

Commission on Accreditation of Athletic Training Education

2022 CAATE /// Accreditation Conference

October 7-8, 2022 / Atlanta, Georgia



Demystifying Accreditation

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Disclosures

None of our speakers have financial or other conflicts of interest to disclose

Accreditation

Accreditation is:

- A voluntary quality assurance process
- A peer review course of action
- A method of validation
- Recognition that an institution/program has met standards set forth by the peer reviewing body

Encourage New Approaches for Student Learning

Innovation

Protects the Public and the Consumer

Quality Improvement Guides &
Supports
Program
Improvement

Quality Assurance



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Overview and Objectives

At the end of this presentation, participants will be able to:

- 1. Appraise the intent of accreditation and its process
- 2. Synthesize the differences among Peer Review, Review, and Standards committees
- 3. Explain the purpose of accreditation standards
- 4. Confirm Myths vs Facts about accreditation







CAATE Mission and Vision

Mission: Serving the public and profession by establishing and ensuring compliance with accreditation standards that facilitate quality outcomes, continuous improvement, innovation, and diversity to enhance athletic training education.

Vision: Advancing clinical practice and improving health care outcomes through promotion of excellence in athletic training education.



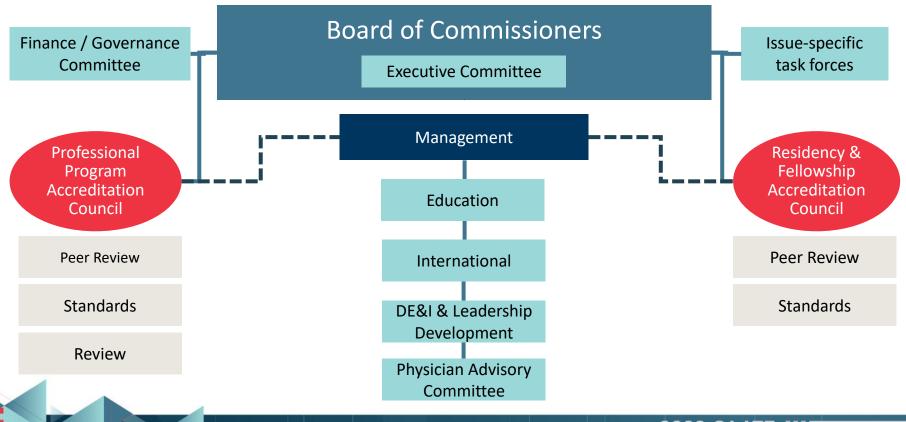
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CAATE Organizational Chart



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Accreditation Process (Self-study – Review Committee)

July 1
Self-study
opens
(1 year before)

June 30 Self-study due July -September PR Team and visit date set PR Team reopens standards as needed

Report sent to Review Committee (10-12 weeks) Preliminary report to CAATE office within 7 days

On-site visit



Accreditation Process (Review Committee – Board Action)

No Rejoinder required

= Program reviews the report for accuracy

Rejoinder required = 90 days to respond

Rejoinder reviewed by Review Committee

Report sent to Council for recommendation

Council Recommends
Accreditation Action to
CAATE Board

Program and BOC notified of Board Action



CAATE Accreditation Process

Myth

Fact

 Calls to the CAATE office will "get my program in trouble" The CAATE staff are there to help!

Todd Neuharth todd@caate.net

Ashley Ahearn-Szymanski ashley@caate.net

Mark Laursen mark@caate.net



CAATE Accreditation Process

Myth

 I only need to think about the standards during a self-study / peer review year.

Fact

- Stay engaged with the accreditation standards.
- Quality improvement
- If you find yourself noncompliant, it's ok to selfreport
- Annual report



Peer Review

Myth

Peer Reviewers are the Enforcers of the CAATE – Bada Bing!

FACT

•Peer Reviewers review Athletic Training Program's self-study reports using the CAATE standards as their guide for evaluating evidence.



Peer Reviewers

- Are trained peer professionals working in tandem as representatives of the CAATE.
- Assigned 1 2 review(s) per cycle.
- Are not consultants to the Athletic Training Program
- Do not make accreditation decisions

Purpose of Peer Reviewers

What? And Why?

- Selected peer professionals tasked to review and validate
- ATPs are ensuring quality in the development, production,
- and delivery of AT education while using the CAATE's
- practice of quality assurance.

Peer Review Process Values





Peer Review Process



Comprehensive programmatic review process

- Support the the CAATE mission and vision
- External, confidential review
- To find evidence
- To support both quality assurance and improvement



Peer Review Timeline



- One week from Peer Review Team (PRT)
 notification / acceptance, contact is made with
 ATP
- PRT reads Self-Study in eAccred; Date for onsite and periodic ATP communications are set
- Standards may be reopened for additional documents and/or narrative clarity from the ATP

Whole process could take four to ten months



Peer Review Timeline



- Onsite visit must occur between Oct 1 –
 May 15 (exception to Residency programs)
- Two & ½ day onsite review to validate program Self-Study in eAccred
- Involves interviews, access to program documents, and concurrent completion of Peer Review Report

Whole process could take four to ten months



Peer Review Timeline



- Seven days to finalize Peer Review Report
- PRR is submitted to the CAATE
- PRR is forwarded to the Review Committee

Whole process could take four to ten months



Review Process

Myth

The Review Team process is to exacerbate the level of angst and bane to the peer review process.

FACT

- Review the Peer Review Report for clarity and further evidence, after on site review.
- Intent is to come to a consensus with PR Team.
- Reviewers do not make accreditation decisions



Purpose of Review Committee

What? And Why?

•To recruit, develop, and support the review volunteer corps of the Commission, coordinate with Peer-Review colleagues to prepare comprehensive reports following Peer Review visits, for all program levels (professional, post-professional, and residency/fellowship) for both quality assurance and quality improvement purposes.



Review Team Process Values





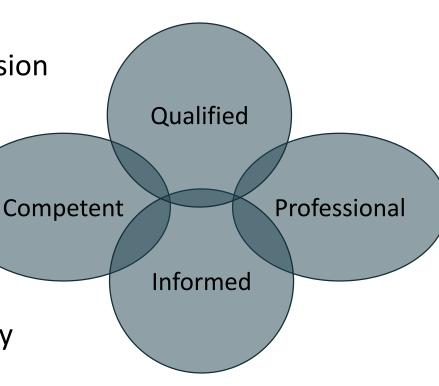
Review Process of Reports

Overview

Support the CAATE mission and vision

Internal review PRR / Institution responses

- To confirm findings of the Peer Review Report
- To find evidence
- Review 8 20+ reports per cycle
- Additional means to ensure quality assurance



Review Committee Timeline



- Assigned to primary team (secondary team if additional review or split vote)
- Review Team Chair communicates with Peer Review Chair for clarity
- Only review standards identified as "Lacking Evidence"
- Report sent to CAATE, then sent to ATP

Whole PRR process could take ten to twelve weeks



Review Committee Timeline



- Peer Review Report only if all standards demonstrate evidence of compliance
- Rejoinder Report if any standards are still lacking evidence in PRR
- Progress Report required if Rejoinder Response is still lacking evidence in RTR
- •Rejoinder Response and Progress Report are allotted up to four weeks for review to return to the CAATE.

Whole PRR process could take ten to twelve weeks



The Role of the Standards

Promote

- Mission
- Vision

Protect

- Public
- Students
- Programs

The Role/Charge of the Standards Committee

In collaboration w/PPAC and Director of Accreditation...

- Review specific questions, problematic or emergent standards
- Make recommendations to PPAC regarding standard language (including annotations, glossary, etc)
- Solicit and consider public comment regarding new or proposed changes to the Standards
- Recommend the timeline for implementation
- Communicate updates and new standards including implementation timelines and requirements
- Periodic review of all Standards / Creation of all new Standards



The Role of the Standards

Myth

- The Standards are written too specifically! They are trying to tell me what to do!
- The Standards are written too vaguely! Just tell me what to do!

Fact

- New standards are thoughtfully designed
- Goes through public comment
- Some (e.g., safety) must be very specific whereas others are designed to allow programmatic flexibility and innovation



The Role of the Standards Committee

Myth

 If I send a question, it will probably end up in a black hole – no one will answer!

Fact

- Questions are funneled to the appropriate standards committee for discussion and resolution.
- If you have a question, it will be answered!





The Standards Committee Uses a QI Process



- A single standard is thoughtfully created and released
- New Standards are thoughtfully designed (multi-year project) and released
- The entire set of Standards are reviewed periodically (every 5 years)





The Standards Committee Uses a QI Process



- Discuss questions/concerns that are raised
- Gather data within AT and benchmark against peer professions
- Converse with other committee leaders (e.g., Review Committee) and examine public comment (if applicable)





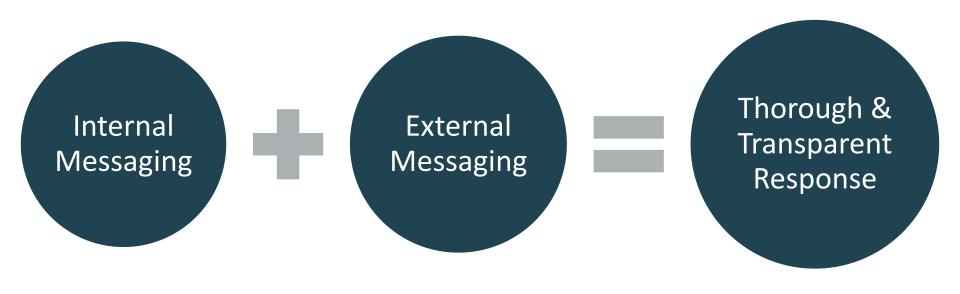
The Standards Committee Uses a QI Process



- Make a recommendation to the PPAC/Board of Commissioners
- Repeat public comment (if it is a major change of intent)
- Board of Commissioners votes upon the recommendation



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Examples

Editorial Change to Existing Standard

Simple clarification
No change of intent

One brief external message needed

Example

Standard 39 – Scholarship was not included as required for the CEC experience/qualifications.

Copy-editing error.

No internal messaging needed

Bullet will be added to the Standards and noted as an edit/addition

Examples

Add a New Standard

New standard(s)

Example

The Board of Commissioners charged the committee to add DEI standards

Working Group of Content Experts; Open Public Comment Period

DEI 1 and DEI 2 were added to the to the Standards and noted as an addition

Approved May 2021 Immediate implementation with required reporting after July 1, 2022

Examples

Substantive Edit to Existing Standard

Complex clarification of intent

Example

"How To Address This Standard" Instructions for Standards 56-94 & DEI2 Added more flexibility for programs to determine where to teach and assess (didactic and clinical)

Edits were made to "How to address this standard" in the annotation

Approved April 2022 Complex implementation because programs underway with self-study

Feedback

Feedback is an important part of the quality improvement process! There are several ways you can provide feedback.

- Participate in open public comment periods when new or revised standards are presented
- Email support@caate.net with questions or comments
- File a complaint with the CAATE All complaints must be submitted in writing to the CAATE Office via email (<u>support@caate.net</u>)





Questions?