October 20, 2020

Dear Technical Review Committee,

The Nebraska State Athletic Trainers' Association (NSATA) is providing this letter in response to the Nebraska Occupational Therapy Association's (NOTA) letter submitted to the Athletic Trainer Technical Review Committee on October 7, 2020. The NSATA appreciates the opportunity to address several of the concerns raised by the NOTA. Please see our responses below.

The NOTA cited a lack of evidence to support the inclusion of the language “vocational.” The NSATA contends that the NOTA’s recommendation to use the term “tactical athletic activities” and removing “or activities requiring physical strength, agility, flexibility, range of motion, speed, or stamina” limits an athletic trainer to rendering care at a level that is less than the full capacity of an athletic trainer’s education and training. That is not the intent of the NSATA in seeking a credentialing review. Athletic trainers have experienced three advancements of educational standards since the last credentialing review completed in 1998. These standards have included didactic and clinical course work which has prepared entry level athletic trainers to work with populations who present with comorbidities and a range of populations from pediatric to geriatric. Domain 2 of the Practice Analysis, as well as Standard 50 and 71 in the CAATE 2020 Standards, demonstrate this advancement best. The NSATA has worked to ensure safety measures are in place when working with members of the public including by doing so with a referral from a licensed health care provider as outlined in 38-404. This ensures the patient and the treating health care provider have choice regarding the qualified health care provider they refer to.

The NSATA has been committed to listening to concerns and recommendations from other interest groups since it started preparing for the credentialing review process in October of 2019. The NSATA worked to use “vocational” at the recommendation of the Nebraska Chapter of the American Physical Therapy Association’s letter submitted to the Technical Review Committee early in the credentialing review process. The NSATA also tried to steer away from “occupational” as a professional courtesy to occupational therapists in Nebraska. Question seven of the additional questions section of the credentialing review application asks for “experience of other jurisdictions in regulating the practitioners affected by the proposal.” The NSATA identified states with similar language to that of the amended proposal and disciplinary data citing no increase in discipline as a result of the scope of practice changes implemented in those states. Virginia, West Virginia, and Oklahoma all have language in their respective athletic training practice acts allowing them to treat occupational injuries. In a survey sent by the Board of Certification for the Athletic Trainer to state regulatory boards, West Virginia’s athletic training regulatory board cited no increase in discipline as a result of a change in scope of practice.

The NOTA also cited the NSATA not using the term “athlete” in the proposed language. The term “athletic” was retained within a list of activities that the NSATA was asked to include to help clarify things which patients athletic trainers are seeing may be engaged in, and limited by, the conditions and illnesses as defined in the proposed language. To provide clarification in this area the NSATA included “injuries or common illnesses and conditions related to, or limits participation in, exercise, athletic, recreational, vocational, or activities requiring physical strength, agility, flexibility, range of motion, speed, or stamina.” The term “athletic” focuses on the condition being treated, not the person (athlete) as the NOTA proposes.

The NOTA also cited that there is no evidence to support that the populations athletic trainers are looking to treat are underserved. The NSATA contends that the purpose of the amended proposal is not to treat a patient population that is underserved, just use the athletic trainer’s skills for the patients they serve. The scope of practice changes would allow for athletic trainers to practice to the fullest of their scope, affording them the opportunity to provide a higher quality of care by providing services they are currently unable to render. The amended proposal would also enable athletic trainers to treat a broader range of injuries, illnesses and common conditions, enabling patients to have a choice regarding the health care professionals to provide their care.

The NSATA appreciates the continued discussion regarding the amended proposal submitted to the Technical Review Committee. The NSATA has listened to comments and recommendations from the Technical Review
Committee, interest groups, and members both prior to, and throughout the credentialing review process. The amended proposal reflects those efforts and iterations of the proposal are documented on the Credentialing Review website. The NSATA stands by its' decision to move forward with the amended proposal in its' current wording.

Sincerely,

Michael Roberts
407 Workgroup Chair
Nebraska State Athletic Trainers’ Association