



CAATE

Policies and Procedures Manual

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Commission on Accreditation of Athletic Training Education
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Introduction

The purpose of the Commission on Accreditation of Athletic Training Education (CAATE) is to develop, maintain, and promote appropriate minimum education Standards for quality athletic training programs. The CAATE is responsible for accreditation of professional, post-professional degree, and post-professional residency programs in athletic training. This policy and procedure manual governs actions for all programs accredited by the CAATE. Although each program level has its own set of Standards, the processes outlined in this document pertain to all CAATE accredited programs.

In this document, the term Standards is used throughout. The three sets of Standards referenced in this document are:

Standards for the Accreditation of Professional Athletic Training Programs

Standards for the Accreditation of Post-Professional Athletic Training Degree Programs
Standards for the Accreditation of Athletic Training Residency & Fellowship Programs

For specific details on the accreditation process, users should refer to the appropriate *Pursuing and Maintaining Accreditation* document:

Pursuing and Maintaining Accreditation of Professional Programs in Athletic Training

Pursuing and Maintaining Accreditation of Post-Professional Degree Programs in Athletic Training

Pursuing and Maintaining Accreditation of Residency & Fellowship Programs in Athletic Training

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CAATE Organizational Chart

I. GOVERNANCE

A. About the CAATE

1. The CAATE is a voluntary non-governmental accreditor for educational programs in Athletic Training. The CAATE is governed by a Board of Commissioners which is led by a President and advised by the Executive Committee and Executive Director.
2. The CAATE is recognized by the Council on Higher Education Accreditation (CHEA) with the following Scope of Accreditation: "The Commission on Accreditation of Athletic Training Education (CAATE) accredits professional and post-professional programs in athletic training at the baccalaureate and master's degree levels and non-degree residency programs in specialty areas of athletic training within the United States."

B. Mission, Vision and Values of the CAATE

1. 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.
2. Vision- Advancing clinical practice and improving health care outcomes through promotion of excellence in athletic training education.
3. Values- Accountability, Transparency, Integrity, Excellence, Leadership, Collaborative
4. Responsibilities of the CAATE-
 1. Develop standards that govern acceptable practices for accredited programs in Athletic Training.
 2. Make the final decisions on accreditation actions.
 3. Develop and maintain a collaborative process for policies and procedures and ensure that those policies and procedures are available to the public.
 4. Review and update the policies and procedures for the purpose of continuity, accountability, responsiveness, and improvement in the provision of accreditation services to constituents will occur every three (3) years. All modifications to existing policies and procedures will be considered for impact on member institutions. Modifications will be implemented in a timely manner and be made available to the public.
 5. Encourage innovation in Athletic Training Programs beyond the requirements delineated in the Standards.
 6. Maintain and make publicly available the accreditation status of all accredited programs.

C. Board of Commissioners

1. The Board shall consist of not less than (7) Commissioners as shall be designated by the Board from time to time and be comprised of not less than four (4) Board of Certification, Inc., ("BOC") certified athletic trainers, one (1) physician, (1) one public member and one (1) institution administrator, but the exact number of board members shall be determined by the Board. At all times, the majority of the Board must contain a majority of Board of Certification, Inc., ("BOC") certified athletic trainers.
2. Whenever possible, appointments shall be staggered. The Board may amend terms as necessary.
3. Terms begin at the end of the Summer/Fall Board meeting unless a vacancy on the Board occurs off-cycle.

4. Quorum shall be a majority of eligible voting members. A quorum must be present at the time of all votes. The President may vote on all matters.
5. Terms end after the close of old business at the Summer/Fall Board meeting.
6. All Board positions are three (3) year terms.
7. Individuals may serve no more than two (2) consecutive terms unless fulfilling the term of President. Any exceptions must be approved by a majority vote of the board.
8. Reappointment to the board for a second term shall be by board vote; a majority of board members must vote for reappointment in order for the Commissioner to serve a second term.
9. Eligibility: In order to be eligible to serve as a Commissioner, individuals must:-
 - a. Be in good standing with their credentialing and regulatory bodies; all healthcare professionals must have a current NPI number.
 - b. Demonstrate experience and/or understanding of educational accreditation and site visit process.
 - c. Demonstrate leadership abilities.
 - d. Not be a member of any other body where they have authority or influence in decisions (e.g., Board member, Committee Chair) that may represent a real or perceived conflict of interest with their fiduciary role as a Board member. Specific examples include serving as a board member of the AATE, BOC, NATA, NATA Research and Education Foundation, district and state athletic training entities, and other athletic training, accreditation, or regulatory related bodies.
 - e. Be free of unresolvable conflicts. The Finance & Governance Committee will review potential conflicts of interest with current Commissions or candidates and make recommendations to the Board of Commissioners if a potential conflict exists.
 - f. Not be from the same institution/organization as another Commissioner. In the event that a Commissioner takes a new job at the same institution/organization as another Commissioner, the Commissioner who changed jobs will not be eligible for another term.
 - g. Exceptions to sections 9. d. and f. may be approved by the board.

D. Election Process

The Finance and Governance and DEIA & Leadership Development Committees are tasked with managing the selection process. The Committees are responsible for assessing the existing competencies possessed by the Board of Commissioners against the ongoing needs of the organization in terms of strategic initiatives, skill needs or gaps, and diversification of thought and experience, and have identified the desired competencies for nominees.

The CAATE DEIA & Leadership Development Committee reviews all applications received, and the Finance and Governance Committee, with representatives of the DEIA and Leadership Development Committee, conducts interviews with selected candidates. Candidates will be assessed based on the current and future needs of the Board of Commissioners.

The Finance and Governance Committee will subsequently prepare a slate of candidates to be presented to the current CAATE Board of Commissioners, who will elect the new Commissioner(s) at the CAATE Board fall meeting. New Commissioners will begin their terms at the end of the Summer/Fall Board meeting.

E. Duties of the Board of Commissioners

1. Prepares for, attends, and actively participates in all Board of Commissioners meetings.
2. Ensures strong fiduciary oversight and financial management.
3. Actively participates in strategic and organizational planning with a focus on achieving the mission and vision.
4. Abides by the CAATE bylaws and policies.
5. Approves and monitors the organization's budget, programs, and services.
6. Actively, professionally, and enthusiastically advocates, supports, and enhances the CAATE's mission and public image.
7. Evaluates the performance of the Executive Director.
8. Acts as liaisons to CAATE and Strategic Alliance committees, represents the CAATE at various public forums, and provides a synopsis of subjects important to the Board.

F. Officers/Executive Committee

1. The Board shall elect the following officers: President, Vice President/President-Elect and Treasurer/ Secretary. The year immediately prior to the President's last year in office, a President-Elect will be elected by the board. The President-Elect may or may not be the Vice President.
 1. Any voting member of the Commission who has served a minimum of two (2) years on the board has the right to be nominated for president-elect/president. Past Commissioners who are less than three (3) years removed from the Board at the time of election are also eligible for nomination for President.
 2. Officer nominations occur prior to the spring Commission meeting, and officer candidates are presented to the Commissioners during the spring Board meeting.
 3. Officers shall be selected by a majority vote during the spring Board meeting before the officers take office.
 4. A President-Elect shall be selected by a majority vote and shall serve one (1) year as President-Elect and three (3) years as President.
2. Executive Committee
 - a. The Executive Committee is comprised of the President, Vice President, President-Elect (when applicable), and the Treasurer/Secretary. The Executive Director will serve as the staff support for the Executive Committee.
 - b. Duties
 - (1) advise the President in making recommendations to and bringing actions before the Commission in accordance with the policies established by the Board;
 - (2) assist the President in hiring and supervising the performance of the Executive Director as outlined in the duties of the President;
 - (3) determine location for board meetings;
 - (4) establish agenda items for the Commission meetings.
3. President
 - a. Attends and presides at all meetings of the Board of Commissioners.
 - b. Direct all activities of the CAATE in accordance with the bylaws and established

- policies.
- c. Works with the Executive Committee and Executive Director to set the agenda for board meetings.
- d. Ensures the strategic plan is relevant, impactful, and works with the Executive Director and volunteers to implement the plan.
- e. Oversee the implementation of all decisions made by the Board of Commissioners.
- f. Ensures strong fiduciary oversight and financial management.
- g. Inspires and enables volunteers to achieve success.
- h. Engages stakeholders through organization activities and communications.
- i. Selects council, committee, and task force chairs in consultation with the DEIA & Leadership Development Committee and with the approval of the Board of Commissioners.
- j. Represents the CAATE and serves as the organization's spokesperson.
- k. Hires and conducts annual performance review for the Executive Director with the Executive Committee and Board of Commissioners.
- l. Meets with the Executive Committee and Executive Director regularly.
- m. The President shall serve a three (3) year term and is not eligible for re-election.

4. Vice President/President-Elect

- a. Prepares to assume the Board President at the conclusion of the term as Board President-Elect.
- b. Works with the Executive Committee and Executive Director to set the agenda for Board Meetings.
- c. Ensures strong fiduciary oversight and financial management.
- d. Prepares for, attends, and actively participates in all Board of Commissioners meetings.
- e. Conducts annual performance review for the Executive Director with the Executive Committee.
- f. Meets with the Executive Committee and Executive Director regularly.
- g. Assists the Board President as needed.
- h. The Vice President/President-Elect shall serve a two (2) year term and is not eligible for re-election.

5. Treasurer/Secretary

- a. Ensures strong fiduciary oversight and financial management.
- b. Chairs the Finance & Governance Committee.
- c. Works with the Executive Committee and Executive Director to set the agenda for Board Meetings.
- d. Oversees the development of financial policies.
- e. Prepares for, attends, and actively participates in all Board of Commissioners meetings.
- f. Conducts annual performance review for the Executive Director with the Executive Committee.
- g. Meets with the Executive Committee and Executive Director regularly.
- h. Assists the Board President as needed.

- i. The Treasurer/Secretary shall serve a three (3) year term and be eligible for re-election.
- 6. Authorized Representative
 - a. The President serves as the authorized representative for the CAATE and the Board and shall preside over all Board meetings. If the President is unable to participate, the order of succession is as follows: Vice President/President-Elect, Treasurer/Secretary. The President may delegate representative or signing authority as appropriate to members of the Executive Committee and/or the Executive Director.
 - b. The CAATE Executive Director is authorized as the sole signer of all CAATE checks. The CAATE Executive Director is authorized to sign all CAATE checks up to \$10,000 without seeking approval from the Treasurer/Secretary. All CAATE checks greater than \$10,000 must be sent to the Treasurer for electronic approval before signature by the Executive Director. A general ledger report detailing all checks signed in that month will be supplied to the Treasurer on a monthly basis.
 - c. With the exception of the CAATE management services contracts (Smithbucklin), the Executive Director is authorized to sign certain financial contracts on behalf of the CAATE. Contracts greater than \$10,000 must be sent to the President for review and approval prior to signing. Approval can be given through email or fax communication. A report of all contracts signed within each quarter will be provided to the CAATE Executive Committee. CAATE management services contracts (Smithbucklin) must be signed by the CAATE President.
- 7. Executive Director
 - a. Works with board in order to fulfill the organization mission.
 - b. Responsible for advising the Commission/Board in a manner that supports and guides the organization's mission as defined by the Commission.
 - c. Responsible for communicating effectively with the Board and providing, in a timely and accurate manner, all information necessary for the Board to function properly and to make informed decisions.
 - d. Keep abreast of the changes in athletic training education outside of the scope of the CAATE, issues related to BOC certification, specialty/professional accreditation, and higher education regulation.
 - e. Develops resources sufficient to ensure the financial health of the organization.
 - f. Responsible for the fiscal integrity of the CAATE, including submission to the Finance and Governance Committee, a proposed annual budget and quarterly financial statements, which accurately reflect the financial condition of the organization.
 - g. Responsible for fiscal management that generally anticipates operating within the approved budget, ensures maximum resource utilization, and maintenance of the organization in a positive financial position.
 - h. Works with board and staff to ensure that the mission is fulfilled through programs, strategic planning, and community outreach.
 - i. Responsible for implementation of programs that carry out the mission of the CAATE
 - j. Responsible for the enhancement of the CAATE's image by being active and visible in the athletic training and accreditation communities and by working closely with other professional, civic, and private organizations.
 - k. Oversees and implements appropriate resources to ensure that the operations of the

organization are appropriate.

- l. Responsible for the effective administration of day-to-day operations.
- m. Responsible for creating job descriptions for all employees and hiring, evaluation, and retention of competent, qualified staff. The Executive Director will receive permission from the board to create new staff positions and to discharge employees.
- n. Responsible for implementing HR policies and programs that are compliant with the required legal responsibilities of the CAATE.
- o. Responsible for the design and implementation of staff sustainability and professional development plan reported to the Board annually. (Succession plan)
- p. Responsible for signing notes, agreements, and other instruments made and entered into and on behalf of the organization per the direction of the President or the Board.
- q. Maintaining a record of the organization for historical documentation and research purposes.

8. Board Meetings

- a. The summer/fall and winter/spring Board meetings will include an open session business meeting.
- b. All personnel, budget, contract actions, and accreditation actions are conducted in closed sessions.
- c. Voting by the Commission requires a quorum at the time of the vote.
- d. Meetings shall be at geographically convenient locations determined by the Executive Committee.
- e. The CAATE meets at least twice each calendar year for the purpose of reviewing and deciding on accreditation recommendations presented by the respective Accreditation Councils. The Board reviews accreditation recommendations for the following statuses of public recognition as outlined in section VII: Accreditation Actions and Statuses.
- f. The Board will publish in a public form a summary of accreditation actions taken by the Board, within ten (10) business days after each meeting.
- g. No accreditation action shall be published until the Board has acted upon the accreditation action recommendations. Probationary actions will not be published until reconsideration documents are submitted by the institution and considered by the Commission.

II. COMMITTEES

A. General Committee Information

1. Appointment

- 1. The President shall appoint all council and committee chairs and members in conjunction with the Executive Committee unless otherwise specified. Commissioners may be asked by the President to serve as an ex-officio member of some committees, except the Nominating Committee if he/she is running for office.

2. Terms of Office (unless otherwise specified)

- 1. Three (3) year appointment.
- 2. May not serve more than two (2) consecutive terms.
- 3. The Commission may stagger re-appointments if necessary, to ensure continuity of the committee.

3. Eligibility for all councils and committees (exceptions by the Commission may be considered)
 1. Be in good standing with their credentialing and regulatory body; all healthcare professionals must have an NPI number.
 2. Evidence of experience as a healthcare clinician, current or past affiliation with the CAATE, CAATE accredited programs, or other healthcare profession's accredited programs.
 3. Demonstrate experience and/or understanding of educational accreditation.
 4. Demonstrate leadership abilities.
 5. Council and committee chairs may not be a sitting board member of another professional athletic training organization.
 6. Exceptions to sections 3 b. and e. may be approved by the Board.
4. Application Process for committee membership
 1. Application materials are to be sent to CAATE office during open recruitment calls for applications.
 - (1) Application questionnaire
 - (2) Curriculum Vita/Resume
 - (3) Verification of credentialing and good standing with BOC (ATs only) and state (if applicable for ATs and other healthcare providers)
 - (4) List of 3 references (provide name, position, phone, and email)
 - (5) Verification of NPI number
 2. Applications are reviewed by a review group consisting of the committee/council chair, at least one additional member of the committee/council, and a DEIA & Leadership Development liaison.
 3. Candidates are interviewed by the review group.
 4. Recommendation for appointment sent to the Board for approval.
 5. An official appointment letter is sent from the CAATE Office.
5. Reporting Lines for Committees
 1. All Committee activities and actions approved by the Professional Accreditation Council or Residency & Fellowship Accreditation Council will be presented to the Board for consideration.
 2. All committee public communication will be done through the CAATE office.
6. Ad Hoc Committees
 1. The President may appoint ad hoc committees/workgroups with notification to the Board for special projects or for a specified period of time.
- B. Appeals Committee (Ad Hoc Committee)
 1. Qualifications
 1. See section II.A.3. above
 2. Complete peer reviewer training and at least one peer review
 2. Selection
 1. The Executive Committee, Director of Accreditation, and the relevant Accreditation Council Chair review qualified candidates. Potential members are brought to the Board.
 2. Selection approved by the Board.
 3. Duties/Roles & Responsibilities

1. Work with the peer review team to prepare the report.
2. Review rejoinders.
3. Review progress reports.
4. Make recommendations to the Board of Commissioners regarding accreditation actions as per the operating procedures of the Board.
5. Follow the procedure outlined in Section VIII. Appeal of Withdrawal or Withhold of this Policy and Procedure Manual

C. Diversity, Equity, Inclusion, and Accessibility & Leadership Development Committee

1. Qualifications & Composition

1. See section II.A.3. above
2. Demonstrated commitment to diversity, equity, inclusion, and accessibility.
3. The Committee shall consist of at least six (6) voting members. Members shall serve a three-year, once-renewable term.
4. The Committee Chair shall also serve as a Commissioner on the CAATE Board of Commissioners.

2. Purpose

1. The purpose of the Diversity, Equity, Inclusion, Accessibility and Leadership Development Committee is to recruit and develop the volunteers and leaders of the Commission with a deliberate emphasis on diversity, equity, inclusion, and accessibility to intentionally promote and ensure a culturally inclusive environment throughout the organization and our stakeholder programs.

3. Duties/Roles & Responsibilities

1. Develop and manage a Board approved and supported DEIA initiative with specific goals to enhance the diversity of our volunteers at all levels (e.g., board, committees, peer reviewers).
2. Conduct leadership training on Diversity, Equity, Inclusion, and Accessibility (e.g., biases, cultural proficiency, LBGTQIA+) to support and enhance organizational DEIA efforts.
3. Promote and ensure that a culturally inclusive environment permeates throughout the CAATE and our stakeholder programs.
4. Facilitate the recruitment of competent, dedicated, and diverse volunteers to populate the board, councils, committees, workgroups, task forces, etc.
5. Conduct leadership development training to promote the advancement of CAATE volunteers within the organization.
6. Manage the selection and election process for all elected positions within the organization.

D. Education Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. The Committee shall consist of at least five (5) voting members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.
- c. Preferred experience with the development of various asynchronous educational content (webinars, podcasts, etc.).
- d. Demonstrated service activities and a strong record of working collaboratively as part of a team.

- e. Demonstrated ability to prioritize workload, meet deadlines, and complete activities.

2. Purpose:

- a. The purpose of the Education Committee is to identify, recommend, and support the educational activities of CAATE. This may include, but is not limited to, educational opportunities for program directors, clinical education coordinators, and other program personnel at all levels of accreditation.

3. Duties/Roles & Responsibilities

- a. Review and assure CAATE compliance with CHEA Standards for work that falls under their purview.
- b. Develop and implement an educational plan for the CAATE for all levels of accreditation. Appraise resources (current and future) needed to implement the educational plan and make appropriate funding requests.
- c. Identify, develop, and assess supplemental educational materials for all levels of accreditation. Assure various modes (webinars, podcasts, etc.) are available to CAATE stakeholders.
- d. Liaise with CAATE Committees and review peer specialty accreditors to identify appropriate educational programming.
- e. Identify the theme, programming, and speakers, and perform evaluations of CAATE educational programs and resources.
- f. Keeping the CAATE President apprised of the substantive issues under consideration by the Committee and reporting in writing to the Executive Committee within seven days of the Committee action any policy decision or recommendation which may require Board endorsement.
- g. Providing written reports for CAATE Board meetings as requested.

E. Ethics and Professional Responsibility Committee (Ad Hoc Committee)

1. Qualifications & Composition

- a. See section II.A.3. above
- b. There shall be five (5) members selected by the Commission. This group shall have no term limits but shall be affirmed by the Commission every two years as needed.
- c. Duties
 - (1) Receive complaints regarding ethics/behaviors and act according to Section XII of this document.

F. Finance & Governance Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Financial acumen, including the ability to understand financial and investment statements.
- c. Understanding of the CAATE mission and strategic priorities.
- d. Understanding of the CAATE bylaws and policies.
- e. The Committee shall consist of five (5) or more members of the Board. Except as otherwise directed by the Board, a Commissioner selected as a Committee member shall continue to be a member for as long as he or she remains a Commissioner or until their earlier resignation or removal from the Committee. Any member may be removed from the Committee by the Board, with or without cause, at any time.

- f. The Chair of the Committee shall be the CAATE Treasurer/Secretary. The Treasurer/Secretary shall preside at meetings of the Committee and have the authority to convene meetings, set agendas for meetings, and shall determine the Committee's information needs, except as otherwise provided by the Board or the Committee. In the absence of the Chair at a duly convened meeting, the Committee shall select a temporary substitute from among its members to serve as the chair of the meeting.
- g. Members of the Committee are appointed by the President and require Board approval and consist of the following members:
 - (1) Treasurer/Secretary (Chair)
 - (2) AT Commission member
 - (3) Public member – in the case where the public member is the Treasurer/Secretary, another member may be appointed
 - (4) President and Vice President/President-Elect serve as ex officio members.
- h. Length of service is one (1) year, renewable, with no term limits.

2. Purpose

- a. The Finance and Governance Committee is appointed by the CAATE President and approved by the Board of Commissioners of the Commission on Accreditation of Athletic Training Education (the CAATE) to assist the Board in fulfilling its oversight responsibilities related to fiscal management and governance excellence.

3. Duties/Roles & Responsibilities

- a. Work with the CAATE staff to develop an annual budget and multi-year financial forecasting for approval by the Board.
- b. Ensure adherence to the budget and achievement of the adopted goals by monitoring and reporting the CAATE's financial activity.
- c. Oversee the management of organization-wide financial assets.
- d. Review investment policies and strategies.
- e. Ensure the maintenance of an appropriate capital reserve structure.
- f. Ensure that the CAATE employs personnel, systems, and investment managers capable of providing timely and accurate financial information to key decision-makers.
- g. Develop and provide oversight of the implementation of policies and procedures regarding Board size, leadership, and composition.
- h. Determine qualifications and characteristics required to become a commissioner.
- i. Coordinate and oversee self-evaluations of the Board and its councils and committees.
- j. Review on a regular basis the overall governance of the CAATE and recommend improvements for approval by the Board where appropriate.
- k. Undertake such other responsibilities as the Board may delegate or assign to the Committee from time to time.
- l. Prepare, in conjunction with the Executive Director, an annual operating budget to be presented to Board of Commissioners.
- m. Receive and review on a quarterly basis investment performance statements and financial statements (statement of financial position, income statement, and operating statement) relating to the then current year-to-date as well as key financial benchmarks the Board deems relevant from time to time and should be presented to the Board on a regular basis.

- n. Review annually an operating budget proposal by staff for the next fiscal year to be approved by the Board.
- o. Evaluate and recommend the financing of capital projects for approval by the Board where material or otherwise appropriate.
- p. Understand the Board's investment goals, risk tolerance level, and spending plans in order to develop an investment strategy to meet these goals.
- q. Oversee the implementation of and compliance with, periodically review, and revise as appropriate the CAATE's Investment Policy, including but not limited to a. hiring and terminating investment managers; b. regularly reviewing investment performance results; c. setting investment objectives; d. establishing performance objectives and benchmarks; e. devising the asset allocation strategy; f. portfolio rebalancing; and g. restricting investments, as necessary.
- r. Report regularly to the Board on the Committee's findings, recommendations, and any other matters the Committee deems appropriate or the Board requests and maintain minutes or other records of Committee meetings and activities.
- s. Review the effectiveness of and recommend modifications as appropriate to the CAATE's committee structure and organizational documents, including the bylaws and policies.
- t. Oversee and advise staff on the development of an appropriate commissioner orientation program, including identification of experienced commissioners as appropriate mentors of new commissioners.
- u. Review emerging corporate governance issues and practices and make appropriate recommendations to the Board.
- v. Conduct a periodic self-evaluation of the performance of the Committee, including its effectiveness and compliance with this charge, and recommend to the Board such amendments of this charge as the Committee deems appropriate.
- w. Undertake such other responsibilities as the Board may delegate or assign to the Committee from time to time.

G. International Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Demonstrated leadership abilities.
- c. Ability to work in a team environment.
- d. The Committee shall consist of at least five (5) voting members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.

2. Purpose

- a. The CAATE International Committee shall consider and make recommendations to the CAATE Board on accreditation issues affecting international athletic training education programs. The committee shall also review the implementation of policies and practices that affect international programs and make recommendations as appropriate.

3. Duties/Roles & Responsibilities

- a. Advances the vision, mission, and values of the CAATE.
- b. Regularly review international issues contained in CAATE Standards.

- c. Serve as the CAATE body to review and make recommendations for educational equivalency assessment and other international-related issues.
- d. Liaise and coordinate with other organizations or CAATE committees engaged with international organizations regarding athletic training.
- e. Promote and support the development of international athletic training programs seeking CAATE accreditation.

H. Professional Program Accreditation Council

1. Qualifications, Composition & Limitations

- a. See section II.A.3. above
- b. Candidates will be reviewed in relation to their commitment to advancing:
 - (1) Academic quality and learner achievement (see Standard 1, page 9)
 - (2) Public accountability and transparency
 - (3) The CAATE mission, vision, and values
 - (4) Integrity in the accreditation process
 - (5) Diversity, equity, and inclusion
- c. The Board will determine the size and composition based on the needs with minimal requirements, including:
 - (1) Majority of Board Certified athletic trainers
 - (2) No fewer than four Board Certified athletic trainers
 - (3) At least one public member
 - (4) At least one athletic trainer engaged in clinical practice
 - (5) At least three athletic trainers affiliated with an accredited athletic training program in good standing
 - (6) Chairs of standing committees will serve as full voting members of the Council
- d. The Council will not:
 - (1) Make accreditation decisions or override accreditation decisions made by the Board of Commissioners.
 - (2) Make policy decisions that impact the comprehensive accreditation review process without consultation and consent from the Board.
 - (3) Enter the CAATE into any contractual or financial obligations.

2. Purpose

- a. The Professional Program Accreditation Council oversees the accreditation processes for professional programs and makes accreditation action recommendations to the Board of Commissioners.

3. Duties/Roles & Responsibilities

- a. Advances the vision, mission, and values of the CAATE.
- b. Promotes academic quality and advances learner achievement.
- c. Adheres to the diversity, equity, and inclusion philosophy and initiatives of the CAATE.
- d. Serves in an advisory capacity to the Board of Commissioners.
- e. Advances programmatic and organizational quality assurance and quality improvement.
- f. Advances programmatic and organizational innovation.
- g. Promotes a culture of public accountability, accessibility, and transparency in alignment with

CHEA Recognition Standards.

- h. Partners with the appropriate committee(s) to develop and deliver stakeholder education around the accreditation standards and the accreditation process.
 - i. Manages the comprehensive programmatic review process and makes accreditation action recommendations to the Board.
 - j. Develops programmatic and operational quality assurance and quality improvement practices across the accreditation process.
 - k. Promotes program and organizational innovation.
 - l. Promotes compliance with the CHEA Recognition Standards.
 - m. Makes recommendations to the Board on financial, volunteer, and staff resources needed to achieve the Council's work.
 - n. Provides oversight of all committees established within the Professional Program Accreditation Council.
 - o. Communicates and collaborates across the organization.
 - p. Participates and contributes to the CAATE's strategic planning process.
- I. Professional Program Peer Review Committee
- 1. Qualifications & Composition
 - a. See section II.A.3. above
 - b. Ability to communicate professionally (strong oral and written communication).
 - c. Ability to work with other members as a collaborative and contributing teammate.
 - d. Demonstrate fairness, and maintain confidentiality.
 - e. An understanding of the accreditation Standards and the peer review process or willingness to learn.
 - f. The Committee shall consist of at least six (6) voting members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.
 - 2. Purpose
 - a. The purpose of the Peer Review Committee is to recruit, develop, and support the peer reviewer volunteer corps of the CAATE to perform comprehensive programmatic reviews, including self-study reviews, virtual and site reviews, for professional and post-professional programs for both quality assurance and quality improvement purposes.
 - 3. Duties/Roles & Responsibilities
 - a. Collaborate with the Board to develop and implement a Board approved philosophy statement regarding the CAATE's commitment to the dual quality assurance and quality improvement accreditation process.
 - b. Conduct appropriate training and development of volunteers for best practices in accreditation peer review that is consistent with CAATE's philosophy, policies, and procedures.
 - c. Recommend to the board changes to CAATE's accreditation philosophy, policies, and procedures as appropriate and consistent with peer-review best practices (e.g., peer-review teams, peer reviewer feedback).
 - d. Facilitate the recruitment, development, and maintenance of a competent corps of diverse volunteers to serve as peer reviewers to conduct comprehensive reviews, including self-study reviews and on-site visits.

- e. Study and recommend the optimal capacity for carrying out high-quality peer review training and subsequent comprehensive reviews based on the number of available high-quality peer reviewers.
- f. Develop a calendar for peer reviewer development and conducting comprehensive programmatic reviews that are predicated on the requirement that all peer reviewers be well-trained and capable of conducting high-quality comprehensive reviews.
- g. Propose an annual budget that includes funding for peer reviewer development and conducting the requisite number of comprehensive reviews annually.
- h. Explore and recommend the appropriate potential use of virtual site visits for items such as interim reports.
- i. Monitor information from the Association of Specialized and Professional Accreditors (ASPA) regarding contemporary issues and best practices in higher education peer review for compressive program evaluations.
- j. Assure that all recommended policies, procedures, and practices under the purview of the Peer-Review Committee are compliant with the current Commission on Higher Education Accreditation (CHEA) Recognition Standards.

J. Professional Program Review Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Ability to communicate professionally (strong oral and written communication).
- c. Ability to work with other members as a collaborative and contributing teammate.
- d. Attention to detail on all reports.
- e. Demonstrate fairness and maintain confidentiality.
- f. An understanding of the accreditation Standards and peer review process or willingness to learn.
- g. The Committee shall consist of at least six (6) members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.

2. Purpose

- a. The purpose of the Review Committee is to 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, and to review rejoinders and progress reports.

3. Duties/Roles & Responsibilities

- a. Work with peer review team to prepare reports.
- b. Review rejoinders
- c. Review progress reports
- d. Report final decisions on compliance/noncompliance with the Standards.

K. Professional Program Standards Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Balance of educators and clinicians from small and large institutions.
- c. Previous experience with CAATE accredited programs is desired.
- d. Attention to detail.
- e. Team orientated.

- f. Excellent communication and reasoning skills.
 - g. The Committee shall consist of no fewer than six (6) members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.
- 2. Purpose
 - 1. The charge of the Standards Committee is as follows:
 - a. Review specific questions provided by the Board related to the Standards for clarification and make recommendations to the Board related to the standard language, including annotations, glossary, etc.
 - b. Bring forward suggestions, as warranted, for Standard revisions or new Standards to the Commission after receiving public comment on the proposed changes.
 - c. Work closely with the Peer Review Committee, Residency Committee, and staff to gather data and public comments on Standards that are new, unclear, or challenging.
- 3. Duties/Roles and Responsibilities
 - a. In collaboration with the Review Committee and Director of Accreditation, review problematic or emergent Standards.
 - b. Solicit and consider public comment regarding new or proposed changes to the Standards.
 - c. Periodically review Standards for all program types and recommend changes to the Commission.
 - d. Recommend the timeline for implementation.
 - e. Partner with staff to communicate updates and new standards, including implementation timelines and requirements.
- L. Residency & Fellowship Accreditation Council
 - 1. Qualifications, Composition & Limitations
 - a. See section II.A.3. above
 - b. Candidates will be reviewed in relation to their commitment to advancing:
 - (1) Academic quality and learner achievement (see Standard 1, page 9)
 - (2) Public accountability and transparency
 - (3) The CAATE mission, vision, and values
 - (4) Integrity in the accreditation process
 - (5) Diversity, equity, and inclusion
 - c. The Board will determine the size and composition based on the needs with minimal requirements, including:
 - (1) Majority of Board Certified athletic trainers
 - (2) No fewer than four Board Certified athletic trainers
 - (3) At least one public member
 - (4) At least one athletic trainer engaged in clinical practice
 - (5) At least three athletic trainers affiliated with an accredited athletic training program in good standing
 - (6) Chairs of standing committees will serve as full voting members of the Council
 - d. The Council will not:
 - (1) Make accreditation decisions or override accreditation decisions made by the Board.
 - (2) Make policy decisions that impact the comprehensive accreditation review process without consultation and consent from the Board.

(3) Enter the CAATE into any contractual or financial obligations.

2. Purpose

- a. The Residency & Fellowship Accreditation Council oversees the accreditation processes for residency and fellowship programs and makes accreditation action recommendations to the Board of Commissioners.

3. Duties/Roles & Responsibilities

- a. Advances the vision, mission, and values of the CAATE.
- b. Promotes academic quality and advances learner achievement.
- c. Adheres to the diversity, equity, and inclusion philosophy and initiatives of the CAATE.
- d. Serves in an advisory capacity to the Board.
- e. Advances programmatic and organizational quality assurance and quality improvement.
- f. Advances programmatic and organizational innovation.
- g. Promotes a culture of public accountability, accessibility, and transparency in alignment with CHEA recognition standards.
- h. Leads the development and delivery of stakeholder education around the accreditation standards and the accreditation process.
- i. Manages the comprehensive programmatic review process and makes accreditation action recommendations to the Board.
- j. Develops programmatic and operational quality assurance and quality improvement practices across the accreditation process.
- k. Promotes program and organizational innovation.
- l. Promotes compliance with the CHEA Recognition Standards.
- m. Makes recommendations to the Board on financial, volunteer, and staff resources needed to achieve the Council's work.
- n. Provides oversight of all committees established within the Residency and Fellowship Accreditation Council.
- o. Communicates and collaborates across the organization.
- p. Participates and contributes to the CAATE's strategic planning process.

M. Residency & Fellowship Peer Review Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Ability to communicate professionally (strong oral and written communication).
- c. Ability to work with other members as a collaborative and contributing teammate.
- d. Demonstrate fairness and maintain confidentiality.
- e. An understanding of the accreditation Standards and peer review process or willingness to learn.
- f. The Committee shall consist of at least six (6) voting members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.

2. Purpose

- a. The purpose of the Peer Review Committee is to recruit, develop, and support the peer reviewer volunteer corps of the CAATE to perform comprehensive programmatic reviews, including self-study reviews, virtual and site reviews, for residency and fellowship programs for both quality assurance and quality improvement purposes.

3. Duties/Roles & Responsibilities

- a. Collaborate with the board to develop and implement a Board approved philosophy statement regarding the Commission's commitment to the dual quality assurance and quality improvement accreditation process.
- b. Conduct appropriate training and development of volunteers for best practices in accreditation peer-review that is consistent with Commission philosophy, policies, and procedures.
- c. Recommend to the board changes to Commission accreditation philosophy, policies, and procedures, as appropriate and consistent with peer review best practices (e.g., peer review teams, peer-reviewer feedback).
- d. Facilitate the recruitment, development, and maintenance of a competent corps of diverse volunteers to serve as peer reviewers to conduct comprehensive reviews, including self-study reviews and on-site visits.
- e. Study and recommend the optimal capacity for carrying out high-quality peer review trainings and subsequent comprehensive reviews based on the numbers of available high quality peer reviewers.
- f. Develop a calendar for peer reviewer development and conducting comprehensive programmatic reviews that are predicated on the requirement that all peer reviewers be well trained and capable of conducting high-quality comprehensive reviews.
- g. Propose an annual budget that includes funding for peer reviewer development and conducting the requisite number of comprehensive reviews annually.
- h. Explore and recommend the appropriate potential use of virtual site visits for items such as interim reports.
- i. Monitor information from the Association of Specialized and Professional Accreditors (ASPA) regarding contemporary issues and best practices in higher education peer-review for compressive program evaluations.
- j. Assure that all recommended policies, procedures, and practices under the purview of the Peer-Review Committee are compliant with the current Commission on Higher Education Accreditation (CHEA) Recognition Standards.

N. Residency & Fellowship Standards Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Previous experience with CAATE Accredited programs is desired.
- c. Attention to detail.
- d. Team oriented.
- e. Excellent communication and reasoning skills.
- f. The Committee shall consist of at least six (6) members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.

2. Purpose

1. The charge of the Residency & Fellowship Standards Committee is as follows:
 - a. Review specific questions provided by the Board related to the Standards for clarification and make recommendations to the Board related to the standard language, including annotations, glossary, etc.
 - b. Bring forward suggestions, as warranted, for Standard revisions or new Standards to the

Commission after receiving public comment on the proposed changes.

- c. Work closely with the Peer Review Committee and staff to gather data and public comments on Standards that are new, unclear, or challenging.

3. Duties/Roles & Responsibilities

- a. Conduct a formal review of the Standards every five (5) years.
- b. In collaboration with the Peer Review Committee and staff, review problematic or emergent Standards.
- c. Solicit and consider public comment regarding new or proposed changes to the Standards.
- d. Periodically review standards for all program types and recommend changes to the Board.
- e. Recommend the timeline for implementation.
- f. Partner with staff to communicate updates and new Standards, including implementation timelines and requirements.

O. Residency & Fellowship Program Standards Committee

1. Qualifications & Composition

- a. See section II.A.3. above
- b. Balance of educators and clinicians.
- c. Previous experience with CAATE accredited programs is desired.
- d. Attention to detail.
- e. Team orientated.
- f. Excellent communication and reasoning skills.
- g. The Committee shall consist of no fewer than four (4) members. The Committee chair shall be appointed by the CAATE President. Members shall serve a three-year, once-renewable term.

2. Purpose

- a. The charge of the Standards Committee is as follows:
 - 1) Review specific questions provided by the Board related to the Standards for clarification and make recommendations to the Board related to the standard language, including annotations, glossary, etc.
 - 2) Bring forward suggestions, as warranted, for Standard revisions or new Standards to the Commission after receiving public comment on the proposed changes.
 - 3) Work closely with the Peer Review Committee and staff to gather data and public comments on Standards that are new, unclear, or challenging.

3. Duties/Roles and Responsibilities

- a. In collaboration with the Review Committee and Director of Accreditation, review problematic or emergent Standards.
- b. Solicit and consider public comment regarding new or proposed changes to the Standards.
- c. Periodically review Standards for all program types and recommend changes to the Commission.
- d. Recommend the timeline for implementation.
- e. Partner with staff to communicate updates and new standards, including implementation timelines and requirements.

P. Other Groups

1. Peer reviewers

a. Qualifications & Application

1. Eligibility: In order to be eligible to serve as a Peer Reviewer, individuals must:-

- (1) Be in good standing with their credentialing and regulatory bodies; all healthcare professionals must have a current NPI number.
- (2) Demonstrate experience and/or understanding of educational accreditation and site visit process.
- (3) Demonstrate leadership abilities.
- (4) Not be a member of any other body where they have authority or influence in decisions that may represent a real or perceived conflict of interest. Be free of unresolvable conflicts.
- (5) The Finance & Governance Committee will review potential conflicts of interest with peer reviewer candidates and make recommendations to the Board of Commissioners if a potential conflict exists.
- (6) Exceptions to sections 9. d. and f. may be approved by the board.
- (7) Peer reviewers are appointed for an initial 3-year term and can be renewed for additional terms.
- (8) Submit materials from II.A.4 through the Peer reviewer application in e-Accreditation.

b. Duties and Roles

- (1) Complete conflict of interest forms
- (2) Attend required training sessions (i.e., eAccreditation, peer reviewer development)
- (3) Review self-study materials for the assigned program.
- (4) Complete peer reviews as assigned.
 - a. Complete all required reports and documentation in a timely fashion
 - b. Stay current with all peer reviewer policies. Renewal is based on assessment of performance.

c. Assignment of Peer reviews

- (1) Complete the conflict of interest forms.
- (2) Peer reviewers are assigned to the institution by staff, in consultation with the Peer Review Committee Chair, taking into consideration factors such as experience, partner matching, Carnegie classification/size of the institution, conflict of interest information, etc.
- (3) New peer reviewers should complete two (2) successful visits as a team member and have received positive evaluations prior to being assigned as chair of a peer review team.

III. FIDUCIARY RESPONSIBILITIES

A. Investments

1. The CAATE invests its financial resources prudently to optimize the return on investments, while assuring safety and needed liquidity necessary to provide accreditation services to its institutions. For the purposes of managing investment risk and to optimize investment returns within acceptable risk parameters, the following funds will be created and held as separate investment pools: Operating Fund, Short-Term Fund, and Long-Term Fund. In addition, policies related to Net Assets are described.

2. Operating Fund

A. Definition, Purpose & Allocation

- (1) The Operating Fund provides high liquidity to meet the current (0-1 year) financial obligations arising from operations. The purpose of the Operating Fund is the preservation of capital and a source of income. The Operating Fund will be made up of cash and cash equivalents with less than a twelve-month original maturity and will be FDIC insured or held in a money market fund. These funds will not necessarily be held with the Investment Advisor. Amounts in this account will fluctuate based on cash flow during the year.

B. Roles & Responsibilities

- (1) The Finance Director will monitor the Operating Fund and report to the Executive Director. The Executive Director will notify the Secretary/Treasurer of deficiencies and any transfer of funds from the Long-Term Fund to the Operating Fund. In the case of a surplus, the Executive Director will notify the Secretary/Treasurer and may transfer funds from the Operating Fund to the Long-Term Fund.

3. Short-Term Fund

A. Definition, Purpose & Allocation

- (1) Short-Term Investment Fund are funds with a one to five-year investment horizon. The purpose is to preserve capital and generate income to meet cash flow needs. Withdrawals from the reserve may be required to fund strategic initiatives or cover operating shortfalls. The fixed-income asset class will target a weighted average maturity of no greater than five years and a weighted average credit rating of no lower than AA.

B. Eligible Investments & Restrictions

- (1) The following are eligible investments for this reserve:

- i. Cash Equivalents

- a) Treasury bills
- b) Money market funds
- c) FDIC-insured CDs
- d) FDIC-insured money market accounts

- ii. Fixed Income Securities (Any individual holdings must be rated investment grade by Moody's, S&P, or Fitch)

- a) U.S. government and agency securities
- b) Fixed income securities of foreign governments and corporations (up to 35% of the market value of the fixed-income allocation)
- c) Corporate notes and bonds
- d) Mortgage bonds

- iii. Mutual Funds or Exchange Traded Funds (including similar pooled investments and separately managed accounts) shall be selected on the basis that they invest in those securities deemed to be allowable above.

C. Diversification and Benchmarking

- (1) No more than 5% of the Short-Term Reserve may be in the securities of any one issuer with the exception of obligations of the US Government and its agencies, and federally insured instruments.
- (2) No more than 12% of the Short-Term Reserve may be in the securities of a particular industry.
- (3) The total Short-Term Reserve's performance will be compared to a total reserve

benchmark comprised of the BBgBarc 1-5 Yr. Gov./Credit Bond Index, and the Merrill Lynch Three Month US Treasury Bill Index. Weights will be applied to each index based on the target allocation to each broad asset class.

- (4) The Investment Adviser will provide a benchmark for each fund and separately managed account held within the portfolio in order to compare the individual investments with style- and size-specific benchmarks.

4. Long-Term Fund

1. Definition, Purpose & Allocation

- (1) Long-Term Investment Fund are funds with a five-year or greater investment horizon. The purpose is to grow the value of the portfolio over a full market cycle, typically defined as three to five years, and meet or exceed the expected rate of return of 4.0% on a three to five-year basis.
- (2) The fixed-income asset class will target a weighted average maturity of no greater than eight years and a weighted average credit rating of no lower than AA.
- (3) The domestic and international equity assets classes will reflect a diversified allocation of market capitalization (Large, Mid, Small) and style (Value, Blend, Growth.) The allocation to US Mid and Small cap stocks will be no higher than half of the US stock allocation. The allocation to international equity will include exposure to both developed and emerging markets. The allocation to emerging market equity will be no higher than 4.0% of the reserve.

2. Eligible Investments & Restrictions

- (1) The following are eligible investments for this investment portfolio:
 - i. Cash Equivalents
 - a) Treasury bills
 - b) Money market funds
 - c) FDIC-insured CDs
 - d) FDIC-insured money market accounts
 - ii. Fixed Income Securities (Any individual holdings must be rated investment grade by Moody's, S&P, or Fitch)
 - a) U.S. government and agency securities
 - b) Fixed income securities of foreign governments and corporations (up to 35% of the market value of the fixed income allocation)
 - c) Corporate notes and bonds
 - d) Mortgage bonds
 - iii. Equity Securities
 - a) Common Stocks
 - b) American Depositary Receipts (ADRs) and ordinary shares of non-U.S. companies
 - c) REITS – publicly traded
 - iv. Mutual Funds or Exchange Traded Funds (including similar pooled investments and separately managed accounts) shall be selected on the basis that they invest in those securities deemed to be allowable above.

3. Diversification

- (1) No more than 5% of the Long-Term Reserve may be in the securities of any one issuer with the exception of obligations of the US Government and its agencies, and federally insured instruments.

- (2) No more than 12% of the Long-Term Reserve may be in the securities of a particular industry.

4. Prohibited Investments

- (1) The following securities and transactions are not permitted for the Fund EXCEPT as directed by the Investment Advisor within an investment fund (e.g., mutual fund, hedge fund, managed futures fund):
 - i. Letter stock and other unregistered securities;
 - ii. Individual commodities or other commodity contracts;
 - iii. Short sales or margin transactions;
 - iv. Individual uncovered and covered options;
 - v. Investments for the purpose of exercising control of management.

5. Portfolio Rebalancing

- (1) This portfolio will be rebalanced periodically to assure that the overall asset allocation target of the portfolio is maintained. Events including large deposits or withdrawals and significant market movements may trigger the need to rebalance the portfolio. Regardless of activity the portfolio will be reviewed on a quarterly basis at a minimum to assure the balance is adequately maintained. In order to minimize transaction costs, the Investment Advisor will evaluate the benefit of rebalancing relative to the transaction cost. The Investment Advisor will rebalance the portfolio if any asset class moves above or below its allowable range as outlined in the target asset allocation.

f. Benchmarking

- (1) The total Long-Term Reserve performance will be compared to a total reserve benchmark comprised of Russell 3000 Stock Index, FTSE All World Ex. US Stock Index, BBgBarc Intermediate Term US Gov/Credit Bond Index and the Merrill Lynch Three Month US Treasury Bill Index. Weights will be applied to each index based on the target allocation to each broad asset class (US Stock, International Stocks, Bonds and Cash).
- (2) The Investment Adviser will provide a benchmark for each fund and separately managed account held within the portfolio in order to compare the individual investments with style- and size-specific benchmarks.

g. Roles & Responsibilities

- (1) The CAATE Board of Commissioners may amend the investment strategies, portfolio composition, and/or this investment policy.
- (2) The Finance Committee will annually review the allocation target with updated historical data and report to the Board with any recommendations for modification.
- (3) The Investment Advisor is responsible for monthly and quarterly reporting and updates to the Finance Committee.
- (4) The Executive Director can authorize changes to the investments that are within this policy.

5. Net Assets

- (1) The CAATE's target range is to maintain Net Assets equal to the Operating Expenses (excluding Non-Operations) between 60% and 90% with a minimum of no less than 50% and a maximum of no greater than 100%.
- (2) Should the Net Assets increase to greater than 90%, the Board may approve spending up to one half of the excess to be used for strategic initiatives that would provide an added

value back to the constituents of the CAATE.

B. Finance Policy Review

1. A session on fiduciary responsibility and/or review will be held at a Commission meeting once per year or as needed.

C. Reimbursement

1. For the purpose of this policy, CAATE representatives refer to CAATE Commissioners, Committee members, peer reviewers, staff, or other invited guests/members.
2. CAATE representatives who attend meeting/programs at the request of the CAATE to represent the CAATE shall have their customary and reasonable travel expenses (e.g., airfare/mileage, lodging, meals, registration) reimbursed by the CAATE.
3. CAATE representatives who are requested to attend meetings/programs by meeting planners to represent the CAATE shall forward the request to the CAATE President and Executive Director for approval prior to making any commitment to represent the CAATE. The requesting organization shall provide registration, one night's lodging, and transportation costs for the CAATE representative only if those are standard for other speakers. Transportation costs, if not provided, and meals for the CAATE representative will be reimbursed by the CAATE, as long as the trip has been pre-approved.
 - a. As much as possible, requests for CAATE representatives to attend meetings/programs should be coordinated such that the representative is attending a meeting that they would normally be attending and/or is near their home. CAATE representatives who are performing CAATE business (e.g., CAATE committee meeting, peer reviewer training), in conjunction with another meeting/program (e.g., NATA Symposium, Educator's Conference, Accreditation Conference) shall have expenses for one night's lodging and one day of meals reimbursed by the CAATE per day of CAATE business.
 - b. All individuals traveling on CAATE business must travel in coach class unless using a free upgrade or have prior approval from the Executive Director or President.
 - c. Baggage fees will be reimbursed.

IV. CHARACTERISTICS OF A SPONSORING INSTITUTION/ORGANIZATION

A. A sponsoring institution/organization must:

1. Demonstrate evidence of sound financial support of the educational program on a current and continuing basis.
2. Appoint faculty to the program based on established criteria for eligibility.
3. Assume primary responsibility for curriculum planning and selection of course content.
4. Exercise primary responsibility in coordination of classroom teaching and supervised clinical experience in simulated, as well as in actual clinical facilities.
5. Receive and process applications for admission to the program.
6. Accept qualified applicants, who are then enrolled as full or part-time learners, with all customary privileges for use of available student services and facilities.
7. Have final authority over any affiliated institutions regarding the aforementioned criteria when learners will ultimately graduate from the primary institution granting the athletic training education.

8. Grant a degree (professional and post-professional programs) or a certificate (residency programs) as evidence of completion of the program.
9. Report programmatic change to the CAATE (see Section XI).
10. Demonstrate punctuality in submitting required reports.
 1. Administrative Probation will be assessed on programs that submit reports beyond the required deadline as determined by the postmarked date or electronic date stamp of sent material (see Sections VI.E and VIII.A.2.n).
11. Be factual in reports submitted to the CAATE.
 1. Institutions submitting erroneous information or falsifying documents will be addressed by the Ethics and Professional Responsibility Committee.
 2. Programs and individuals submitting false, inaccurate, or otherwise purposefully erroneous material to the CAATE, after appropriate due process, may be sanctioned with negative accreditation actions consistent with those outlined in Section VII of this document.

V. INSTITUTIONAL/ORGANIZATIONAL AUTONOMY

- A. Rights of Institutions/Organizations Sponsoring Programs:
 1. The CAATE conducts business with respect for the sponsoring institution/organization's autonomy, self-governance, and self-management within the scope of the Standards.
- B. Sponsorship
 1. The institution/organization has the right, without approval from the CAATE, to define and establish its own organizational and administrative structure and management. The institution/organization has a responsibility for maintaining administrative and academic control over its affiliates and for assuring quality, availability of resources, supervisory accountability for, and integrity in the education conducted within its affiliates.
- C. Resources:
 1. The institution/organization has the right:
 1. To choose its own financial practices, including those for raising and allocating funds and for budgeting, accounting, and auditing. The institution has a responsibility to ensure that there are sufficient funds to sustain the quality of the program until commitments to currently matriculated learners are satisfied.
 2. To assess qualifications, hire, promote, grant tenure, assign duties, and apportion the time for program administrators, faculty, and support staff in accordance with its own policies. The institution/organization has the right to monitor and provide opportunities for the continuing competence of its faculty by the most appropriate and feasible means at its disposal. The institution/organization has a responsibility to monitor and promote the continuing competence of its faculty/staff and to assure that members are effective in teaching and/or clinical practice in adherence with the Standards.
 3. To identify and hire individuals to assume the responsibilities of each designated administrative position. The institution/organization has a responsibility to select individuals who are qualified in adherence with the Standards.
 4. To determine, within the constraints of its available resources, the number of learners who may be enrolled in the program. The institution/organization has a responsibility to ensure the adequacy of resources for the support of enrolled learners.
- D. Curriculum
 1. The institution/organization has the right, while abiding by the Standards, to determine the format, sequence, duration, and methods of instruction for the curriculum. The institution has a

responsibility, in adherence to the Standards, to design a curriculum in a sequence and process that is based upon a sound educational rationale and that promotes efficient and effective learning.

E. Learners:

1. The institution/organization has the right, while abiding by the Standards to:
 1. Establish admission requirements and select learners in accordance with its policies.
 2. Determine the manner in which it maintains permanent student records. The institution/organization has a responsibility to retain official records for each student so that documentation of the student's attendance and performance is available, if needed, by the graduate or external agencies in later years.

F. Fair Practices:

1. The institution/organization has the right to determine the manner in which it observes and satisfies the fair practice requirements of accredited programs.

G. Self-Evaluation:

1. The institution has the right to define its own means of conducting continuous assessments of quality assurance and quality improvement outcomes. The institution has a responsibility to prepare and submit the Self-Study Report in a manner consistent with the framework of the Standards.

H. Institutional Accreditation

1. The CAATE requires institutions applying for the accreditation of professional athletic training programs to be institutionally accredited by a recognized institutional accrediting body or by a body otherwise acceptable to the CAATE.
2. The CAATE requires institutions/organizations applying for the accreditation of athletic training programs at the residency and fellowships levels, in addition to being accredited by a recognized accrediting body CAATE.

VI. ACCREDITATION STANDARDS

A. Program Requirements

1. The Standards for the Accreditation of Professional Athletic Training Programs, the Standards for the Accreditation of Post-Professional Athletic Training Degree Programs, and the Standards for the Accreditation of Athletic Training Residency & Fellowship Programs are followed by institutions/organizations in preparing athletic trainers. It is the responsibility of each institution/organization to demonstrate compliance with these Standards in order to obtain and maintain recognition as a CAATE-accredited Athletic Training Program.
2. Institutions/organizations are encouraged to develop programs that exceed these Standards through the development of sound innovative educational approaches.
3. All CAATE accreditation Standards include outcome measures. All accreditation Standards are relevant and, to the extent possible, have been determined to be reliable and valid in regard to the requirements described in the Standards.

B. Accreditation Process

There are specific procedures followed by the CAATE to ensure consistency in decision-making for accreditation and quality in the educational program. Each aspect is identified in detail in the Appendices, Standards, and on the CAATE website. An overview is as follows:

1. Programs seeking initial accreditation

- A. A registration and application process had been designed to assist athletic training programs in their development and preparation for accreditation. This process (typically one to two years) culminates in the submission of a self-study to CAATE for review under the appropriate *Standards for the Accreditation of Athletic Training Programs* (professional, post-professional degree or residency & fellowship). Completion of the registration and application requirements does not guarantee accreditation.
- B. While a program may advertise that it has applied for or attained application status by the CAATE, the program also must state that this status does not guarantee accreditation.
- C. A registration fee is required for each year the program is in process. The fee grants the program access to the resources available in the electronic accreditation services offered by the CAATE. Please see the CAATE website for the current fee structure.

2. Accreditation

- A. Initial or continuing accreditation actions occur on cycles that are no longer than five years for Initial Accreditation and ten years for Continuing Accreditation. The initiation of an accreditation cycle requires a comprehensive review to determine compliance with the Standards.
- B. Current accredited programs or those requesting initial accreditation review must apply for a comprehensive review for accreditation on or before July 1st of the year preceding the end of their accreditation cycle or the end of the application period through eAccreditation. Application materials must include:
 - i. CAATE Application for accreditation
 - ii. Peer review fee due upon acceptance of self-study
 - iii. Comprehensive self-study
- C. For programs seeking continuing accreditation, failure to submit the required self-study documents within the designated time period will result in the program being placed on Administrative Probation at 30 days past the deadline. Failure to submit the self-study within 60 days of the deadline will result in the CAATE initiating Withdrawal of Accreditation for the program. Initial programs that miss the July 1 deadline for submission must wait until the following July 1st to resubmit materials.
- D. A peer review team is assigned to the accreditation review for the program through eAccreditation. The program is sent the names of the peer review team and may request a different team member if there is a conflict of interest.
- E. The peer review team, consisting of three members, will be forwarded the self-study materials to review and compare to the Standards in advance of the peer review.
- F. The peer review team will coordinate a three-day (two-day for Residency and Fellowship Programs) in-person or virtual site visit that includes an agenda for the visit on dates agreeable to both parties. In the event that not all courses have been or are being taught and/or not all clinical components implemented by the time of the peer review, the request for a comprehensive accreditation review will be denied. The institution is given a preliminary oral report of the findings of compliance with the Standards at the conclusion of the peer review.
- G. Following the peer review, the peer review team will submit a preliminary report.
- H. The program will receive a final written copy of the peer review team report and have 90 days to submit a rejoinder in response to the peer review team's findings to comment and provide clarification and/or additional data and correct factual errors.
- I. The rejoinder is submitted electronically to the CAATE. The peer review team will review the rejoinder and make comments and recommendations in the program presentation file.

The document is sent to the appropriate Accreditation Council for review, after which the Council makes an accreditation action recommendation to the Board.

- J. Programs will receive written documentation (sent electronically) from the CAATE regarding the status of their program following regularly scheduled meetings for accreditation action.
 - K. Programs are granted 45 days, following the receipt of the official correspondence, to seek clarification of the requirements and requests delineated in this official correspondence by the CAATE in writing. The CAATE will not respond or review materials in advance of the submission of the progress report, Annual Report, or rejoinder, in advance of the required submission or without written request.
 - L. Programs applying for continuing accreditation and having zero citations remaining after the review of the initial peer review report rejoinder may be awarded the maximum accreditation award. Other programs applying for continuing accreditation and having remaining citations requiring a follow-up progress report may be awarded a shorter length of accreditation determined by the Commission.
 - M. If programs have a progress report due or are on probation, discovery of additional non-compliance may result in probation, continuation of probation, or withdrawal.
3. Maintaining Accreditation:
- A. Accreditation bears with it certain institutional/organizational administrative responsibilities. Failure to meet any of the following administrative requirements may lead to administrative probationary action and the involuntary withdrawal of accreditation. Administrative probation is rescinded upon the rectification and verification that all deficiencies have been corrected and/or that fees have been paid. To maintain accreditation, the following actions are required:
 - 1. The Program must submit the self-study or, if requested, the required progress report within the timeframe determined by the CAATE based on the availability of specific documentation being requested.
 - 2. All CAATE-accredited programs must submit a self-study and have an on-site review in accordance with the stated deadlines.
 - 3. Program personnel changes (e.g., Clinical Education Coordinator, Medical Director,) and/or administrative personnel changes (e.g. President, Dean, Department Chair) should be updated on eAccreditation as needed. See Section XI.
 - 4. The sponsoring institution/organization must inform CAATE of its intent to transfer program sponsorship in accordance with CAATE policy. Please contact the CAATE office for more information. Applying for a transfer of sponsorship does not guarantee that transfer of accreditation will be granted.
 - 5. The program must pay CAATE fees within 60 days. Late fees will be assessed after 60 days. Failure to submit payment will result in the program not being reviewed if applying for initial accreditation, or for continuing programs being placed on administrative probation.
 - B. For professional programs, the sponsoring institution/organization must inform CAATE in writing of any adverse decision affecting its institutional /organizational or state accreditation within 30 days of such action. Written notification must contain the administrative signature of the president/CEO.
 - C. The sponsoring institution/organization must inform CAATE in writing, within 30 days, of any intended substantive changes in the institution or program. Written notification must

also contain an appropriate administrative signature of an administrator who has the authority to speak and act on behalf of the institution. See Section XI for specific changes that must be reported.

4. Annual Reporting Requirements

- A. The institution sponsoring the program must complete an annual report designed to document continued compliance with the Standards.
- B. An annual report must be submitted by the designated date.
 - a. Failure to submit the annual report as required will result in Administrative Probation.
 - b. Administrative Probation will be converted to Probation with a requirement for submission of additional materials, with the maximum penalty of a mandatory comprehensive review, if report is not received within thirty days (30) of the original submission deadline. See also Section VII.
- C. During the annual report process, institutions self-reporting a non-compliance(s) with one or more Standard(s) or found to be in non-compliance with the Standards will be required to submit a rejoinder, as requested by CAATE, demonstrating current compliance. Failure to demonstrate compliance may lead to probation and a progress report.
- D. Additional materials may be requested as needed by CAATE for verification or clarification.
- E. Failure to demonstrate compliance with the Standards after the rejoinder from the Annual Report will result in probation.
- F. Failure to self-report or fail to truthfully self-report non-compliance with the Standards will result in Probation. See Section VII.
- G. If programs have a progress report due or are on probation, discovery of additional non-compliances may result in probation and/or continuation of probation.

5. Inactive Programs

- A. A program may request inactive status from CAATE for up to, but not exceeding, two years. No learners may be admitted or enrolled currently in an inactive program.
- B. Programs are not expected to maintain compliance with the Standards while inactive.
- C. To reactivate a program, the institution/organization must inform CAATE in writing of its intent to do so and complete a focused peer review prior to reinstatement of their accreditation status. Refer to Section VII.12.
- D. The program and its sponsoring institution/organization must continue to pay all required fees at a 50% rate reduction while inactive in order to maintain its accreditation status.
- E. A program that does not enroll learners for more than two years is considered discontinued and will have its accreditation involuntarily withdrawn.
- F. Programs cannot be inactive during the comprehensive review process.

6. Administration

- A. All materials submitted to CAATE become the property of CAATE. Under no circumstances will the property of CAATE be returned to an institution/organization or to an individual.
- B. The policies and procedures of CAATE are not contained wholly in this document but will be available in a public forum. Those policies and procedures included in this document and the *Pursuing and Maintaining Accreditation* documents, like all CAATE policies and procedures, are subject to review and revision by CAATE. All currently accredited programs and those in application will be notified of changes to policies and/or procedures that affect accreditation at the time of the change.
- C. All CAATE accreditation actions will be made available in a public forum and are required

as part of the accreditation process.

7. Institutions with multiple CAATE accredited programs
 - A. Institutions that sponsor multiple programs will have staggered accreditation dates for each program. The two programs will NOT be accredited during the same accreditation action.
 - B. The status of one academic program in athletic training does not affect the accreditation status and qualification of the other. Each academic program must meet the accreditation Standards for that program to be recognized with CAATE accreditation. Should one program be placed on probation, this would not necessarily affect the other program.

VII. ACCREDITATION ACTIONS AND STATUSES:

As the accreditor, the CAATE is responsible for all written communication with the sponsoring organization and its program(s) regarding accreditation actions and the program's subsequent accreditation status. All notification(s) regarding the accreditation process and outcomes must come from the CAATE Office, on the CAATE letterhead, or by electronic means through e-Accreditation.

A. Accreditation Actions

The CAATE takes the following accreditation actions that determine the program's accreditation status:

1. **Seeking Initial Accreditation** refers to an action taken when a program Seeking Initial Accreditation completes the formal application and pays the appropriate fees according to the fee schedule.
2. **Initial Accreditation** refers to an accreditation action taken when a program is deemed to be in substantial compliance with all accreditation Standards and receives accreditation through the CAATE for the first time. The maximum length of initial accreditation is five (5) years.
3. **Continuing Accreditation** refers to an accreditation action that is taken when a program is deemed to be in substantial compliance with all accreditation Standards and is only taken with programs currently accredited by the CAATE. The maximum length of continuing accreditation for programs is ten (10) years.
 - (1) The CAATE accreditation status is not time limited but remains in place until a subsequent accreditation action is taken to alter a program's current accreditation status.
 - (2) The standard interval between comprehensive program evaluations shall be a maximum of five (5) years for initial, and maximum of ten (10) years for continuing.
4. **Progress Report** refers to an accreditation action that is required when a program is non-compliant with one or more Standards. The Progress Report is required at appropriate intervals to ensure the program is addressing the non-compliant Standard(s).
5. **Probation**
 - a. Probationary actions are levied on accredited programs that fail to maintain compliance with the Standards.
 - b. Prior to taking any probationary action, the CAATE will recommend a probationary action. The sponsoring organization is provided the opportunity to accept the recommendation and request reconsideration of the recommendation within 15 days of notification and demonstrate compliance with the designated Standard(s) within a specified time.
 - c. The institution accepting the recommendation for probationary action must submit an official notification to the CAATE office that includes:
 - (1) A letter accepting the recommendation for probationary action authorized and signed by the President/CEO. This letter must be received within fifteen (15) days of receipt of the letter notifying the sponsoring organization of the recommendation for probationary action.

- (2) The CAATE will then take probationary action at the next scheduled meeting and grant the status of Continuing Accreditation – Probation.
 - (3) The program must submit all materials electronically, within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (4) The program accepting Probation must then complete a Progress Report addressing the non-compliant Standards.
 - (5) The program must announce the subsequent change in accreditation status that follows all probationary actions in all of its publicly accessible documents and announcements that reference the CAATE accreditation until such time that the status is changed or the program's CAATE accreditation is withdrawn. The program must notify all learners currently enrolled in the program of this change in program status. A description of this communication, and copies of any affiliated documents, must be included in the submission for acceptance of Probation submitted to the CAATE office.
- d. An institution may request that the CAATE reconsider a recommendation to place a program on Probation. A decision by the CAATE to deny the reconsideration of a recommendation of Probation may be appealed. A copy of the CAATE Appeals Procedures is enclosed with the letter of notification of negative accreditation actions and may be found in Section VIII of this document.
 - e. When the CAATE takes action to place a program on Probation, the sponsoring organization's chief executive officer is provided with a clear statement of each programmatic deficiency leading to the negative accreditation action.
 - f. Reconsideration of a recommendation for probationary action is based on conditions existing both when the Board arrived at its recommendation and on subsequent documented evidence of corrected deficiencies provided by the institution.
 - (1) At the time of reconsideration, the institution must provide an explanation and all appropriate supporting documentation and evidence to demonstrate that the program is compliant with the Standard(s) cited in the official communication regarding the Board's recommendation that the program be placed on Probation. Plans and other proposed methods by which an institution intends to come into compliance with a non-compliant Standard(s) are not evidence of compliance. If documentation to show compliance with the Standard(s) cited in this letter is not received or is deemed insufficient, the CAATE will take probationary action resulting in the accreditation status of Continuing Accreditation-Probation.
 - (2) Reconsideration of the initial recommendation by the CAATE will occur at the next scheduled meeting, and the subsequent action taken at that meeting is final. The program must submit all materials electronically, and this process should be completed within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (3) The CAATE will either vacate their recommendation for probationary action and grant Continuing Accreditation or will affirm their recommendation and take probationary action and grant the status of Continuing Accreditation – Probation.
 - g. Failure to provide evidence documenting compliance with the designated Standard(s) may result in the CAATE recommending the action of the Withdrawal of Accreditation.
 - h. The institution's accreditor or other appropriate regulatory/governing body, when applicable in the absence of an institutional accreditor (e.g., private practice sponsoring a Residency Program), will be notified when a program is placed on Probation.

6. Defer Action

- a. Defer action is used when there is insufficient information on which to judge compliance. In such case, any accreditation action is deferred until a time specified by the Commission.
- b. The CAATE will notify the program when an action is being deferred and may request that a program submit additional information or materials by a specified date for consideration by the members of the Commission in taking a future accreditation action.
- c. A program's current accreditation status remains unchanged during a period of deferral.

7. Show Cause

- a. A Show Cause accreditation action is a notice of impending Withdrawal of Accreditation unless the program can justify within the specified time why this action should not be taken.
- b. Show cause may be taken when the CAATE judges that there is clear evidence of egregious non-compliance that either jeopardizes the capability of the sponsoring organization to achieve minimal levels of acceptable educational quality or significantly impacts the safety and well-being of learners or patients.
- c. The CAATE will notify the program of a Show Cause accreditation action and will request that a program submit additional information or materials by a specified date (not to exceed 30 days) for consideration by the members of the Commission in taking further accreditation action.
- d. A Show Cause action requires that a program provide evidence why the CAATE should not withdraw accreditation.
- e. A program's accreditation status remains unchanged during a period of Show Cause.

8. Focused Programmatic Review

- a. The CAATE may, at its discretion, conduct a special evaluation focused on programmatic review to further investigate a particular issue to determine whether the program is in compliance with specific Standards.
- b. The focused programmatic review will include a peer review of the program at the sole discretion of the CAATE, given the specific non-compliant Standard(s) and the unique circumstances leading to this action.
- c. The CAATE will indicate to the program the reasons that such a review is necessary. Such reviews may be conducted by members of the peer reviewer pool. These peer reviewers will write a report to be considered by the Commission at a time specified by the Commission.
- d. The program must submit a focused self-study document that addresses the reason(s) for the visit.
- e. The cost of a focused peer review will be the responsibility of the program and will equal the fee of a comprehensive programmatic review based on the fee schedule.
- f. The focused peer review will occur within 90 days of notifying the program.

9. Administrative Probation

- a. Administrative Probation is an action taken with currently accredited programs that fail to follow administrative requirements of an accredited program.
- b. After taking the action of Administrative Probation, the CAATE may take the subsequent action of Probation within 30 days of either non-response or inefficient documentation of the implementation of corrective behaviors to be in compliance with the Standards.

10. Withhold Initial Accreditation

- a. Withholding Initial Accreditation actions are levied when a program seeking initial accreditation has failed to show compliance with the Standards.
- b. Before initial accreditation can be withheld, the sponsoring organization is provided the opportunity to request reconsideration within 15 days of notification and demonstrate

compliance with the designated Standard(s) within a specified time.

- c. An institution may request that the CAATE reconsider the decision to withhold initial accreditation. A decision by the CAATE to deny the reconsideration of a recommendation to withhold initial accreditation may be appealed. A copy of the CAATE Appeals Procedures is enclosed with the letter of notification of negative accreditation actions and may be found in Section VIII of this document.
- d. When the CAATE takes action to Withhold Initial Accreditation, the sponsoring organization's chief executive officer is provided with a clear statement of each deficiency and is informed that if the institution chooses not to appeal, the institution may newly apply for accreditation if the program submits new evidence to demonstrate that they are in compliance with the accreditation Standards.
- e. The institution accepting the recommendation to Withhold Initial Accreditation must submit an official notification to the CAATE office that includes:
 - (1) A letter accepting the recommendation to Withhold Initial Accreditation authorized and signed by the President/CEO must be received within fifteen (15) days of receipt of the letter notifying the sponsoring organization of the recommendation to Withhold Initial Accreditation.
 - (2) The CAATE will then take action at the next scheduled meeting and grant the status of Initial Accreditation Withheld.
 - (3) The program must submit all materials electronically, within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (4) The program must announce this change in accreditation status in all of its publicly accessible documents and announcements that reference the CAATE accreditation until such time that the status is changed.
- f. Reconsideration of a recommendation to Withhold Initial Accreditation is based on conditions existing both when the Board arrived at its initial recommendation and on subsequent documented evidence of corrected deficiencies provided by the institution.
 - (1) At the time of reconsideration, the institution must provide an explanation and all appropriate supporting documentation and evidence to demonstrate that the prospective program is compliant with the Standard(s) cited in the official communication regarding the Board's initial recommendation to Withhold Initial Accreditation. Plans and other proposed methods by which an institution intends to come into compliance with a non-compliant Standard(s) are not evidence of compliance. If documentation to show compliance with the Standard(s) cited in this letter is not received or is deemed to be insufficient, the CAATE will take the action of designating Initial Accreditation Withheld.
 - (2) Reconsideration of the initial recommendation by the CAATE will occur at the next scheduled meeting, and the subsequent action taken at that meeting is final. The program must submit all materials electronically, and this process should be completed within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (3) The CAATE will either vacate their recommendation to Withhold Initial Accreditation and will take action to grant Initial Accreditation or will affirm their recommendation and take the action to Withhold Initial Accreditation.

11. Withdrawal of Accreditation

- a. Withdrawal of Accreditation actions are levied on a previously accredited program that has failed to meet the Standards or administrative requirements.

- b. Before accreditation can be withdrawn, the sponsoring organization is provided the opportunity to request reconsideration within 15 days of notification and demonstrate compliance with the designated Standard(s) within a specified time.
- c. An institution may request that the CAATE reconsider the decision to withdraw accreditation. A decision by the CAATE to deny the reconsideration of a Withdrawal of Accreditation action may be appealed. A copy of the CAATE Appeals Procedures for a Withdrawal of Accreditation is enclosed with the letter of notification of negative accreditation actions and may be found in Section VIII of this document.
- d. When the CAATE takes action to withdraw accreditation, the sponsoring organization's chief executive officer is provided with a clear statement of each deficiency.
- e. The institution accepting the recommendation for the Withdrawal of Accreditation action must submit an official notification to the CAATE office that includes:
 - (1) A letter accepting the recommendation for the Withdrawal of Accreditation action authorized and signed by the President/CEO must be received within fifteen (15) days of receipt of the letter notifying the sponsoring organization of the recommendation for withdrawing accreditation.
 - (2) The CAATE will then take action at the next scheduled meeting to grant the status of Accreditation Withdrawn.
 - (3) The program must submit all materials electronically, within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (4) The program must announce this change in accreditation status in all of its publicly accessible documents and announcements that reference the CAATE accreditation. The program must notify all learners currently enrolled in the program of this change in program status. A description of this communication, and copies of any affiliated documents, must be included in the submission for acceptance of Withdrawal of Accreditation submitted to the CAATE office.
- f. Reconsideration of a recommendation for the Withdrawal of Accreditation action is based on conditions existing both when the Board arrived at its recommendation and on subsequent documented evidence of corrected deficiencies provided by the institution.
 - (1) At the time of reconsideration, the institution must provide an explanation and all appropriate supporting documentation and evidence to demonstrate that the program is compliant with the Standard(s) cited in the official communication regarding the Board's initial recommendation that the program's accreditation be withdrawn. Plans and other proposed methods by which an institution intends to come into compliance with a non-compliant Standard(s) are not evidence of compliance. If documentation to show compliance with the Standard(s) cited in this letter is not received or is insufficient, the CAATE will take the action of the Withdrawal of Accreditation.
 - (2) Reconsideration of the initial recommendation by the CAATE will occur at the next scheduled meeting, and the subsequent action taken at that meeting is final. The program must submit all materials electronically, and this process should be completed within eAccreditation. Instructions on this process will be sent to the program director in a separate email, and questions about this process can be directed to the CAATE Office.
 - (3) The CAATE will either vacate their recommendation for the Withdrawal of Accreditation and grant Continuing Accreditation or Continuing Accreditation-Probation or will affirm their recommendation and take the Withdrawal of Accreditation action and grant the status of Accreditation Withdrawn.
 - a. Failure to provide evidence documenting compliance with the designated Standard(s)

may result in the action of Withdrawal of Accreditation.

- b. The institution's accreditor or other appropriate regulatory/governing body when applicable in the absence of an institutional accreditor (e.g., private practice sponsoring a Residency Program), will be notified when the program's accreditation is withdrawn. A plan for protecting the currently enrolled learners, including either teach-out or transfer, will be agreed upon by the institution and the Commission. If the withdrawal is due to non-compliant Standard(s) impacting student safety, appropriate instruction, fair practice, employability, or other student concerns, the Commission may require the program complete the academic term and assist the current learners in transferring to another program.
- c. Following Withdrawal of Accreditation, the institution may not re-apply for initial accreditation of a new program until such time as the existing program has completed its teach-out plan and has closed.

12. Continuing Accreditation - Inactive Status

Programs may request a period of Inactive Status while maintaining their continuing accreditation only if they do not have any enrolled learners. The CAATE may take the action of granting a program Continuing Accreditation – Inactive Status if appropriate documentation is provided in a timely manner. A program may remain inactive for up to two years. During this time, the program is required to pay all the CAATE fees at a 50% reduced rate. No learners may be enrolled or be matriculating in the program during the time period in which the program is inactive. Programs will not be granted Continuing Accreditation – Inactive Status during the comprehensive programmatic review process. To request Inactive Status, a program must complete a substantive change form. Programs are not expected to maintain compliance with the Standards while inactive. Programs in inactive status must complete a focused programmatic review prior to reinstatement of their accreditation status.

13. Voluntary Withdrawal of Accreditation

Any sponsoring organization may request a voluntary withdrawal of accreditation from the CAATE. To initiate a voluntary withdrawal, the institution must notify the CAATE Office in writing of its desire to discontinue the program's accreditation status. The notification must include:

- a. Signatures of appropriate institutional officials. The notification of voluntary withdrawal of accreditation must be signed by the president/CEO or their designee duly authorized to take such actions.
- b. The desired effective date of the voluntary withdrawal must be clearly stated. Learners who graduate after the effective date of withdrawal will not graduate from an accredited program and, therefore, will not be eligible for the benefits associated therewith. For example, learners in professional programs will not be eligible to sit for the Board of Certification (BOC) certification examination for athletic trainers, and residents in Residency Programs will not be eligible to sit for BOC specialty certification examinations through the accredited program completion eligibility route.
 - (1) The program must indicate when the last class of learners graduated or will graduate and how current or recruited learners will be informed of the institution's decision to withdraw accreditation.
 - (2) The program must provide a "teach-out plan" for any currently enrolled learners or learners who will be enrolled prior to the withdrawal. This includes documentation of how currently enrolled learners will be protected and assisted in 1) completing the program, or 2) identifying an alternative academic program within the institution (professional programs), or 3) assisting in transferring to another program.

The plan for protecting currently enrolled learners, including either teach-out or transfer, will be agreed upon by the institution and the Commission. If the teach-out plan is incomplete or if the non-compliant Standard(s) impact learner safety, appropriate instruction, fair practice or employability, or other student concerns, the Commission may choose not to recognize the voluntary withdrawal.

- (3) The program must provide documentation available to the public that the AT program has voluntarily withdrawn from accreditation.
- (4) Learners must be informed that if they graduate after the effective date of withdrawal, they will not be eligible to sit for the BOC examination (professional program) or BOC specialty examinations via the graduation from an accredited Residency Program route to eligibility (Residency Programs).
 - a. Programs must identify the location where all records for learners who have completed the program will be kept.
 - b. Once documentation has been received and accepted by the Commission, a letter will be sent from the CAATE Office to the institution recognizing the effective date of voluntary withdrawal. This letter should be kept on file by the institution. If any information is missing from the institution's letter initiating voluntary withdrawal of accreditation, that information will be requested by the CAATE Office prior to any CAATE action recognizing the voluntary withdrawal request. Programs must continue to pay the annual accreditation fee and complete annual reports until the effective date of withdrawal.
 - c. It is expected that programs will remain in compliance with ALL Standards during the withdrawal process. Programs that have non-compliances with the Standards will be required to complete Progress Reports on the non-compliant Standards until the withdrawal date.
 - d. If a program voluntarily withdraws its accreditation, the program may not submit intent to start a new program at any level (Professional, Post-Professional, Residency, Fellowship) while learners are still in teach-out.
 - e. Learners may not be admitted, enrolled, or matriculated into the program after the notification of intent to voluntarily withdraw accreditation has been accepted by the CAATE.
 - f. The institution's accreditor or other appropriate regulatory/governing body, when applicable in the absence of an institutional accreditor (e.g., private practice sponsoring a Residency Program), will be notified when a program Voluntarily Withdraws accreditation.

B. Accreditation Statuses

The CAATE accreditation status is not time limited but remains in place until a subsequent accreditation action is taken to alter a program's current accreditation status. The CAATE confers the following statuses of public recognition related to accreditation:

1. **Seeking Initial Accreditation:** Is conferred on programs after the CAATE takes action to approve the initial application. Learners who graduate from a Professional Program Seeking Initial Accreditation WILL NOT be eligible to sit for the credentialing examination for athletic trainers. Learners who graduate from a Residency Program Seeking Initial Accreditation WILL NOT be eligible to sit for the credentialing examination for specialized education and focused experience under the Board of Certification Path 1 Requirement.
2. **Initial Accreditation:** Is conferred on a program after the CAATE takes action to grant initial accreditation. This status is only awarded the first time a program receives accreditation through the CAATE. The maximum length of initial accreditation is five (5) years.

3. **Initial Accreditation - Probation:** Is conferred on a program after the CAATE takes probationary action and refers to currently accredited programs that has specific deficiencies in one or more Standards.
 4. **Initial Accreditation - Administrative Probation:** Is conferred on a program after the CAATE takes action to place programs on Administrative Probation and refers to currently accredited programs that fail to follow administrative requirements of an accredited program.
 5. **Continuing Accreditation:** Is conferred on a program after the CAATE takes action to grant continuing accreditation and refers to accreditation status conferred on programs currently accredited by the CAATE. The maximum length of continuing accreditation for programs is ten (10) years.
 6. **Continuing Accreditation - Probation:** Is conferred on a program after the CAATE takes probationary action and refers to currently accredited programs that fail to maintain compliance with the Standards.
 7. **Continuing Accreditation - Administrative Probation:** Is conferred on a program after the CAATE takes action to place programs on Administrative Probation and refers to currently accredited programs that fail to follow administrative requirements of an accredited program.
 8. **Initial Accreditation Withheld:** Is conferred on a program after the CAATE takes action to withhold initial accreditation and refers to a program in the initial accreditation period that failed to meet the necessary Standards to become accredited.
 9. **Accreditation Voluntarily Withdrawn:** Is conferred on a program after the CAATE takes action granting the voluntary withdrawal of accreditation and refers to an accredited program that has requested the voluntary withdrawal of the CAATE accreditation.
 10. **Accreditation Withdrawn:** Is conferred on a program after the CAATE takes action to withdraw accreditation and refers to a previously accredited program that has had its accreditation withdrawn for failure to meet the Standards or administrative requirements.
 11. **Continuing Accreditation - Inactive:** Is conferred on a program after the CAATE takes action to grant a program's request to become inactive and refers to an accredited program that is temporarily inactive by virtue of not having any currently enrolled learners.
- C. Public Notification of Accreditation Status
1. The public will be notified of a non-compliance when information leading to the non-compliance is readily available to the public or if a non-compliance remains after a rejoinder from a comprehensive programmatic review or annual report.
 2. The CAATE provides the public with information about a program's accreditation status on the CAATE website at <http://www.caate.net> and officially in writing upon request.
 3. The CAATE considers a program that is on Probation to retain its status as an accredited program.
 4. The CAATE discloses the probationary status of a program, including timeline and non-compliant sections of the Standards that resulted in probationary action on the website and in all responses to telephone and written inquiries. The CAATE website will reflect those changes.
- D. Use of CAATE Accreditation Status by Programs and Sponsoring Organization
1. The CAATE requires institutions and programs to be accurate in reporting to the public the program's accreditation status.
 2. Publication of a program's accreditation status must include the full name, mailing address, and telephone number of the CAATE.
 3. The CAATE requires a program and/or institution to inform all current learners and applicants in writing of the program's accreditation status in cases of change of accreditation status.
 4. If a program has not yet been accredited by the CAATE, the following statement must appear in all

- public materials (including websites): “(Name of Institution) is currently seeking accreditation for their new Athletic Training program and is not accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The program will be undergoing a comprehensive programmatic review as part of the accreditation process, which begins with submitting a self-study on July 1 for scheduling a site review during the upcoming site review cycle (October-April) upcoming year. Submission of the self-study and completion of an on-site review does not guarantee that the program will become accredited. Learners who graduate from the Professional Program prior to accreditation WILL NOT be eligible to sit for the credentialing examination for athletic trainers and will not be eligible for licensure in most states. Learners that graduate from the Residency Program prior to accreditation WILL NOT be eligible to sit for the credentialing examination for specialized education and focused experience under the Board of Certification Path 1 Requirement.
5. A Program shall not hold itself out privately or publicly to be the CAATE-accredited until it receives formal notification of a positive accreditation action and subsequent accreditation status from the CAATE.
 6. If a program has been awarded CAATE accreditation, it must use the following language when referring to that accreditation in a publicly accessible document: “(Name of program) is accredited by the Commission on Accreditation of Athletic Training Education (CAATE), 2001 K Street, NW, Washington, DC, 20006”. Programs may use the “Accredited by the CAATE” logo on official publications and websites.
 7. If a program has been placed on Probation by the CAATE, it must disclose this sanction whenever reference is made to its accreditation status in publicly accessible documents: “(Name of program) is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The program has been placed on Probation as of (date of Probation action) by the CAATE, 2001 K Street, NW, Washington, DC, 20006 (512) 733-9700.”
 8. Since Probation is a temporary status, publications that are published less frequently than once a year (e.g., catalogs) are not required to carry the above wording. However, if such publications are distributed to the program’s current learners or potential applicants, the program must ensure learners and applicants are made aware of the accreditation status of the program.
 9. Any promotional pieces, print advertisements, or areas on the program’s website that make reference to accreditation status must include the above language about the program’s Probationary status.
 10. Institutions and institution personnel improperly citing a program’s accreditation status can lead to Administrative Probation and will be subject to action by the CAATE.
- E. Using the CAATE Accredited Program Seal
1. The regular CAATE logo is reserved exclusively for use by the CAATE; unauthorized use of the CAATE logo is a violation of copyright and trademark law.
 2. Variations of the logo are available for use by the CAATE accredited programs or other persons or institutions that request, in writing, authority to use the CAATE logo(s). The CAATE logos may not be used until the user obtains written permission from the CAATE. The CAATE makes variations of its logo available for specific uses.
 3. Programs accredited by the CAATE have default permission to use the following:
 - Use of the official Accredited Program Seal
 - "This Program is accredited by the Commission on Accreditation of Athletic Training Education"
 - "Link to the Commission on Accreditation of Athletic Training Education"
 4. The Accredited Program Seal must be used exactly as they were created, without changes in color, verbiage, typeface or otherwise altering the appearance of the logo(s). The regular CAATE logo is

reserved exclusively for use by the CAATE.

VIII. APPEAL OF WITHDRAWAL OR WITHHOLD

- A. The CAATE provides a program's sponsor institution/organization the mechanism to appeal the denial of a reconsideration of a recommendation for withdrawing accreditation ("Denial of Reconsideration").

1. Procedure

1. The Chief Executive Officer of the program's sponsoring institution/organization may file a Notice of Appeal of a CAATE Denial of Reconsideration. The Notice of Appeal must be sent to CAATE's address as provided on CAATE's website, addressed to the President of CAATE and sent via recognized overnight courier or certified mail, return receipt requested. In order to be effective, the Notice of Appeal must: (i) be correctly addressed and postmarked or placed with the overnight carrier within 15 days of the date of CAATE's letter of the Reconsideration Action; (ii) must include payment of an appeal fee payable to CAATE by certified check or money order; and (iii) must include payment by certified check of any fees, if any, currently owed by the institution.
2. Upon receipt of the Notice of intent to appeal, the adverse decision will be set aside, leaving the accreditation status of the program in place until the appeal has been conducted and a decision has been rendered.
3. Within 30 days of the postmark of the Notice of Appeal or the date placed with the overnight carrier, as applicable, the program's sponsoring institution must submit an electronic copy of a statement of appeal to the CAATE office, including a statement with respect to whether the institution requests to have and attend a hearing or chooses to have the appeal decided on the written materials only ("Statement").
4. The institution has the burden of proving that CAATE's status decision was:
 - (1) Not reasonably supported by substantial evidence considering the reliable and probative evidence in the Record (as defined below) as a whole; or
 - (2) Arbitrary or capricious or characterized by abuse of discretion or clearly unwarranted exercise of discretion.
5. The CAATE will send the program's sponsoring institution the names of at least five (5) individuals who meet the requirements of an Appeal Committee member ("Committee List").
6. Within ten (10) days of receipt of the Committee List, the institution must designate to CAATE in writing three (3) of the individuals listed (in A.1.d. above) who will become members of the Appeal Committee. In the event the institution does not respond by the deadline or fails to designate three individuals, the President of CAATE will appoint, from the Committee List, as many members as are needed to create a three (3) member Appeal Committee. The President will designate one of the members to be the Chairperson.
7. After constituting the Appeal Committee, CAATE will provide each Appeal Committee member and the institution with the complete Record, the Statement submitted by the institution, and any correspondence between CAATE and the institution. CAATE may provide a written response to the Statement within a timeframe to be decided by the Appeal Committee.
8. After constituting the Appeal Committee, CAATE will schedule a hearing, if requested by the institution, within 30 days. Once scheduled, CAATE will provide notice of the date and time of the hearing to the members of the Appeal Committee and the program sponsor, with copies of the notice sent to the CAATE President. All hearings will be held at the office of the CAATE legal counsel.
9. If the institution chooses to have the appeal decided on the written materials only, the Appeal Committee will meet on a mutually agreeable date. Only the Appeal Committee, its legal

advisor, if any, will be present at such a meeting.

10. Any hearing will be conducted before the Appeal Committee and presided over by the Appeal Committee Chair according to the “CAATE Hearing Format” set forth below. The Appeal Committee will record the hearing except for any executive session or other closed deliberations of the Appeal Committee. The program representative(s) and CAATE representatives may present oral arguments in person or by telephone conference in support of their position. The Appeal Committee may ask questions of the program’s sponsoring institution/organization and/or the CAATE representative at its discretion.
 11. Any party may have a lawyer present at its sole cost and expense.
 12. Brief executive sessions may be called by the Appeal Committee to ensure its complete understanding of the information or consult with its lawyer, if any.
 13. Only facts and evidence contained in the Record may be presented to the Appeal Committee and considered by the Appeal Committee in reaching its decision.
 14. Subsequent to the hearing or meeting, as applicable, the Appeal Committee may request that the institution file additional written materials to support its position. Electronic copies of the additional materials must be sent to the CAATE Executive Office and must be postmarked or placed with the overnight carrier within ten (10) days of the adjournment of the hearing or the date of the request for additional information after a meeting, whichever is later. At the conclusion of oral arguments and questioning, the hearing will be adjourned by the Appeal Committee Chair.
 15. After the later of: (i) the adjournment of the hearing/meeting; or (ii) the receipt of additional written materials from the institution within the 10-day limit, the Appeal Committee will recommend in writing to the CAATE Board either to “deny the appeal” or “sustain the appeal” (“Recommendation”) and submit its Recommendation to the President of CAATE. The Appeal Committee may explain its Recommendation. The Appeal Committee should submit its Recommendation within twenty (20) days after the later of (i) the adjournment of the hearing/meeting; or (ii) the receipt of additional written materials from the institution within the 10-day limit; provided, however, the failure of the Appeal Committee to make its Recommendation in such time will not be the basis to sustain the appeal or grant the institution other relief.
 16. After receipt of the Recommendation, the President of CAATE will forward a copy of the Recommendation to each member of the Board and designate the manner in which the Board will arrive at its decision (regular meeting, mail ballot, conference call).
 17. If the CAATE Board’s decision is to deny the appeal, then the status of public recognition will immediately be changed to that which was originally decided by CAATE.
 18. If the decision is to sustain the appeal, then there will be no change of the accreditation status. Institutions recommended for withhold will be granted accreditation.
 19. The President will notify the institution/organization of the decision of the Board.
 20. The decision of the Board will be final and is not subject to further appeal.
2. Hearing Format
1. Hearing called to order by the Appeal Committee Chair.
 2. Introduction of Appeal Committee Members and other attendees.
 3. Appeal Committee Chair makes opening statement and reads the Confidentiality Statement.
 4. Review of Hearing Ground Rules:
 - (1) Only information and evidence about the conditions of the program available to the CAATE when it formulated its Denial of Reconsideration and information submitted through

Reconsideration of that recommendation may be considered.

- (2) The institution/organization may not present new, revised, or updated information or evidence that was not available to the CAATE for its recommendation or reconsideration of that recommendation.
 - (3) The purpose of the hearing is to determine whether the record of information and evidence available to CAATE at the time CAATE formulated its Denial of Reconsideration supports the decision.
5. Appellant's oral presentation (not to exceed 30 minutes, from which Appellant may reserve time to respond to CAATE's presentation).
 6. Committee's clarification of appellant's presentation.
 7. CAATE's oral presentation (not to exceed 30 minutes).
 8. Committee's clarification of CAATE's presentation.
 9. Appellant's response, if any, utilizing time reserved from Appellant's initial oral presentation.
 10. Recess for Committee Executive Session to review the material presented.
 11. Additional clarification from attendees, if needed.
 12. Review of the timetable of remaining steps in appeal.
 13. Chair's concluding remarks.
 14. Hearing Adjourned.

IX. ANNUAL FEES

A. Establishment and Review of Fees

1. The CAATE assesses fees that are necessary and reasonable. These fees are established by the CAATE Board and assessed annually to each accredited program at the sponsoring institution/organization.
2. The Commission will review all fee increases in order to determine if they are reasonable.
3. The Commission will make an appropriate announcement of a change in its fee structure in advance of implementation.

B. Invoices

1. An invoice will be addressed to the Program Director and Department Chair (or another administrative designated recipient). Annual fees will be invoiced by August 1st and are due upon receipt.
 1. Payments beyond 60 days will result in a late fee of \$200.
 2. If any of the fee deadlines fall on a weekend or holiday, the date due will be the first business day following the stated due date.

C. Multiple Programs and multi-sites at an Institution/Organization

1. Institutions/organizations that sponsor multiple accredited programs must pay the annual fee for *each* program.
2. Institutions/organizations that add additional locations (e.g., satellite location) must pay the annual fee for each location.

D. Late Payments

1. Procedures for Those Institutions/Organizations Failing to Pay Fees
 - a) Sponsoring institutions/organizations that do not respond and/or that remain unpaid as of 60 days past the invoice date will be charged an additional \$200 late fee.
 - (1) Failure to pay by fees within 90 days will result in a change of accreditation status to

Administrative Probation. This Probation action may not be appealed. Notification of Probationary status MUST be published on the program website and will be published on the CAATE website until full payment plus late fees is received.

2. All fees paid to the CAATE for accreditation services, annual fees, programmatic reviews, or for other services provided by the CAATE are non-refundable. If errors are made in fee payment, it will be the responsibility of the appropriate party to notify the other of the error.
 1. It will be the responsibility of the institution/organization to notify the CAATE of overpayments made in error. The amount of overpayment will be credited to the institution's account with the CAATE; however, no monies will be returned to the institution.
 2. If an institution/organization has underpaid a required fee, it will be the responsibility of the CAATE to notify the institution and request additional payment.
3. Programs which have been granted inactive status are subject to a 50% reduction of their annual fees. All inactive programs with reduced fees will be held liable to the same invoicing processes, payment deadlines, and late fees as outlined above.

X. REQUESTS FOR EXTENSION:

A. Procedures

1. The following procedures are in place for Requests for Extension of any materials required by the CAATE (e.g., Self-Study, Rejoinder, Annual Reports, Appeals).
2. The CAATE recognizes that circumstances arise that may impact an institution's ability to comply with deadlines set forth by the CAATE. Circumstances with unforeseeable and/or extenuating causes beyond the program's control may be granted an extension for a maximum time limit determined by the CAATE. Failure to comply with all extended deadlines granted by the CAATE may result in administrative probation.
3. It is the responsibility of the institution/organization to notify and correspond with the CAATE as soon as the need is recognized but no later than three months in advance of the required submission date. Requests made later than this deadline will require additional documentation, as explained below. All requests must be made formally from the Program Director and the appropriate administrator, or appropriate administrators should the Program Director be incapacitated, and must include all information requested below:
 1. Indicate the type of deadline change (e.g., self-study, annual report), institution name, and Program Director name.
 2. Provide an explanation that will contain all vital information needed by the CAATE to render a decision. In cases where medical conditions exist, provide only the necessary information; extensive personal and/or medical information need not be submitted.
 3. Explain how the requested extension will impact current and future learners.
 4. In the event that the extension request includes the incapacitation of a faculty or clinical staff member, provide information on how the program will accommodate that situation and how learning will be affected. This information may include such adjustments as changes in faculty/staff loads/responsibilities, job descriptions, or other accommodations. If additional athletic training faculty/staff are hired on a permanent or temporary basis, the program also must provide a Curriculum Vita/Resume for each individual, with the exception of the program director, for whom additional documentation is required in accordance with the Standards.
 5. Include the signatures of both the appropriate institutional administrator, as well as the Program Director.
 6. In cases where requests are submitted later than the required three- month time frame, provide an explanation as to the rationale for being submitted at the later time.

B. Extension Granted Procedures:

1. In the event, the CAATE grants an extension of the next comprehensive review cycle, the following procedure must be completed by the institution/organization:
 1. Submit a completed “Limited Self-Reported Program Change of Status Report” by the due date established by the CAATE, including all supporting documentation requested. This report will be for the current academic year in which the extension granted covers.

XI. REPORTING PROGRAM CHANGE:

A. Change of Personnel

1. Changes in program personnel, with the exception of the program director, may be made directly in e-Accreditation by the program. Failure to do so may result in the program being placed on Administrative Probation.
2. Program Director Changes and Documentation Requirements
 1. Institutional/organizational administrators who have the authority to speak on behalf of the institution are responsible for notifying the CAATE within 30 days of the anticipated departure or actual departure of the Program Director. Failure to do so will result in the program being placed on Administrative Probation.
 2. Program Director changes must be completed through the online accreditation platform according to the instructions below:
 - (1) Vacancy/New Hire
 - i. Institution/organization administrator uploads a formal letter to the CAATE on institutional/organizational letterhead in e-Accreditation through the Substantive Change Tab informing the CAATE about the change in program leadership. This letter must include:
 - ii. The effective date of departure and person being named as the replacement.
 - iii. The full name and credentials of the person being named as Program Director.
 - iv. Verification, signed and dated by the Dean or Medical Director, that the new Program Director is a full-time faculty member or employee who has all the rights, privileges and responsibilities of a full-time faculty member or employee as described in the CAATE Standards.
 - v. Complete contact information for the new Program Director.
 - vi. Verification of the Program Director qualifications as outlined in the Standards.
 - (2) Interim Program Director or Official Hire
 - i. A letter of acceptance for the new Program Director with start date, contact information, including address, phone, fax, and email.
 - ii. The new Program Director’s current curriculum vitae or resume.
 - iii. Verification of the new Program Director’s qualifications as outlined in the Standards.
 - iv. A copy of new Program Director’s BOC card verification
 - v. A copy of the new Program Director’s state practice credential if applicable.
 - vi. Proof that that the new Program Director is a full-time faculty/employee with privileges and responsibilities as described in the Standards.
 - (3) Current Faculty/Staff Promotion
 - i. If an existing faculty/staff moves into the Program Director position and another person is added to the faculty/staff in an existing faculty member’s slot, then the

institution/organization must provide the new faculty member's qualifications in the within e-Accreditation, documentation of BOC certification, and state practice credential. This individual should fulfill the qualifications as defined by the Standards.

- B. Change in institution accreditation status (by a recognized accreditor – professional programs only).
- C. Change in the institution's or program's ownership, control, or legal status.
- D. Change in program resources from the organization
- E. Programs that pause student/learner admissions
- F. Addition of multi-campus program site(s)
- G. Programs that wish to apply for inactive status
- H. Programs that wish to apply for Voluntary Withdrawal
- I. [Substantive Change: Program Transition from Residency to Fellowship or Fellowship to Residency](#)
- J. Other substantive program changes to be noted on the Annual Report (electronically) can be found on the CAATE website.
- K. [Professional Programs](#)
- L. [Residency & Fellowship Programs](#)

I. COMPLAINTS REGARDING CAATE ACCREDITED PROGRAM

- A. The CAATE will review formal consideration of complaints only if related to the Standards or established policies.
- B. The CAATE emphasizes that it will not intervene on behalf of individuals or act as a court of appeal for faculty members or learners in matters of admission, appointment, promotion, or dismissal. It will act only when it believes practices or conditions indicate the program may not be in compliance with the Standards or with established accreditation policies.
- C. CAATE maintains two separate records of complaints:
 - 1. An official record is maintained of all complaints received.
 - 2. The Program affected by the complaint shall have the record maintained in the Program's file for five (5) years following the resolution of the complaint before moving to the archives.
- D. Procedure:
 - 1. To receive formal consideration, all complaints shall be submitted in writing and signed, either by mail or electronically. The complaint should demonstrate that substantive efforts have been made to resolve the complaint.
 - 2. When received by the CAATE office, complaints are reviewed by staff, and additional information is obtained from the complainant as necessary.
 - 3. Following consultation among staff, the President or Executive Committee determines whether the complaint relates to the manner in which the program complies with the Standards or follows established accreditation policies.
 - 4. If the complaint does not relate to the Standards or to established policies, the person initiating the complaint shall be notified accordingly by the CAATE office within 20 working days following receipt of the complaint. A copy of this correspondence shall be shared with CAATE.
 - 5. If the complaint does relate to the Standards or to established policies, the Executive Director shall acknowledge receipt of the complaint within 20 working days and share with the filing party a

description of the process and policies that pertain to handling such complaints.

- a. The President shall notify the Program Director and the administrator of the sponsoring institution/organization of the substance of the complaint and shall request a preliminary investigation and report on the findings within 30 days of the sponsoring institution/organization's receipt of the letter of notice.
 - b. The President may request further information or material relative to the complaint from the complaining party, the institution, or other relevant sources.
 - c. The CAATE office must receive copies of this correspondence.
 - d. The identity of the complaining party shall be kept confidential unless the complainant authorizes disclosure of their identity or unless such disclosure is required by legal process in a subsequent proceeding.
6. Upon receipt of the responses referred to above, the CAATE Executive Committee shall consider the complaint and all relevant information obtained during the investigation and formulate an appropriate action according to the following guidelines:
- a. If the complaint is determined to be unsubstantiated or unrelated to the Standards or established accreditation policies, the complaining party, officials of the program in question, and the appropriate official of the sponsoring institution will be notified within ten (10) days of the completion of the investigation.
 - b. If the investigation reveals the program may not be or may not have been in compliance with the Standards or may not have been following the established accreditation policies, one of two approaches shall be taken.
 - (1) The program may submit a report and documentation within 30 days following the investigation, demonstrating the manner in which the substantiated complaint has been corrected. Should the CAATE be satisfied with the response, the program, its sponsoring institution/organization, and the party filing the complaint should be notified of the CAATE's satisfaction with the resolution of the matter and notice that the program's accreditation status remains unaffected by the complaint.
 - (2) Should the CAATE judge the program or sponsoring institution/organization's response to the complaint inadequate and lacking in evidence of the program's continuing substantial compliance with the Standards or adherence to accreditation policies, the CAATE may request and arrange for a focused programmatic review of the program as soon as reasonably feasible, but not more than 30 days following the investigation. The purpose of the review shall be limited to an investigation of the complaint and the manner in which it affects compliance with the Standards or with accreditation policies. The cost of the review shall be borne by the CAATE.
 - (3) Should the CAATE, on evidence received through the return on-site evaluation, consider the program to remain in substantial compliance with the Standards and in adherence with accreditation policies, the program, its sponsoring institution/organization, and the complaining party shall be notified of this assessment and the program's current accreditation status shall remain unaffected by the complaint.
 - (4) Should the CAATE consider the evidence of the programmatic review to indicate the complaint is valid and the program is not in compliance with the Standards or with accreditation policies, the said committee shall recommend a change in accreditation status.

II. ETHICAL STANDARDS

INTRODUCTION

This Governance Code of Conduct (the “Code”) applies to all Commissioners, Officers, and Committee Members (“Leaders”) of The Commission on Accreditation of Athletic Training Education (the “CAATE” or “organization”), as well as others where incorporated by reference into an executed agreement. The Code is a statement of goals and expectations for Leaders’ behavior in governing the CAATE. All affected Leaders of the CAATE are expected to read the Code, understand it, and comply with its letter and spirit. Together with other applicable guidelines or policies of the CAATE, compliance with this Code will help protect the CAATE’s reputation for honesty and integrity.

The overarching obligation of Leaders is to act in the best interests of the organization and to carry out their fiduciary duty to the organization. That fiduciary duty encompasses several component duties:

- A. **The Duty of Care:** The Duty to Act Honestly, Reasonably, and in Good Faith.
- B. **The Duty of Obedience:** The Duty to Faithfully Pursue the Organization’s Mission.
- C. **The Duty of Loyalty**, which includes:
 - 1. The Duty to Maintain the Confidentiality of Information that the Organization Deems Confidential;
 - 2. The Duty to Disclose and Avoid Conflicts of Interest; and
 - 3. The Duty to Refrain from Expropriation of Corporate Opportunities.

This Code presents some specific examples of how Leaders are expected to comply with their fiduciary duties to the organization. In some circumstances, the Code may impose heightened standards of conduct that exceed what the law demands. The Code does not and cannot address every possible situation, however; the conduct of Leaders should, in every situation, be governed by the expectations that spring from their fiduciary duty to the organization.

A. STANDARDS OF CONDUCT

1. Duty to Act Honestly, Reasonably, and in Good Faith

Leaders must act with the care an ordinarily prudent person in like position would exercise under similar circumstances. This means that Leaders must act honestly, reasonably, diligently, on an informed basis and in good faith. Leaders can and should delegate to and reasonably rely on staff and advisers with particular expertise, such as accountants and lawyers; they are not required to – and shouldn’t – perform all activities or do all the research or investigation themselves.

2. Duty to Faithfully Pursue the Corporation’s Mission

Leaders must faithfully pursue the corporation’s mission as stated in the organization’s governing documents and in the policies adopted by the Board of Commissioners.

3. Confidentiality

All Leaders are responsible for safeguarding and keeping confidential any information that the organization considers to be of a confidential or sensitive nature. Such information includes, but is not limited to, financial records and reports, marketing and strategic planning information, employee-related documents, and other materials that the organization would not want disclosed to an unauthorized recipient, or that might be harmful to the organization or its constituents if disclosed, whether or not such information is marked “confidential.” Confidential information also includes information concerning possible transactions with other organizations or individuals or information about the organization’s accredited programs, suppliers or contractors, which the organization is under an obligation to keep confidential. Discussions at meetings of the Board of Commissioners or Board committees, councils, or task forces are presumptively confidential, unless and until the organization

decides to disclose such information. Information contained in the minutes of such meetings is not presumed to be confidential. Leaders must exercise caution and discretion with respect to any appropriate temporary removal of confidential or sensitive information from the organization's premises and must safeguard the information from unintended disclosure or loss. Leaders should not discuss with or disclose to any third-party, even family members or other constituents of the organization, Board proceedings or deliberations or other non-public information of the organization or its constituents to which they have access in their capacity as a Leader of the organization.

4. Conflicts of Interest

A conflict of interest arises when a Leader of the organization may benefit financially from a decision or vote he or she could make in that capacity, including indirect benefits such as to family members or businesses with which the person is closely associated.

Leaders must annually disclose or update to the President (or, in the case of the President, to the Secretary/Treasurer), on a form provided by the organization, any interests that could give rise to conflicts of interest, such as substantial business or investment holdings, and other transactions or affiliations with businesses and other organizations by the Leader or his or her family members, if those interests could be affected by the decisions or actions of the organization.

For each interest disclosed, the President (or Secretary/Treasurer) will determine whether to: (a) take no action; (b) assure full disclosure to the Board of Commissioners and other individuals covered by this policy; (c) ask the person to recuse from participation in related discussions or decisions within the organization; or (d) ask the person to resign from his or her position in the organization or, if the person refuses to resign, become subject to possible removal in accordance with the organization's removal procedures.

The organization's Executive Director will monitor proposed or ongoing transactions for conflicts of interest and disclose them to the President in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred.

5. Corporate Opportunities

No Leader of the organization shall, for personal or any other person's or organization's gain, deprive the organization of any business opportunity or benefit which could be construed as related to any existing or reasonably anticipated future activity of the organization. Leaders who learn of any such opportunity through their involvement with the organization may not disclose it to a third party or invest in the opportunity unless and until they have first offered it to the organization and the organization has rejected the opportunity.

6. Financial Record-Keeping

Leaders are expected to submit accurate documentation and receipts for all expenses or other payments that are charged to the organization.

7. Improper Payments

No Leader may ever authorize or pay or use any funds or assets for a bribe, "kickback," or similar payment. Prohibited payments are those intended to directly or indirectly benefit any person or organization (including any governmental organization or official) rather than serving as payment for

contracted services or other approved purposes. No Leader may, in connection with their position in the organization, offer or give any gift or business entertainment of any kind to any government employee without the prior written approval of the President or other officer as designated by the Board.

8. Acceptance of Payments

Leaders may not seek or accept, either directly or indirectly, any payments, fees, services, or other gratuities (other than, with respect to employed Officers, in the normal course of the employee's business duties) from any other person or organization that does or seeks to do business with the organization. Gifts of cash or cash equivalents of any amount are strictly prohibited. Routine dividends and other returns on investments from publicly traded securities are permissible. The receipt of common courtesies, sales promotion items of nominal value, occasional meals, and reasonable entertainment are also permissible to the extent that such payments or favors are commonly provided, appropriate to a business relationship, and associated with business discussions, but they must not be solicited or requested by the Leader.

9. No Harassment or Discrimination

Leaders should refrain from conduct that is discriminatory, harassing, coercive, or disruptive, including sexual harassment, in their dealings with CAATE staff, consultants, applicants, vendors, volunteers, or other individuals who provide support to CAATE or with whom they interact due to their position with CAATE. For purposes of this policy, prohibited harassment includes unwelcome actions, words, jokes, or comments based on any legally protected characteristic, such as an individual's sex, race, color, national origin, age, religion, mental or physical disability, sexual orientation, gender identity or expression, pregnancy, or military or veteran status. Some examples of impermissible behavior include making fun of an individual's religious beliefs, using racially biased epithets, making uninvited sexual advances or propositions, telling obscene jokes, discussing sexual activities, or engaging in unwelcome physical conduct, including touching, assaulting, or impeding or blocking movements. Leaders should not initiate physical contact that could reasonably be interpreted as a sexual overture when interacting with CAATE staff, applicants, or contractors. In evaluating whether verbal or other conduct may be unwelcome, Leaders must be mindful of any actual or perceived power differential and should not initiate discussions of sexual or potentially offensive topics with others performing CAATE work unless the Leader has an objective basis for expecting that the individual would not consider the remarks unwelcome. When determining the appropriateness of interactions with others in their capacity as a Leader, Leaders may also take into consideration whether they have a preexisting friendship or other independent collegial relationship with the individual in which the individual has treated similar interactions as welcome.

10. Fair Dealing

Leaders are expected to conduct their business dealings and their organization-related actions with integrity and honesty and a high level of ethics. Conduct by a Leader that calls into question his or her integrity, honesty, or ethics, even if such conduct does not directly relate to his or her role with the organization, may be grounds for disciplinary action against the Leader or for removal from the Board or relevant committee.

11. Compliance with Laws, Regulations, and the Organization's Policies and Procedures

Leaders are required to comply with all applicable laws, regulations, and the organization's policies and procedures. Violation of laws and regulations may subject an individual, as well as the organization, to civil and/or criminal penalties. Leaders should promptly alert the organization to any deviation from

applicable laws, regulations, or policies and procedures.

12. Duty to Report Violations or Threats to the Organization

Each Leader is responsible for promptly reporting to the Board any circumstances that such person believes in good faith may constitute a violation of the organization's policies or any unlawful conduct that may negatively impact the organization. Such reports may be oral, written or by e-mail, and may be made anonymously. Reports should be made in accordance with the organization's Whistleblower Policy and/or other relevant policies and procedures.

13. Social Media and Communications

Social media continues to expand its presence in our professional and personal lives. The CAATE recognizes that social media provides powerful, widely used avenues for communication, interaction and information gathering. Personally, we utilize social media to monitor news, stay in touch, make new connections, or be entertained. In a professional context, we are also finding ways to use social media to drive growth and maintain strong networks. In order to adhere to the confidentiality standards, set forth in this agreement, we established the following guidelines for appropriate use of social media.

Leaders shall (a) maintain the confidential information as described in Section 2. Such items may include information regarding the development of systems, processes, products, templates, know-how, and technology. Do not post internal reports, financial information, policies, procedures, or other internal business-related confidential communications; (b) be respectful and courteous to fellow CAATE Leaders, staff, and any other organizations or people associated with the CAATE; (c) express only your personal opinions and never represent yourself as a spokesperson for the CAATE; and (d) leaders should not speak to the media on the CAATE's behalf without prior approval from the Board of Commissioners. All media inquiries should be directed to the CAATE office.

B. Adjudication

1. Reporting Ethical Issues

- a. Athletic trainers or other individuals representing CAATE or participating in a CAATE accredited program must be familiar with the CAATE Code of Ethics. Lack of awareness or misunderstanding of Ethical Standards is not a defense to a charge of unethical conduct.
- b. When an athletic trainer or other individual serving as a representative of CAATE or one of the programs it accredits violates any Ethical Standard, an investigatory process will entail. If an athletic trainer or other individual serving as a representative of CAATE during a site review or review of accreditation materials encounters obvious illegal acts, there is an obligation to report such violation to the CAATE President.
- c. If an athletic trainer, athletic training student, college administrator, or other individual is uncertain whether a particular situation or course of action violates the CAATE Code of Ethics, the person should first contact the CAATE office where the correspondence will be referred to the CAATE President and the CAATE Ethics Committee Chair.

2. Ethical Violations of CAATE Representatives or program faculty/staff.

- a. If, during an official site review or other activities under the auspices of CAATE, any representative or program staff violates an Ethical Standard of CAATE, disciplinary action could occur.
- b. Reports of violations may be submitted by any athletic trainer, athletic training student,

administrator, or other individual for any activity under the auspices of CAATE.

- c. Alleged violations must be submitted in writing via the CAATE office, to the CAATE President, postmarked within 2 weeks of the incident. Failure to report violations shall be considered a breach of CAATE's Ethical Standards.
- d. If the CAATE President, in consultation with the CAATE Ethics Committee Chair, deems the violation/s has/have merit, a subcommittee will be appointed (i.e., CAATE Ethics Review Panel) consisting of three individuals on the CAATE Ethics Committee to evaluate the merits of the allegation(s).
- e. Initial disciplinary actions may include removal as a peer reviewer, revocation of CAATE committee membership, and/or program probation sanctions for a period of up to 5 years.
- f. Any violation of state licensure acts, BOC Standards Practice or NATA Code of Ethics shall be reported to the appropriate agency(ies).

C. Full Investigative Procedures

1. If the CAATE President, in consultation with the CAATE Ethics Committee Chair, determines a violation may exist, he/she will convene a sub-committee comprised of up to three committee members from the CAATE Ethics Committee to conduct an investigation to clarify, expand, or corroborate the information provided by the submitted individual. This sub-committee shall be referred to as the CAATE Ethics Review Panel. At this time, the person who potentially violated the CAATE Code of Ethics will be notified by the CAATE Ethics Review Panel in writing, stating: (a) the nature of the allegation, (b) the obligation to cooperate fully in the investigation and (c) the opportunity to request a hearing on the challenge before the CAATE Ethics Review Panel. This notification will be given to the subject of the allegation by certified mail from the CAATE office.
2. Should a Commissioner of CAATE or the Chair of the Ethics Committee be named in the complaint, this/these individual(s) will be administratively released of their CAATE duties/responsibilities until such time that the complaint is fully investigated and resolved. Should the complaint involve a Commissioner, other existing CAATE Policies and Procedures will be instituted to resolve the change in responsibility, and an appropriate replacement will be named.
3. Investigations involving challenges are conducted in confidence, with all written communications sealed and marked "Personal and Confidential" and conducted objectively, without any indication of prejudgment. An investigation may be directed toward any aspect of an inquiry or challenge that is relevant or potentially relevant.
4. The CAATE Ethics Review Panel will investigate all claims, interview necessary persons or other duties as deemed necessary. The investigation will take place within 30 days of submission of materials from the CAATE Ethics Chair/CAATE President to the CAATE Ethics Review Panel.
5. If, after completion of the investigation by the CAATE Ethics Review Panel, there is a preponderance of evidence indicating the subject of the allegation failed to meet a provision (or provisions) of the CAATE Code of Ethics, an advisory opinion will be written by the CAATE Ethics Review Panel interpreting their findings and the specific code violation. This opinion will be submitted to the CAATE President/Commission, who may accept, reject, or modify any recommendations made by the CAATE Ethics Review Panel. If there is insufficient evidence to formally act on the allegation, the CAATE Ethics Review Panel will send a recommendation of "No Action" to the CAATE President/Commission.
6. The advisory opinion submitted by the CAATE Ethics Review Panel to the CAATE President/Commission shall also identify a recommended sanction for the violation. Any of the following sanctions may be imposed on the individual found in violation of a provision (or provisions) of the CAATE Code of Ethics: a) admonition, b) reprimand, c) administrative suspension, and d) suspension for a designated period.

D. Ethics Violation Appeals

1. Only the individual who is being investigated may appeal an adverse decision. If the individual requests an appeal, the CAATE President will convene a second, independent panel (i.e., the CAATE Ethics Appeal Panel). The CAATE Ethics Appeal Panel will consist of any three or more Ethics Committee members or members from the Annual Report Committee, other than (a) the CAATE President or other CAATE Commissioner, (b) CAATE Ethics Committee members who assisted substantially in the initial investigation (i.e., on the Ethics Review Panel), and (c) any CAATE Ethics Committee or Annual Report Committee member who has a significant relationship with the appellant. The CAATE Ethics Appeal Panel and the appellant may call witnesses, who are subject to cross-examination and questioning by the CAATE Ethics Appeal Panel and the appellant. During the appeals process, the CAATE President may confer with legal counsel to determine the continued status of the individual with the CAATE.
 2. To request a hearing before the CAATE Ethics Appeals Panel, the appellant shall notify the CAATE Executive Office by certified mail, return-receipt requested, that the individual wishes to appeal the decision. The CAATE Executive Office shall then notify the CAATE President and Chair of the Ethics Committee of the request for appeal. This notification must be received within thirty (30) calendar days after receipt of the letter advising the appellant of the CAATE's decision following the full investigation.
 3. The appeal must comply with the following: a) The decision being appealed, b) The date of the decision, c) Why the individual feels the decision is wrong or was improperly rendered, d) The redress sought by the individual.
 4. The CAATE Ethics Appeals Panel will review the initial complaint, full investigation procedures, findings of the full investigation and actions taken by the CAATE as well as any additional information presented by the appellant. The Ethics Appeals Panel shall then submit an advisory opinion regarding the appeal and recommend to the CAATE Commissioners one of the following actions:
 - a. Dismiss the original complaint and findings and set aside the original action taken;
 - b. Reopen the investigation and request additional information;
 - c. Uphold the original findings but modify the sanctions, e.g., reduce or increase level of discipline or modify requirements; or
 - d. Uphold the original findings and sanctions.
 5. Recommendations to the CAATE Commissioners from the Ethics Appeal Panel and the Commissioners' decision regarding the appeal are final and binding.
 6. The appellant shall be notified by the CAATE President through certified mail of final action of the appeals process within 30 calendar days of the Commissioners' final decision.
- D. Maintenance of Records of Closed Ethics Investigations
1. The records for all ethics investigations found to have merit shall be sealed in an envelope with only the name, action taken and date of final action on the outside. The CAATE Office maintains the records. Scanned copies of these documents may also be maintained following current practice of the CAATE. This record is to be kept indefinitely. Any records associated with an investigation that is dismissed without action will be destroyed.

GLOSSARY

Accreditation Status

Accreditation Voluntarily Withdrawn: Is conferred on a program after the CAATE takes action granting the voluntary withdrawal of accreditation and refers to an accredited program that has requested the voluntary withdrawal of the CAATE accreditation.

Accreditation Withdrawn: Is conferred on a program after the CAATE takes action to withdraw accreditation and refers to a previously accredited program that has had its accreditation withdrawn for failure to meet the Standards or administrative requirements.

Continuing Accreditation: Is conferred on a program after the CAATE takes action to grant continuing accreditation and refers to accreditation status conferred on programs currently accredited by the CAATE. The maximum length of continuing accreditation for programs is ten (10) years.

Continuing Accreditation - Administrative Probation: Is conferred on a program after the CAATE takes action to place programs on Administrative Probation and refers to currently accredited programs that fail to follow administrative requirements of an accredited program.

Continuing Accreditation - Inactive: Is conferred on a program after the CAATE takes action to grant a program's request to become inactive and refers to an accredited program that is temporarily inactive by virtue of not having any currently enrolled learners.

Continuing Accreditation - Probation: Is conferred on a program after the CAATE takes probationary action and refers to currently accredited programs that fail to maintain compliance with the Standards.

Initial Accreditation: Is conferred on a program after the CAATE takes action to grant initial accreditation. This status is only awarded the first time a program receives accreditation through the CAATE. The maximum length of initial accreditation is five (5) years.

Initial Accreditation - Administrative Probation: Is conferred on a program after the CAATE takes action to place programs on Administrative Probation and refers to currently accredited programs that fail to follow administrative requirements of an accredited program.

Initial Accreditation - Probation: Is conferred on a program after the CAATE takes probationary action and refers to currently accredited programs that have specific deficiencies in one or more Standards.

Initial Accreditation Withheld: Is conferred on a program after the CAATE takes action to withhold initial accreditation and refers to a program in the initial accreditation period that failed to meet the necessary Standards to become accredited.

Seeking Initial Accreditation: Is conferred on programs after the CAATE takes action to approve the initial application. Learners who graduate from a Professional Program Seeking Initial Accreditation WILL NOT be eligible to sit for the credentialing examination for athletic trainers. Learners who graduate from a Residency Program Seeking Initial Accreditation WILL NOT be eligible to sit for the credentialing examination for specialized education and focused experience under the Board of Certification Path 1 Requirement.

Other Terms

Accreditation Record - All written materials available to the CAATE Board when it formulated its status of public recognition and through Reconsideration of that recommendation.

Accreditation Standards - A qualitative measure used in assessing a health science education program's compliance with established national norms as described in a document called Standards.

Adverse Accreditation Decision - A CAATE action of Withhold Accreditation or Withdraw Accreditation.

Appeal Committee Member - An individual, recommended by the CAATE, who has knowledge of the relevant profession, is familiar with accreditation process, has a working knowledge of the appropriate Standards as well as the type of institution sponsoring the health science education program and has no relationship past or present with the program sponsor or the accreditation process leading to the decision being appealed.

Basis of Appeal - The program sponsor must show that regarding CAATE's decision: 1) the record does not support the decision; and/or 2) due process and proper procedure were not followed.

(The) Board or Commission- the voting part of CAATE, consists of 6 ATs, 3 sponsoring organization members, 1 public member and 1 administrator member.

Day - a calendar day.

Executive Committee - the Officers: President, President Elect, Treasurer/Secretary and Executive Director.

Executive Office- Commission on Accreditation of Athletic Training Education (CAATE), 2001K Street, NW, Third Floor North, Washington, DC 20006

Notice of Appeal - A letter addressed to the President of CAATE from the Chief Executive Officer of the program sponsor requesting an appeal of an adverse accreditation decision by CAATE.

Program Sponsor - The organization that requested the accreditation services for the program on which the CAATE adverse accreditation action was taken.

Proper Notice - All correspondence, notices, and other materials exchanged between the participants of an appeal shall be by Certified Mail-Return Receipt Requested or by next day delivery.

Reconsideration - A second consideration of a status of public recognition recommendation, based on the conditions that existed when the CAATE formulated its original recommendation and on subsequent documented evidence of corrected deficiencies at the time of the second consideration. Reconsideration is available when a recommendation of probation, withhold, and withdraw accreditation occurs.

Sponsor of CAATE - An organization that establishes or supports the Commission through representation on the Board.

Statement of Appeal - The substance of the appeal by a program sponsor comprised of the entire, point- by-point basis upon which the institution believes the CAATE action should be reversed.



Appendices



CAATE

CONFIDENTIALITY AGREEMENT

CAATE Committees, Commission, Liaisons, Volunteers and Staff

I hereby attest that I have read and I understand Section XIII of the CAATE Policy & Procedures Manual regarding Ethical Standards of Practice, and I agree to comply by all policies outlined therein.

Additionally, I attest that I shall hold as strictly confidential all information related to accreditation activities. As a CAATE representative or liaison, I agree to:

- Not disclose private matters learned about an institution or its personnel.
- Maintain confidentiality of all written materials provided and submitted.
- Recuse myself from discussions/voting in a case of a conflict of interest or a potential conflict of interest
- Agree that any material developed by me for the CAATE will be the property of the CAATE
- Be fiscally responsible when traveling on behalf of the CAATE
- Never represent myself as a spokesperson for the CAATE, speak to the media on CAATE's behalf without prior approval from the Board of Commissioners, and express only my personal opinions not related to my role with CAATE on any social media platform or any other public forum.

The terms of this Ethics Statement are effective immediately and shall apply to all work performed by me in carrying out my responsibilities as a CAATE representative.

Name (Please Print)

Signature

Date



CONFIDENTIALITY AGREEMENT

CAATE Peer Reviewers

I hereby attest that I have read and I understand Section XIII of the CAATE Policy & Procedures Manual regarding Ethical Standards of Practice, and I agree to comply by all policies outlined therein.

Additionally, I attest that I shall hold as strictly confidential all information related to accreditation activities. As a CAATE representative or liaison, I agree to:

- Not disclose private matters learned about an institution or its personnel.
- Maintain confidentiality of all written materials provided and submitted.
- Recuse myself from discussions/voting in a case of a conflict of interest or a potential conflict of interest
- Agree that any material developed by me for the CAATE will be the property of the CAATE
- Be fiscally responsible when traveling on behalf of the CAATE
- Not recruit potential personnel from the institution being visited.
- Not accept any gratuity from the institution being visited (i.e. small gifts, business wares and/or products).
- Not promote self as a potential consultant or employee of the institution being visited.
- Present the facts as validated by the visit.
- Not compare the program and/or institution being visited with any other program and/or institution.
- Submit all required documents in the time frame and format described within CAATE documents.
- Adhere to the social media and communications policy when interacting on public media platforms

The terms of this Ethics Statement are effective immediately and shall apply to all work performed by me in carrying out my responsibilities as a CAATE representative.

Name (Please Print)

Signature

Date



ASSIGNMENT OF RIGHTS

FOR INDIVIDUALS RECEIVING NO COMPENSATION FROM THE CAATE

I am a contributor to:

(the “Work”), a project of the Commission on Accreditation of Athletic Training Education (CAATE), located at 2001 K Street, NW, Washington, DC 20006. I have received no compensation from the CAATE for the contribution of my portion of the Work. For purposes of this Assignment of Rights Agreement, I understand that the CAATE includes not only the CAATE as a corporation, but also any affiliated organizations and any employees, agents, licensees and assignees of the CAATE.

I agree that the Work may be published or otherwise used by the CAATE to further its educational endeavors.

By signing this Agreement, I understand that I am giving the CAATE whatever ownership interests I have or may have in the copyright of the Work, including the rights to any illustrations or photos I have prepared, submitted or developed. Specifically, by signing this Agreement, I understand that:

I am giving the CAATE the entire worldwide right, title, interest, ownership and all subsidiary rights I have or may have in the Work; and

I have retained no personal or proprietary rights in the Work; and

I have given the CAATE any future rights to commence any legal action or to recover damages and other relief resulting from infringement of the copyright in the Work.

I have no knowledge of any lawsuits, claims or demands relating to my portion of the Work nor have I conveyed or assigned any claim, potential claims or any part of my portion of the Work to any person or organization other than the CAATE.

I am the sole author of my portion of the Work and the owner of all rights granted in this Agreement. My portion of the Work has not been previously published.

I warrant to the CAATE that my portion of the Work is original and does not violate or infringe on the rights of another person or organization. I warrant that my portion of the Work contains nothing libelous, injurious or untrue.

I understand that the CAATE may edit my portion of the Work for publication or other uses. If the CAATE accepts this Assignment of Rights, I understand that the CAATE does not bind itself to use my portion of the Work in its original form or in its entirety.

I understand that if my portion of the Work contains patient-identifiable information, I warrant that I have obtained all necessary permissions and/or adhered to all requirements under state and federal privacy laws

and regulations (including the HIPAA privacy regulations).

Original signatures by electronic transmission (facsimile or email with PDF attachment) shall be sufficient and binding upon the parties hereto.

By:

Signature

Contribution to Work (Article, Video or Presentation)

Printed Name

Date

Approved 07/11/2013