Certifying Agencies (NCCA). The NCCA is the accreditation body of the Institute of Credentialing Excellence.

The BOC Standards of Professional Practice consists of two sections:

- I. Practice Standards
- II. Code of Professional Responsibility

#### **I. Practice Standards**

##### **Preamble**

The primary purpose of the Practice Standards is to establish essential duties and obligations imposed by virtue of holding the ATC® credential. Compliance with the Practice Standards is mandatory.



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The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every Athletic Trainer and applicant must agree to comply with the Practice Standards at all times.

## **Standard 1: Direction**

The Athletic Trainer renders service or treatment under the direction of, or in collaboration with a physician, in accordance with their training and the state's statutes, rules and regulations.

## **Standard 2: Prevention**

The Athletic Trainer implements measures to prevent and/or mitigate injury, illness and long-term disability.

## **Standard 3: Immediate Care**

The Athletic Trainer provides care procedures used in acute and/or emergency situations, independent of setting.

## **Standard 4: Examination, Assessment, and Diagnosis**

The Athletic Trainer utilizes patient history and appropriate physical examination procedures to determine the patient's impairments, diagnosis, level of function and disposition.

## **Standard 5: Therapeutic Intervention**

The Athletic Trainer determines appropriate treatment, rehabilitation and/or reconditioning strategies. Intervention program objectives include long and short-term goals and an appraisal of those which the patient can realistically be expected to achieve from the program. Appropriate patient-centered outcomes assessments are utilized to document efficacy of interventions.

## **Standard 6: Program Discontinuation**

The Athletic Trainer may recommend discontinuation of the intervention program at such time the patient has received optimal benefit of the program. A final assessment of the patients' status is included in the discharge note.

## **Standard 7: Organization and Administration**

The Athletic Trainer documents all procedures and services in accordance with local, state and federal laws, rules and guidelines.



## II. Code of Professional Responsibility

### Preamble

The Code of Professional Responsibility (Code) mandates that BOC credential holders and applicants act in a professionally responsible manner in all athletic training services and activities. The BOC requires all Athletic Trainers and applicants to comply with the Code. The BOC may discipline, revoke or take other action with regard to the application or certification of an individual that does not adhere to the Code. The *Professional Practice and Discipline Guidelines and Procedures* may be accessed via the BOC website, [www.bocatc.org](http://www.bocatc.org)

### Code 1: Patient Care Responsibilities

The Athletic Trainer or applicant:

- 1.1 Renders quality patient care regardless of the patient's age, gender, race, religion, disability, sexual orientation, or any other characteristic protected by law
- 1.2 Protects the patient from undue harm and acts always in the patient's best interests and is an advocate for the patient's welfare, including taking appropriate action to protect patients from healthcare providers or athletic training students who are, impaired or engaged in illegal or unethical practice
- 1.3 Demonstrates sound clinical judgment that is based upon current knowledge, evidence-based guidelines and the thoughtful and safe application of resources, treatments and therapies
- 1.4 Communicates effectively and truthfully with patients and other persons involved in the patient's program, while maintaining privacy and confidentiality of patient information in accordance with applicable law
  - 1.4.1 Demonstrates respect for cultural diversity and understanding of the impact of cultural and religious values
- 1.5 Develops and maintains a relationship of trust and confidence with the patient and/or the parent/guardian of a minor patient and does not exploit the relationship for personal or financial gain
- 1.6 Does not engage in intimate or sexual activity with a patient and/or the parent/guardian of a minor patient
- 1.7 Informs the patient and/or the parent/guardian of a minor patient of any risks



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involved in the treatment plan

- 1.7.1 Does not make unsupported claims about the safety or efficacy of treatment

## **Code 2: Competency**

The Athletic Trainer or applicant:

- 2.1 Engages in lifelong, professional and continuing educational activities to promote continued competence

- 2.2 Complies with the most current BOC recertification policies and requirements

## **Code 3: Professional Responsibility**

The Athletic Trainer or applicant:

- 3.1 Practices in accordance with the most current BOC Practice Standards

- 3.2 Practices in accordance with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

- 3.3 Practices in collaboration and cooperation with others involved in a patient's care when warranted; respecting the expertise and medico-legal responsibility of all parties

- 3.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services

- 3.5 Does not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services or the skills, training, credentials, identity or services of athletic training

- 3.5.1 Provides only those services for which they are prepared and permitted to perform by applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

- 3.6 Does not guarantee the results of any athletic training service

- 3.7 Complies with all BOC exam eligibility requirements.

- 3.8 Ensures that any information provided to the BOC in connection with exam eligibility, certification recertification or reinstatement including but not limited to,



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exam applications, reinstatement applications or continuing education forms, is accurate and truthful

**3.9** Does not possess, use, copy, access, distribute or discuss certification exams, self-assessment and practice exams, score reports, answer sheets, certificates, certificate or applicant files, documents or other materials without proper authorization

**3.10** Takes no action that leads, or may lead, to the conviction, plea of guilty or plea of nolo contendere (no contest) to any felony or to a misdemeanor related to public health, patient care, athletics or education; this includes, but is not limited to: rape; sexual abuse or misconduct; actual or threatened use of violence; the prohibited sale or distribution of controlled substances, or the possession with intent to distribute controlled substances; or improper influence of the outcome or score of an athletic contest or event

**3.11** Reports any suspected or known violation of applicable local, state and/or federal rules, requirements, regulations and/or laws by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training

**3.12** Reports any criminal convictions (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs) and/or professional suspension, discipline or sanction received by him/herself or by another Athletic Trainer that is related to athletic training

**3.13** Cooperates with BOC investigations into alleged illegal or unethical activities. Cooperation includes, but is not limited to, providing candid, honest and timely responses to requests for information

**3.14** Complies with all confidentiality and disclosure requirements of the BOC and existing law

**3.15** Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization

**3.16** Complies with all conditions and requirements arising from certification restrictions or disciplinary actions taken by the BOC, including, but not limited to, conditions and requirements contained in decision letters and consent agreements



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entered into pursuant to Section 4 of the *BOC Professional Practice and Discipline Guidelines and Procedures*.

**3.17** Fulfills financial obligations for all BOC billable goods and services provided.

### **Code 4:** Research

The Athletic Trainer or applicant who engages in research:

- 4.1** Conducts research according to accepted ethical research and reporting standards established by public law, institutional procedures and/or the health professions
- 4.2** Protects the human rights and well-being of research participants
- 4.3** Conducts research activities intended to improve knowledge, practice, education, outcomes and/or public policy relative to the organization and administration of health systems and/or healthcare delivery

### **Code 5:** Social Responsibility

The Athletic Trainer or applicant:

- 5.1** Strives to serve the profession and the community in a manner that benefits society at large
- 5.2** Advocates for appropriate health care to address societal health needs and goals

### **Code 6:** Business Practices

The Athletic Trainer or applicant:

- 6.1** Does not participate in deceptive or fraudulent business practices
- 6.2** Seeks remuneration only for those services rendered or supervised by an AT; does not charge for services not rendered
  - 6.2.1** Provides documentation to support recorded charges
  - 6.2.2** Ensures all fees are commensurate with services rendered
- 6.3** Maintains adequate and customary professional liability insurance
- 6.4** Acknowledges and mitigates conflicts of interest



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## Appendix O

### CAATE 2020 Professional Standards

*Given to Students & Available on ATrack*





# BETHUNE-COOKMAN UNIVERSITY

## Appendix P COVID-19 Form

### **Student Disclosure & Attestation for COVID-19 / SARS-COV-2 Return to Clinical Education &/or Clinical Lab Courses**

#### ***Purpose / Background***

The purpose of this document is to disclose risks, reasonable precautions, and implications for entry of students into clinical education (i.e. internships) and/or clinical lab courses during this time of pandemic. Many academic programs within the B-CU College of Nursing & Health Sciences require clinical education rotations and/or clinical lab classes as mandated by their respective professional accreditation and/or licensure. When reasonable alternate assignments have been exhausted, the return to internships and face to face lab classes may be necessary for academic programs to maintain compliance with accreditation standards and/or allow timely degree completion, and possible qualification for licensure.

#### ***Credentialing / Clearance for Clinical Education***

In order to be credentialed / cleared for clinical education experiences, students must complete numerous pre-assignment background requirements, which are mandated by either the University (or academic unit), or the partnering organization (i.e. hospital organization, etc.). Some requirements are disclosed in the affiliation agreement, while others are added by either entity due to public or individual health and safety concerns. These requirements may include but are not limited to criminal background checks, drug screening, health insurance, CPR certification, immunization records, blood borne pathogens training, etc.

*It should be noted that different partnering facilities / agencies may have different variations of these aforementioned requirements. In all cases, the Bethune Cookman and/or the individual academic unit works with the facility to establish that each assigned student meets all requirements prior to entry at the facility for purposes of completing the assigned clinical experience / internship.*

#### ***Clinical Lab Coursework***

In order to maintain compliance with accreditation standards, some academic units are required to deliver laboratory-based, clinical courses. These courses require person to person physical interaction in a manner which social distancing cannot occur. These courses also may involve competencies which the faculty must verify to assure the reasonable skill and safety in order to protect the public. Thus, faculty interaction is also necessary to ensure competence in these clinical skills and readiness to enter clinical practice with patients and vulnerable populations.

#### ***Additional Considerations Due to COVID-19 / SARS-COV-2***

In light of the global pandemic/COVID-19, the B-CU College of Nursing & Health Sciences has developed additional, internal requirements for clinical education internships as well as return to clinical laboratory courses.

As part of these precautions, each student (you) must attest to the following:

1. Student has reviewed and understands the symptoms of COVID-19 as provided by the Centers for Disease Control and Prevention CDC \_\_\_\_\_(Initial)



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2. Student attests that he/she will immediately report to an appropriate healthcare professional if he/she experiences the symptoms provided by the CDC. \_\_\_\_\_(Initial)
3. Student attests that he/she will immediately contact B-CU MAT Program Director/Clinical Coordinator if he/she experiences signs and symptoms of COVID-19 or experiences a high-risk exposure event.
  - a. Student will comply with the guidance provided by B-CU MAT Program.  
\_\_\_\_\_ (Initial)
4. Student has reviewed, understands, and will comply with all guidance for healthcare professionals provided by the CDC to reduce risk of transmission. \_\_\_\_\_(Initial)
5. Student has reviewed, understands, and will comply with any additional guidance for health care professionals requested by the partnering site / organization / agency.  
\_\_\_\_\_ (Initial)
6. Student is aware of the following:
  - a. There is an imminent threat of physical injury, pain, and suffering, including loss of life, posed by exposure to COVID-19 by participating in the internship at the Internship Site.
  - b. The threat is not only a threat to self, but a threat to persons with whom he/she lives, works and/or has direct or indirect physical contact.
  - c. Becoming ill with the virus can result in financial hardship for self and others.  
\_\_\_\_\_ (Initial)
7. Student will immediately leave the Clinical Site at any time he/she feels unsafe or uncomfortable generally or with any particular activity associated with COVID-19; and will immediately report concerns to both supervising staff at the Internship Site and appropriate B-CU faculty/staff member.  
\_\_\_\_\_ (Initial)
8. Student understands that either or both the Clinical Site and the University may authorize medical treatment if an emergency situation arises at the Internship Site. Costs of that treatment are the student's responsibility. Further, the student understands that he/she should maintain health insurance for his/her benefit and that the University will not cover the cost of any medical treatment authorized during the internship. \_\_\_\_\_(Initial)

Students in training at a facility site are subject to the rules and policies of the facility and must comply with those rules and policies to remain in training at the site. Given the global pandemic, student should expect that partnering organizations are likely to be enacting policies relating to potential exposure, control of transmission, and addressing outbreaks. Students must comply with all such policies that the organization enacts due to COVID-19.

### ***Implications of Student Behaviors & Decisions***

COVID-19 exposures in hospital and clinical settings are possible. These settings are typical destinations for future clinical practice of students where there are times when exposure to numerous infectious diseases may occur. Through their education, students are provided with necessary information and



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training on reducing risks of transmission through use of good hygiene, use of appropriate PPE, and avoiding unnecessary behaviors.

It is an expectation that students majoring in health professions understand the implications of their choices and behaviors and subsequent health risks. This includes behaviors that reduce risk of transmission such as good hygiene, use of appropriate PPE, etc. This also includes personal behaviors such as avoiding unnecessary travel that may result in required quarantine. Such behaviors can result in a negative impact to degree completion timeline.

By signing below, the student attests the following:

1. The student has reviewed and understands all information provided in this document, including reference materials from the CDC.
2. The student has reviewed and understands all information related to the implications associated with the decision to participate in the scheduled clinical education internship or lab course.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
CEC



# BETHUNE-COOKMAN UNIVERSITY

Return to Clinical Education &/or Clinical Lab Courses)

## Appendix Q

### COVID-19 Forms

## **COVID-19: Return to In-Person Clinical Skills Classes, Training or Testing Student Confirmation**

### **Background**

Many academic units within Bethune Cookman University prepare future healthcare providers. Professional disciplines within health sciences need to be in compliance with professional accreditation standards and /or alignment with state licensure standards. Paramount to these standards is the assurance of clinical (psychomotor) skill competency of students. Many clinical skills our students learn cannot be conducted in a distance format manner as the lack of hands-on guidance from faculty experts and assurance of competency presents a violation of standards and danger to the public.

*Therefore, the clinical skill guidance / instruction and examinations for psychomotor skill acquisition and competency must be conducted in a face-to-face manner. These concepts are guided by professional accreditation and/or state licensure requirements. Activities involved necessitate in-person lab courses or scheduled activities in the BCU clinical skill lab setting.*

### **Guiding Framework**

The B-CU College of Nursing & Health Sciences approves students to return to the classroom setting for clinical skill guidance and examination to assure competency to practice if all of the following conditions are met:

1. The clinical skills:
  - a. (1) are required activity of professional accreditation, **and**
  - b. (2) there is no other mechanism to delay the activity, or alter the experience (mode of delivery, different timing, etc.).
2. In order to mitigate risk of COVID-19 transmission to students, faculty, and staff, all student and faculty participants in the class activity follow Centers for Disease Control (CDC) guidelines which includes but not limited to the following:
  - a. Self-screening for symptoms.
  - b. Standard precautions where social distancing is not possible.
  - c. Use of good hygiene and appropriate PPE.
  - d. Educators will be expected to model behaviors consistent with the CDC guidelines.
3. Programs must have the resources and support to adhere to updates to professional guidelines.
4. Programs will adhere to additional guidance that may be provided by B-CU Student Health Services leadership and B-CU Health and Safety.



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## Verification of Requirements:

For approval of return to clinical skill classes, training, and/or examinations, academic units must meet the requirements outlined in the Guiding Framework above. Verification of these requirements are met through the following:

### ***Student-Specific Requirements***

1. Signature below attests the signee (student) has reviewed and will comply with CDC guidelines which include but is not limited to: (1) Self-screening for symptoms (2) Standard precautions where social distancing is not possible (3) Use of good hygiene and appropriate PPE.

---

Print Name

Signature

2. Signature below attests the signee (student) has received, understands, and signed the disclosure of the health risks of COVID-19 .

---

Print Name

Signature

(Appendix Q: COVID-19: Return to In-Person Clinical Skills Classes, Training or Testing  
Student Confirmation)



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## Appendix R

### COVID-19 Hour Addendum

The Commission on Accreditation of Athletic Training Education (CAATE) continues to monitor the impact of the Coronavirus (COVID-19) pandemic on all levels of our accredited programs. Additionally, the CAATE is monitoring the responses from the Department of Education, the Council for Higher Education Accreditation (CHEA), the Association of Specialized and Programmatic Accreditors (ASPA), and those of our peer health care accreditors. The Commission recognizes the significant difficulties of operating athletic training programs during these challenging times. The CAATE is working diligently to afford programs appropriate flexibility to deal with these difficulties while at the same time being vigilant in enforcing the standards, we have set forth to assure programmatic quality and protect students and the public.

As programs continue to be impacted by restricted campus access, campus closures, and restricted clinical site access, they are increasingly challenged to deliver and assess the psychomotor skills necessary to prepare students for contemporary athletic training practice. While the Commission recognizes this challenge, please be advised that programs **MUST** adequately teach and assess the necessary psychomotor skills.

**The Bethune-Cookman University Master of Athletic Training program will make adjustments in hours, due to COVID-19, for the following:**

**Year:**

**Semester/s:**

**Hour Adjustment:**

***By signing below, you are stating that you understand and will abide by this addendum.***

Student Name: \_\_\_\_\_

Student Clinical / Internship Site Name: \_\_\_\_\_

Clinical / Internship Semester/Year: \_\_\_\_\_

### ***Program Administration Requirements***

Clinical Education Coordinator Name: \_\_\_\_\_

Clinical Education Coordinator Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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## Appendix S

### Bethune-Cookman University Master of Athletic Training Program

#### Prerequisite Approval

Per the MAT program requirements, all prerequisite courses are vetted for rigor and program compliance. The student will be required to send in syllabi for all prerequisite courses being submitted for entry into the Master of Athletic Training Program. If the course does not meet the requirements it will not be accepted with the application. The Program Director assesses the syllabi for the following criteria:

1. Institution where student attended
2. Accreditation status of school
3. Course level (200,300 or 400)
4. Course Title (Does course title match same courses at B-CU, or the defined names of the courses that the CAATE identifies)
5. Credit hour requirement
6. Course description
6. Official transcript
7. Course syllabi (biology, chemistry, physics, psychology, anatomy, and physiology)



# BETHUNE-COOKMAN UNIVERSITY

## Appendix T

### Bethune-Cookman University Master of Athletic Training Program

#### Academic Honesty-Honor Code

Bethune-Cookman University students are expected to abide by the B-CU Student Honor Code in all academic activities. As members of an academic community, which places a high value on truth and the pursuit of knowledge, students are expected to be honest in every phase of their academic life and to present, as their own work, only that which is genuinely theirs. Students have the responsibility to maintain the highest standards of academic integrity and to refrain from any form of academic dishonesty.

Academic dishonesty, such as cheating, plagiarism or other actions to create an unfair academic advantage for oneself or a disadvantage for another other member or members of the academic community, is antithetical to learning and inconsistent with the Institutional Core Values. Students who are academically dishonest undermine the integrity of the University. If students receive recognition, the value of the recognition is diminished if the student is accused of academic dishonesty. In such cases, the reputation of the University and its graduates are jeopardized. Academic dishonesty hurts the University and is unfair to other students. A complete definition of academic dishonesty and disciplinary procedures are found in the B-CU Student Honor Code.

Suspected violation of either a University policy on academic honesty or the instructor's specific codes, as found in the course syllabus, will be handled in accordance with the B-CU Honor Code.



# BETHUNE-COOKMAN UNIVERSITY

## Appendix U

### Bethune-Cookman University Master of Athletic Training Program Grievance & Appeal Policy

Bethune-Cookman University is committed to supporting the student matriculation process. It is our intent to positively resolve issues, complaints, and concerns that may impact the success of students in meeting student learning outcomes. The grade appeal procedure provides students with an opportunity to have awarded grades reviewed by an impartial body and to provide relief. Before initiating a petition for appeal, the student should attempt to resolve the problem directly with the professor and/or department chair. Should efforts to resolve the problem with the professor and/or department chair be unsuccessful, the student has the right to file a formal appeal. Students must consult their respective academic college or school guidelines which may differ.

#### Student Grade Appeal Procedure:

Students have the right to appeal the grades awarded in courses.

Students will have ten business days from the day that grades are posted or otherwise given before initiating the appeal. The student should submit a written statement to the academic dean within ten days setting forth the complaint, efforts to resolve it, and supporting evidence or justification for the complaint. The academic dean, on receipt of this petition, should provide a copy of the complaint to the faculty.

The Dean will convene the committee charged with reviewing matters of concern. The Committee will review the written statement from the student, secure additional information that the student may have, and hear and examine evidence and information that the professor may have in support of her/his decision. Both the student and the faculty shall each receive reasonable notice of the hearing before the faculty committee and be permitted to be present at the hearing. In addition, the parties shall have the right to present evidence and to examine any witnesses who should testify. Students enrolled in online degree programs will be granted the option of attending the hearing via Skype or Zoom. The committee then makes a recommendation to the dean, along with all of the supporting data, and the dean renders a decision in the case, which is immediately communicated in writing to the student, the faculty concerned, and the committee.

If the student or the faculty concerned is dissatisfied with the decision of the academic dean, either may appeal to the Office of the Provost. If this is done, the Provost will review all of the information and the Provost may convene a committee to investigate the situation further and recommend action. The Provost will render a decision in the case which is to be communicated to the student, the faculty concerned, the academic dean, and the members of the committee participating in the case. The decision of the Provost is final.



# BETHUNE-COOKMAN UNIVERSITY

## Appendix V

### Bethune-Cookman University Master of Athletic Training Program

#### Withdrawal & Refund Policy

Withdrawal from the University can only be successfully completed by following specific prescribed steps. Failure to follow the process to the end may result in unnecessary charges to the student's account and/or failing grades.

A student who desires to withdraw from the university must contact the Student Success Center and explain the circumstances which he or she feels require him or her to withdraw from the university. The student is then directed to the offices indicated on the Withdrawal Form to secure clearance, including Financial Aid and Office of the Bursar. If living on campus, the student is also required to turn in all residence hall keys to the counselor of the residence hall in which the student is residing and meet all other stipulations required by the university. A student must bring the signed form to the Office of the Registrar for processing. If the student does not return the form but leaves the university, the student's classes will NOT be dropped. A student may receive 'F' grades for nonattendance. A student must notify the Dean of Students' and Registrar's Office in writing within 48 Hours (2 business days) if he or she changes his or her mind about withdrawing from the University.

Students who choose to withdraw after the published Last Day to Withdraw will receive a grade of "WF" on their permanent record. "WF" grades calculate the same as a grade of "F".

If final examinations are scheduled to take place 10 days or less at the time the student begins the withdrawal process in either the Fall or Spring Terms, he or she will not be allowed to withdraw from the University. If final examinations are scheduled to take place 5 days or less at the time the student begins the withdrawal process during either the Summer A or B Term, he or she will not be allowed to withdraw from the University.

Proper withdrawal from the University will result in a notation of "W" being placed beside each course the student enrolled in the Semester or summer term of the withdrawal. Failure to properly drop classes or withdraw from the university will result in "F" grades for nonattendance.

Note: Adjustments to Tuition will only be made to a student's account based on the date the student "officially" withdraws from Bethune-Cookman University. For additional details, please review one of the following: "Institutional Refund Policy for Fees" under Student Accounts on the B-CU Website, or see the policy in the university catalog. Students may also contact Student Accounts

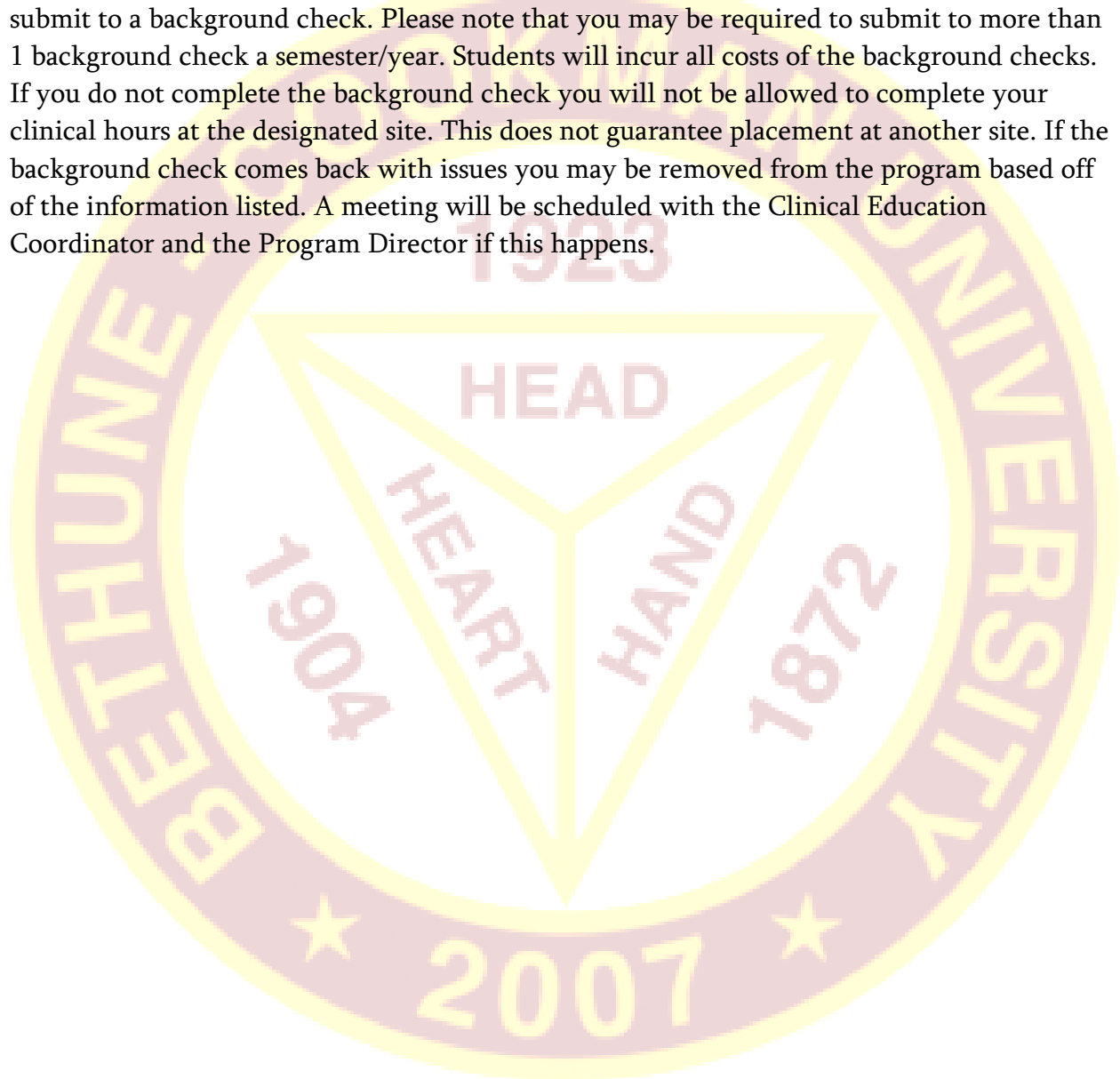


# BETHUNE-COOKMAN UNIVERSITY

## Appendix W

### Bethune-Cookman University Athletic Training Program Background Check Policy

Upon acceptance into the Master of Athletic Training Program students are required to submit to a background check. Please note that you may be required to submit to more than 1 background check a semester/year. Students will incur all costs of the background checks. If you do not complete the background check you will not be allowed to complete your clinical hours at the designated site. This does not guarantee placement at another site. If the background check comes back with issues you may be removed from the program based off of the information listed. A meeting will be scheduled with the Clinical Education Coordinator and the Program Director if this happens.





# BETHUNE-COOKMAN UNIVERSITY

## Appendix X

### Bethune-Cookman University Athletic Training Program

#### Immunizations

Students will be required to submit a copy of their immunization records to the Clinical Education Coordinator after acceptance in the MAT program. Students will be required to have a TB test performed within 1 year of application into the program. Students will be required to submit a copy of their Hepatitis B series of injections or start the series before starting the clinical rotations.

