NEW DEGREE PROGRAM PROPOSAL

October 20, 2011

Sponsoring Institution: University of Missouri-Columbia
Program Title: Athletic Training
Degree: Bachelor of Health Sciences
Options: N/A
Delivery Site(s) N/A
Implementation Date: Spring 2012
Cooperative Partners: N/A
CIP CODE 51.0913

AUTHORIZATION:

Steve Graham

Name/Title of Institutional Officer

Steve Graham
Person to Contact for More Information
Steven W. Graham, Senior Associate Vice President for Academic Affairs, 573-882-6396
### Introduction

According to the Commission on Accreditation of Athletic Training Education (CAATE), the Certified Athletic Trainer works with physicians and other medical personnel, employers, patients, parents, guardians, and athletic personnel in the development and coordination of efficient and responsive health care delivery systems. Athletic trainers are integral members of the health care team in secondary schools, colleges and universities, professional sports programs, sports medicine clinics, corporate/industrial, and other health care settings. The athletic trainer’s professional preparation is based on the development of specified educational competencies and clinical proficiencies. Through a combination of formal classroom and clinical instruction and clinical experience, the athletic trainer is prepared to provide health care within each of the following content areas:

- Risk management and injury prevention
- Pathology of injuries and illnesses
- Orthopedic clinical examination and diagnosis
- Acute care of injury and illness
- Pharmacology
- Therapeutic modalities
- Conditioning and rehabilitative exercise
- Medical conditions and disabilities
- Nutritional aspects of injury and illness
- Psychosocial intervention and referral
- Health care administration
- Professional development and responsibility

(Source: Commission on Accreditation of Athletic Training Education: [http://caate.net/documents/Standards.6.30.08.pdf](http://caate.net/documents/Standards.6.30.08.pdf)).

The AT proposal is a response to the critical allied health professions workforce shortage across the nation including Missouri. Traditionally, an athletic trainer worked either in a high school or college setting with an occasional placement in a physical therapy practice or with a professional sports team. Today, athletic trainers are needed in a wide variety of “non-traditional” settings such as hospitals and medical offices, clinics, corporations, industrial settings, police departments, fire safety and even in NASCAR racing and the military. The demand for health care, with an emphasis on preventive care, is predicted to grow as the population ages and as the need to reduce health care costs increases. (Source: National Trainers Association (NATA) Article, Evolution of an ATC; Jeanna Polonchek, Ed.D, ATC; Mar04: [www.nata.org/employers/physex/evolutionofanATC.pdf](www.nata.org/employers/physex/evolutionofanATC.pdf))

Students who pass the examinations by NATA’s Board of Certification, Inc. (BOC) and complete their degree are awarded the professional credential of Certified Athletic Trainer (ATC®). The ATC is an entry-level credential for practicing Athletic Training. Responsibility for the success of the program will lie with the AT Program Director, Chair of the Physical Therapy Department, and Dean of the School of Health Professions. Implementation of the AT will require immediate/initial hiring of the AT Program Director.
**MU Athletic Training Program Director Qualifications**

- Assistant/Associate Professor or Assistant/Associate Clinical Professor
- PhD or equivalent (e.g. EdD; DPE; ScD; PED; HSD) in related field (Exercise Science; Kinesiology; Health Education; etc)
- Athletic training certification
- Eligible for Missouri Athletic Training License
- Minimum of 3 years experience in higher education AT
- Evidence of involvement in preparing self-study report for CAATE (experience with the Commission on Accreditation of Allied Health Education Programs (CAAHEP) is acceptable)
- Evidence of Scholarly Activity

**2. Fit with University Mission and Other Academic Programs**

2.A. Alignment with Mission and Goals

**MU Mission Statement**

*Our distinct mission, as Missouri's only state-supported member of the Association of American Universities, is to provide all Missourians the benefits of a world-class research university. We are stewards and builders of a priceless state resource, a unique physical infrastructure and scholarly environment in which our tightly interlocked missions of teaching, research and service work together on behalf of all citizens. Students work side by side with some of the world's best faculty to advance the arts and humanities, the sciences, and the professions. Scholarship and teaching are daily driven by a sense of public service—the obligation to produce and disseminate knowledge that will improve the quality of life in the state, the nation and the world.*

**Alignment with Institutional Mission**

The proposed AT program fits well with MU’s overall mission to improve the quality of life of Missourians and the world’s citizens through teaching, discovery, and service. The program emphasizes high quality, rigorous instruction, and responds to student demand. The AT program addresses Missouri’s critical need for allied health professionals and workers in the health care in the immediate and long-term era. The AT program fits well with the mission of a land grant university. The program will enhance the health of Missourians because it increases the number of health care providers in Missouri, thereby improving access to timely care. Surveys of alumni from the School of Health Professions indicate that approximately 84% are working and providing high quality care throughout Missouri. The AT program will provide education in an area of high demand for traditional and non-traditional students. It is anticipated that the vast majority of program graduates will live and work in the state, thereby extending the positive benefits of the program.
An AT program would benefit and enhance existing programs at MU. The proposed program would provide a formal venue for health science training collaboration that did not exist previously, thereby augmenting the educational and service efforts of the numerous health divisions of MU as well as the MU Department of Intercollegiate Athletics.

Implementation of the AT program will not negatively affect existing programs. Instead, the program will facilitate student retention and graduation and facilitate matriculation into graduate programs at MU and other universities. As described below, the program will allow for increased interdisciplinary instruction in the School of Health Professions and collaboration with other academic units.

**Unique Collaboration Opportunities within the School of Health Professions**

In the School of Health Professions at the University of Missouri, the new Athletic Training (AT) program has great potential to positively work within the Department of Physical Therapy (PT) and subsequently aid in the development of extensive opportunities. These opportunities include collaborations with physical resources, educational resources, professional development of AT and PT students, research collaborations, and enhanced curricular offerings.

**Physical and Educational Resources, Professional Development**

Physical and educational resources can be shared between the AT and PT programs. These two programs of study have similarities in academic preparation, particularly in the treatment and rehabilitation domains. Due to these similarities, the AT and PT programs have the opportunity to potentially share laboratory and classroom space. In addition, the academic faculty and clinical faculty have the unique opportunity to affect the professional development of students in the AT and PT programs.

Traditionally the athletic training and physical therapy professions have been at odds. The disagreements between the two professions have been centered on the similarities in academic preparation, direct access, and insurance reimbursement. Through an understanding of the unique qualities that each profession possesses, a more collegial relationship between the two professions can be fostered. A more collegial relationship between the athletic training and physical therapy professions will ultimately lead to improved and enhanced healthcare.

**Research**

The addition of AT faculty increases opportunities for collaborative research within the department. Relative to other health/medical professions, athletic training and physical therapy research is fairly young. With increased emphasis on evidence-based practice, there is a need for continued quality research in these professions. Quality, publishable research allows each profession to move forward and improve future healthcare.

**Enhanced Curricular Offerings**

The curriculums of the AT and physical therapy programs have similarities, yet some significant differences. Students in each program have the opportunity to take elective courses within each program receiving instruction from qualified, full-time faculty. In addition, the development of new courses (such as seminar type courses), will allow additional opportunities for athletic
training and physical therapy student interaction. This interaction will assist in fostering collegial attitudes and provide a better understanding of the role of each profession.

Typically, physical therapy educational programs do not offer a focus on the management of the acutely injured athlete or injury prophylaxis. This addition of the AT will provide interested physical therapy students the potential to broaden their education in a manner that is currently not available.

2.B. Duplication and Collaboration within Campus and Across System

This program will not duplicate any existing programs in the UM System; however, across Missouri there are twelve higher education institutions that offer CAATE-accredited athletic training education programs, as listed below.

Central Methodist University, Fayette, Mo
Culver-Stockton College, Canton, Mo
Lindenwood University, St. Charles, Mo
Missouri State University, Springfield, Mo
Missouri Valley College, Marshall, Mo
Park University, Parkville, Mo
Southeast Missouri State University, Cape Girardeau, Mo
Southwest Baptist University, Bolivar, Mo
St. Louis University, St. Louis, Mo
Truman State University, Kirksville, Mo
University of Central Missouri, Warrensburg, Mo
William Woods University, Fulton, Mo

The availability of unique clinical experiences, facilities and medical staff within the MU campus and associated institutions sets the program apart. Students enrolled in the University of Missouri athletic training program will work with a variety of high-level NCAA Division I athletes who are some of the most skilled and highly motivated athletes in the country, and in some cases, in the world. In addition, AT students will be exposed to competition in the Big XII conference, one of the most competitive conferences in collegiate athletics. Students will have the opportunity to travel to other institutions within the Big XII. These travels provide experience in “life on the road” for the athlete and athletic training professional.

The MU facilities for athlete care are extensive and span six different buildings within the MU Sports Park: Glen L. McElroy Sports Medicine Center, Memorial Stadium Athletic Training Room, Mizzou Arena Athletic Training Room, Hearnes Athletic Training Room, Audrey J. Walton Stadium Athletic Training Room, and Mizzou Aquatics Center Athletic Training Room. In addition to these facilities, AT students have full access to the MU J. Otto Lottes Health Sciences Library, an essential resource for students studying in the medical or medical-related field.

The staff associated with the AT program will include athletic trainers, graduate assistant athletic trainers, and physicians. The staff athletic trainers are some of the most experienced in the Big
XII. The physician coverage, which includes game day and athletic training room visits five nights per week, is shared between the Columbia Orthopedic Group, the MU School of Medicine Department of Orthopedic Surgery and the Missouri Orthopaedic Institute. Clinical experiences with physicians allow AT students the opportunity to interact with medical practitioners in the pre- and post-surgical phase of patient care, as well as being involved with several surgical observations.

Athletic Training is recognized by the American Medical Association as an official allied health profession, making the School of Health Professions a logical academic home for this new educational program. By establishing this program in the School of Health Professions, the new AT program will be able to develop collaborative education programs with the other health professions in the school, at the university, and in the surrounding community. MU’s broad base of existing health science expertise supports the efficient development of a strong AT curriculum. Opportunities for interdisciplinary coursework collaboration exist with the Departments of Psychological Sciences, Biological Sciences, Education and Counseling Psychology, School of Nursing, School of Medicine and College of Human Environmental Sciences. This collaboration will present an opportunity for students to have a broader array of course offerings and for faculty and students to work in cross-discipline settings.

3. Business-Related Criteria and Justification

3.A. Market Analysis: Program Need and Demand

Employment
The Bureau of Labor Statistics (BLS), http://www.bls.gov, provides valuable information regarding employment and the job outlook for athletic trainers. It states that athletic trainers held about 16,300 jobs in 2008 and are found in every part of the country. Most athletic trainer jobs are related to sports, although an increasing number also work in non-sports settings. About 39 percent were found in public and private educational services, primarily in colleges, universities, and high schools. Another 38 percent of athletic trainers worked in healthcare, including jobs in hospitals, offices of physicians, and offices of other health practitioners. About 13 percent worked in fitness and recreational sports centers. Around 5 percent work in spectator sports.

Job Outlook
According to the BLS, job prospects for Athletic Trainers should be good in the healthcare industry and in high schools, but competition is expected for positions with professional and college sports teams.

Employment change. The BLS states employment of athletic trainers is projected to grow 37 percent from 2008 to 2018, much faster than the average for all occupations, because of their role in preventing injuries and reducing healthcare costs. Job growth will be concentrated in the healthcare industry, including hospitals and offices of health practitioners. Fitness and recreation sports centers also will provide new jobs, as these establishments grow and continue to need additional athletic trainers to provide support for their clients. Growth in positions with sports teams will be somewhat slower, however, as most professional sports clubs and colleges and universities already have complete athletic training staffs.
The demand for healthcare, with an emphasis on preventive care, should grow as the population ages and as a way to reduce healthcare costs. Increased licensure requirements and regulation has led to a greater acceptance of athletic trainers as qualified healthcare providers. As a result, third-party reimbursement is expected to continue to grow for athletic training services. Athletic trainers will benefit from this expansion because they provide a cost-effective way to increase the number of health professionals in an office or other setting.

In some states, there are efforts underway, according to the BLS, to have an athletic trainer in every high school to work with student-athletes, which may lead to growth in the number of athletic trainers employed in high schools. In addition, as more young athletes specialize in certain sports, there is increasing demand for athletic trainers to deal with repetitive and stress injuries (see article in Appendix C).

As athletic trainers continue to expand their services, more employers are expected to use these workers to reduce healthcare costs by preventing work-related injuries. Athletic trainers can help prevent injuries and provide immediate treatment for many injuries that do occur. For example, some athletic trainers may be hired to increase the fitness and performance of police and firefighters.

Job prospects.
Because of relatively low turnover, the BLS states that the settings with the best job prospects will be the ones that are expected to have the most job growth, primarily positions in the healthcare and fitness and recreational sports centers industries. Additional job opportunities may arise in elementary and secondary schools as more positions are created. Some of these positions also will require teaching responsibilities.

There are relatively few positions for professional and collegiate sports teams in comparison to the number of applicants. Turnover among professional sports team athletic trainers is also limited. Many athletic trainers prefer to continue to work with the same coaches, administrators, and players when a good working relationship already exists.

The BLS states there are also opportunities for athletic trainers to join the military, although they would not be classified as an athletic trainer. Enlisted soldiers and officers who are athletic trainers are usually placed in another program, such as health educator or training specialist, in which their skills are useful.

This occupation is expected to continue to change over the next decade, to include more administrative responsibilities, adapting to new technology, and working with larger populations. Jobseekers must be prepared to adapt to these changes.
### Projections data from the National Employment Matrix

<table>
<thead>
<tr>
<th></th>
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<th></th>
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</thead>
<tbody>
<tr>
<td>Athletic Trainers</td>
<td>29-9091</td>
<td>16,300</td>
<td>22,400</td>
<td>6,000 +37%</td>
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</table>


### The Growing Health Care Industry

The Population Resource Center (PRC) gathers information and promotes the use of accurate population data and sound, objective analysis of this data in the making of public policy. The center advises policymakers about important demographic trends—such as immigration, global population growth, and the aging of America—and helps policymakers understand how those trends affect issues like the environment, education, the economy, and foreign policy. Some significant points noted by the PRC about the healthcare industry:

- Ten of the 20 fastest growing occupations are healthcare-related.
- Healthcare will generate 3.2 million new wage and salary jobs between 2008 and 2018, more than any other industry, largely in response to rapid growth in the elderly population.

According to the PRC, the health care workforce in the U.S. is being affected by four major trends: changes in health professions education, shortages in allied health, the aging population, and the need for interdisciplinary education in health care delivery. As described below, the AT program is designed to address the workforce challenges of the future.

### Changing Landscape of Health Care Education

The PRC states the need for health care professionals continues to rise as our society ages and the mechanisms for diagnosing and treating illness and injury become more sophisticated and specialized. As a result, professional programs are demanding that students obtain a bachelor’s degree to be eligible for admission. An AT degree would be ideal for those students pursuing clinical doctorates. The Physical Therapy Department in SHP, for example, requires an AT or similar degree in order to be eligible for admission to the Doctor of Physical Therapy (DPT) program.

### Allied Health Shortages

The U.S. Government’s Bureau of Labor Statistics projects that nearly all of the allied health professions will experience faster-than-average growth in the next 10 years as compared to other professions. The AT program will provide another option for students to become trained in the allied health professions. By increasing the allied health workforce, the AT will address the health professions workforce shortages.

(Source: [http://www.prdc.org/300million/The_Aging_of_America/2011](http://www.prdc.org/300million/The_Aging_of_America/2011))
3.A.1. Need for Program

The Bureau of Labor Statistics, Occupational Outlook Handbook states that in today’s changing health care environment, professionals that specialize in preventive care have become increasingly important. The demand for health care, with an emphasis on preventive care, will grow as the population ages and as a way to reduce health care costs. Increased licensure requirements and regulation has led to a greater acceptance of athletic trainers as qualified health care providers. As a result, third-party reimbursement is expected to continue to grow for athletic training services. Athletic trainers will benefit from this expansion because they provide a cost-effective way to increase the number of health professionals in an office or other setting. (Source: Bureau of Labor Statistics, Occupational Outlook Handbook: www.bls.gov/oco/ocos294.htm)

Prevention is not the only unique aspect of athletic training that allows it to fit well into the changing health care environment. Advancements in surgical procedures and innovative rehabilitation techniques have allowed athletic trainers and other rehabilitative health care providers more efficient and aggressive means for returning the physically active patient to sports, recreation, and occupations.

Even the most efficient medical offices, hospitals and clinics are looking for ways to increase productivity. In light of the national shortage of health care workers today, one profession that has proven effective in achieving productivity is athletic training, particularly when members work as "physician extenders" in clinical environments. According to the National Athletic Trainers' Association (NATA), using physician extenders in medical and hospital practices can result in time savings, patient satisfaction, increased revenue, increased physician productivity and efficiency, and more effective patient education. (Source: The National Athletic Trainers Association Article (NATA), “With a National Health Care Shortage and Increased Need for Patient Care, Athletic Trainers Fill a Necessary Niche as “Physician Extenders”, February 9, 2009, www.nata.org/newsrelease/archives/000646.htm)

The BLS Occupational Outlook Handbook says a shift in the U.S. economy away from goods-producing in favor of service-providing is expected to continue. Service-providing industries are anticipated to generate approximately 14.5 million wage and salary jobs. See Chart 5 below.
Additional information regarding occupational employment and wages for Athletic Trainers is provided in Appendix B.

3.A.2. Student Demand for Program

The MU Admissions Department recently provided information regarding the most frequently requested majors at MU that are NOT offered at this time - Athletic Training tops the list.

1. Sports Medicine and Athletic Training
2. Sports Management
3. Public Relations
4. Entertainment Management
5. Graphic Design
6. Forensic Science
The Athletic Training Program will also give the rapidly growing student population in the School of Health Professions (SHP) another critically needed degree pathway. The SHP is one of the fastest growing schools/colleges at MU as more and more students seek health related careers. Athletic training can lead to a wide variety of course opportunities for many of these students. Formal announcement of the Athletic Training Degree Program will draw even larger numbers of students to SHP.

Listed below are the enrollment numbers at MU as of August 22, 2011. It shows the SHP is up 373 students (22.0%) over this time last year. The Athletic Training Degree Program is an extremely attractive option for many of these students based on feedback from our advisement sessions with students both inside and outside MU.

<table>
<thead>
<tr>
<th></th>
<th>FRESHMAN</th>
<th>SOPHOMOR</th>
<th>JUNIOR</th>
<th>SENIOR</th>
<th>IRST_PRO</th>
<th>PECIA</th>
<th>MASTER</th>
<th>OCTORA</th>
<th>FS2011</th>
<th>FS2010</th>
<th>% Diff</th>
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<td>2,200</td>
<td>1,818</td>
<td>1,994</td>
<td>0</td>
<td>0</td>
<td>322</td>
<td>843</td>
<td>10,204</td>
<td>10,176</td>
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<td>Business</td>
<td>1,244</td>
<td>883</td>
<td>748</td>
<td>889</td>
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<td>0</td>
<td>292</td>
<td>36</td>
<td>4,092</td>
<td>4,102</td>
<td>-0.2%</td>
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<td>Engineering</td>
<td>701</td>
<td>482</td>
<td>482</td>
<td>852</td>
<td>0</td>
<td>0</td>
<td>264</td>
<td>212</td>
<td>2,993</td>
<td>2,748</td>
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<td>259</td>
<td>390</td>
<td>0</td>
<td>83</td>
<td>915</td>
<td>521</td>
<td>2,802</td>
<td>2,931</td>
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<td>424</td>
<td>451</td>
<td>601</td>
<td>0</td>
<td>0</td>
<td>129</td>
<td>176</td>
<td>2,306</td>
<td>2,182</td>
<td>5.7%</td>
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<td>394</td>
<td>532</td>
<td>629</td>
<td>0</td>
<td>0</td>
<td>227</td>
<td>30</td>
<td>2,241</td>
<td>2,208</td>
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<td>464</td>
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<td>0</td>
<td>84</td>
<td>118</td>
<td>2,068</td>
<td>1,695</td>
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<td>Nursing</td>
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<td>252</td>
<td>167</td>
<td>345</td>
<td>0</td>
<td>0</td>
<td>180</td>
<td>130</td>
<td>1,414</td>
<td>1,251</td>
<td>13.0%</td>
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<td>Human Environment</td>
<td>206</td>
<td>242</td>
<td>326</td>
<td>438</td>
<td>0</td>
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<td>98</td>
<td>69</td>
<td>1,379</td>
<td>1,351</td>
<td>2.1%</td>
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<td>Graduate Non-Div</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>865</td>
<td>118</td>
<td>983</td>
<td>881</td>
<td>11.6%</td>
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<tr>
<td>Natural Resources</td>
<td>140</td>
<td>158</td>
<td>170</td>
<td>209</td>
<td>0</td>
<td>0</td>
<td>70</td>
<td>35</td>
<td>782</td>
<td>562</td>
<td>39.1%</td>
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<tr>
<td>Medicine</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>392</td>
<td>0</td>
<td>107</td>
<td>63</td>
<td>562</td>
<td>542</td>
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<tr>
<td>Veterinary Medicina</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>413</td>
<td>0</td>
<td>25</td>
<td>13</td>
<td>451</td>
<td>399</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>431</td>
<td>0</td>
<td>16</td>
<td>0</td>
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<td>471</td>
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<td>Social Work</td>
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<td>30</td>
<td>46</td>
<td>48</td>
<td>0</td>
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<td>211</td>
<td>14</td>
<td>386</td>
<td>329</td>
<td>17.3%</td>
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<tr>
<td>Non-divisional Undergr.</td>
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<td>6</td>
<td>7</td>
<td>63</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>204</td>
<td>181</td>
<td>12.7%</td>
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<tr>
<td>Total</td>
<td>7,661</td>
<td>5,766</td>
<td>5,470</td>
<td>6,915</td>
<td>1,236</td>
<td>83</td>
<td>3,805</td>
<td>2,378</td>
<td>33,314</td>
<td>32,009</td>
<td>4.1%</td>
</tr>
</tbody>
</table>
Form SE

STUDENT ENROLLMENT PROJECTIONS

Table 1a. Student Enrollment Projections (Admitted to the Program) Based on market and student demand.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>FULL-TIME</td>
<td>0</td>
<td>40</td>
<td>78</td>
<td>114</td>
<td>114</td>
</tr>
<tr>
<td>PART-TIME</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>0</td>
<td>40</td>
<td>78</td>
<td>114</td>
<td>114</td>
</tr>
</tbody>
</table>

Table 1b. Student Enrollment Projections (Pre-professional Students) Based on market and student demand.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>FULL-TIME</td>
<td>40</td>
<td>60</td>
<td>80</td>
<td>90</td>
<td>100</td>
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<tr>
<td>PART-TIME</td>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>40</td>
<td>60</td>
<td>80</td>
<td>90</td>
<td>100</td>
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</tbody>
</table>

The Athletic Training Program will be a full-time curriculum limited to 40 students per class. Students will be admitted via a formalized admissions process. Part-time enrollment will not be an option in this program.

Table 2. Minimum enrollment for financially and academically stability

<table>
<thead>
<tr>
<th>ENROLLMENT STATUS</th>
<th>Full-Time</th>
<th>Part-Time</th>
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<tbody>
<tr>
<td>NUMBER OF STUDENTS</td>
<td>60</td>
<td>0</td>
<td>60</td>
</tr>
</tbody>
</table>

Should there be an unforeseen decrease in enrollment due to market or unanticipated factors, we have considered the following:

Discussions with Athletic Training Program representatives at The Ohio State University and Plymouth State University have indicated that a minimum of 20 students per class (a total of 60 students) is an acceptable number to support academic viability.

With appropriate budget adjustments the minimum student enrollment (60 in professional program) results in continuing program expense of $587,980 per year after loan repayment is satisfied. Projected revenue during the same year is $674,656. Therefore, minimum enrollment of 60 students in the program is sufficient to maintain financial viability.
Table 2a. Actual Enrollment Projections

The chart below summarizes anticipated enrollment projections for the Athletic Training program. At the end of year 5, a total of 114 students will be enrolled in this three-year professional program (40 sophomores, 38 juniors, 36 seniors). The projected freshman pre-athletic training enrollment is projected to be 100 students. This yields a total enrollment of 214 students (100 freshmen plus 114 professional program students). The chart below provides a breakdown and assumes a 5% attrition rate plus a 10% conversion to residency.

<table>
<thead>
<tr>
<th>Total Hrs</th>
<th>SHP Hrs</th>
<th>MU Hrs Taught</th>
<th>Pre-professional</th>
<th>Full Enrollment</th>
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<tbody>
<tr>
<td></td>
<td>121</td>
<td>74</td>
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<table>
<thead>
<tr>
<th>Year</th>
<th>In-State</th>
<th>Out-State</th>
<th>Total</th>
<th>Pre-Prof</th>
<th>Freshm</th>
<th>In-State</th>
<th>Out-State</th>
<th>Pre-Prof</th>
<th>Freshm</th>
<th>In-State</th>
<th>Out-State</th>
<th>Pre-Prof</th>
<th>Freshm</th>
<th>In-State</th>
<th>Out-State</th>
<th>Pre-Prof</th>
<th>Freshm</th>
<th>In-State</th>
<th>Out-State</th>
<th>Pre-Prof</th>
<th>Freshm</th>
<th>In-State</th>
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<tr>
<td>FY12</td>
<td></td>
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<td>7</td>
<td>2</td>
<td>32</td>
<td>960</td>
<td>48</td>
<td>1,440</td>
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<td>1,920</td>
<td>72</td>
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<td>13</td>
<td>8</td>
<td>240</td>
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<td>16</td>
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<td>20</td>
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</tbody>
</table>

TOTAL Students: 40

<table>
<thead>
<tr>
<th>Credit Hours Taught by SHP</th>
<th>280</th>
<th>1,380</th>
<th>2,584</th>
<th>3,194</th>
<th>3,264</th>
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<tbody>
<tr>
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<td>920</td>
<td>1,900</td>
<td>2,360</td>
<td>2,986</td>
<td>3,216</td>
</tr>
</tbody>
</table>
3.C. Business and Marketing Plan: Recruiting and Retaining Students

Student Recruitment and Retention
Target recruitment audiences for the AT will include high school students, entering undeclared freshmen, current undergraduate students, and allied health workers currently without a bachelor degree. Current employees of health care facilities will be the focus of recruitment of non-traditional students. The overarching recruitment goal is to obtain a highly qualified student body that is diverse across traditional/non-traditional student categories, discipline area, age, gender, race, and ethnicity. Students are often unaware of education and career options in allied health. Recruitment methods will serve to educate the students about the field, but also strive to make them feel welcome to pursue the AT. As demonstrated above, there is strong demand for the AT among both traditional and non-traditional students. The demand for the program is expected to increase after the recruitment plan is implemented because student awareness of the program will increase dramatically.

The recruitment plan will be comprehensive and use multiple proven methods to reach both traditional and non-traditional students. The recruitment methods for high school and traditional undergraduate students will include:

- Presentations/attendance at high school and freshman recruiting fairs throughout Missouri;
- Direct mail involving invitations and brochures of the program;
- Degree-specific website that includes web-based services;
- Paragraphs about, and links to, the AT program on collaborating academic units websites;
- Press releases distributed to a variety of media outlets;
- Requested media interviews (e.g., local radio);
- Announcements posted around MU campus and at other appropriate locations;
- Presentations about the AT to student clubs and similar organizations;
- Mass emails about the AT program sent to various lists such as the Missouri Academic Advising Association (MACADA), MU Info (all students, faculty, staff), and the MU Advisor’s Forum Listserv;
- Targeted emails sent to undergraduate listservs of several cooperating departments;
- AT Open House on the MU campus to attract admitted students and their family members as well as prospective students and family members; and
- Advertisements about program and Open House in the MU Maneater publication.

The published materials about the AT (including websites) will highlight the interdisciplinary nature of the AT curriculum, and the multiple graduate studies and career options, and the market demand for the degree.

Student retention is major goal of the AT program. The program will hire a full-time advisor to augment the advising that faculty members will provide. The advisor will be responsible for all new student inquiries and new student advising, including initial course enrollment. Students will be assigned to a faculty member advisor prior to their junior year. The faculty advisors will guide
students through course selection, monitor their progress toward completing graduation requirements, and provide information and advice on post-graduation employment. Students will also be advised and encouraged to utilize the many academic and career support services offered by MU. The resources available at MU and individual, faculty member advising will help attract and retain students.

**Action Plan for Program Delivery**
The AT program will be directed by a designated faculty member who has dedicated time for program development and implementation. The Program Director will report to the Chair of the Department of Physical Therapy. Adequate faculty and support staff, including an administrative assistant/office support staff person and a student advisor will be provided to the program.

**4. Institutional Capacity**
The majority of resources to complete development and implementation of the AT already exist in the School of Health Professions and the other collaborating academic units at MU. The collaborating units have faculty, staff and facilities critical to the success of this program. Classrooms on the MU campus will be utilized for some of the courses that have large enrollments. Modest additional office space will be required for the administrative “home” of the program. Additional faculty members will be needed to teach the specialized AT curriculum and supervise fieldwork experiences.

**Space Considerations**
The Athletic Training Program will be highly integrated within the University of Missouri Sports Medicine complex and work very closely with existing Sports Medicine staff. Almost all of the professional level AT classes will be taught in this complex or in affiliated sites. Clinical practicum classes will be coordinated with the MU Sports Medicine staff and utilize many of the facilities under the control of the MU Department of Athletics.

The Athletic Training faculty and support staff will be housed in the MU Sports Medicine complex. This will facilitate the high degree of integration that must exist in this type of academic program. One of the new faculty members will also be a member of the Physical Therapy faculty and teach prerequisite classes. This faculty member will be housed in the Department of Physical Therapy. The academic advisor will also be involved in assisting with developing affiliations and career placement but will spend some time on campus conducting group and individual advisement sessions.

See Appendix E for letter from Bryan Maggard, MU Senior Associate Athletic Director, affirming that space will be provided to house the AT faculty and support staff.

**Intercollegiate Athletes**
Students enrolled in the University of Missouri athletic training program will experience working with a variety of high-level NCAA Division I athletes. These athletes represent some of the most skilled and highly motivated athletes in the country, and in some cases, in the world. Several MU athletes have gone onto professional careers at the highest level in their respective
sports. As a student enrolled in the MU AT, there is direct impact on the success of MU athletics and potential future professional prospects.

In addition to working with and improving the health and well-being of elite level collegiate athletes, AT students will also be exposed to competition in the Big XII conference, one of the most competitive conferences in collegiate athletics. Students will have the opportunity to travel to other institutions within the Big XII. These travels provide experience in “life on the road” for the athlete and athletic training professional. In addition, travel to other Big XII institutions and neutral sites (e.g. St Louis; Kansas City; etc.) expose students to other athletic training facilities.

**Staff**

The MU staff associated with the AT program will include staff athletic trainers, graduate assistant athletic trainers, and physicians. The staff athletic trainers are some of the most experienced athletic training staff in the Big XII. Each staff member has primary responsibilities for MU athletic teams and associated athletes. The graduate assistant athletic trainers provide additional support to MU athletic teams and the athletic training staff. The physician coverage is shared among the Columbia Orthopedic Group, the MU School of Medicine Department of Orthopedic Surgery and the Missouri Orthopaedic Institute (MOI). The collaboration/combination of these physician entities affords MU athletes and AT students the opportunity to consult and be exposed to different medical specialties to enhance the treatment of MU athletes. The physician coverage includes game day coverage and athletic training room visits five nights per week. In addition, AT students will be afforded the opportunity to view various surgeries and interact with physicians within and outside the athletic training room environment.

**Clinical Experiences**

Important to any AT program is the clinical experience. Clinical experiences provide opportunity for AT students to apply practical knowledge learned from theoretical concepts. The clinical experience is perhaps the most important aspect of any AT program. As explained in section 5.E, the MU AT program has five clinical experiences that address several different areas of the athletic training profession including athlete treatment and rehabilitation, general medical issues, and surgical intervention.

The MU AT program will offer clinical experiences within the MU athletic training facilities, local area high schools, local area physical therapy clinics, and rotations with physicians from the MU department of orthopedic surgery and the Columbia Orthopedic Group (COG). The clinical experiences within the MU athletic training facilities and at local area high schools are under the direct supervision of certified athletic trainers. These experiences are considered the traditional settings for the practice of athletic training. AT students in these clinical experiences engage in the comprehensive spectrum of athletic training practice, which broadly includes athlete care and administrative responsibilities. Within the local area physical therapy clinics, AT students are exposed to and participate in varied rehabilitation programs for both the athletic and general population. During these rotations AT students work directly with licensed physical therapists and athletic trainers in the rehabilitation of injuries, which may include post-surgical intervention. Clinical experiences with physicians from MU and COG allow AT students the
opportunity to interact with medical practitioners in the pre- and post-surgical phase of patient care, as well as being involved with several surgical observations.

**Facilities**

Facilities available for MU AT students provide the setting for practical application of theoretical concepts. The MU facilities for athlete care span six different buildings within the MU Sports Park: Glen L. McElroy Sports Medicine Center, Memorial Stadium Athletic Training Room, Mizzou Arena Athletic Training Room, Hearnes Athletic Training Room, Audrey J. Walton Stadium Athletic Training Room, and Mizzou Aquatics Center Athletic Training Room. Descriptions of these facilities are provided below. In addition to facilities for athlete care, AT students have full access to the MU J. Otto Lottes Health Sciences Library, an essential resource for students studying in the medical or medical-related field.

**Glen L. McElroy Sports Medicine Center**
The Glen L. McElroy Sports Medicine Center is located in the MU Athletics Training complex. This center serves as the main site providing athletic training services for football, women’s soccer, softball, baseball, and track and field. This sports medicine center is the largest of all of MU’s athletic training facilities. The Glen L. McElroy Sports Medicine Center houses a treatment area, rehabilitation area, hydrotherapy area, physician exam rooms, and office space to house 13 athletic training staff members. This facility is open throughout the day and all MU athletes have access to treatment and rehabilitation activities.

**Memorial Stadium Athletic Training Room**
The Memorial Stadium Athletic Training Room is located at the South end of Faurot Field and is adjacent to the football game day locker room. The primary use of this facility is for football game day use. The Memorial Stadium Athletic Training Room houses a game day preparation (taping/wrapping) area, as well as a physician exam room with x-ray capability.

**Mizzou Arena Athletic Training Room**
The Mizzou Arena Athletic Training Room is the newest facility available to MU athletes. This facility is primarily utilized by men’s and women’s basketball. Athletes are afforded treatment and rehabilitation areas. In addition there is a physician exam room and offices for the staff athletic trainers responsible for men’s and women’s basketball.

**Hearnes Athletic Training Room**
The Hearnes Athletic Training Room is utilized primarily by MU wrestling, gymnastics, volleyball, and indoor track and field. This facility avails athletes with treatment and rehabilitation areas, physician exam room, and office space for athletic training staff. The Hearnes Athletic Training Room is the primary athletic training room in the Hearnes Center, with an additional two satellite athletic training rooms utilized by the wrestling and volleyball teams.

**Audrey J. Walton Stadium Athletic Training Room**
The Audrey J. Walton Stadium Athletic Training Room is the primary game day athletic training room utilized by women’s soccer, softball and track and field for game day events. This facility houses treatment facilities for use on game days.
**Mizzou Aquatics Center Athletic Training Room**
The Mizzou Aquatics Center Athletic Training Room is designed to specifically meet the needs of the men’s and women’s swimming and diving teams. This facility is located on the pool deck and is in use during practice and swimming and diving meets. The facility avails MU swimmers and divers with treatment and rehabilitation opportunities.

The MU athletic training facilities offer student athletes, staff, and AT students opportunities to receive and provide athletic training services in state-of-the-art and varied environments. The main facility, the Glen L. McElroy Sports Medicine Center, is one of the premier sports medicine centers in the Big XII and NCAA. For more information on each of these facilities please visit the MU Sports Medicine website at [http://www.mutigers.com/genrel/sportsmedicine.html](http://www.mutigers.com/genrel/sportsmedicine.html).

**J. Otto Lottes Health Sciences Library**
The J. Otto Lottes Health Sciences Library is the main library for use by students, faculty, and staff associated with the School of Medicine, Sinclair School of Nursing, School of Health Professions, Health Services Management, and University Hospitals and Clinics. This facility houses several resources important to the dissemination of medical-related topics and research. Students enrolled in the MU AT have full access to this impressive library. For more information on the J. Otto Lottes Health Sciences Library please visit the library website at [http://library.muhealth.org/about/about.htm](http://library.muhealth.org/about/about.htm).
Form PS

PROGRAM STRUCTURE

5. Structure

1. Total credits required for graduation: 121

Number of NEW Courses Generated: 22

Total NEW Credit Hours Generated: 64  (Highlighted in text below)

2. Residency requirements, if any:

30 of the last 36 credit hours must be completed at the University of Missouri.

3. General Education:

Total credits for general education courses: 23

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<th>Credits</th>
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<td>College Algebra</td>
<td>Fall-Fr</td>
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<tr>
<td>5</td>
<td>1010/1020</td>
<td>Biological Science</td>
<td>Fall-Fr</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>Humanities Gen Ed</td>
<td>Fall-Fr</td>
</tr>
<tr>
<td>3</td>
<td>1100/1200</td>
<td>American History/Gov</td>
<td>Fall-Fr</td>
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<tr>
<td>3</td>
<td></td>
<td>Behavioral/Social Science (2000+)</td>
<td>Spring-Fr</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>Humanities (2000+)</td>
<td>Spring-Fr</td>
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<tr>
<td>3</td>
<td>1000</td>
<td>English/Exposition</td>
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4. Major Requirements: Total credits specific to degree: 98

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<td>HP1000</td>
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<td>4</td>
<td>AT</td>
<td>Elementary Human Anatomy</td>
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<td>First Aid and CPR</td>
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<td>2</td>
<td>N&amp;F 3800</td>
<td>Prevention and Care of Athletic Injuries</td>
<td>Fall</td>
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<td>AT</td>
<td>Clinical I</td>
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<td>3</td>
<td>2190</td>
<td>Medical Terminology or Free elective*</td>
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<tr>
<td>2</td>
<td>1310</td>
<td>General Chemistry I or Free elective *</td>
<td>Fall</td>
</tr>
<tr>
<td>2</td>
<td>AT</td>
<td>Athletic Training Skills I</td>
<td>Fall</td>
</tr>
<tr>
<td>4</td>
<td>AT</td>
<td>Human Physiology</td>
<td>Spring</td>
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<tr>
<td>3</td>
<td>AT</td>
<td>Clinic II</td>
<td>Spring</td>
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<td>3</td>
<td>1320</td>
<td>General Chemistry II or Free elective*</td>
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<td>3</td>
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<td>Humanities General Education (writing intensive)</td>
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<td>2</td>
<td>AT</td>
<td>Athletic Training Skills II</td>
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* Indicates elective credit options.
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<td>AT  Lower Extremity, Trunk, Spine Assessment</td>
<td>Summer Session I</td>
</tr>
<tr>
<td>3</td>
<td>AT  Lower Extremity, Trunk, Spine Assessment Lab</td>
<td>Summer Session I</td>
</tr>
<tr>
<td>3</td>
<td>AT  Upper Extremity and Head Assessment</td>
<td>Summer Session II</td>
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<tr>
<td>2</td>
<td>AT  Upper Extremity and Head Assessment Lab</td>
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<td>AT  Rehabilitation of Athletic Injuries</td>
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<td>3</td>
<td>HP 4250  Kinesiology</td>
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<tr>
<td>3</td>
<td>HP 4420  Foundations of Therapeutic Exercise</td>
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<td>3</td>
<td>AT  Clinical III</td>
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<td>3</td>
<td>AT  Administration in Athletic Training</td>
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<td>4</td>
<td>AT  Therapeutic Modalities</td>
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<td>3</td>
<td>AT  General Medical Conditions</td>
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<td>HP4790  Pharmacology for the Rehabilitation Professional</td>
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<td>3</td>
<td>AT  Seminar in Athletic Training (writing intensive)</td>
<td>Fall</td>
</tr>
<tr>
<td>3</td>
<td>AT  Clinical V</td>
<td>Fall</td>
</tr>
<tr>
<td>3</td>
<td>AT  Nutrition for Athletic Performance &amp; Rehab</td>
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<td>Phy 1210  Physics I or Free elective*</td>
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<td>3</td>
<td>AT  Seminar in Athletic Training (BOC preparation)</td>
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<td>3</td>
<td>Stat 1300  Statistics or ESC PS 4170</td>
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<tr>
<td>4</td>
<td>Phys 1220  Physics II or Free elective*</td>
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<td>3</td>
<td>Soc Sci*  Psychology of Sport, Injury &amp; Rehabilitation</td>
<td>Spring</td>
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</table>

The above curricular plan is structured so that students who wish to continue on to the University of Missouri DPT program can satisfy pre-requisite requirements while completing requirements for the Athletic Training major.

*Those students who wish not to enter the University of Missouri DPT program can substitute electives for: Medical Terminology; General Chemistry I; General Chemistry II; Physics I and Physics II. In addition, students can elect to take General Chemistry I and II, and Physics I and II during the summers between freshman and sophomore years and/or junior and senior years.

5. Free elective credits: 0-16 credit hours


Clinical rotations are required as part of this professional program. These rotations will take place at facilities in the MU Department of Intercollegiate Athletics, affiliated colleges and high schools, Department of Orthopedic Surgery, the Missouri Orthopedic Institute (MOI), the Columbia Orthopedic Group (COG) and other sites as the program grows.
FORM PG

PROGRAM CHARACTERISTICS AND PERFORMANCE GOALS

5.A

Any unique features such as interdepartmental cooperation:

The program will be housed in the Department of Physical Therapy thereby promoting unique collaboration with this rehabilitation discipline and the Doctorate of Physical Therapy (DPT) academic degree program.

The above curricular plan is structured so that students who wish to continue onto the MU DPT program can satisfy pre-requisite requirements while completing requirements for the Athletic Training major. Those students who wish not to enter the MU DPT program can substitute electives for these courses: Medical Terminology; General Chemistry I; General Chemistry II; Physics I and Physics II. In addition, students can elect to take General Chemistry I and II, and Physics I and II during the summers between freshman and sophomore years and/or junior and senior years.

Note: The faculty in the athletic training department, and those departments affiliated with the program, will make the final decision about the curriculum implemented for this program.

5.B. Faculty and Administration

All of the full-time faculty for this program will be new hires. They will be selected based on their excellent teaching skills and their record of strong scholarship and service (see minimum qualifications listed below). The core faculty members will be full-time faculty who are responsible for teaching, research, and service activities in the School of Health Professions. All faculty members will have completed at least a master’s degree in their core discipline, although it is expected that the majority of faculty members will have obtained a PhD in their core discipline.

All faculty members in the School of Health Professions are expected to carry a heavy teaching load unless they have extramural research funding or healthcare clinical duties. The AT faculty will be augmented as necessary by part-time faculty members who have demonstrated teaching skills and/or have valuable private or public sector experience. All of the required courses for the AT will be taught by faculty from SHP or collaborating academic units. Graduate teaching assistants may be involved in assisting faculty members who have courses with larger enrollments.

Responsibility for the proposed AT program will lie with the Program Director (when hired), the Chair of the Department of Physical Therapy and with Richard Oliver, Dean of the SHP.
Implementation of the AT will require immediate/abridged hiring of the AT Program Director and support staff. During academic year 2011-12, academic position searches will be held to identify permanent hires for the AT Program Director and other program faculty positions.

Listed below are recommended minimum qualifications and other pertinent information for each AT position:

**PROGRAM DIRECTOR**
- Assistant/Associate Professor or Assistant/Associate Clinical Professor
- PhD or equivalent (e.g. EdD; DPE; ScD; PED; HSD) in related field (Exercise Science; Kinesiology; Health Education; etc)
- Athletic training certification
- Eligible for Missouri Athletic Training License
- Minimum of 3 years experience in higher education AT
- Evidence of involvement in preparing self-study report for CAATE (CAAHEP experience is acceptable)
- Evidence of scholarly activity
- Expectations of faculty involvement:
  - 60% - Administration
  - 20% - Teaching
  - 20% - Service

**ASSISTANT PROFESSOR or ASSISTANT CLINICAL PROFESSOR**
- Tenure track preferred
- PhD or equivalent (ABD considered) (e.g. EdD; DPE; ScD; PED; HSD) in related field (Exercise Science, Physiology, Kinesiology, Health Education preferred)
- Evidence of scholarly activity
- Expectations of faculty involvement:
  - 40% - Teaching
  - 40% - Research
  - 20% - Service

**ASSISTANT PROFESSOR or ASSISTANT CLINICAL PROFESSOR**
- Non-tenure track faculty
- PhD or equivalent (ABD considered) (e.g. EdD; DPE; ScD; PED; HSD) in related field (Exercise Science; Kinesiology; Health Education; etc)
- Athletic training certification
- Eligible for Missouri Athletic Training License
- Evidence of scholarly activity
- Expectations of faculty involvement:
  - 60% - Teaching
- 20% - Clinical Supervisor
  - 20% - Service

**CLINICAL COORDINATOR**
- Non-tenure track clinical faculty
- MS or equivalent (MEd; MA) in related field (Exercise Science; Kinesiology; Health Education; etc)
- Athletic training certification
- Eligible for Missouri Athletic Training License
- Minimum 3 years experience as athletic trainer; NCAA Division I experience is preferred (graduate assistantship would count towards 3 years)
- Earned undergraduate degree from an accredited AT program
- Experience working in an accredited AT as an ACI and/or Clinical Coordinator
- Expectations of faculty involvement:
  - 60% - Clinical Coordination
  - 20% - Teaching
  - 20% - Service

**ASSISTANT CLINICAL PROFESSOR**
- Non-tenure track faculty
- Master’s degree in Athletic Training or related field
- Athletic training certification
- Eligible for Missouri Athletic Training License
- Dually credentialed AT/PT preferred
- Expectations of faculty involvement:
  - 60% - Teaching
  - 20% - Clinical Supervision
  - 20% - Service

**ACADEMIC ADVISOR**
- Prefer MS or equivalent (MEd; MA) in related field (Exercise Science; Kinesiology; Health Education; etc)
- Minimum 1 year experience in teaching or advising
- Expectations of AT involvement: 100%
In addition to the full-time AT faculty hired to teach within the classroom, existing full-time athletic training staff will team-teach the Athletic Training Skills I and II courses. They will act as the primary instructors for clinical courses specific to the athletic training room. Utilization of full-time athletic trainers for these courses reduces the potential disconnect between academic preparation and practical application within the athletic training room. Therefore, students will be better prepared to function within the University of Missouri athletic training rooms upon enrollment in required clinical course work. If interested, the full-time athletic trainers may also teach some courses within the classroom (e.g. Administration in Athletic Training). This may be an effective way to reduce the teaching load of the PhD-prepared faculty to allow more time for research.

5.C. Student Preparation

Admission. All applicants must meet the criteria for admission to MU.

Graduation. Students must maintain an overall GPA of \(2.0\) to remain in the program. To graduate from the Athletic Training program in the School of Health Professions, students must complete at least 30 credits at or above the 3000 level. At least 30 of the last 36 credit hours must be completed in residence at MU. At graduation, students must have 2.0 or better MU cumulative GPA, a 2.0 or better GPA in the degree program, and a 2.0 or better GPA in the final 36 credit hours.

It should also be noted that students should take the First Aid and CPR course during their freshman year to gain the proper certification required for the National Athletic Trainers' Association Board of Certification (NATABOC) examination. Students will be required to maintain current First Aid and CPR certification while enrolled in each clinical. Failure to maintain current certification will make a student ineligible to enroll in the next clinical rotation, which may hinder the student’s ability to graduate in 4 years.

5.D. Program Outcomes

Learning Outcomes

Graduates of the MU AT program will be qualified for a wide variety of entry-level jobs in this field of study. With the push to require athletic training in every high school and with the emphasis on safeguarding the health of today’s athletes from permanent disabilities from events such as severe concussion, the job market is projected to expand. See Appendix C for related article.

Graduates of the AT program will also be qualified to pursue advanced degrees in fields such as athletic training, physical therapy, nutrition and fitness, occupational therapy, medicine and public health. Intercollegiate athletics has become a major industry in Missouri and attracts hundreds of thousands of fans to events every year. This industry requires an adequate and well-trained cadre of athletic trainers and other sports science-related professionals to support and protect the athletes and to engage in research leading to better prevention and rehabilitation.
outcomes. MU is uniquely positioned to be a national leader in the field of athletic training and sports science.

5.E. Program Design and Content

The proposed MU AT curriculum is designed to comply with the standards and guidelines established by the National Athletic Trainers’ Association (NATA) and the Commission on Accreditation of Athletic Training Education (CAATE). Athletic trainers must have a bachelor's or master’s degree from an accredited athletic training program in order to take the rigorous certification examinations administered by NATA’s Board of Certification, Inc. (BOC). The BOC sets the standards for the practice of athletic training and is the only accredited certifying body for Athletic Trainers in the US. Additionally, the BOC has established the continuing education requirements that a Certified Athletic Trainer must satisfy in order to maintain current status as a BOC Certified Athletic Trainer. (Source-Bureau of Labor Statistics, Occupational Outlook Handbook: http://www.bls.gov/oco/ocos294.htm).

NEW COURSE DESCRIPTIONS - ATHLETIC TRAINING CURRICULUM

**Elementary Human Anatomy (4 credits)**
Introduction to the structure and function of the human body. Emphasis on the relationship of anatomy to the study of physical activity, sport and exercise.

**First Aid & CPR (1 credit)**
CPR and first aid for adults, children and infants. Emergency situations, precautions to prevent disease transmission, care for injuries or sudden illness. Use of Automated External Defibrillator. Leads to Red Cross Certification.

**Clinical I (3 credits)**
Students are provided the opportunity to perform in a hands-on environment under the direct supervision of a certified athletic trainer. Emphasis is placed on proper athletic training room etiquette; preparation for practices and games; understanding, recognizing, evaluating, and treating athletic injuries. A minimum of 300 documented hours under the direct supervision of a certified athletic training is required.

**Athletic Training Skills I (2 credits)**
An introduction to the development of psychomotor skills for athletic training including taping and wrapping skills for the lower extremity; wound care; ice bag/massage; whirlpool and hydrocollator use. A minimum of 50 hours of observation is required in the athletic training room and at practices and games.

**Human Physiology (4 credits)**
Introduction to body function at the cellular, tissue, organ and system level.

**Clinic II (3 credits)**
Students continue to perform in a hands-on environment under the direct supervision of a certified athletic trainer. There is continued exposure to proper athletic training room etiquette and preparation for practices and games. Greater emphasis is now placed on understanding, recognizing, evaluating, and treating athletic injuries. A minimum of 300 documented hours under the direct supervision of a certified athletic training is required.

**Athletic Training Skills II (2 credits)**
A continuation of Athletic Training Skills I. This course focuses on the development of psychomotor skills for athletic training including taping and wrapping skills for the upper extremities and trunk. Additional course information includes record keeping; basic first aid treatments; and other basic administrative tasks associated with the operation of the athletic training room. A minimum of 50 hours of observation is required in the athletic training room and at practices and games.

**Lower Extremity, Trunk, Spine Assessment (3 credits)**
Provides athletic training students with a systematic approach to orthopedic injury evaluation. Each body segment of the lower extremity, trunk and spine are examined including functional anatomy, neurological innervations, associated pathologies and comprehensive evaluation.

**Lower Extremity, Trunk, Spine Assessment Lab (2 credits)**
Provides athletic training students with the practical experience associated with theoretical concepts in the lower extremity, trunk, and spine assessment course. Comprehensive orthopedic evaluations and interpretations are conducted for the lower extremity, trunk and spine.

**Upper Extremity and Head Assessment (3 credits)**
Provides athletic training students with a systematic approach to orthopedic injury evaluation. Each body segment of the upper extremity, and head are examined including functional anatomy, neurological innervations, associated pathologies and comprehensive evaluation.

**Upper Extremity and Head Assessment Lab (2 credits)**
Provides athletic training students with the practical experience associated with theoretical concepts in the upper extremity and head assessment course. Comprehensive orthopedic evaluations and interpretations are conducted for the upper extremity and head.

**Rehabilitation of Athletic Injuries (4 credits)**
The theory and application behind rehabilitative tools utilized in the athletic setting (in-season and out-of-season). Emphasis is placed on developing and administering rehabilitative programs based on injury, the healing process, and return to function/play.

**Clinical III (3 credits)**
Students are provided with two options for this clinical rotation. Option 1: Students may participate in hands-on experience with an equipment intensive sport, such as football. Students further develop and perfect learned athletic training skills under the direct supervision of an approved clinical instructor or clinical instructor (ACI or CI). Responsibilities are commensurate with an advanced level of cognitive and psychomotor ability (minimum of 450 documented hours under the direct supervision of an ACI is required). Option 2: Students may
participate in rehabilitation and general medical/surgical rotations with local rehabilitation specialists and physicians. The rehabilitation portion of the clinical allows students the opportunity to associate with rehabilitation specialists (such as physical therapists) to become exposed to rehabilitation techniques for various pathologies. The general medical/surgical rotation allows students the opportunity to associate with physicians in the care of athletes as well as the general population. Surgical observations and rotations through office and athletic training room visits are requirements for this option (a minimum of 60 documented hours under the direct supervision of a CI/ACI with an emphasis on rehabilitation are required for the rehabilitation portion of the clinical; and 20 documented hours under the direct supervision of a CI/physician and 5 surgical observations are required for the general medical portion of the clinical. Total minimum clinical hours for Option 2 = 80 hours).

Administration in Athletic Training (3 credits)
Examines the administrative aspects of the athletic trainer in developing and managing a health care facility specializing in the care and treatment of the athletic population. Emphasis is placed on professional responsibilities/conduct; avenues for professional development; national and state regulatory agencies; certification/licensure requirements; budgetary issues; and other duties/responsibilities relative to the administration within the athletic training profession.

Therapeutic Modalities (4 credits)
Comprehensive study of the various therapeutic modalities utilized in the treatment and rehabilitation of athletic injuries. Understanding the technology, theory and practical applications of appropriate modalities are emphasized.

General Medical Conditions (3 credits)
Students study the general medical conditions, illnesses and disease found within the athletic population. Emphasis is placed on the recognition, treatment, and referral options of these conditions/diseases.

Clinical IV (3 credits)
Students further develop and perfect learned athletic training skills under the direct supervision of an approved clinical instructor (ACI). Responsibilities are commensurate with an advanced level of cognitive and psychomotor ability (minimum of 450 documented hours under the direct supervision of an ACI is required).

Seminar in Athletic Training (writing intensive) (3 credits)
A seminar-format course that requires students to review and critically evaluate current literature in the athletic training profession. Students are instructed in the proper method for written evaluation of scientific literature and presentation of such material to their peers.

Clinical V (3 credits)
Students are provided with two options for this clinical rotation. Option 1: Students may participate in hands-on experience with an equipment intensive sport, such as football. Students further develop and perfect learned athletic training skills under the direct supervision of an approved clinical instructor or clinical instructor (ACI or CI). Responsibilities are commensurate with an advanced level of cognitive and psychomotor ability (minimum of 450
documented hours under the direct supervision of an ACI is required). Option 2: Students may participate in rehabilitation and general medical/surgical rotations with local rehabilitation specialists and physicians. The rehabilitation portion of the clinical allows students the opportunity to associate with rehabilitation specialists (such as physical therapists) to become exposed to rehabilitation techniques for various pathologies. The general medical/surgical rotation allows students the opportunity to associate with physicians in the care of athletes as well as the general population. Surgical observations and rotations through office and athletic training room visits are requirements for this option (a minimum of 60 documented hours under the direct supervision of a CI/ACI with an emphasis on rehabilitation are required for the rehabilitation portion of the clinical; and 20 documented hours under the direct supervision of a CI/physician and 5 surgical observations are required for the general medical portion of the clinical. Total minimum clinical hours for Option 2 = 80 hours).

Note: students who participated in Option 1 for Clinical III must participate in Option 2 for Clinical V. Students who participated in Option 2 for Clinical III must participate in Option 1 for Clinical V.

*Nutrition for Athletic Performance & Rehab (3 credits)*

Broad-based study of nutrition, including fundamental scientific principles of health, wellness, human performance, injury and disease.

*Seminar in Athletic Training (BOC preparation) (3 credits)*

The culminating experience in athletic training which reviews the cognitive, psychomotor and affective domains of athletic training to prepare students to challenge the NATA-BOC examination.

*Psychology of Sport, Injury & Rehab (3 credits)*

This course is designed to provide an understanding of the psychology of sport, injury and rehabilitation.

5.F. Program Goals and Assessment

The effectiveness of the AT program and goals will be measured against several criteria, including:

- The annual number of graduates as a percentage of matriculating students. It is expected that 90% of matriculating students will complete the program within one year of expected graduation;
- Annual review of coursework and the overall program;
- Placement rate of graduates. It is expected that greater than 90% of graduates will find work within the field within three months of graduation;
- Alumni surveys will be used as a qualitative measure of graduates’ satisfaction with the program;
- Surveys and focus groups involving personnel from field experience sites will provide a qualitative measure of student preparation for “real-life” skills;
The program administrators will be comprised of both practitioners and educators familiar with the scope of work and educational requirements for athletic trainers.

The expected number of graduates is 36 per annum.

It is expected that the proportion of students who will achieve licensing, certification or registration will be 100%.

Estimated placement rates in related fields is 65%, in other fields - 35%, and unemployed – 0%. It is estimated that 25% of the graduates will eventually pursue masters degrees in athletic training or consider programs such as physical therapy (Doctor of Physical Therapy) or public health (Master of Public Health).

5.G. Alumni and Employer Survey

The School of Health Professions will initiate a self-study and quality improvement process specifically for the AT program. Annual anonymous, web-based surveys of alumni and employers will be conducted. The purpose of these surveys will be to track graduates’ preparedness to enter the workforce and to assess strengths and weaknesses in the content and format of the curricula. In addition, qualitative information will be obtained from alumni and employer interviews. These interviews will help provide a context for the quantitative information and to identify trends in employer and marketplace needs. Graduating students will also be given the opportunity to participate in separate focus groups and web-based surveys about the program curricula, research, and administration. All of this information will be shared with the School of Health Professions’ existing External Advisory Board. The surveys and interviews will be used to improve the performance of the program and its graduates and enhance the program’s ability to stay at the cutting-edge of health workforce needs.

5.H. Accreditation

Standards and guidelines are established by the National Athletic Trainers’ Association (NATA) and the Commission on Accreditation of Athletic Training Education (CAATE) for entry-level education of athletic trainers. Athletic trainers must have a bachelor's or master’s degree from an accredited athletic training program in order to take the rigorous certification examination administered by NATA’s Board of Certification, Inc. (BOC). The BOC sets the standards for the practice of athletic training and is the only accredited certifying body for Athletic Trainers in the US. Additionally, the BOC has established the continuing education requirements that a Certified Athletic Trainer must satisfy in order to maintain current status as a BOC Certified Athletic Trainer. (Source: Bureau of Labor Statistics, Occupational Outlook Handbook: http://www.bls.gov/oco/ocos294.htm).
Plans for Accreditation
The following outline is a provisional time frame for developing an entry-level athletic training education program at the University of Missouri.

Program Year 1
a. Hiring of a program director, student advisor, and administrative staff  
b. Begin MU & CBHE approval process for the new education program  
c. Apply for Year 1 of JRC-AT candidacy following approval of the new program at MU. Candidacy application requires:
   i. Completion of the application form  
   ii. Personnel chart for the program  
   iii. Academic plan for the program  
   iv. Course syllabi (with the name of the course instructor & course learning objectives) for all required courses  
   v. Instructor loads  
   vi. Clinical instruction plan (identify how students qualify for clinical placements and how clinical proficiencies and psychomotor competencies will be instructed and evaluated)  
   vii. Student selection and admission standards  
   viii. Academic catalog/bulletin  
   ix. Candidacy application fees

Program Year 2
a. Candidacy is a minimum of 2 years and a maximum of 3 years: Begin year 1 of the candidacy phase.  
b. Hire faculty, clinical coordinator, and part-time instructors (fully staffed)  
c. Begin teaching all newly created required courses for the program  
d. Establish all physical resources for the education program (classrooms, labs, etc.)  
e. Begin working on the self-study for CAATE accreditation  
f. Complete second year of the candidacy phase  
g. Finish teaching (at least once for each course) all newly created courses, and complete all other necessary things to begin the accreditation process at the start of program year 4.  
h. Self-study must be completed and submitted before June 1 in order to begin the accreditation process for the following academic year.

Program Year 3
a. Complete second year of the candidacy phase  
b. Finish teaching (at least once for each course) all newly created courses, and complete all other necessary things to begin the accreditation process at the start of program year 4.  
c. Self-study must be completed and submitted before June 1 in order to begin the accreditation process for the following academic year.

Program Year 4
a. Site-visit will occur this year if the self-study was completed and submitted on time the previous academic year.  
b. Minimum 12 months and maximum of 24 months to complete accreditation  
c. Achieve full program enrollment for first time during program year 4
APPENDIX A

School of Health Professions
University of Missouri-Columbia

Office of the Dean
509 Lewis Hall
Columbia, MO 65211

PHONE (573) 882-8013
FAX (573) 884-8000
WEBSITE: www.umhp.org

MEMORANDUM OF UNDERSTANDING (MOU)

University of Missouri (MU)
Athletic Training Degree Program

This memorandum of understanding is entered into between the MU School of Health Professions and the MU Department of Orthopaedic Surgery.

The purpose of this MOU is to:

- Acknowledge the financial commitment of $150,000 from the MU Department of Orthopaedic Surgery in support of an accredited Bachelor of Health Sciences degree program in Athletic Training in the MU School of Health Professions and
- Establish a structured repayment plan of $150,000 from the MU School of Health Professions to the MU Department of Orthopaedic Surgery

Both parties believe this new degree program will create a positive and immediate impact at MU with direct benefits to the School of Health Professions, the Department of Orthopaedic Surgery, the Missouri Orthopaedic Institute and the Department of Athletics. MU possesses expertise in orthopaedic surgery, sports science and athletic training that is unequaled both within and outside of Missouri. This expertise, coupled with state-of-the-art athletic facilities, creates an appropriate environment for an athletic training degree program of national prominence.

It is the intent of the MU School of Health Professions to reimburse the Department of Orthopaedic Surgery $50,000 per year (from excess program revenues) beginning in fiscal year 2013, or beginning the first fiscal year of programmatic excess revenue, and continuing for three consecutive years or until the original amount of $150,000 has been repaid in full.

Agreed and entered into on this 19TH day of May, 2010.

Richard E. Oliver
Dean
School of Health Professions
University of Missouri

James Stannard
Professor and Chair
Dept. of Orthopaedic Surgery
University of Missouri

There's Only One Mizzou
MEMORANDUM OF UNDERSTANDING (MOU)

University of Missouri (MU)
Athletic Training Degree Program

This memorandum of understanding is entered into between the MU School of Health Professions and the MU Department of Athletics.

The purpose of this MOU is to:

- Acknowledge the financial commitment of $50,000 from the MU Department of Athletics in support of an accredited Bachelor of Health Sciences degree program in Athletic Training in the MU School of Health Professions and
- Establish a structured repayment plan of $50,000 from the MU School of Health Professions to the MU Department of Athletics

Both parties believe this new degree program will create a positive and immediate impact at MU with direct benefits to the School of Health Professions, the Department of Athletics, Department of Orthopaedic Surgery and the Missouri Orthopaedic Institute. MU possesses expertise in orthopaedic surgery, sports science and athletic training that is unequaled both within and outside of Missouri. This expertise, coupled with state-of-the-art athletic facilities, creates an appropriate environment for an athletic training degree program of national prominence.

It is the intent of the MU School of Health Professions to reimburse the Department of Athletics $25,000 per year (from excess program revenues) beginning in fiscal year 2014 and continuing for two consecutive years or until the original amount of $50,000 has been repaid in full.

Agreed and entered into on this 14th day of June, 2010.

Richard E. Oliver
Dean
School of Health Professions
University of Missouri

Michael Alden, Athletic Director
Department of Athletics
University of Missouri
APPENDIX B

Occupational Employment and Wages, May 2010
29-9091 Athletic Trainers

Last Modified Date: May 17, 2011

National estimates for this occupation:

Employment estimate and mean wage estimates for this occupation:

<table>
<thead>
<tr>
<th>Employment (1)</th>
<th>Employment RSE (3)</th>
<th>Mean hourly wage</th>
<th>Mean annual wage (2)</th>
<th>Mean wage RSE (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>16,290</td>
<td>3.2 %</td>
<td>(4)</td>
<td>$44,030</td>
<td>1.0 %</td>
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</tbody>
</table>

Percentile wage estimates for this occupation:

<table>
<thead>
<tr>
<th>Percentile</th>
<th>10%</th>
<th>25%</th>
<th>50% (Median)</th>
<th>75%</th>
<th>90%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Wage (2)</td>
<td>$25,750</td>
<td>$33,800</td>
<td>$41,600</td>
<td>$51,280</td>
<td>$64,390</td>
</tr>
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</table>

Industry profile for this occupation:

Industries with the highest levels of employment in this occupation:

<table>
<thead>
<tr>
<th>Industry</th>
<th>Employment (1)</th>
<th>Percent of industry employment</th>
<th>Hourly mean wage</th>
<th>Annual mean wage (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colleges, Universities, and Professional Schools</td>
<td>3,670</td>
<td>0.13</td>
<td>(4)</td>
<td>$44,730</td>
</tr>
<tr>
<td>General Medical and Surgical Hospitals</td>
<td>2,640</td>
<td>0.05</td>
<td>(4)</td>
<td>$43,230</td>
</tr>
<tr>
<td>Offices of Other Health Practitioners</td>
<td>2,620</td>
<td>0.39</td>
<td>(4)</td>
<td>$40,060</td>
</tr>
<tr>
<td>Other Amusement and Recreation Industries</td>
<td>2,180</td>
<td>0.20</td>
<td>(4)</td>
<td>$43,160</td>
</tr>
<tr>
<td>Elementary and Secondary Schools</td>
<td>1,630</td>
<td>0.02</td>
<td>(4)</td>
<td>$52,840</td>
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</tbody>
</table>

Industries with the highest concentration of employment in this occupation:
<table>
<thead>
<tr>
<th>Industry</th>
<th>Employment (1)</th>
<th>Percent of industry employment</th>
<th>Hourly mean wage</th>
<th>Annual mean wage (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spectator Sports</td>
<td>680</td>
<td>0.52</td>
<td>(4)</td>
<td>$54,240</td>
</tr>
<tr>
<td>Offices of Other Health Practitioners</td>
<td>2,620</td>
<td>0.39</td>
<td>(4)</td>
<td>$40,060</td>
</tr>
<tr>
<td>Other Amusement and Recreation Industries</td>
<td>2,180</td>
<td>0.20</td>
<td>(4)</td>
<td>$43,160</td>
</tr>
<tr>
<td>Other Schools and Instruction</td>
<td>470</td>
<td>0.15</td>
<td>(4)</td>
<td>$27,470</td>
</tr>
<tr>
<td>Colleges, Universities, and Professional Schools</td>
<td>3,670</td>
<td>0.13</td>
<td>(4)</td>
<td>$44,730</td>
</tr>
</tbody>
</table>

Top paying industries for this occupation:

<table>
<thead>
<tr>
<th>Industry</th>
<th>Employment (1)</th>
<th>Percent of industry employment</th>
<th>Hourly mean wage</th>
<th>Annual mean wage (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performing Arts Companies</td>
<td>30</td>
<td>0.03</td>
<td>(4)</td>
<td>$58,700</td>
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<tr>
<td>Business, Professional, Labor, Political, and Similar Organizations</td>
<td>40</td>
<td>0.01</td>
<td>(4)</td>
<td>$55,510</td>
</tr>
<tr>
<td>Spectator Sports</td>
<td>680</td>
<td>0.52</td>
<td>(4)</td>
<td>$54,240</td>
</tr>
<tr>
<td>Elementary and Secondary Schools</td>
<td>1,630</td>
<td>0.02</td>
<td>(4)</td>
<td>$52,840</td>
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<tr>
<td>Local Government (OES Designation)</td>
<td>90</td>
<td>(7)</td>
<td>(4)</td>
<td>$48,040</td>
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</tbody>
</table>

About May 2010 National, State, Metropolitan, and Nonmetropolitan Area Occupational Employment and Wage Estimates:

These estimates are calculated with data collected from employers in all industry sectors, all metropolitan and nonmetropolitan areas, and all states and the District of Columbia. The top employment and wage figures are provided above.

The percentile wage estimate is the value of a wage below which a certain percent of workers fall. The median wage is the 50th percentile wage estimate—50 percent of workers earn less than the median and 50 percent of workers earn more than the median.

(1) Estimates for detailed occupations do not sum to the totals because the totals include occupations not shown separately. Estimates do not include self-employed workers.
Annual wages have been calculated by multiplying the hourly mean wage by a "year-round, full-time" hours figure of 2,080 hours; for those occupations where there is not an hourly mean wage published, the annual wage has been directly calculated from the reported survey data.

The relative standard error (RSE) is a measure of the reliability of a survey statistic. The smaller the relative standard error, the more precise the estimate.

Wages for some occupations that do not generally work year-round, full time, are reported either as hourly wages or annual salaries depending on how they are typically paid.

The value is less than .005 percent of industry employment.

Estimate not released.

The location quotient is the ratio of the area concentration of occupational employment to the national average concentration. A location quotient greater than one indicates the occupation has a higher share of employment than average, and a location quotient less than one indicates the occupation is less prevalent in the area than average.

(Source: http://www.bls.gov/oes/current/oes299091.htm#%284%29)
Professionals testify for bills to educate coaches about head injuries
By Christi Warren

March 2, 2011 | 9:14 p.m. CST

JEFFERSON CITY — When in doubt, sit them out.

The motto, which refers to "benching" injured student athletes, was repeated throughout the hearing room as medical professionals and a representative from the Missouri State High School Activities Association testified in support of a series of bills heard by the House Health Care Policy Committee during a public hearing Wednesday.


To do this, they propose the school boards of each district work with the association to create a training program to educate leaders of student athletes on the symptoms, risks and severity involved with head injury in children.

In addition, the bills would require that coaches not allow an injured player to return to the field prior to an examination by a health professional and also not before the culmination of rest period of a minimum of 24 hours following the injury.

Thomas Martin, former president of the board of directors of the Brain Injuries Association of Missouri, supported the other medical professionals' testimonies in emphasizing the importance of the coach's knowledge of the symptoms of brain trauma.
"We're talking about physical symptoms, nausea, headache," Martin said. "We're talking about cognitive symptoms: diminished speed of processing, diminished learning and memory. We're talking about changes in sensory functioning, balancing, coordination, vision and hearing. We're talking about changes in behavioral functioning: a lower tolerance for frustration, irritability."

A recent increase in concern about proper care for student athletes who sustain injuries to the head follows the death of Kansas City high school football player, Nathan Stiles, in October. The cause of death was a subdural hematoma, or the pooling of blood on the surface of the brain, following trauma to the tissue. His death was caused by second-impact syndrome, which happens when athletes take the field prior to healing and sustain a second injury.

"These are our children. These are our future. Multiple brain injuries, multiple concussions — they are not going to be able to function after two concussions," Wyatt said. Robert Harris, a Columbia pediatric physician, said, "All I can say is, hallelujah."

No one spoke in opposition to the bill.
### APPENDIX D

### Athletic Training Program

#### University of Missouri, New Program Proposals

**Financial Projections, INCOME**

Provide Credit Hours generated within the proposed program
Place a 1 in front of your campus  
1 Columbia  1 Kansas City  1 Rolla  0 St Louis

### Revenues

<table>
<thead>
<tr>
<th>Tuition</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
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<tbody>
<tr>
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<td>1,128</td>
<td>305,462</td>
<td>2,136</td>
<td>598,721</td>
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<tr>
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<td>252</td>
<td>179,474</td>
<td>448</td>
<td>330,221</td>
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<td>1,380</td>
<td>484,937</td>
<td>2,584</td>
<td>928,942</td>
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<tr>
<td>Educational Fee Discounting</td>
<td>19,080</td>
<td>93,915</td>
<td>178,488</td>
<td>225,780</td>
<td>239,176</td>
</tr>
<tr>
<td>Total Fees (Net Income)</td>
<td>78,052</td>
<td>391,022</td>
<td>750,454</td>
<td>954,693</td>
<td>1,010,608</td>
</tr>
</tbody>
</table>

### Supplemental Fees

<table>
<thead>
<tr>
<th>Allied Health Course Fee, UMC</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
</tr>
</thead>
<tbody>
<tr>
<td>In State Undergrad Discount Rate</td>
<td>0.16</td>
<td>0.16</td>
<td>0.16</td>
<td>0.16</td>
<td>0.16</td>
</tr>
<tr>
<td>Out State Undergrad Discount Rate</td>
<td>0.26</td>
<td>0.26</td>
<td>0.26</td>
<td>0.26</td>
<td>0.26</td>
</tr>
</tbody>
</table>

### Total Revenue Generated

<table>
<thead>
<tr>
<th></th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenue Generated</td>
<td>246,224</td>
<td>544,522</td>
<td>950,972</td>
<td>1,211,171</td>
<td>1,281,846</td>
</tr>
</tbody>
</table>
October 10, 2011

Richard Oliver, Dean
510 Lewis Hall
School of Health Professions
Columbia, MO 65211

Dear Dr. Oliver,

As discussed throughout the planning process, in addition to our financial commitment of support, the MU Athletic Department is willing to provide space as available to accommodate the proposed Athletic Training program.

This endeavor is mutually beneficial to both our organizations and we look forward to working together on this new program.

Sincerely,

Bryan Maggard, Ph.D.
Senior Associate Athletic Director