

# NATA Think Tank Educator Forum Highlights

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The following is a brief review of selected topics discussed on the NATA Think Tank Educator Forum. Only NATA members can access the archived messages and discussions. To view this forum, go to <http://forum.nata.org/thinktanks> (login required).

## Professional involvement among our students (September 5, 2008 – 14 postings)

Considering the sheer volume of undergraduate and graduate athletic training education programs, the number of students joining and remaining active in the NATA seems to be very low. Unfortunately, member support is critical for the profession to maintain and improve its status as an allied health care provider. This struggle has been fought over the years by the NATA, individual districts, and state associations who have encouraged students to get involved while in school.

Student recruitment varies by program, with some requiring students to become NATA members as a condition of enrollment, and others simply encouraging them to join. While students may want to join early in their academic career, it may not be financially feasible. However, those that do are eligible to attend and present at professional conferences for reduced tuition, and may submit research and case studies for NATA funding, awards, and journal publications.

While the NATA provides its student members greater benefits and opportunities than for non-members, students who have not yet joined can still be active in the profession. This is particularly true during Athletic Training Month. Regardless, it is essential that students network and promote the profession with other students, practitioners, educators, administrators, medical personnel, patients, and others. Thanks to ever increasing technology and electronic media, student involvement has become easier than ever.



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## Is 20 hours enough? (September 7, 2008 – 41 postings)

To help prevent athletic departments from misusing ATs' as a workforce, CAATE and individual academic programs have set clinical hour guidelines that some may consider unfair and unrealistic. The intent of these guidelines is to ensure that students have adequate supervision, especially when traveling, and that their experience is both educational and of quality.

Currently, students are limited to 20 hours per week in the clinical setting to allow time for other academic responsibilities. By sheltering students from professional realities, recent graduates may not be adequately prepared for the long work days and weeks that they will likely encounter at their first job or graduate assistantship. While endless hours with debatable educational value were commonly seen under the internship route to certification, this new system also limits the academically stronger students who have better time management skills from gaining additional experience that may enhance their educational outcomes.

To compare athletic training clinical education to other medical professions is unfair. In most cases, graduate medical students have fewer didactic courses and extracurricular responsibilities each semester than undergraduate athletic training students, and therefore, can be assigned more than 20 hours per week. The best opportunities for students to get the full 20+ experience are internships. Arguably, students should not have to complete 60 hours per week as a student to prepare for a 60 hour per week job. Perhaps a compromise between today's restrictive clinical experience limits and the old internship free-for-all would be placing additional value on gaining experience through co-curricular internships, summer employment, and pre-season practices.

If each clinical site across the country offered consistently rich and rewarding learning experiences, perhaps the 20 hour rule would be understandable. However, institutions and ACIs vary widely, creating the need for staff supervisors to recognize that newly certified athletic trainers' knowledge and experiences will also be quite different.

## Clinical Instructor Stipends/Payments (September 12, 2008 – 6 postings)

Clinical instructors are an essential part of athletic training education programs, with many supervising up to 12 students for weeks, semesters, or years. Unfortunately, most are not financially compensated for their time. One suggestion to reward CIs was to pay them as an adjunct faculty member (one credit hour stipend per

clinical experience). If your institution cannot afford monetary reimbursement for CIs, the school, department, or program may have funding to pay for continuing education, professional membership, or licensure, or may offer free on-campus professional development/workshops or tuition waivers for their CIs. Lastly, if your institution is considering ways to reimburse your CIs, it is important to document the number of hours they are supervising students and compare that to what other programs are doing for similar positions (e.g., supervisors of student teachers, nursing students, and other allied health professions).

### **How do you address the Physician Extender setting with your students? (December 12, 2008 – 4 postings)**

Students are encouraged to seek jobs as physician extenders after graduation but many programs are having difficulty finding quality off-campus experiences for them to observe. One physician extender/ATC indicated that the learning curve for this type of setting is steep and the job is not for everyone. In these settings, students can be exposed to several different injuries and populations, surgeries, post-op care, and triage. Most importantly, students will become more comfortable interacting with physicians and other specialized healthcare professionals, using their assessment skills, and recognizing general medical complaints.