



## CAATE Update on the Coronavirus: March 11, 2020

The Commission on Accreditation of Athletic Training Education (CAATE) continues to monitor the impact of Coronavirus (COVID-19). Previously, the Commission released a limited statement regarding [travel](#), but provides further information here specific to potential impacts on the delivery of athletic training programs. As concerns regarding the spread of Coronavirus throughout the U.S. rise, many institutions and entities are developing their own unique Coronavirus guidelines and response plans. For instance, many institutions of higher education are moving to mandatory distance learning and some clinical education sites are restricting access for non-essential personnel, such as student learners. Subsequently, Athletic Training programs may be impacted in a variety of ways and programs are appropriately seeking guidance from the CAATE.

Consistent with others across higher education, including the Department of Education, the Commission is committed to promoting maximum flexibility for students whose educational activities are impacted by Coronavirus, either directly because the student is ill or quarantined, or indirectly because the student can no longer participate in internships or clinical rotations, or attends a campus that temporarily suspended operation or has moved to distance learning

The Commission provides the following guidance to institutions impacted by the Coronavirus:

- Acknowledging the rapidly changing landscape and varied responses of our stakeholder institutions, the Commission will not require programs to receive prior approval or notify the Commission at this time of **temporary** changes made to the program that are consistent with their own institution's Coronavirus guidelines/response plan, unless they feel that such changes create a specific situation of non-compliance with the Standards. Should a program feel that institutionally required changes will result in a specific non-compliance, they should reach out to the Commission via email at [Support@caate.net](mailto:Support@caate.net) or by phone at 512-733-9700.
- Programs can immediately begin to temporarily use distance learning/online learning as required by their own institution's Coronavirus guidelines/response plan. Prior Commission approval or Commission notification is not required at this time. The Distance Learning Sites Standards (Standards 106 – 109) of the [2012 Standards for Professional Programs](#) do not apply to programs that are required to move on-campus courses to an online format for a temporary time period as part of a required temporary institutional response to the Coronavirus.

- Programs are encouraged to be innovative in their response to support student learning with regards to the potential impact of the Coronavirus on clinical education. However, the Commission recognizes that issues may arise outside of the program's control that negatively impact student clinical placements. Further, we recognize these situations may extend students time to complete the required elements of the program. Programs are allowed to modify their own clinical education policies as long as it is consistent with their own institution's Coronavirus response plan. For instance, if a program presently requires a specific minimum number of hours related to clinical education, the program can appropriately modify their own policies. NOTE: The Commission does not presently specify any required minimums for clinical education, these are established programmatically. Prior Commission approval or Commission notification is not required at this time for altering programmatic clinical education policies.
- Consistent with Standard 17 (see below) of the [2020 Standards for Professional Programs](#), programs may immediately begin using simulation (defined below) for clinical education, where they deem appropriate, regardless of whether or not they are currently operating under the 2012 or 2020 Standards. Prior Commission approval or Commission notification is not required at this time for using simulation in a manner consistent with the 2020 Standards.
- The CAATE believes that AT's are front line healthcare providers who can make a positive impact as members of an interprofessional healthcare team as part of a broad Coronavirus response. However, there are significant ethical and legal considerations around healthcare students' engagement in the treatment of serious infectious diseases and the Commission understands that some students may wish to be removed from certain clinical environments for a variety of reasons. Decisions about requiring students to participate in specific clinical rotations are both individual and institutional. Therefore, the CAATE will not insert itself as the arbiter in these instances, but rather encourages programs to consider how to support student success should an individual request to be removed from a particular clinical rotation in response to the Coronavirus. Further, students who make such choices should be adequately informed regarding the potential delays in program completion that may result from such decisions.
- The Commission recognizes a variety of scenarios resulting from Coronavirus may lead to a delay in the normal time to program completion for students, including students being ill or quarantined, difficulty finding appropriate clinical sites, and institutions temporarily closing. We further recognize that delays in a student's program completion may impact their BOC exam eligibility and entry into the workforce. The Commission has reached out to the BOC who is preparing their own communication regarding the potential impact of delayed program completion due to Coronavirus response policies on BOC exam eligibility. All questions regarding BOC exam eligibility should be directed to the BOC via email at [exam@bocatc.org](mailto:exam@bocatc.org) or by phone 1-877-262-3926.

- The Commission believes that the novel Coronavirus epidemic presents a tremendous learning opportunity for athletic training students. Programs are encouraged to appropriately identify ways to use this opportunity engage with students on a variety of topics, such as infectious disease transmission, prevention, and treatment, epidemiology, medical ethics, health policy development and implementation, interprofessional collaboration, public health, and other potential topics.
  
- In addition to the Commission's commitment to promoting flexibility in response to the Coronavirus, we remain committed to assuring compliance with our accreditation standards. Therefore, within the reasonable and temporary nature of the guidelines provided above, programs must continue to remain compliant with all accreditation standards. Should programs be required by their institutional response to the Coronavirus to take extraordinary steps, such as temporary closure, the Commission reserves the right to require some form of reporting in the future.
  
- Programs are encouraged to stay abreast of Coronavirus developments through monitoring of valid sources of critical information, including:
  - Centers for Disease Control COVID-19 Page: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
  - Department of Health and Human Services: <https://www.hhs.gov>
  - Department of Education COVID-19 Pages: <https://www.ed.gov/coronavirus?src=feature>
  - National Institutes of Health COVID-19 Page: <https://www.nih.gov/health-information/coronavirus>
  - American College Health Association COVID-19 Page: [https://acha.org/ACHA/Resources/Topics/2019\\_Novel\\_Coronavirus\\_2019-nCoV.aspx](https://acha.org/ACHA/Resources/Topics/2019_Novel_Coronavirus_2019-nCoV.aspx)
  - State and Local Health Authorities

As stated at the outset of this communication, the Commission is committed to supporting our programs during this unprecedented time in higher education and health care, and to promoting flexibility to support program compliance with institutional changes in response to the Coronavirus epidemic. The CAATE staff have been directed to develop corresponding FAQ's as they continue to receive inquiries from stakeholders. As these questions and answers are developed we will share them on the CAATE website.

The Commission is committed to the health, safety, and well-being of our stakeholders and appreciates your ongoing commitment to student learning and quality assurance. Additional information will be disseminated by the Commission as deemed appropriate. Should you have specific questions or additional concerns, please do not hesitate to contact the CAATE Office (512-733-9700).

## REFERENCED CONTENT FROM THE [2020 STANDARDS](#)

**Standard 17** A program's **clinical education** component is planned to include clinical practice opportunities with varied client/patient populations. Populations must include clients/patients

- throughout the lifespan (for example, pediatric, adult, elderly),
- of different sexes,
- with different **socioeconomic statuses**,
- of varying levels of activity and athletic ability (for example, competitive and recreational, individual and team activities, high- and low-intensity activities),
- who participate in nonsport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).

*Annotation* These clinical practice opportunities should occur in **athletic training clinical experiences** with real clients/patients in settings where **athletic trainers** commonly practice. When this is not possible, the program may use **simulation** to meet portions of this standard. Students must have adequate real client/patient interactions (**athletic training clinical experiences**) to prepare them for contemporary clinical practice with a variety of patient populations.

**Simulation:** An educational technique, not a technology, to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.