

SOUTHERN UTAH UNIVERSITY
MASTER OF ATHLETIC TRAINING

STUDENT HANDBOOK
2020 – 2021



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Mission, Goals, and Outcomes

Mission: The mission of the Athletic Training Program is to provide students with a personalized learning environment to foster meaningful experiences involving the Head, Hands and Heart (knowledge, skills and disposition), which leads to the development of competent and effective athletic trainers who will be contributing members to the allied health professional field of athletic training.

Goals:

- Offer a well-rounded combination of academic coursework and hands-on clinical experiences.
- Educate students on the prevention, assessment, treatment, and rehabilitation of sport-related injuries and illnesses for the physically active utilizing evidence-based-practice concepts.
- Prepare students for organizational and professional health and well-being of working in the private, public, and professional areas of sport health care.
- Prepare students for successful completion of the national Board of Certification (BOC) exam

Student Learning Outcomes:

Upon completion of the athletic training program students will be able to:

- Properly apply prophylactic taping and bracing to active individuals for the assistance of injury prevention
- Employ current techniques and evidence for the use of clinical evaluation and diagnosis of athletic injuries and illness
- Explain and apply theoretical and practical application of therapeutic modalities
- Utilize the concepts of range of motion, strength, power, endurance, and return to activity for implementation of rehabilitation programs for the injured athlete
- Understand and administer necessary policies, procedures, maintenance, and daily operation of an athletic training facility and staff
- Communicate effectively with athletes, coaches, administration and other health care professionals regarding the well-being of the athlete

Policies and Procedures

The Clinical Portion of the Athletic Training Program

The SUU AT Program involves an academic and clinical education component in a cooperative, interdepartmental setting. The Department of Kinesiology and Outdoor Recreation houses the academic component with the majority of the clinical experiences component being housed within the Athletic Department. Being accepted into the Athletic Training Program at Southern Utah University requires significant responsibility on the part of the Athletic Training Student. The following are guidelines which the student must adhere to in order to remain active in the Athletic Training Program.

The MAT program has been designed with the intent to maximize the clinical education experience of the athletic training student and expose them to a greater breadth and understanding of life as an athletic trainer. Thus, every semester that the athletic training student is enrolled in the program the semester will be divided into two halves. One half will be dedicated to didactic classroom instruction, and the other will be dedicated to immersive clinical education without the requirement of classroom attendance and instruction. The clinical education component will give each student a full immersive experience in the athletic training environment for 7 consecutive weeks during fall and spring semesters. Hours and the number of weeks for the summer semester will vary and will be determined by the associate clinical course. Students will complete the SUU internship form prior to their clinical experiences as a part of the associated course. Clinical experiences are 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. Clinical experiences will be comprised of spending a requisite number of hours (pre-determined by the associated clinical course) in an athletic training facility on the Southern Utah University campus, pre-arranged physician's office, hospital, pre-arranged high school, or other clinical sites as arranged by the program. ***It is the responsibility of the ATS to arrange transportation to and from the clinical experience sites.***

The AT Program utilizes Qualtrics for the reporting and tracking of clinical hours and clinical education experiences. It is expected that students submit clinical hours and clinical educational experiences through Qualtrics in a timely manner. Reports not submitted according to course policy will be subject to consequences as outlined in the course syllabus.

Occasionally there are clinical experience opportunities outside of the assigned clinical education rotation. The ATS may arrange such opportunities with the supervising preceptor with the understanding that the experience is voluntary. Hours and experiences should still be reported to the CEC similar to those reported for the assigned rotation.

If the student demonstrates unacceptable clinical behavior (not meeting clinical time requirement, etc.) they may be dismissed from the Athletic Training Program at any time.

Academics and Clinical Behavior

In order to remain enrolled in the clinical portion of the SUU AT Program all athletic training students must maintain a minimum GPA of 3.0. It is the student's responsibility to schedule their time efficiently so that academic course work is not affected by participation in the clinical athletic training program.

If an athletic training student's GPA drops below the 3.0 minimum standard, they may be placed on *clinical probation* immediately. Clinical probation is a condition where a student's status in the Athletic Training Program is tentative with their further continuation in the program being dependent on their performance during a probationary period. Performance is evaluated based on academic grades as well as clinical behavior as described in this handbook. Clinical probation is maintained for the duration of one semester. After one semester, if the GPA does not exceed the minimum of 3.0, or the clinical behavior does not improve, the student may be dismissed from the Southern Utah University Athletic Training Program.

If an athletic training student feels that their GPA is suffering from too much time spent in the athletic training facility, it is the student's responsibility to schedule a meeting with the Program Director, Clinical Education Coordinator, Head Athletic Trainer, and Assistant Athletic Trainer as soon as possible to seek resolution to the problem. The athletic training student must remember that academics are of the utmost priority when in the pursuit of becoming a certified athletic trainer.

Unacceptable clinical behavior is defined as any behavior that is unbecoming of a professional person. The following are examples but are not all inclusive of unacceptable clinical behavior:

- Failure to meet the clinical time requirement
- Repeated failure to refer all athletic injuries to the supervising certified athletic trainer
- The use of foul language, sexist or racial remarks
- Repeated inappropriate dress for the work conditions
- Failure to comply with outlined student responsibilities and code of conduct

Student Contract and Program Violations

Each athletic training student is to have on file, a signed program contract outlining the university's expectations of them in the Athletic Training Program. Breaches of this contract may be considered a program violation. A program violation is an action, on the student's behalf, that is NOT in accordance with the *Athletic Training Program Contract* or with the current *Athletic Training Program Policies and Procedures*. Supervising preceptors at Southern Utah University or affiliated sites who observe a program violation may submit a program violation form, see Appendix H. Ramifications of committing program violations are as follows:

Violation #1: The student is dismissed from their clinical experience for the remainder of that day (or longer) and is required to obtain program violation form signatures by meeting with their Preceptor and the Program Director or Clinical Coordinator.

Violation #2: Same as for violation #1 **AND** a group meeting is to be called with the student, Preceptor, Clinical Education Coordinator and the Program Director to discuss the course of action including possible clinical probation.

Violation #3: Same as for violation #2 **WITH** possible program dismissal.

Clinical Assignments, Schedules, and Hours Spent in the Athletic Training Facilities

The MAT program has been designed with the intent to maximize the clinical education experience of the athletic training student and expose them to a greater breadth and understanding of life as an athletic trainer. The clinical education component will give each student a full immersive experience in the athletic training environment for 7 consecutive weeks during fall and spring semesters, and at least 4 weeks for the summer semesters. Throughout the duration of the student's involvement in the MAT program, she/he will be involved in a variety of clinical practice opportunities with varied client/patient populations. Athletic training students will be assigned to a certified athletic trainer "preceptor" for clinical rotations, which will be determined by the Clinical Education Coordinator with input from the athletic training staff. Athletic training students will spend their first year rotating through various clinical assignments. Students who are in their second year may have the opportunity to be assigned to a specific sport for the duration of the academic year or rotate at the semester. If a conflict arises in the student's schedule, it is the student's responsibility to contact the supervising preceptor to discuss this issue.

Students must be aware that clinical education experiences are considered immersive and many of their assigned hours will be on weekends and on week nights, depending on their assignment. The student should realize that this is the nature of the field of athletic training and thus must be flexible and willing to participate during these times.

Requesting Days Off

Athletic trainers often work on weekends and holidays. If an Athletic Training Student is in need of a day off, this needs to be communicated with their assigned preceptor before the time that the student is expected to be at the clinical rotation.

Dress Code

Because athletic training students directly reflect the image of Southern Utah University, they must dress professionally and be easily identified with the name tag provided at all times. Athletic training is an allied health profession and those working within the profession should dress accordingly. While serving as an athletic training student, students must wear an approved SUU athletic training T-shirt or collared shirt. Tailored shorts or slacks will be worn during outdoor game events. Nicer dress (shirt and tie, dresses) may be required for indoor game events. Because of an athletic trainer's need to move rapidly during emergency situations, shoes worn

should be of an “athletic” or “running” style, and in good shape. Clogs, open-toed sandals, and heels are not allowed to be worn by the athletic training students. It is very important that athletic training students and certified athletic training staff look neat, clean and professional at all times. Students should check with their supervising preceptor when the dress code may vary depending on the sport involved.

Social Media Policy

Due to the time spent and rapport established between athletic training students and athletes it is common for athletic training students and athletes to “follow” each other via various social media platforms. However, it is vital that relationships between the ATS and athletes remain professional, especially with athletes who are still in high school. Thus, athletic training students must refrain from establishing social media relationships while the ATS is enrolled in the athletic training program and/or the athlete is still in high school.

Discussion of Injuries of Athletes

The athletic training student will often be aware of the athlete’s previous medical history and current medical condition. The athletic training student must realize that this is privileged information, and at no time may she/he discuss the athlete’s condition to members of the press, other athletes or non-sport related individuals. If a question arises, the athletic training student must direct all inquires to the supervising preceptor.

CPR/AED and First Aid Training

All athletic training students must hold a current CPR/AED card. CPR/AED certification is typically good for two years. Emergency Cardiac Care certification status will be reviewed each year prior to beginning the year’s clinical rotations. Students whose certification will expire during the year will be required to renew prior to expiration date. Any student whose certification is a basic level will be expected to acquire an advanced level certification at the first renewal once in the program.

Travel

SUU athletic training students may be given the opportunity to travel with intercollegiate athletic teams or other organizations as opportunities arise. Selection of who may travel and/or when an athletic training may travel is that of the supervising athletic trainer. Not every athletic training student may get the opportunity to travel each year. When traveling with a preceptor, the SUU ATS is to adhere to the same standards, policies and procedures as if they are covering a home event. In addition, the ATS is to adhere to any other team related policies specific to that travel.

Referral Policy

All medical referrals from SUU Athletic training facilities of student athletes to outside medical facilities (Valley View Medical Center, etc.) must be cleared by the preceptor. **Medical conditions requiring immediate referral (a life-threatening condition) can be initiated by an ATS in the event that a preceptor is not immediately present.** This emergency referral must be followed by notification to the preceptor.

Blood Borne Pathogens

SUU athletic training students are to conduct themselves at all times in compliance with the Occupational Safety and Health Administration (OSHA) standards, while utilizing Universal Precautions. Athletic training students are highly encouraged to obtain pre-exposure hepatitis-B immunizations at a medical facility of their choice. Payment for these immunizations is the responsibility of the ATS. The ATS is required to attend blood borne pathogen training every year. Refer to Appendix C for Blood Borne Pathogen exposure risk procedure and forms.

Waste Disposal (contaminated)

During daily operation, the athletic training facility generates potentially infectious waste. This waste is to be disposed of in a biohazard waste container. Waste generated on the athletic field/court is to be placed in one of the biohazard waste bags located in the medical kit and taken to the athletic training facility for proper disposal.

Non-Prescription and Prescription Medications

The athletic training facilities all contain a limited supply of non-prescription medication. If an athlete requests some type of medication, it is the ATS' responsibility to inquire why the athlete is requesting this medication, check to see if the athlete is allergic to this medication, and be sure that the preceptor is aware that the athlete has requested this medication. The ATS must request permission from the preceptor before removing any non-prescription medication from the locked medicine cabinet. **A signature must be obtained from each athlete to whom any medication is dispensed and only a single dose is to be dispensed at any one time.**

A limited amount of prescription medications are kept in the athletic training facilities for the convenience of the attending team physicians. The storage and dispensing of this medication is conducted in accordance with state and federal laws as well as NCAA guidelines. At no time will the ATS be allowed to dispense or carry this medication. It is a federal violation for anyone other than a physician or pharmacist to dispense prescription medication. **Never dispense any type of medication to an athlete whom has just suffered a head injury.**

Cell Phone Policy

Private cell phone use while on duty in the athletic training facility, at practice or games needs to be kept to a minimum. Your duties as an ATS require your full attention at all times.

Professional Affiliations

It is strongly recommended that students apply for student membership in the National Athletic Trainers' Association (NATA). This also includes membership in the Rocky Mountain Athletic Trainers' Association/NATA District 7 and the Utah Athletic Trainers' Association. Membership also facilitates taking the national certification exam and attending national and district conferences for a significantly reduced fee. Students can join online under membership at NATA.org.

Scholarships

Scholarships are available from both the NATA and RMATA. Complete application forms can be found on the internet under scholarship at NATA.org and RMATA.org.

Program Costs

The Southern Utah University Athletic Training Program strives to keep associated costs to a minimum to lessen the financial responsibility of the student. In addition to tuition and fees of the university, additional fees are the responsibility of the student. The following is a list of items that are the responsibility of the ATS (also found in Appendices E and F):

- Acquiring appropriate immunizations (MMR, Hepatitis B series, Tdap, Tb, Varicella)
- Passing of a drug test (\$30)*
- Completing a background check (\$70)*
- National Athletic Trainers' Association (NATA) Student Dues: (\$105.00)
- Travel to and from clinical education sites
- Emergency Cardiac Care certification
- Any items of clothing considered "professional dress" not provided by the University.
- Books, Supplies and Equipment
- Costs associated with travel to and from professional conferences and symposia.
- BOC/AT Licensing Application (NATA Member \$35, Non-NATA Member \$60)
- BOC/AT Exam Registration (\$300)

*The cost of immunizations, background check, drug test, etc. will vary based on the location on services rendered.

Student Signature

Date

Athletic Training Student Responsibilities

Responsibilities may vary depending on their team and athletic training facility assignment, previous experience, level of confidence, interpersonal communication, and skill level.

At no time will an ATS be expected to perform a duty or task that they have not been trained to perform. A student's *clinical skills competency check list* will serve as the documentation for various athletic training skills that they will be expected to learn.

Athletic training students are to perform the following skills to the best of their abilities:

- 1) The ATS is expected to effectively apply athletic tape, braces, bandages, pads, splints, and wraps to the body parts of injured/non-injured athletes.
- 2) To the best of their ability and within the limits of their training, the ATS will provide first aid to injured athletes. When treating all open wounds, the ATS is expected to conduct themselves in accordance with their Universal Precautions training and the standards set forth by the Occupational Safety and Health Administration.
- 3) The ATS will be able to maintain, apply and care for various therapeutic modalities. They will be aware of the contraindications and indications for each modality in the athletic training facility. They must be instructed in and approved for application of any modalities before being allowed to apply the therapeutic modalities.
- 4) The ATS will be responsible for keeping accurate SOAP notes, or other methods of medical record taking, whenever s/he has evaluated, treated or rehabilitated an athlete. Records of athlete's treatment will be updated daily.
- 5) The ATS shall provide adequate care for patients within the scope of their learning and education.
- 6) The ATS is responsible for being on time for their prearranged times for clinical experiences.
- 7) The ATS must be consistent when enforcing athletic training facility rules.
- 8) The ATS must refer all athletic injuries to their supervising preceptor.

- 9) Relationships of a romantic nature between an ATS and a student athlete must be handled in a professional manner. Such relationships may also necessitate a meeting with the clinical coordinator for ATS reassignment.
- 10) Athletic training students traveling with an SUU athletic team must act professionally and adhere to the policies set forth in this manual at all times.
- 11) The athletic training facility must be kept clean at all times. It is the first medical facility an injured athlete enters. Waste containers are provided throughout the athletic training facility. Use them. The floor is not a waste container. Some procedures do generate waste; clean it up immediately upon completing the procedure.
- 12) Athletic training facility supplies must be kept continually stocked.
- 13) Injuries and treatments of athletes must be recorded daily. Practice recording them immediately.
- 14) Taping stations must be kept clean and stocked with taping supplies.
- 15) Waste containers must be emptied each day. All cardboard boxes removed to waste dumpster.
- 16) Towels must be washed and folded each day.
- 17) Modalities must be kept clean. They must be dusted and wiped down each day.
- 18) Counters, tables, and benches must be disinfected each day.
- 19) Whirlpools must be cleaned each day and/or whenever dirty. If a patient with an open enters the whirlpool, the whirlpool must be disinfected before and after the treatment.
- 20) Sinks must be cleaned daily.
- 21) Ice cups are to be kept continually stocked.

22) Ice coolers and water containers must be cleaned inside and out after each use or daily.

23) First aid kits must be restocked each day.

24) Heel and lace pads need to be made when necessary.

25) Athlete's records, rehabilitation notes, coach's reports and treatments must be updated daily.

26) Athletic training students are not to leave a mess even if they did not make it. All SUU athletic training facilities are to be kept clean at all times.

Student Signature

Date

Athletic Training Student Code of Professional Conduct

It is essential to the success of all athletic training students that certain personal qualities be met. In order to gain respect and confidence from student-athletes, coaches, and colleagues, students should conduct themselves in a mature and responsible fashion. Characteristics such as dependability, emotional stability, adaptability, assertiveness, and desire will contribute to the success and professionalism of the athletic training program, as well as the individuals personally. Each ATS is expected to maintain the highest standards of honesty and integrity in professional matters.

Each student will:

- Develop habits to remain competent and current
- Attain personal mastery of medical knowledge and athletic training skills through honest effort
- Relate to peers and athletic training staff in a spirit of collaboration and mutual respect
- Recognize and honor privileged information from athletes, peers, and athletic training staff
- Relate to athletes and their families with compassion, truthfulness and respect for their experience and dignity
- Conduct themselves in accordance with Southern Utah University Athletic Training Program Handbook policies and procedures.

Athletic Training Student Accountability

The ATS is often in the eyes of the public. It is the intention of this policy to make sure that the ATS is aware that her/his actions are often witnessed. At no time should the ATS bring undue attention with their actions or dress that poorly represents themselves, the athletic training program, the Department of Kinesiology and Outdoor Recreation, the athletic department, or the institution.

This encompasses, but is not limited to, situations of campus violations (academic dishonesty, substance abuse, etc.). The ATS will be placed on probation or suspended from clinical rotations until due process proceedings have been conducted through the Department of Kinesiology and Outdoor Recreation and/or University Disciplinary Agencies. Situations of misconduct off campus that involve legal authorities will be handled with probation or suspension of clinical rotations until judicial hearings are conducted.

Situations of misconduct and/or violation of team rules (individual team the ATS is assigned to) may mean the loss of sport responsibility privileges. Each case will be handled on an individual basis with collaboration of all involved parties.

Confidentiality/Honesty

The athlete's right to the confidentiality of her/his medical records is a fundamental tenet of medical care. The discussion of problems or diagnoses of a patient by professional staff/students

in public violates patient confidentiality and is unethical. Under no circumstances will any medical records be removed from the university or clinical rotation, nor is photocopying of the record permitted. For presentations, the ATS is permitted to extract information but not copy wholesale parts of the charts. Written permission must be obtained from the athletic training staff and the athlete.

It is the ATS' responsibility to familiarize themselves with the confidentiality policy at each clinical rotation and abide by those policies. Refer to Appendices A and B.

ATSs are expected to demonstrate honesty and integrity in all aspects of their education and in their interactions with athletes, peers, staff, and faculty. They may not cheat, plagiarize, or assist others in the commission of these acts. The ATS must assure the accuracy and completeness of her/his part of the medical progress reports, record keeping, treatment logging, and other related tasks and make a good-faith effort to provide the best possible patient care. ATSs must be willing to admit errors and not knowingly mislead others or promote her/himself at the athletes' or fellow students' expense. The ATS is bound to know, understand, and preserve professional ethics and has a duty to report any breach of the ethics by other ATSs to the athletic training staff.

Professional Demeanor

The ATS should be thoughtful and professional when interacting with athletes and the athletes' families. Inappropriate behavior includes the use of offensive language, gestures, or remarks with sexual overtones. The ATS should maintain a neat and clean professional appearance, dress in attire that is generally accepted as professional and approved of by the athletic training staff.

Under pressure of fatigue, professional stress, or personal problems, the ATS should strive to maintain composure. The ATS should seek support from the athletic training staff when appropriate.

The ATS should accurately represent her/himself to athletes and others encountered and should never misrepresent their position, knowledge, or authority.

Nondiscrimination

It is unethical for the ATS to refuse to participate in the care of a person based on race, religion, ethnicity, socioeconomic status, gender, age, or sexual preference.

Sexual Misconduct

The ATS will not engage in any romantic, sexual, or other nonprofessional relationships with an athlete, coach, or staff member, even at the apparent request of an athlete, coach, or staff member, which interferes with the functioning of the athletic training facility and established policies and procedures. The ATS is not expected to tolerate inappropriate

sexual behavior on the part of any of these individuals (see Sexual Harassment Policy, Appendix D).

Impairment

The ATS will not use alcohol, drugs, or any NCAA banned substance while on duty. The ATS is obligated to report fellow athletic training students whose behavior exhibits impairment or lack of professional conduct or competence, or who engage in fraud or deception.

Communication

Open and honest communication contributes to the proper functioning of any work environment. The ATS is expected to engage in appropriate communication with the athletic training staff, other athletic training students, coaches, and administrative personnel. Examples of situations which demand appropriate communication include, but are not limited to, athlete injury status (new, old, ongoing), rehabilitation status, and matters of scheduling. The ATS is encouraged to discuss changes in injury treatment and rehabilitation protocol, but under no circumstances should they alter any protocol without first communication with the athletic training staff.

Criticism of Colleagues

It is unethical and harmful for an ATS to disparage the professional competence, knowledge, qualification, or services of a peer or athletic training staff member to a fellow student, staff, or athlete. It is also unethical to imply by word, gesture, or deed that an athlete has been poorly managed or mistreated by a colleague without tangible evidence.

Professional relations among all members of the medical community should be marked with civility. Thus, scholarly contributions and awards should be acknowledged. Slanderous comments and acts should be avoided, and each person should recognize and facilitate the contributions of others to the community.

The ATS will deal with professional staff and peer members of the athletic training staff in a cooperative and considerate manner.

Evaluation

Once each semester, students and preceptors will complete an evaluation process. Students should seek feedback and are expected to respond to constructive criticism by appropriate modification of their behavior.

I fully understand my responsibilities and professional code of conduct.

If I am found not complying with the above, I understand I will be disciplined up to and including dismissal from the Athletic Training Program.

Signature _____ Date _____

Appendix A: Family Educational Rights and Privacy Act (FERPA)

[Family Policy Compliance Office \(FPCO\) Home](#)

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):
 - School officials with legitimate educational interest;
 - Other schools to which a student is transferring;
 - Specified officials for audit or evaluation purposes;
 - Appropriate parties in connection with financial aid to a student;
 - Organizations conducting certain studies for or on behalf of the school;
 - Accrediting organizations;
 - To comply with a judicial order or lawfully issued subpoena;
 - Appropriate officials in cases of health and safety emergencies; and

- State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, “directory” information such as a student’s name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information, you may call 1-800-USA-LEARN (1-800-872-5327) (voice). Individuals who use TDD may use the [Federal Relay Service](#).

Or you may contact us at the following address:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, D.C. 20202-8520

Appendix B: Health Insurance Portability and Accountability Act

Introduction

The *Standards for Privacy of Individually Identifiable Health Information* (“Privacy Rule”) establishes, for the first time, a set of national standards for the protection of certain health information. The U.S. Department of Health and Human Services (“HHS”) issued the Privacy Rule to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”).¹ The Privacy Rule standards address the use and disclosure of individuals’ health information—called “protected health information” by organizations subject to the Privacy Rule — called “covered entities,” as well as standards for individuals’ privacy rights to understand and control how their health information is used. Within HHS, the Office for Civil Rights (“OCR”) has responsibility for implementing and enforcing the Privacy Rule with respect to voluntary compliance activities and civil money penalties.

A major goal of the Privacy Rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and well being. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing. Given that the health care marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosures that need to be addressed.

The Privacy Rule, as well as all the Administrative Simplification rules, apply to health plans, health care clearinghouses, and to any health care provider who transmits health information in electronic form in connection with transactions for which the Secretary of HHS has adopted standards under HIPAA (the “covered entities”).

What Information is Protected

Protected Health Information. The Privacy Rule protects all “*individually identifiable health information*” held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information “protected health information (PHI).”

“Individually identifiable health information” is information, including demographic data, that relates to:

- the individual’s past, present or future physical or mental health or condition,
- the provision of health care to the individual, or
- the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be

used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number).

The Privacy Rule excludes from protected health information employment records that a covered entity maintains in its capacity as an employer and education and certain other records subject to, or defined in, the Family Educational Rights and Privacy Act, 20 U.S.C. §1232g.

De-Identified Health Information. There are no restrictions on the use or disclosure of de-identified health information. De-identified health information neither identifies nor provides a reasonable basis to identify an individual.

General Principle for Uses and Disclosures

Basic Principle. A major purpose of the Privacy Rule is to define and limit the circumstances in which an individual's protected health information may be used or disclosed by covered entities. A covered entity may not use or disclose protected health information, except either: (1) as the Privacy Rule permits or requires; or (2) as the individual who is the subject of the information (or the individual's personal representative) authorizes in writing.

Required Disclosures. A covered entity must disclose protected health information in only two situations: (a) to individuals (or their personal representatives) specifically when they request access to, or an accounting of disclosures of, their protected health information; and (b) to HHS when it is undertaking a compliance investigation or review or enforcement action.

Permitted Uses and Disclosures

Permitted Uses and Disclosures. A covered entity is permitted, but not required, to use and disclose protected health information, without an individual's authorization, for the following purposes or situations: (1) To the Individual (unless required for access or accounting of disclosures); (2) Treatment, Payment, and Health Care Operations; (3) Opportunity to Agree or Object; (4) Incident to an otherwise permitted use and disclosure; (5) Public Interest and Benefit Activities; and (6) Limited Data Set for the purposes of research, public health or health care operations. Covered entities may rely on professional ethics and best judgments in deciding which of these permissive uses and disclosures to make.

(1) To the Individual. A covered entity may disclose protected health information to the individual who is the subject of the information.

(2) Treatment, Payment, Health Care Operations. A covered entity may use and disclose protected health information for its own treatment, payment, and health care operations activities. A covered entity also may disclose protected health information for the treatment activities of any health care provider, the payment activities of another covered entity and of any health care provider, or the health care operations of another covered entity involving either quality or competency assurance activities or fraud and abuse detection and compliance activities, if both covered entities have or had a relationship with the individual and the protected health information pertains to the relationship.

Limiting Uses and Disclosures to the Minimum Necessary

Minimum Necessary. A central aspect of the Privacy Rule is the principle of “minimum necessary” use and disclosure. A covered entity must make reasonable efforts to use, disclose, and request only the minimum amount of protected health information needed to accomplish the intended purpose of the use, disclosure, or request. A covered entity must develop and implement policies and procedures to reasonably limit uses and disclosures to the minimum necessary. When the minimum necessary standard applies to a use or disclosure, a covered entity may not use, disclose, or request the entire medical record for a particular purpose, unless it can specifically justify the whole record as the amount reasonably needed for the purpose. See additional guidance on [Minimum Necessary](#).

The minimum necessary requirement is not imposed in any of the following circumstances: (a) disclosure to or a request by a health care provider for treatment; (b) disclosure to an individual who is the subject of the information, or the individual’s personal representative; (c) use or disclosure made pursuant to an authorization; (d) disclosure to HHS for complaint investigation, compliance review or enforcement; (e) use or disclosure that is required by law; or (f) use or disclosure required for compliance with the HIPAA Transactions Rule or other HIPAA Administrative Simplification Rules.

Access and Uses. For internal uses, a covered entity must develop and implement policies and procedures that restrict access and uses of protected health information based on the specific roles of the members of their workforce. These policies and procedures must identify the persons, or classes of persons, in the workforce who need access to protected health information to carry out their duties, the categories of protected health information to which access is needed, and any conditions under which they need the information to do their jobs.

Disclosures and Requests for Disclosures. Covered entities must establish and implement policies and procedures (which may be standard protocols) for *routine, recurring disclosures, or requests for disclosures*, that limits the protected health information disclosed to that which is the minimum amount reasonably necessary to achieve the purpose of the disclosure. Individual review of each disclosure is not required. For non-routine, non-recurring disclosures, or requests for disclosures that it makes, covered entities must develop criteria designed to limit disclosures to the information reasonably necessary to accomplish the purpose of the disclosure and review each of these requests individually in accordance with the established criteria.

Reasonable Reliance. If another covered entity makes a request for protected health information, a covered entity may rely, if reasonable under the circumstances, on the request as complying with this minimum necessary standard. Similarly, a covered entity may rely upon requests as being the minimum necessary protected health information from: (a) a public official, (b) a professional (such as an attorney or accountant) who is the covered entity’s business associate, seeking the information to provide services to or for the covered entity; or (c) a researcher who provides the documentation or representation required by the Privacy Rule for research.

Privacy Practices Notice. Each covered entity, with certain exceptions, must provide a notice of its privacy practices. The Privacy Rule requires that the notice contain certain elements. The notice must describe the ways in which the covered entity may use and disclose protected health information. The notice must state the covered entity's duties to protect privacy, provide a notice of privacy practices, and abide by the terms of the current notice. The notice must describe individuals' rights, including the right to complain to HHS and to the covered entity if they believe their privacy rights have been violated. The notice must include a point of contact for further information and for making complaints to the covered entity. Covered entities must act in accordance with their notices. The Rule also contains specific distribution requirements for direct treatment providers, all other health care providers, and health plans.

Administrative Requirements

HHS recognizes that covered entities range from the smallest provider to the largest, multi-state health plan. Therefore the flexibility and scalability of the Rule are intended to allow covered entities to analyze their own needs and implement solutions appropriate for their own environment. What is appropriate for a particular covered entity will depend on the nature of the covered entity's business, as well as the covered entity's size and resources.

Privacy Policies and Procedures. A covered entity must develop and implement written privacy policies and procedures that are consistent with the Privacy Rule.

Privacy Personnel. A covered entity must designate a privacy official responsible for developing and implementing its privacy policies and procedures, and a contact person or contact office responsible for receiving complaints and providing individuals with information on the covered entity's privacy practices.

Workforce Training and Management. Workforce members include employees, volunteers, trainees, and may also include other persons whose conduct is under the direct control of the entity (whether or not they are paid by the entity). A covered entity must train all workforce members on its privacy policies and procedures, as necessary and appropriate for them to carry out their functions. A covered entity must have and apply appropriate sanctions against workforce members who violate its privacy policies and procedures or the Privacy Rule.

Mitigation. A covered entity must mitigate, to the extent practicable, any harmful effect it learns was caused by use or disclosure of protected health information by its workforce or its business associates in violation of its privacy policies and procedures or the Privacy Rule.

Data Safeguards. A covered entity must maintain reasonable and appropriate administrative, technical, and physical safeguards to prevent intentional or unintentional use or disclosure of protected health information in violation of the Privacy Rule and to limit its incidental use and disclosure pursuant to otherwise permitted or required use or disclosure. For example, such safeguards might include shredding documents containing protected health information before discarding them, securing medical records with lock and key or pass code, and limiting access to keys or pass codes. See additional guidance on [Incidental Uses and Disclosures](#).

Complaints. A covered entity must have procedures for individuals to complain about its compliance with its privacy policies and procedures and the Privacy Rule. The covered entity must explain those procedures in its privacy practices notice.

Among other things, the covered entity must identify to whom individuals can submit complaints to at the covered entity and advise that complaints also can be submitted to the Secretary of HHS.

Retaliation and Waiver. A covered entity may not retaliate against a person for exercising rights provided by the Privacy Rule, for assisting in an investigation by HHS or another appropriate authority, or for opposing an act or practice that the person believes in good faith violates the Privacy Rule. A covered entity may not require an individual to waive any right under the Privacy Rule as a condition for obtaining treatment, payment, and enrollment or benefits eligibility.

Documentation and Record Retention. A covered entity must maintain, until six years after the later of the date of their creation or last effective date, its privacy policies and procedures, its privacy practices notices, disposition of complaints, and other actions, activities, and designations that the Privacy Rule requires to be documented.

Fully-Insured Group Health Plan Exception. The only administrative obligations with which a fully-insured group health plan that has no more than enrollment data and summary health information is required to comply are the (1) ban on retaliatory acts and waiver of individual rights, and (2) documentation requirements with respect to plan documents if such documents are amended to provide for the disclosure of protected health information to the plan sponsor by a health insurance issuer or HMO that services the group health plan.

APPENDIX C: Blood Borne Pathogen Exposure Risk Procedure & Forms

SUU Master of Athletic Training Program Blood Borne Pathogen Exposure Risk Procedure & Forms Student – Unusual Occurrence/Exposure Risk

In the event of an unusual occurrence or possible exposure to blood or body fluids the student shall notify the supervising Preceptor immediately.

The supervising Preceptor shall immediately, in person, discuss the incident with the involved student(s) to review the incident. If there is a risk of exposure to blood borne pathogens the student will be advised to first, assure that the exposure has been cleansed with soap and water (for a needle stick), or flush eyes, nose or mouth with copious amounts of tap water (for 20 minutes). Preceptor will then facilitate completion of appropriate forms and a medical evaluation. Any injury sustained by the student while participating in Athletic Training Program activities and subsequent medical treatment, with all costs associated with care will be the student's responsibility. Preceptors will encourage a medical evaluation with appropriate testing and follow-up including at least the following elements:

- (1) Documentation of the unusual occurrence and/or routes of exposure, and the circumstances of the unusual occurrence/exposure.
- (2) Identification and completion of forms and procedures required by the facility where the incident occurred.
- (3) Completion of SUU AT Program forms.
 - a. Unusual Occurrence/Exposure form
 - b. Post-Exposure follow-up form (if an exposure)
- (4) In the case of exposure, identification of the source individual, unless infeasible or prohibited by law.
 - a. Seek to determine the source individual's HBV and HIV status.
 - b. Results of the source individual's testing shall be made available to the exposed student with information about confidentiality and identity protection laws.
- (5) Assistance to student to see their private care provider, an Instacare facility, or ER, A.S.A.P. with instructions to get tests for exposure to blood borne pathogens.
- (6) Inform MAT Program Director of incident and follow up A.S.A.P. Submit SUU AT Program forms to Program Director within 24 hours of incident.

SUU Master of Athletic Training Program
Blood Borne Pathogen Exposure Risk Procedure & Forms
Student Post Potential Exposure Follow-up Form

To be completed by the supervising Preceptor with the involved student(s) at time of incident. Check circles as step is completed.

- 1. Discuss exposure, how it occurred, and how it could be prevented in the future.
- 2. Discuss risk for blood borne pathogen exposure and recommend immediate follow up with private care provider or Instacare provider. Individuals who have been exposed to blood or body fluids are at risk for an infectious disease such as HIV, HCV and/or HBV infection. To assess risk, provide timely evaluation of current status, and a baseline for future evaluation and potential interventions it is recommended an exposed individual seeks immediate medical attention. An appointment with a private care provider if immediately available or an Instar-care provider is strongly recommended. Any injury sustained by the student while participating in AT Program activities and subsequent medical treatment with all costs associated with care will be the student's responsibility.
- 3. Facilitate student appointment for immediate follow-up.
- 4. Complete the following with the student:
 - Exposed individual's name _____
 - Type of exposure _____
 - Date and time of exposure _____
 - I have been fully trained in SUU's exposure control plan and I understand I may have contracted an infectious disease such as HIV, HCV or HBV. I also understand the implications of contracting these diseases. I have been encouraged to seek immediate follow-up care by my Preceptor to determine whether or not I have contracted an infectious disease.

I will visit _____ provider.

Date and time of visit _____

Student Signature _____

Preceptor Signature _____

Or

- I have been fully trained in SUU’s exposure control plan and I understand I may have contracted an infectious disease such as HIV, HCV or HBV. I also understand the implications of contracting these diseases. I have been encouraged to seek immediate follow-up care by my Preceptor to determine whether or not I have contracted an infectious disease. Despite all the information I have received, for personal reasons, I freely decline to seek a post-exposure evaluation and follow up.

Student signature _____ Date _____

Preceptor signature _____ Date _____

SUU Master of Athletic Training Program
Blood Borne Pathogen Exposure Risk Procedure & Forms
Unusual Occurrence/Exposure Report Form

Student Name _____ Date _____

Date of incident/accident _____ Time incident occurred _____

Incident location _____

Describe the incident fully (route of exposure, circumstances; describe type of controls in a place at time of incident including person protective equipment worn, identify unsafe conditions and/or actions; relevant police reports) _____

Describe student's (Athlete's) injury (body part/type of injury) _____

SUU Preceptor contacted about incident _____ Time of contact _____

Tell how this type of exposure can be prevented:

Follow up provided or scheduled _____

APPENDIX D: Sexual Harassment Policy

SOUTHERN UTAH UNIVERSITY MASTER OF ATHLETIC TRAINING PROGRAM SEXUAL HARASSMENT POLICY

The athletic training environment is one in which physical contact, competition, and pressure for opportunities are intense and where failure often has quick consequences. The potential for sexual harassment is high in environments such as these.

What is Sexual Harassment?

Sexual Harassment is any form of unwelcome conduct based on a victim's gender. The form that we are most familiar with is *quid pro quo*, in which the victim is promised some kind of benefit, is threatened, or fears some kind of harm in exchange for sexual favors. Sexual favors include request for dates and social events as well as request for any kind of sexual touching.

Another form of sexual harassment, *hostile environmental harassment*, is more commonly alleged and does not require any threat or promise of benefit: sexual harassment occurs if a harasser by her/his conduct or failure to act *creates or allows* a hostile, offensive, or intimidating environment. An environment may be hostile even if no touching occurs; jokes, pictures, innuendo, comments about a person's body or appearance, sexual remarks about others, gestures and looks, and ever more subtle actions or comments may create one. Even flirting can make another person angry, uncomfortable or confused.

What are some of the results of sexual harassment?

As a result of sexual harassment an individual can have feelings of confusion, fearfulness, powerlessness, guilt, or shame. The classroom or work environment may become hostile, intimidating, or offensive to the victim of sexual harassment and to other students.

If you feel you have been a victim of sexual harassment:

Keep a record of what happened. Were other individuals around who witnessed inappropriate behavior?

Discuss the situation with the Athletic Training Program Director, Head Athletic Trainer, or the Director of Affirmative Action. It is important to sort out your feelings and these individuals can help you decide what to do.

Notify the “harasser” of your feelings. If this is difficult to do in person, you can write a letter stating the type of behavior found to be offensive and clear any misinterpretations on both sides. The Athletic Training Program Director, Head Athletic Trainer, or the Director of Affirmative Action can help you in preparing the letter.

If the above steps are not effective, you may want to pursue more formal procedures.

This is the last and most serious option. Take filing a formal complaint seriously.

Understand your strengths and know your sources of support and encouragement. File a written complaint with the Director of Affirmative Action, who will investigate.

Southern Utah University is a collegial academic community whose mission requires an open learning and working environment. An open learning and working environment values and protects individual dignity and the integrity of human relationships. The educational process is based upon mutual trust, freedom of expression and the absence of intimidation and exploitation.

Sexual harassment can occur anywhere. Sometimes it is difficult to determine what behaviors can be defined as sexual harassment. However, it is important to have an idea of what you would do if confronted with sexual harassment – whether it makes you uncomfortable and angry or forces you to make a decision affecting your course of study, your current position, or career. It is important to remember that you do not have to remain in an uncomfortable situation. You have options to consider.

The privacy of all individuals involved is of utmost importance and will be respected at all times.

The relationships with peers, athletes and coaches should remain outside of the athletic training facility/setting (see Code of Conduct).

APPENDIX E: Documentation Requirements and Communicable Disease Policy

Students applying for acceptance into the Master of Athletic Training Program must complete the following as part of the application packet.

Athletic Training Technical Standards

- Applicant must read and sign the release page of the “Technical Standards” document First Aid/CPR/AED
- Applicant must provide a copy, front and back, of their current certification in First Aid/CPR/AED or show proof of being currently enrolled in PE 1543

Compliance with these policies helps to insure the well-being of both the ATS as well as the athletes/patients they may come in contact with. Costs associated with obtaining the following are the responsibility of the ATS.

Health Immunization Record

- A copy of the student’s immunization record is submitted to the Department Administrative Assistant to be placed in the student’s file. Records must include the items listed following the signature page.

Drug Test

- SAM-5 drug test – testing a urine sample for the presence of substances that include the following:
 - Marijuana
 - Natural Opiates
 - Amphetamines
 - Cocaine
 - PCP

Criminal Background Check

Background checks are obtained through Verified Credentials. Students need to go to the following website <http://suu.edu/cose/nursing/current.html> towards the top of the page is a red link “Student Background Check.” Students click on the link and enter under “First Time Users” Code: MPFVJ-73849, they complete all personal information fields and pay \$70 to order their background check.

Communicable Disease

- In the event a student contacts a communicable disease, they must inform their preceptor and the Program Director.
- The student will then be referred to the, SUU Team Physician, their Family Physician, or a Health Care Provider of their choice for care. They cannot continue their clinical experience until released by the Health Care Provider.

Student Signature

Date

Immunization Requirements

1. Tuberculosis screening requirements. One of the following is required.
 - a. 2step TST (two separate Tuberculin Skin Test, aka PPD tests) within twelve months of each other. With the second test occurring no later than 7 days prior to the beginning of an Intermountain Rotation.
 - b. One QuantiFERON Gold blood test with negative result
 - c. One T-SPOT blood test with negative result
 - d. If previously positive to any TB test, Student must Complete a symptom questionnaire and have a chest x-ray read by a radiologist with a normal result. If chest x-ray is abnormal, the Student needs to be cleared by their physician or local health department.
2. Measles (Rubeola), Mumps and Rubella requirement. One of the following are required.
 - a. Proof of two (2) MMR Vaccinations
 - b. Prof of immunity to Measles (Rubeola), Mumps, Rubella through blood test.
3. Tdap requirement:
 - a. Proof of One (1) Tdap vaccination after age 10.
4. Varicella (Chicken Pox) requirement. One of the following is required:
 - a. Proof of two (2) Varicella vaccinations
 - b. Proof of Immunity to Varicella through a blood test.
5. Flu Vaccination requirement:
 - a. Proof of current, annual influenza vaccination.
6. Hepatitis B recommendation.
 - a. Documentation of three (3) Hepatitis B vaccinations and blood test with “Reactive” Results.
 - b. Documentation of three (3) Hepatitis B vaccinations given more than 8 weeks prior to start date
 - c. Blood test with “Reactive” result
 - d. Documentation of six (6) Hepatitis B Vaccinations with blood test result of “Not Reactive”

APPENDIX F: Technical Standards for Admission

SOUTHERN UTAH UNIVERSITY MASTER OF ATHLETIC TRAINING PROGRAM TECHNICAL STANDARDS FOR ADMISSION

The Master of Athletic Training Program at Southern Utah 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 Master of 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 program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). All students admitted to the Master of Athletic Training Program must meet the following abilities and expectations. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program.

Compliance with the program's technical standards does not guarantee a student's acceptance into the Master of Athletic Training Program or eligibility for the BOC certification exam.

Candidates for selection to the Master of Athletic Training Program must demonstrate:

1. 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.
2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
4. The ability to record the physical examination results and a treatment plan clearly and accurately.
5. The capacity to maintain composure and continue to function well during periods of high stress.
6. The perseverance, diligence and commitment to complete the athletic training major education program as outlined and sequenced.
7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection to the Master of Athletic Training Program will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

The Southern Utah University Services for Students with Disabilities will evaluate a student who states he/she could meet the program's technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student states he/she can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review as to whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program.

Signature of Applicant

Date

Print Name

Alternative statement for students requesting accommodations

I certify that I have read and understand the technical standards of selection listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the Southern Utah University Services for Students with Disabilities to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not to be admitted into the program.

Signature of Applicant

Date

APPENDIX G: Clinical Supervision Policy

SOUTHERN UTAH UNIVERSITY MASTER OF ATHLETIC TRAINING PROGRAM CLINICAL SUPERVISION POLICY

Athletic Training clinical experiences are supervised by a preceptor who is an athletic trainer or a physician. 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 on-site and have the ability to intervene on behalf of the athletic training student and the patient. Supervision must also occur in compliance with the state practice act of the state in which the student is engaging in client/patient care.

- CAATE 2020 Professional Standards

The Southern Utah University Master of Athletic Training Program does not support unsupervised clinical experiences nor are they considered part of the athletic training student's clinical educational experience. Athletic training students may not represent themselves as an athletic trainer or perform athletic training activities outside of their clinical experience. However, there may be unplanned times that an ATS is briefly unsupervised. During these uncommon times, athletic training students will not engage in athletic training activities. **At any time should an ATS find him/herself in an unsupervised situation he/she understands that he/she has the opportunity to act as a voluntary first aid provider, and can only provide first aid services, which will be viewed as non-compulsory. This voluntary opportunity may be refused by the ATS at any time. This voluntary opportunity will not count in the hour requirement of the ATS.** This refusal will have no detrimental effect on the athletic training student's clinical education. At the beginning of each school year, all athletic training students will read, understand and sign the clinical education /practice agreement prior to being allowed to perform athletic training clinical experiences.

Clinical Experience Supervision

Although one of the major goals of a clinical experience is for students to become autonomous in their skills & decision making, students should never confuse autonomy with unsupervised practice. Students will **ALWAYS** practice athletic training under the supervision of a SUU

approved preceptor. Autonomy in practice by students refers to students becoming proficient to the extent that they collaborate in making and implementing decisions regarding the care of their patients. Students should work to become competent and comfortable in decision-making, but all care related decisions made by students must be reviewed with their preceptor prior to implementation. **Clinical experiences will frequently involve student autonomy in activity and collaboration in decision-making, but students are never the primary care provider for a patient or team. To this end, it is wholly incorrect for a student to see themselves as “the athletic trainer” for a team or to look at his/her time in clinical experience as “covering” a practice or a game.** Instead, clinical experiences must be seen from an educational perspective and the students must see themselves as being there to learn and to increase in skill and to develop an understanding for and appreciation of all aspects of the profession. Southern Utah University’s clinical athletic training education is a vital part of the athletic training student’s complete learning goals. Clinical education integrates the didactic knowledge from the classroom with the practical application of athletic training skill and critical decision making, under direct supervision, to develop the confidence and real-world experience while adhering to the standards of supervision of clinical education set forth by CAATE. **At no time should athletic training students work independently of their assigned preceptor, or make decisions without the collaboration of their preceptor, nor should supervision of an ATS be transferred to any person other than the assigned preceptor without the express written approval of the SUU Athletic Training Program Director. At no time will the ATS be viewed as a replacement of a certified athletic trainer.**

APPENDIX H: Violation Corrective Action Form

SOUTHERN UTAH UNIVERSITY MASTER OF ATHLETIC TRAINING PROGRAM VIOLATION CORRECTIVE ACTION FORM

I, _____, recognize that I have violated Southern Utah University Master of Athletic Training Program Academic or Clinical Behavior Policies and Procedures. This is my _____ violation and I agree to abide by the following ramification and corrective actions.

Corrective Action: _____

Ramification of non-compliance to corrective action: _____

Student Signature

Date

Preceptor

Date

Program Director Signature

Date

APPENDIX I: Program Violation Form

SOUTHERN UTAH UNIVERSITY MASTER OF ATHLETIC TRAINING PROGRAM PROGRAM VIOLATION FORM

_____ is in violation of the following Southern Utah University Master of Athletic Training Program Academic or Clinical Behavior Policies and Procedures:

Signature of Preceptor

Date

Return this Form to:

Nathan Slaughter
Director, Master of Athletic Training
Southern Utah University
351 W. University Blvd
Cedar City, Utah 84720

APPENDIX J: Athletic Training Student Clinical Experience Contract

SOUTHERN UTAH UNIVERSITY
MASTER OF ATHLETIC TRAINING PROGRAM
ATHLETIC TRAINING STUDENT – CLINICAL EXPERIENCE CONTRACT

The purpose of this contract is to clearly define the roles and responsibilities of the Southern Utah University ATS during **supervised** clinical experiences.

1. Direct Supervision: the preceptor must be physically present and have the ability to intervene on behalf of the ATS to provide on-going and consistent education.
2. The Master of Athletic Training Program at Southern Utah University places a high priority on hands-on experiential learning. The clinical experience is where this learning takes place. Clinical experience hour requirements will be outlined in each associated clinical course. Should there be clinical experience opportunities beyond the outlined hours the student can arrange such opportunities with the supervising preceptor on a volunteer basis. Clinical experience opportunities outside of the academic calendar are arranged with the supervising preceptors. All athletic training students are **REQUIRED** to report to campus July 1 (unless otherwise specified by the Program Director) of each year for the start of clinical rotations. Those students who do not follow the above policy may be subject to penalties outlined in the syllabus of the associated clinical course. The AT Program utilizes the Qualtrics software program for the reporting and tracking of clinical hours and educational experiences. It is expected that students submit clinical hours through Qualtrics in a timely manner. Reports not submitted according to course policy will be subject to consequences as outlined in the course syllabus.

Clinical Experience Assignment and Evaluation

Each ATS will be assigned to a specific preceptor for their clinical experience and evaluation each semester. Each student may also be assigned to a specific team(s) to work with over the course of the semester and will be expected to work assigned team competitions. It is expected that the majority of the supervision of the ATS be done by the assigned preceptor, although there may be times when another approved preceptor provides the required supervision.

I understand that I will be evaluated each semester on my performance in my field experience working in the athletic training facilities and on the fields/courts with the athletic teams that I am assigned to. I understand that I am assigned to a specific preceptor, who will do the evaluation of my performance.

_____	_____
Student	Date
_____	_____
Program Director	Date

APPENDIX K: SUU Policy 6.3 Internship Permission Form

Internship Permission Form

Name: _____ T Number _____

FALL SPRING SUMMER YEAR _____

CRN	Course ID (ex. ENGL1010)	SEC	CREDITS	INSTRUCTOR of RECORD SIGNATURE	DEPT CHAIR SIGNATURE

ADDITIONAL STUDENT INFORMATION REQUIRED:

Cumulative GPA _____

Are you participating in an International Internship? Yes No
If yes,

what country? _____

Approval: _____ Date _____
Signature (Global Engagement Center Director)

INTERNSHIP INFORMATION:

Internship funded and paid through SUU payroll: Yes No If No, please read and sign below waiver

Company Name _____

Company Address _____ State, Zip Code _____

Work Supervisor _____ Work Supervisor Telephone _____

Internship Waiver of Liability

By going into functioning programs, rather than remaining in an on-campus classroom, students may expose themselves to greater risks. For example, in many placements the host agency does not assume liability for injury or harm to the SUU students who serve/work/volunteer in the program.

Likewise employees of these agencies are not personally responsible for harm which may come to SUU students in the course of their carrying out their services and educational activities. Southern Utah University similarly assumes no liability for any such risk.

Given the supervision and limited case loads, SUU students are rarely exposed to even as much risk or harm as ordinary human service workers. Nevertheless, the potential for transportation accidents, and some emotional or mental distress, is present. SUU students are expected to exercise reasonable caution and to provide their own insurance to cover such harm, should it occur.

Students are also expected to conduct themselves according to the host agency's policies and procedures and according to the training which they receive, so as to further reduce risks of harm.

The intent of the cooperative/internship courses is to provide academic credit to SUU students who wish to gain educationally meaningful field experiences. The student, as a legal adult, assumes primary responsibility for the consequences of his/her conduct, for accidents, and for other harm or injury that may occur, recognizing that this learning format is more active and involved than the traditional classroom setting.

By signing below I affirm that I have read this statement and have had my questions regarding risk and liability answered. Also, by signing below, I assume all risks that may be inherent in and associated with the internship(s) in which I will be involved. I also waive any claim against Southern Utah University, its agents and employees, for any harm, injury, damage or claim that may result from my involvement in the cooperative(s) and internship(s) experience which does not occur as a direct result of the University's gross negligence. I further agree to indemnify the University and hold it and its agents and employees harmless from any such harm, injury, damage or claim that affects me or someone else as a result of my involvement.

Student's Signature & Date