Curricular Affairs Committee of the Faculty Senate

To: The UVM Faculty Senate
From: Curricular Affairs Committee of the Faculty Senate, Laura Almstead, Chair
Date: April 5, 2018
Re: Approval of a proposal for a new Master of Science in Athletic Training submitted by the College of Nursing and Health Services in conjunction with the Graduate College

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At its meeting on April 5, 2018, the Curricular Affairs Committee approved the actions recommended in the following memo.

The Curricular Affairs Committee approved a proposal for a new Master of Science in Athletic Training (MSAT) submitted by the College of Nursing and Health Sciences (CNHS), Department of Rehabilitation and Movement Science (RMS) and recommend approval. Kathryn Vreeland, EdD, MBA, ATC; Clinical Associate Professor, RMS will serve as Program Director. The program will eventually replace the current undergraduate Athletic Training (AT) program. If approved by the Faculty Senate and Board of Trustees, the program will be offered beginning summer 2019.

Program Description and Rationale

Athletic trainers are health care professionals who collaborate with physicians and other health care providers across a wide range of settings including schools, clinics, professional sports and health care administration. Professional programs in AT lead to eligibility to sit for the Board of Certification (BOC) examination and to enter the profession through rigorous curricula and clinical experiences. The proposed Master of Science is a 49-credit entry-level master's program completed over two full calendar years.

The program has been proposed in response to a change in licensing standards for Athletic Trainers. The Commission on Accreditation of Athletic Training Education (CAATE) now requires that all accredited professional AT programs be at the master's level not later than 2022. The proposers note the discipline is changing more rapidly than the standard requires. The number of professional entry-level AT programs at the master's level has grown from just 18 in 2014 to 70 according to the CAATE database of accredited AT programs. To hold its place in a competitive field, UVM will need to move forward quickly. RMS is very well positioned to capitalize on the many strengths of its current bachelor's program in AT by transitioning to the MSAT. Changes to the current AT curriculum as part of the transition will ensure graduate level of rigor.

Justification and Evidence for Demand

In the last decade, the AT program at UVM has grown to capacity and continues to be one of the most competitive majors at UVM with 245 applicants for 20 spots in the 2017 FTFY cohort. Student success indicators of the program are excellent including a 100% pass rate (first attempt) on the national certification board exam for the last five years. Graduates of the program have a 100% placement rate for employment or graduate school enrollment. The AT program at UVM is currently in its self-study for the CAATE Comprehensive Review and re-accreditation. As part of this process, the CAATE will allow a transition from

the current bachelor's program to the MSAT via a Substantive Change Application mechanism done as part of the re-accreditation review. This provides an easier and more cost-effective transition to meet the new standard for professional certification in the field.

This change is timely beyond the educational needs of the program. Along with the projected growth in jobs in the healthcare sector, the AT field specifically is predicted to grow at a significant rate. The Bureau of Labor Statistics predicts that the period from 2014 to 2024 will see demand for athletic trainers grow by 21%. With a steady increase in salaries and demand for athletic trainers, demand for the programs such as the MSAT is predicted to remain strong. Considering its current presence in the field, UVM is well positioned to capitalize on the transition in accreditation standards.

Relationship to Existing Programs

The MSAT will replace the current undergraduate AT program, which has already accepted its last class of students. The current health collaborations across RMS enjoyed by the AT program will continue with the MSAT. Multiple faculty teach within RMS across the AT, PT and EXMS programs. Research opportunities for students across RMS disciplines would also continue.

Curriculum

Below is a list of the courses comprising the 49 credits required for the proposed MSAT. Two existing courses (RMS 213 and RMS 244) do not require modification to be included in the curriculum. One new course has been developed (AT 356). All other courses are currently taught as part of the BS in Athletic Training and are being transitioned to graduate-level courses. Credit numbers are provided in parentheses.

<u>Summer 1</u>
AT 355: Emergency Medicine in AT (3)
AT 356: Clinically Oriented Anatomy (3)
AT 358: Fundamentals of AT (2)

<u>Fall 1</u>
AT 359: Clinical Skills in AT I (1)
AT 369: Clinical Experience in AT I (2)
AT 384: Injury Evaluation and Recognition I (4)
RMS 213: Biomechanics of Human Movement (3)

<u>Spring 1</u>
AT 360: Clinical Skills in AT II (1)
AT 370: Clinical Experience in AT II (2)
AT 385: Injury Evaluation and Recognition II (4)
AT 386: Rehabilitation Techniques (3)[T]

<u>Summer 2</u>
RMS 244: Therapeutic Modalities (3)
AT 387: Recognition and Treatment of Med. Cond. in AT (3)
AT 371: Clinical Experience in AT III (1)

<u>Fall 2</u>

AT 361: Clinical Skills in AT III (1)
AT 372: Clinical Experience in AT IV (2)
AT 388: Evidence-based Practice in AT (3)
AT 390: Seminar in AT (1)

Spring 2
AT 362: Clinical Skills in AT IV (1)
AT 373: Clinical Experience in AT V (2)
AT 389: Leadership in AT (3)
AT 391: Advanced Seminar in AT (1)

It is understood that all MSAT students will require a graduate level of rigor in coursework and current courses will be altered to reflect this. The changes to the curriculum as part of the transition are meant to ensure graduate level education as well as highlight areas of distinction that the UVM MSAT has to offer. These include a curriculum wide approach to evidence-based practice, clinical simulation, and the addition of advanced clinical skills.

Admission Requirements and Process

The proposed MSAT is selective and space is limited due to clinical capacity. There is no guaranteed admission for undergraduates wishing to enter the MSAT. Applicants are expected to have a baccalaureate degree from an accredited college or university with pre-requisite coursework in General Biology, Anatomy and Physiology (with lab), Kinesiology or Biomechanics, Exercise Physiology (with lab) and Statistics. Coursework in Chemistry, General Physics, Medical Terminology and Sport Psychology is also recommended. Candidates will be ranked using a combination of undergraduate GPA, GRE and TOEFL scores (if required), students' statements on the Graduate College application and letters of recommendation.

Anticipated Enrollment and Impact on Current Programs

In the current undergraduate program, a capacity of 20 is based on 60 clinical placements spread over the three-year clinical portion of the program. With the transition to the MSAT, the clinical portion of the program will go from three to two years. Thus, MSAT capacity per cohort will be 30. The proposers anticipate a conservative enrollment of 20 in the program's first year, increasing to 25 in the second year, reaching full capacity of 30 in the third year.

There will be no effect on other colleges. The MSAT curriculum will be offered entirely within CNHS. All but one of the courses in the proposed curriculum are currently offered with the AT curriculum. As noted above, the transition to a MSAT includes revision of these existing courses to ensure students will experience graduate level rigor and expectations for learning.

Advising and Assessment Plan

AT program faculty will advise the students. The AT program currently has a very well defined, comprehensive assessment plan. The program holds national accreditation through the CAATE. Maintaining this accreditation involves extensive reporting of outcomes data as well as creation of a Comprehensive Assessment Plan. In addition, the program engages in specific assessment practices at department, college and university levels.

Staffing Plan, Resource Requirements, and Budget

Although there will be an addition of some summer teaching, there is no anticipated need for additional faculty positions. The Program Director's position will be expanded from nine to ten months to allow for teaching and administrative oversight of the MSAT curriculum. No new staff needs are anticipated.

All four AT full-time faculty will be assigned 100% of their workload to the program, including the AT program director and clinical education coordinator. The proposers expect no first-year costs in addition to the current budget. Net revenue for the first five years is projected.

Evidence of Support

Letters of support were provided from:

- S. Elizabeth Ames, MD, Department of Orthopedics and Rehabilitation, Larner College of Medicine
- Gary M. Mawe, PhD, Department of Neurological Sciences, Larner College of Medicine
- Patricia A. Prelock, PhD, Dean, CNHS
- Jeremy Sibold, EdD, ATC, Chair, Department of Rehabilitation and Movement Science

Summary

The proposed program will capitalize on and further UVM's excellent reputation in the evolving and rapidly growing field of Athletic Training. Initiating the transition to a Masters-level degree prior to the CAATE's deadline 2022 will allow UVM to remain competitive with other universities that offer AT programs. The transition to a master's degree will also provide important strategic advantages in recruiting and enrolling high quality students.