

# Board of Athletic Trainers



## Newsletter

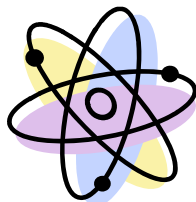
Spring 2008

A Regulatory Agency of the State of Tennessee

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The mission of the Department of Health is to promote, protect, and improve the health of persons living in, working in, or visiting the state of Tennessee

227 French Landing, Suite 300, Heritage Place MetroCenter, Nashville, TN 37243 • <http://health.state.tn.us> (615) 532-5127 or 1-800-778-4123  
Office Hours: Monday – Friday 8:00 a.m. to 4:30 p.m. Central Time (except State and Federal holidays) Fax: (615) 532-5369



### **ATHLETIC TRAINERS** **\*Nature of the Work**

Athletic trainers help prevent and treat injuries for people of all ages. Their clients include everyone from professional athletes to industrial workers. Recognized by the American Medical Association as allied health professionals, athletic trainers specialize in the prevention, assessment, treatment, and rehabilitation of musculoskeletal injuries. Athletic trainers often are one of the first health care providers on the scene when injuries occur, and therefore they must be able to recognize, evaluate, and assess injuries and provide immediate care when needed. They also are heavily involved in the rehabilitation and reconditioning of injuries. Athletic trainers should not be confused with fitness trainers or personal trainers, who are not health care workers, but rather train people to become physically fit.

Athletic trainers often help prevent injuries by advising on the proper use of equipment and applying protective or injury-preventive devices such as tape, bandages, and braces. Injury prevention also often includes educating people on what they should do to avoid putting themselves at risk for injuries.

Athletic trainers work under the supervision of a licensed physician, and in

cooperation with other health care providers. The level of medical supervision varies, depending upon the setting. Some athletic trainers meet with the team physician or consulting physician once or twice a week; others interact with a physician every day. The extent of the supervision ranges from discussing specific injuries and treatment options with a physician to performing evaluations and treatments as directed by a physician.

Athletic trainers often have administrative responsibilities. These may include regular meetings with an athletic director or other administrative officer to deal with budgets, purchasing, policy implementation, and other business-related issues.

Athletic trainers held about 17,000 jobs in 2006 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 34 percent of athletic trainers worked in health care, including jobs in hospitals, offices of physicians, and offices of other health practitioners. Another 34 percent were found in public and private educational services, primarily in colleges, universities, and high schools. About 20 percent worked in fitness and recreational sports centers.

*\*Information provided by the U.S. Department of Labor, Bureau of Labor Statistics*

NOTE: \*As of April 2008, there are 700 licensed athletic trainers in Tennessee, with 300 practicing within the state.

*\*These numbers are rounded. This information was provided by the Tennessee Department of Health, Division of Health Statistics*

# **EMERGENCY SYSTEM For Advanced Registration Of VOLUNTEER HEALTH PROFESSIONALS**

Disasters bring out the best in us; however, unfortunately, they also bring out the worst. During 9/11, healthcare professionals responded to New York City and the Pentagon to provide their services. A concern came with verifying the credentials of nurses, physicians and other multiple healthcare professionals that appeared to lend aid during this time of disaster.

Many Federal laws passed in the days after 9/11, including a federal law in 2002 that required states to establish, by August 2008, the capability for physicians, nurses, and other healthcare professionals to volunteer their assistance before a disaster occurs. This law created the *Emergency System for Advanced Registration of Volunteer Health Professionals (ESAR-VHP)*. States began to work toward this goal when in 2005 Hurricane Katrina came and again taught us the importance of having a way during a disaster to verify credentials of healthcare professionals in order to properly utilize them.

The responsibility for ESAR-VHP (*pronounced E'sar-Vip*) lies with Health Resources and Services Administration (HRSA). The Tennessee Department of Health is working on several options for establishing this database for all healthcare providers. The plan is for a web-based system by which those wishing to volunteer during a disaster can pre-register so their credentials may be verified by the states or federal government at the time of the disaster.

The database will be linked with the licensing boards in Tennessee. In the event of a disaster anywhere, the database can be accessed by the appropriate personnel to verify that those volunteering have the appropriate credentials.

This project is important to Tennesseans as the state could be the recipient of multiple volunteers should the predicted earthquake in West Tennessee or some other overwhelming disaster occurs. A system that is nationally recognized with volunteers from across the United States would be able to assist us. Additionally, the state would not have the concern that the volunteers were not properly credentialed. This system will provide a means to verify credentials of nurses at one web site. In turn, other states where this state's providers might respond during a disaster could verify Tennessee licensees' credentials.

Tennessee has always lived up to its name as the volunteer state by providing assistance to other states in time of need like the hurricanes in Florida and other coastal states and floods in Louisiana. Soon, ESAR-VHP will make it easier and safer to dispatch qualified healthcare providers to areas of need and for healthcare providers to volunteer their services. When ESAR-VHP is live and running, consider signing up as a volunteer.

--By: **Donna Tidwell, BSN, RN, EMT-P, Director**  
of  
**EMS Personnel Licensure and Education**

## ***Board of Athletic Trainers Meeting***

**November 6, 2008 - 10:00 a.m.**

**Iris Board Meeting Room  
227 French Landing, Ground Floor  
Nashville, Tennessee**



## **BOARD CONSULTANT GUIDELINES**

The Tennessee Department of Health is charged with the responsibility of regulating health care professionals to protect the health, safety and welfare of the citizens of this state.

Regulation is accomplished through twenty-plus health related boards which set qualifications for the licensure and continued competency of each regulated health professional. Each board sets standards for professional practice and is responsible for the discipline of those health professionals found guilty of violations of laws and regulations.

These measures are accomplished by three state agencies working in tandem. The agencies are:

- **Division of Health Related Boards (HRB)** – This division provides administrative and investigative services for the boards.
- **Office of Investigations** – This office is responsible for investigating complaints against any licensee. Investigations are usually precipitated when a complaint is received from the public.
- **Office of General Counsel (OGC)** – Their function is to provide legal advice to the department and the boards, which are

administered by the Division of Health Related Boards (HRB). OGC also represents the department in administrative and disciplinary hearings. OGC does not provide legal advice to licensees or applicants for licensure.

### **General State of Functions:**

Following a general protocol, board consultants may be called upon to participate in the following:

- Review and evaluation of complaints filed with the Office of Investigations for alleged violations of the Practice Act and/or rules.
- Complaint File Review – In conjunction with the Department’s Office of General Counsel, a consultant will provide and apply expertise as a practitioner of the profession, while the litigation attorney will provide the legal expertise. Together the consultant and the state’s attorney will make the decisions concerning the disposition of pending complaint files.
- Review of applications and supporting documents and make initial determination as to the eligibility/ineligibility for licensure where the board’s statutes and rules grant authority.
- Review of continuing education documentation for compliance with the board’s statutes and rules.
- Undertaking of any other matter authorized by the board and serve on ad hoc committees.

All work is strictly confidential and shall not be disclosed to anyone except the board’s authorized administrative staff, the Office of Investigations and the Office of General Counsel.

### **Minimum Qualification for a Board Consultant:**

1. Must hold a current license issued by the board with which he/she will consult.
2. Have never had his/her license restricted, sanctioned, revoked or otherwise disciplined in this state or any state, jurisdiction or territory.
3. Have a general knowledge or applied practice as detailed in the Tennessee Code Annotated, rules or the specified board/profession.

4. Are not currently under disciplinary review, which could possibly lead to legal or ethical disciplinary sanction, restriction, or similar action or condition by the Division of Health Related Boards or other licensure or certification board or professional association in any other state or locality.
5. Are an actual bona fide resident and a legally practicing professional licensed for at least five (5) years in the specified profession in this state preceding such appointment to this position.
6. Are not regularly employed by nor is a member of the governing body, training program, college or university for the specified profession.

### **How the process will work:**

1. A list will be compiled consisting of licensees who meet the criteria and indicate a willingness to be a board consultant. It is the state’s intent that these actions will preserve the integrity of the process by avoiding the appearance of impropriety and/or conflicts of interest.
2. If a consultant has a personal/professional relationship with the applicant or licensee, the consultant shall recuse himself/herself. The Division will then assign another consultant.
3. When there is a need for a board consultant by either of the above entities, a telephone contact will be made to schedule a date, time and location for the task to be accomplished. Most tasks will require the individual to travel to Nashville. The division offices are open between the hours of 8 a.m. and 4:30 p.m., Central Time, Monday- Friday.
4. Once a consultant is placed on the contact list, rejecting a consultation opportunity on three (3) consecutive requests by the department or failure to appear at a scheduled time shall be just cause for removal from the contact list.

### **General Compensation Rates and Procedure for Compensation-Monthly Basis:**

In order to be paid for travel to include mileage, lodging and meals, the individual must complete and submit a travel claim for reimbursement of travel expense no later than five

(5) days after the end of the month in which travel occurred. All written signatures on the travel claim must be original (no copies).

Telecommunications costs while on travel status-local phone calls, fax charges and long distance calls for state business will be reimbursed. Individuals must provide a statement furnishing the date, name and location called for long distance calls and fax charges.

If you meet the qualifications listed here previously, and are interested in assisting with this crucial part of licensure and regulation, please submit a current resume which clearly reflects your employment history.

The cover letter should include your license number with expiration date. It should also state that you meet the minimum qualifications listed here previously, and unequivocally state that you understand the stipulations in the above paragraphs. You must provide a telephone number where you can be reached during our business hours. Please send your resume and cover letter to:

Tennessee Department of Health  
Division of Health Related Boards  
*Name of the professional board*  
227 French Landing, Suite 300  
Heritage Place, MetroCenter  
Nashville, TN 37243



## **Public Acts of 2007**

### **Public Chapter 83 Mandatory Domestic Violence Reporting**

The General Assembly passed a new law last legislative session (2007) that mandates health care practitioners report cases of suspected or confirmed domestic violence to the Tennessee Department of Health.

The mandatory monthly reporting is a web-based system developed by the Department's Division of Health Statistics. The system became operational in October 2007, and the Department mailed you details of the required data to be reported and instruction on how to use the reporting tool. The Board will also keep you informed as more information is available.

## **Public Chapter 529 Prohibition of Employment of Illegal Aliens**

If the Commissioner of Labor and Workforce Development receives a complaint that a person licensed by a state regulatory board knowingly employs, recruits or refers for a fee for employment an illegal alien, that person is subject to an investigation and contested case hearing.

If there is proof a person knowingly employed, recruited or referred for a fee for employment, an illegal alien, which occurred while acting within the scope of practice of his/her license, the regulatory board will be required to revoke, suspend, or deny the person's license.

For the first violation, the regulatory board will be required to suspend the person's license until the licensee shows he/she no longer employs, recruits or refers for a fee for employment, an illegal alien. This can be shown by the person filing a sworn statement that the licensee no longer employs illegal aliens.

If a second violation occurs within three (3) years from the first order, the regulatory agency will be required to suspend the person's license for one (1) year.

## **Public Chapter 410 Non-Smoker Protection Act**

Public Chapter 410 created the *Non-Smoker Protection Act* which prohibits smoking in all enclosed public places within the State of Tennessee including, but not limited to, the following places:

- Areas available to, and customarily used by, the general public in businesses and non-profit entities patronized by the public including, but not limited to: banks, laundromats, factories, professional offices and retail service establishments; and health care facilities. (Nursing homes and long-term care facilities are exempt.)

This legislation requires that offices and health care facilities do the following:

- Inform all existing employees and any prospective employees upon their application for employment of the prohibition on smoking; and
- "No Smoking" signs, or the international "No Smoking" symbol, shall be clearly and conspicuously posted at every entrance to every public place and place of employment where smoking is prohibited.



## Cover Tennessee: Health Care for Tennessee's Uninsured

Governor Phil Bredesen's multi-pronged effort, **Cover Tennessee**, extends health insurance to uninsured individuals in Tennessee through three insurance programs and a pharmacy assistance program.

**CoverTN** is an affordable and portable health insurance initiative for working Tennesseans who are uninsured. Comprehensive coverage for children is provided through **CoverKids**, and chronically ill adults are eligible for **AccessTN**. **CoverRx** is a statewide pharmacy assistance program designed to assist those who have no pharmacy coverage, but have a critical need for medication.

**Cover Tennessee** provides health insurance coverage that is affordable to participants and affordable to the state.

More information on all **Cover Tennessee** programs is available at [www.CoverTN.gov](http://www.CoverTN.gov) or by calling **1-866-COVERTN**.

### Overview of Programs

#### CoverTN

CoverTN is a partnership between the state, small businesses and self-employed individuals to provide coverage for the most needed medical services. CoverTN is a voluntary initiative for uninsured Tennesseans to obtain private insurance. The individual owns the plan, not the state or the company. To promote personal responsibility, premiums are based on weight, tobacco use and age – with an average monthly premium of \$50 for each payer.

CoverTN is affordable. The program features no deductibles and pricing is simple and straight-forward: \$20 copayment for a doctor's office visit and \$10 for most prescription drugs. There is also coverage for hospitalization and other medical needs.

Enrollment is a two-step process. Once a business is confirmed as eligible, BlueCross BlueShield of Tennessee, the program's insurer, sends out enrollment materials, and individuals have 90 days to make a decision.

#### CoverKids

CoverKids offers comprehensive health insurance coverage to uninsured children 18 years-old and younger, and maternity coverage for pregnant women with household incomes below 250 percent of the federal poverty level. Families above the income limit, who wish to purchase coverage for their child, can "buy in" to the program by paying monthly premiums. The coverage is similar to the benefits offered to dependents of state employees. BlueCross BlueShield of Tennessee administers the program.

#### AccessTN

AccessTN provides comprehensive health insurance options to uninsurable Tennesseans. AccessTN, a high-risk pool, was created for persons with one of 55 specified medical conditions, or those who are unable to get insurance in the commercial market because of their health status. BlueCross BlueShield of Tennessee administers the program.

#### CoverRx

CoverRx is a statewide pharmacy assistance program designed to assist those who have no pharmacy coverage, but have a critical need for medication. CoverRx is not health insurance. It provides up to five prescriptions per month. (Insulin and diabetic supplies will not count against the monthly limit.) Express Scripts administers the program.

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[www.covertn.gov](http://www.covertn.gov)  
**1-866-COVERTN**

Tennessee Board of Athletic Trainers  
227 French Landing, Suite 300  
Heritage Place MetroCenter  
Nashville, TN 37243



## Tennessee Board of Athletic Trainers Board Members

Joseph T. Erdeljac  
Cookeville  
Athletic Trainer  
Chair

Monroe J. Abram  
Antioch  
Athletic Trainer  
Vice Chair

Kurt P. Spindler, MD  
Franklin  
Physician  
Board Member

Janet Mary Rasmussen-Wilbert  
Humboldt  
Athletic Trainer  
Board Member

Walter S. Fitzpatrick, III  
Cookeville, TN  
Consumer  
Board Member

## Board Staff

Tomica Walker  
AARB2  
Board Administrator

Laquita Crutcher  
Licensing Tech

Marva Swann  
Administrative Director