RESIDENCY IN ATHLETIC TRAINING PROGRAM

Policy and Procedure Manual 2019-2020
2019

Boston University
Athletic Training Services
Department of Family Medicine, Sports Medicine

Athletic Training Residents:

The following policies and procedures reflect the requirements of the Residency Program in Athletic Training. It is assumed that all persons enrolled in the athletic training residency program have read and accept these policies and procedures. These policies are in addition to those established by Boston University for employees and by Athletic Training Services.

Please review this manual. Updated information or additions will be provided as necessary.

Sincerely,

Hollie J Walusz, MA, ATC
Director, Residency Program in Athletic Training


Information in this manual is not intended to be fully comprehensive. Residents should also refer to policies or procedures that are found in: Boston University employee manual and Athletic Training Services Policies and Procedures.

While every effort is made to keep all of these sources accurate, up-to-date, and in agreement with one another, occasional discrepancies may occur and will be resolved by consultation with the program director.
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**Welcome to Boston University and the Department of Family Medicine**

**Mission of Boston University**

Boston University is an international, comprehensive, private research university, committed to educating students to be reflective, resourceful individuals ready to live, adapt, and lead in an interconnected world. Boston University is committed to generating new knowledge to benefit society.

We remain dedicated to our founding principles: that higher education should be accessible to all and that research, scholarship, artistic creation, and professional practice should be conducted in the service of the wider community—local and international. These principles endure in the University’s insistence on the value of diversity, in its tradition and standards of excellence, and in its dynamic engagement with the City of Boston and the world.

Boston University comprises a remarkable range of undergraduate, graduate, and professional programs built on a strong foundation of the liberal arts and sciences. With the support and oversight of the Board of Trustees, the University, through our faculty, continually innovates in education and research to ensure that we meet the needs of students and an ever-changing world.

**Mission The Department of Family Medicine (DFM):**

The BU DFM will provide leadership to the development of family practice and primary care regionally, nationally and internationally, through its research, education, and clinical activities. It will accomplish this through:

- **Research**, policy, and advocacy that improves approaches to the conduct, organization and innovation of primary care, with emphasis on assets and challenges of the underserved and their communities, and the integration of primary care, medical anthropology, public health, and behavioral health;

- **Education** which prepares medical students and residents for careers as primary care physicians, and fellows for leadership positions in primary care, with special emphasis on preparation to work in multidisciplinary primary care teams responsive to the needs of multicultural communities;

- **Clinical activities**, which provide the necessary practice-based laboratories and teaching environments, with emphasis on programs that, complement the overall mission of the BMC, and which are responsive to primary care needs of the greater Boston region, and especially its underserved communities.

**Welcome to the Residency in Athletic Training Program**

**Program History**

In 2013 the idea of a residency program at Boston University was conceptualized, proposed to the Vice President of Administrative Services and approved by Human Resources. The first resident was hired in the Fall of 2013 and funded through soft money with an orthopedic examination and diagnosis focus. The position continued with another new hire in the Fall of 2014 with a focus on neurotrauma and spine. Athletic Training Services requested ongoing permanent funding for three residency positions and funding for administrative costs for the 2015-2016 academic year, at which time we filed our intent to seek accreditation with the Commission on Accreditation of Athletic Training Education (CAATE). This request was approved by
the University. The Vice President for Administrative Services has authority and signature power over this position and program.

**Athletic Training Services Mission Statement**

Provide exceptional comprehensive patient care with a focus on prevention, wellness and education that establishes enduring skills meant to enrich life.

**Athletic Training Residency Program Mission**

Develop and educate advanced level athletic training clinicians whose practice is patient centered, guided by evidence, and advances the profession of athletic training and healthcare through clinical practice and scholarship.

**Athletic Training Residency Program Vision**

Produce advanced-level clinicians who will be progressive leaders nationally in their residency areas, with a focus on the prevention, diagnosis, and intervention of injuries and illnesses of an orthopedic nature and/or traumatic and non-traumatic injuries and illnesses related to the nervous system, head, and spine.

**Athletic Training Residency Program Objectives:**

**Common:**
1. Identify inter-professional healthcare teams and engage in collaborative practice
2. Demonstrate the ability to integrate the best available research evidence with clinical expertise and consideration of patient values and circumstances to optimize patient outcomes
3. Critically evaluate their clinical practice through the selection, implementation, and interpretation of patient and clinician rated outcome measures to guide decision making for improved patient outcomes
4. Complete a minimum of two quality improvement projects and two literature reviews during their time as a resident
5. Use technology to deliver information to others for the purpose of practice improvement
6. Demonstrate critical reflection through examination of available research and patient outcomes
7. Demonstrate improvement in interpretation and utilization of diagnostic modalities
8. Use the disablement model to treat the whole patient
9. Communicate effectively with all those involved in the healthcare of the patient, using appropriate oral and written syntax
10. Partake in a minimum of two out of the four areas of scholarship as defined by Boyer during the course of their residency year that advances knowledge

**Orthopedics and Diagnostics:**
1. Demonstrate knowledge, skills, and abilities consistent with advanced, patient-centered, athletic training practice. Specific focus will include the prevention, diagnosis, and intervention of injuries and illnesses of an orthopedic nature.

**Neurotrauma and Spine**
1. Demonstrate knowledge, skills, and abilities consistent with advanced, patient-centered, athletic training practice. Specific focus will include the prevention, diagnosis, and intervention of traumatic and non-traumatic injuries and illnesses related to the nervous system, head, and spine.
Accreditation

Program was accredited on March 20, 2018 from:
Commission on Accreditation of Athletic Training Education (CAATE)
6836 Austin Center Blvd., Suite 250
Austin, TX  78731-3193
(512) 733-9700

AT Residency Program Curriculum

Program Curriculum

The duration of the residency program is one year with the first day being June 1 and the last day being May 31 of the next year.

Didactic:
Literature review, critically appraised topics, journal clubs, quality improvement projects, grand rounds, fellowship lectures (DFM), case presentations, standardized patients, hands-on labs, discussion board responses to scholarly work, required reading, staff professional development

Clinical Education:
Mentored time in: athletic training practice, physician’s clinics and radiology rotations*

Scholarship:
Dissemination of work products of the didactic portion of the program, lecturing, delivering professional development, and presentations

*Clinical placements are made by the Residency Director in coordination with the Director of Athletic Training Services based on the programatic goals, as well as residents’ personal and academic goals in keeping with University policy.

Duty Hours, Leave of Absence and Vacation

Duty Hours

Mandatory Time Free of Clinical Work in Education

The resident should have 8 hours off between scheduled clinical work and educational periods. There may be circumstances when residents choose to stay to care for their patients and return to work with fewer than 8 hours free of clinical experience and education. This must occur within the context of the 80 hours and one-day-off-in -seven requirement.

Residents must have at least 14 hours free of clinical work and education after 24 hours of call.

Residents must be scheduled for a minimum of one day in seven free of clinical work and required education (when averaged over 4 weeks). At home call cannot be assigned on these free days.
MAXIMUM CLINICAL WORK AND EDUCATION PERIOD LENGTH

Clinical and education work for residents must not exceed 24 hours of continuous scheduled clinical assignment.

Up to 4 hours of additional time may be used for activities related to patient safety, such as providing effective transition of care, and/or resident education.

Additional patient care responsibilities must not be assigned to the resident during this time.

CLINICAL EDUCATION AND WORK HOUR EXCEPTIONS

Rare circumstances, after handing off all other responsibilities, the resident, on their own initiative may elect to remain or return to the clinical site in the following circumstances:

- To continue to provide care to a single severely ill or unstable patient;
- Humanistic attention to the needs of the patient or family; or,
- To attend a unique educational event.

These additional hours of care or education will be counted toward the 80 hour weekly limit.

ACGME approved major revision of Section VI: February, 2017; effective: July 1, 2017

Accessed April 22, 2017:
http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRs_Section%20VI_2017-07-01_TCC.pdf

Leave of Absence

A resident may apply for a leave of absence from the university using the process described in Employee Handbook Section 314-315 on page 57-61 after notifying the program director.

A resident may not apply for a leave of absence to avoid dismissal for from the residency.

- **Sick leave**
- **FLMA**
- **Parental Leave**
- **Sympathy Leave**
- **Jury Duty Leave**
- **Military Leave**

Residents are afforded all rights in this regard as outlined by University policy. However in order to successfully complete the residency, the RESIDENT may miss no more than six weeks of time engaged in the residency in patients care. These six weeks are a combination of vacation and any family or sick leave taken. Extension or exception to this policy will be determined based on student performance solely by the Residency Director in consultation with the Medical Director and the Director of Athletic Training Services.

Vacation

Eligibility

All regular, full-time employees and regular, part-time employees scheduled to work at least 50 percent of the regularly scheduled workweek are eligible upon hire to accrue and use Vacation Leave in accordance with the provisions of this policy.
Accrual

Eligible employees accrue Vacation Leave for each full calendar month of service completed at Boston University. Accruals are credited to employees on the first day of the month following each full calendar month of completed service. The following accrual rates are based on a regular, full-time workweek and a twelve-month assignment duration. They apply on a pro-rata basis to regular, part-time employees and other assignment durations.

<table>
<thead>
<tr>
<th>Vacation Days Per Year</th>
<th>Accrued Per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>First year to fourteenth (14th) year</td>
<td>20</td>
</tr>
</tbody>
</table>

BOSTON UNIVERSITY CORE POLICIES

SUSPENSION OR DISMISSAL

Boston University residency program reserves the discretionary right to suspend or dismiss any resident from the program for failure to maintain a satisfactory academic record, acceptable personal behavior, or for other reasons of health, safety, or welfare of the patient. It is our policy that no progress can be made toward completion of the residency during a period in which the resident is suspended from the program for disciplinary reasons.

Suspension or dismissal from the residency program does not necessarily affect the residents employee status at the University. Suspension or dismissal from employment will follow University policy for Termination Notices.

WITHDRAWAL

*If the resident wishes to withdraw from the residency program they must notify the Program Director and the Director of Athletic Training Services in writing. At the discretion of the Program Director and the Director Of Athletic Training Services the resident may be allowed to stay on as an employee to the end of their contract.*

GRIEVANCES: will follow the University policy for grievances that can be found on page 22-24 of the Employee Handbook.
ACADEMIC POLICIES AND STANDARDS

Admission Requirements:

Qualifications:
- Graduation from CAATE-accredited professional athletic program
- Post-professional Master’s Degree in Athletic Training preferred
- 2 years of athletic training experience
- BOC Certification, Commonwealth of Massachusetts license eligible and current CPR certification

Application:
- Cover letter
- Resume
- Three references (name, email, phone number(s) and association)
- Unofficial graduate and undergraduate transcripts
- Unofficial GRE scores
- Personal statement addressing why you are interested in a residency position and which area of focus you are applying for. Please identify your qualifications for the selected area of focus. This statement should not exceed two double-spaced typed pages.

Interview:
- Evidenced Based presentation
- Discussion components to address communication, personal skills, professional and academic goals, skills and abilities in the residency area of focus.
- Search committee recommendation
- Program Director selection

Equal opportunity policy

Performance Measures:

Common:
1. Completion of entrance written comprehensive examination and standardized patient assessments
2. Assessment of journal club presentations
3. Assessment of grand rounds presentations
4. Assessment of case presentations
5. Assessment of critically appraised topics
6. Assessment of quality improvement projects
7. Assessment of lab preparatory work and participation
8. Cumulative assessment of standardized patient examinations
9. Completion of exit written comprehensive examination

Orthopedics and Diagnostics:
1. Quarterly assessments
2. Milestones assessments

Neurotrauma and Spine:
1. Quarterly assessments
2. Milestones assessments
Graduates of the BU residency program from Boston University Athletic Training Services will:

1. Be advanced-level clinical specialists practicing in the field of AT
2. Provide the highest quality of care to individual patients
3. Demonstrate the ability to utilize information technology, manage clinical data, locate and critically appraise relevant evidence, and synthesize this information in the interest of optimizing patient care
4. Practice athletic training with honesty, integrity, and critical reflection in an ethical, legal, and culturally competent manner
5. Demonstrate the ability to select, interpret, translate, and educate in relation to diagnostic modalities
6. Practice athletic training in a manner that captures the patient’s physical, social, and mental well-being and their needs associated with each of those roles1
7. Partake in scholarship that advances athletic training practice2
   2. Boyer, E. L. (1990), Scholarship reconsidered: Priorities of the professoriate. (PDF), Carnegie Foundation for the Advancement of Teaching

Retention:

Termination of Enrollment in the Residency in Athletic Training Program for Academic Reasons:

Failure to meet the quarterly benchmarks (see table below) in each quarterly assessment, used to assess an advanced level clinical specialist*.

*Advanced level clinical specialist is an athletic trainer who possesses skills above an entry level practitioner, with the knowledge and abilities that other experienced practitioners with no specialized training in the area of the residency or demonstrated advanced level skill would be inclined to seek out for collaboration on a patient case in their specialty area.

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum score</td>
<td>any</td>
<td>30</td>
<td>55</td>
</tr>
<tr>
<td>in any category</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average score</td>
<td>any</td>
<td>45</td>
<td>65</td>
</tr>
</tbody>
</table>

Any act that would result in termination of employment would result in termination from the residency program.

Completion Procedures:
In order to complete the residency program, the resident must attain the following:

1. Completion of all didactic requirements per comprehensive assessment plan benchmarks
2. Achievement of a minimum score of 65 in any category, with an average score of 75 in all categories by the Q4 assessment
3. An average score of 3.5 on the final written comprehensive examination rubric
4. A faculty vote indicating successful completion of standardized patient assessment checklists
5. An average score greater than 3.25 on the Milestones Assessment tool
6. Majority vote of core faculty in support resident’s completion

**EVALUATIONS OF PRECEPTORS AND PROGRAM**

These evaluations are mandatory and required for completion of the residency.

**CONTINUING EDUCATION FUNDING**

Residents receive the same amount of continuing education money that is allotted each year to full-time staff holding the job description of Athletic Trainer. All funding must be used for development in the residency specialty area, and be approved by the Residency Director and the Director of Athletic Training Services or their designee.

**WORK OPPORTUNITIES**

Consulting and outside employment is highly discouraged and requires, per University policy, written permission from the Director of Athletic Training Services upon the recommendation of the Program Director.

**PROGRAM COSTS**

Residents are required to maintain Massachusetts athletic training license, BOC certification and CPR/AED certification at the professional rescuer/healthcare provider level. Cost associated with these licenses and certifications are the responsibility of the resident.

**SCHOLARSHIPS**

Boston University does not offer any type of scholarships to athletic training residents.

**RECORDINGS**

For the purpose of assessment and reflection, the resident may be recorded (to include either video or voice) during didactic, clinical education, or scholarship components of the residency program.