Cover Sheet: Request 12432

Doctor of Athletic Training

Info

Process	Degree|New|Ugrad/Pro|Existing Type|State-funded|Residential
Status	Pending at PV - University Curriculum Committee (UCC)
Submitter	Sarah Eberhart seberhart@hhp.ufl.edu
Created	3/21/2018 2:29:00 PM
Updated	4/10/2018 5:54:07 PM
Description of request	The Doctor of Athletic Training (DAT) program will be a post-professional advanced clinical practice degree. The mission of the DAT at the University of Florida will be to develop outstanding clinical professionals, who have the expertise to positively promote and advance the Athletic Training profession. Students will advance their clinical knowledge in the areas of evidence-based practice, interprofessional and collaborative practice, and healthcare informatics/quality improvement, while engaging in a patient-centered healthcare program aimed to advance clinical practice in areas of distinction (e.g., orthopaedics, manual therapy, sport performance and/or teaching and leadership). The DAT program will prepare students to serve as credentialed healthcare providers in secondary schools, colleges and universities, sports medicine clinics, professional sports programs, industrial settings and other healthcare environments. Emerging practice settings for employment as an athletic trainer includes performing arts/dance, military, physician office and rural medical clinics.

Actions

Step	Status	Group	User	Comment	Updated
Department	Approved	HHP - Applied Physiology and Kinesiology 012603000	Thomas Clanton		3/22/2018
No document changes					
College	Approved	HHP - College of Health and Human Performance	Christopher Janelle		3/22/2018
No document changes					
OIPR	Commented	PV - Office of Institutional Planning and Research	Cathy Lebo	The summary table on the first page of the proposal needs to have the FTE calculated. Currently the form shows 297 FTE in the first year, which is really 297 total SCH. Divide total SCH by 24 credits per student (BOG standard for graduate students) to calculate FTE. FTE for the first year would be 12.4. Then the E&G costs per FTE will make sense and be close to the BOG expenditure analysis. I am sending a copy of the revised table by email so you can see how to calculate the FTE. Cathy	4/2/2018
DAT signature page (Libraries).pdf DAT EO signature page.pdf					3/22/2018 3/29/2018

Step	Status	Group	User	Comment	Updated
OIPR	Approved	PV - Office of Institutional Planning and Research	Cathy Lebo		4/6/2018
Doctor of Athletic Training Program Proposal with Appendices 04.04.2018.pdf					4/5/2018
AP for Undergraduate Affairs	Recycled	PV - Associate Provost for Undergraduate Affairs	Casey Griffith	Recycled back to OIPR at request of K. Lebo.	4/9/2018
No document changes					
OIPR	Approved	PV - Office of Institutional Planning and Research	Cathy Lebo		4/9/2018
No document changes					
AP for Undergraduate Affairs	Approved	PV - APUG Review	Angela Lindner		4/10/2018
No document changes					
University Curriculum Committee	Pending	PV - University Curriculum Committee (UCC)			4/10/2018
No document changes					
Faculty Senate Steering Committee					
No document changes					
Faculty Senate					
No document changes					
Academic Affairs					
No document changes					
Board of Trustees					
No document changes					
Board of Governors					
No document changes					
Academic Affairs Notified					
No document changes					
Office of the Registrar					
No document changes					
OIPR Notified					
No document changes					
Student Academic Support System					
No document changes					
Catalog					
No document changes					

Step	Status	Group	User	Comment	Updated
Academic Assessment Committee Notified					
No document changes					
College Notified					
No document changes					

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.

Signature of Equal Opportunity Officer	**Date** 3/28/18
Signature of Library Director	**Date**

This appendix was created to facilitate the collection of signatures in support of the proposal. Signatures in this section illustrate that the Equal Opportunity Officer has reviewed section II.E of the proposal and the Library Director has reviewed sections X.A and X.B.

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.

Signature of Equal Opportunity Officer	**Date**
	3/22/18
Signature of Library Director	**Date**

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Board of Governors, State University System of Florida

Request to Offer a New Degree Program

(Please do not revise this proposal format without prior approval from Board staff)

University of Florida	**Summer B 2020**
University Submitting Proposal	**Proposed Implementation Term**
Health & Human Performance	**Applied Physiology & Kinesiology**
Name of College(s) or School(s)	**Name of Department(s)/ Division(s)**
Athletic Training	**Doctor of Athletic Training**
Academic Specialty or Field	**Complete Name of Degree**
51.0913	
Proposed CIP Code	

The submission of this proposal constitutes a commitment by the university that, if the proposal is approved, the necessary financial resources and the criteria for establishing new programs have been met prior to the initiation of the program.

Date Approved by the University Board of Trustees		**President**	**Date**
Signature of Chair, Board of Trustees	**Date**	**Vice President for Academic Affairs**	**Date**

Provide headcount (HC) and full-time equivalent (FTE) student estimates of majors for Years 1 through 5. HC and FTE estimates should be identical to those in Table 1 in Appendix A. Indicate the program costs for the first and the fifth years of implementation as shown in the appropriate columns in Table 2 in Appendix A. Calculate an Educational and General (E&G) cost per FTE for Years 1 and 5 (Total E&G divided by FTE).

Implementation Timeframe	Projected Enrollment (From Table 1)		Projected Program Costs (From Table 2)				
	HC	FTE	E&G Cost per FTE	E&G Funds	Contract & Grants Funds	Auxiliary Funds	Total Cost
Year 1	11	12.375	$15,943	$197,300	$0	$0	$197,300
Year 2	20	22.5					
Year 3	21	23.625					
Year 4	22	24.75					
Year 5	23	25.875	$11,585	$299,750	$0	$0	$299,750

Note: This outline and the questions pertaining to each section must be reproduced within the body of the proposal to ensure that all sections have been satisfactorily addressed. Tables 1 through 4 are to be included as Appendix A and not reproduced within the body of the proposals because this often causes errors in the automatic calculations.

INTRODUCTION

I. Program Description and Relationship to System-Level Goals

A. Briefly describe within a few paragraphs the degree program under consideration, including (a) level; (b) emphases, including majors, concentrations, tracks, or specializations; (c) total number of credit hours; and (d) overall purpose, including examples of employment or education opportunities that may be available to program graduates.

The Strategic Alliance for the Athletic Training Profession, led by the accreditation arm (Commission on Accreditation of Athletic Training Education – CAATE) has approved and initiated a professional transition of athletic training preparatory programs. Effective Fall 2022, athletic training programs must either transition to a professional degree offered at the graduate (Master's degree) level or no longer enroll AT students. Professional degree transition required by the external accreditation prompted the faculty within the Department of Applied Physiology & Kinesiology (APK) to review the implications of such a requirement on the current degree/programs offered through the department. The professional level athletic training program (Bachelors Level) and post-professional level athletic training program (Masters' Level) currently split resources and have non-integrated faculty providing teaching, mentorship and clinical oversight for students across the two programs. The Department/College determined the best allocation of resources moving forward would be to combine resources (faculty, facilities, etc.) and create a new post-professional clinical doctorate in athletic training vs. transition both the Bachelor and Master's degree level programs.

The Doctor of Athletic Training (DAT) program, offered within the Department of Applied Physiology & Kinesiology (College of Health & Human Performance) will be a post-professional advanced clinical practice degree. The mission of the DAT at the University of Florida will be to develop outstanding clinical professionals, who have the expertise to positively promote and advance the Athletic Training profession. Students will advance their clinical knowledge in the areas of evidence-based practice, inter-professional and collaborative practice, and healthcare informatics/quality improvement, while engaging in a patient-centered healthcare program aimed to advance clinical practice in areas of distinction (e.g., orthopaedics, manual therapy, sport performance and/or teaching and leadership). In preparation for external accreditation through the CAATE (https://caate.net/wp-content/uploads/2017/01/2014-Standards-for-Accreditation-of-Post-Professional-Degree-Programs.pdf), the DAT advisory committee (refer to page 13 below) has outlined areas of distinction to highlight the unique attributes of the University of Florida DAT program. To provide added value to the areas of distinction, the DAT program will offer Certificates of Added Qualification (CAQ). Students matriculating in the DAT will select (during the admission process) an area of distinction to complete his/her CAQ. Students must select one area of distinction to successfully complete the DAT program. No other DAT program in the country offers CAQs as a component of the degree and our areas of distinction (refer to page 13 below) uniquely capture the expertise of the faculty, affiliate and/or adjunct clinical preceptors who support the DAT.

The DAT program will prepare students to serve as credentialed healthcare providers in secondary schools, colleges and universities, sports medicine clinics, professional sports programs, industrial settings and other healthcare environments. Emerging practice settings for employment as an athletic trainer includes performing arts/dance, military, physician office and rural medical clinics. A unique attribute of our DAT is that we anticipate providing opportunities, via funded clinical work experiences and/or CAQ experiential learning opportunities for students in each of these emerging practice areas. Graduates of the DAT program will serve the healthcare needs of physically active individuals, successfully navigate a global society, are culturally competent and positively engage with patients from a diverse background. The curriculum is designed to meet post-professional accreditation standards set forth by the CAATE. Students who graduate from the DAT program will receive an advanced clinical practice degree and will meet the requirements for a CAQ based on their selected area of distinction.

The academic, scholarship and service activities conducted through the DAT Program will promote the mission of both the College of Health and Human Performance and the University of Florida; we anticipate gaining national external accreditation for the DAT program. Faculty and students within the DAT Program will promote injury/illness prevention through community awareness activities and enhance the quality of health care for student-athletes at the local secondary school and various college/university settings. Our clinical distinction areas and didactic opportunities will foster student engagement in scholarship and professional development, which promotes the positive impact our DAT Program, College and University will have at the state, regional and national levels.

Students in the DAT program will select an area of distinction (4 available), which will lead to CAQ. The CAQ is a component of the program and is designed to provide added value and advanced skill for students, in addition to the DAT degree awarded. The DAT program offers students residential coursework (54 credits, 7000 level). Within the Athletic Training profession, the Strategic Alliance recently defined individuals who earn a post-professional clinical doctorate (i.e., DAT) as "clinical scholars with advanced knowledge and skills needed for the delivery of patient care at the highest levels". Graduates of the University of Florida's DAT program may seek employment in a variety of clinical and educational settings (e.g., faculty in professional Athletic Training programs, clinicians at the secondary school, collegiate and/or professional sport levels, performing arts, military bases, clinics, wellness centers, etc.). We anticipate graduates to have advanced clinical knowledge, experience and leadership skills to become leaders within the athletic training profession.

B. Please provide the date when the pre-proposal was presented to CAVP (Council of Academic Vice Presidents) Academic Program Coordination review group. Identify any concerns that the CAVP review group raised with the pre-proposed program and provide a brief narrative explaining how each of these concerns has been or is being addressed.

The Council of Academic Vice Presidents discussed our pre-proposal for a Doctor of Athletic Training (DAT – CIP 51.0913) on February 10, 2017 and did not have any formal concerns.

C. If this is a doctoral level program please include the external consultant's report at the end of the proposal as Appendix D. Please provide a few highlights from the report and describe ways in which the report affected the approval process at the university.

The program proposal was reviewed by Mark Merrick, PhD, AT, ATC, FNATA of The Ohio State University. Dr. Merrick has served for the past 18 years as the Director of the Division of Athletic Training in the School of Health and Rehabilitation Sciences within the College of Medicine at Ohio State University. He also holds the office of Past-President of the Commission on Accreditation of Athletic Training Education. He served as the accreditor's (CAATE) President from 2015-2017 and has been closely involved in guiding the current changes in Athletic Training education. He is also a member of the National Academy of Medicine's Global Forum on Innovations in Health Professions' Education. Because of his extensive experience in Athletic Training education, accreditation, and his national and international perspective and experience in health professions education policy, he is in a good position to review the Doctor of Athletic Training proposal and offer commentary and context for its consideration by the University, Board of Trustees and the Board of Governors. Dr. Merrick's review provides strong support for the proposal and the following are excerpts from his full review, found in Appendix D.

- The Land, Sea and Space Grant mission and flagship nature of the University of Florida's academic and athletic programs uniquely positions the proposed Doctor of Athletic Training to be a significant player in the marketplace from its inception. No other DAT program exists in this niche and it is a niche that should be uniquely attractive to prospective students both within the state of Florida and nationally.
- The early entry of the University of Florida's proposed Doctor of Athletic Training into a limited but growing pool of DAT programs positions it to be a key influencer of the future direction of these programs. Within the state, there is currently one other DAT program, at Florida

International University (FIU). While existing in the same state, the FIU program is substantially different than the proposed program at the University of Florida and it appears each has carved out a unique niche that should produce very little overlap in demand.

- The proposed Doctor of Athletic Training degree program at the University of Florida offers a unique, well-crafted and compelling curriculum specifically designed to fill an identified educational niche.
- Another innovative aspect of the proposed program is the inclusion of self-selected areas of specialized training leading to Certificates of Added Qualification (CAQ's). This is a truly novel approach that blends the best elements of a post-professional degree program with some of the narrow specialization that would typically be found only in non-degree clinical residency training. This innovative feature provides in-demand skills training and should be both attractive and beneficial to students.
- From my interactions with several key clinical practice partners, the synergy, buy-in, ownership and enthusiasm for the program are deeply rooted and the partnerships appear ready to thrive. This benefits not only the students in the program, but also the patients across these clinical practice sites.
- The recent and growing partnership with the Anaclerio Learning Center where the program will engage in medical simulation and standardized patient experiences is a clear strength. Likewise, the opportunity for Athletic Training students to engage in existing community based interprofessional education with other health care professions will also be vital to the integration of these students into the patient centered health programs and accountable care organizations that will serve the needs of the residents of the state in the future.
- The proposed Doctor of Athletic Training degree program is well conceived, appropriately resourced, and promises to offer a novel and valuable program that benefits its students, institution, community, and the residents of the state of Florida.
- The clinical practice partnerships are one of the greatest strengths of the proposed program. Advanced practice programs are often limited by their ability to find experienced and sufficiently advanced practitioners to mentor the students. The proposal identifies and partners with a core group of well-respected practitioners who are eager, engaged, and vital to the program.
- In short, the proposed program is well positioned for success and I fully support this proposal. It is my belief that it will quickly develop a strong reputation and be among the most important DAT programs in the nation.

Dr. Merrick's evaluation, recommendations and onsite visitation/discussion with program faculty and college/department administration provided valuable and supportive context for the proposal. With the ongoing support of the college and department, we anticipate positive evaluation as the proposal navigates the university approval process.

D. Describe how the proposed program is consistent with the current State University System (SUS) Strategic Planning Goals. Identify which specific goals the program will directly support and which goals the program will indirectly support (see link to the SUS Strategic Plan on the resource page for new program proposal).

The new DAT program is an advanced practice healthcare program within the CIP 51 code and is structured so that we can apply for post-professional degree accreditation from the CAATE. The DAT program supports the SUS Strategic Plan for Health Graduate Degree and External Accreditation (National Preeminence). Within the Florida Jobs – 2016 data: Athletic Trainers will have a 17.8% growth in Florida by 2024. Additionally, the mission and graduates of the DAT would support the Teaching and Learning section of the Strategic Priorities for a Knowledge Economy (i.e., GOAL: Increase the Number of Degrees Awarded in STEM and Other Areas of Strategic Emphasis) and for Excellence (i.e., GOAL: Strengthen Quality and Reputation of Academic Programs and Universities).

The development of the DAT program supports Community and Business Engagement and employment retention within Florida. The work of the faculty and students within the DAT program will support the University of Florida's role to "Deliver knowledge to advance the health, welfare, cultural enrichment,

and economy through community and business engagement and service" (SUS, BOG, Strategic Plan 2012-2025, pg. 11).

Community and Business Engagement: The DAT program, through affiliated contracts for clinical service work, will provide ATs to the local secondary schools in Alachua and surrounding counties, School of Theatre and Dance (College of Arts), and RecSports (University of Florida Office of Student Affairs) and intends to expand such relationships with other entities on campus and in the greater Gainesville community (e.g., ROTC, rural family medicine, student healthcare center).

Employment Retention in Florida: We anticipate graduates of the DAT program will remain in Florida and serve to improve healthcare for student-athletes and other physically active individuals. Data from the current University of Florida post-professional Master of Science program in Athletic Training provides a snapshot of projected impact of DAT graduates. From 2009 – 2017, the post-professional MS (concentration in Athletic Training) program had 99 graduates; 9 from Florida and 90 from out of state Bachelor level athletic training programs. Of the 99 graduates, 33 gained employment in Florida after graduation and 66 gained employment out of state; 7 of the 33 graduates employed in Florida were in-state students.

E. If the program is to be included in a category within the Programs of Strategic Emphasis as described in the SUS Strategic Plan, please indicate the category and the justification for inclusion.

The Programs of Strategic Emphasis Categories:

1. Critical Workforce:
    - Education
    - Health
    - Gap Analysis
2. Economic Development:
    - Global Competitiveness
3. Science, Technology, Engineering, and Math (STEM)

Please see the Programs of Strategic Emphasis (PSE) methodology for additional explanations on program inclusion criteria at the resource page for new program proposal.

Programs of Strategic Emphasis - Critical Workforce: Healthcare (all CIP 51)
Athletic Training (CIP 51.0913), a Health Professions and Related Clinical Sciences program, encompasses prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities. The American Medical Association recognizes ATs as healthcare professionals who collaborate with physicians to optimize activity and participation of patients and clients. The SUS Programs of Strategic Emphasis identified the Healthcare Workforce (including Athletic Training) as an area of critical need to support the demographic changes with the state of Florida http://www.flbog.edu/pressroom/strategic_emphasis/.

The University of Florida's DAT will be an advanced clinical practice degree for credentialed ATs. Students within the DAT program, may receive funding assistance to provide healthcare services within the community; and serve as primary providers for secondary schools, junior college and university-level patients in Gainesville and surrounding communities. As a 100% residential program, the DAT offered at the University of Florida would be the only residential program nationally; currently 6 online or hybrid delivery DAT programs exist, with only 1 nationally accredited by the CAATE. The areas of distinction and inclusion of the CAQ, (unique to the University of Florida) has the potential to set the post-professional standard of excellence for educating AT clinical scholars. Our program has the capacity to offer funding support (similar to the current graduate assistantship model) to off-set tuition expenses and provide stipends for clinical service work; thereby decreasing the debt students would incur while earning the DAT. The potential impact of our DAT both nationally and locally will support the preeminence mission of UF as a Top 10 Public University. Nationally, we aim to produce graduates who

exceed employment expectations and positively engage within the professional societies/associations at the state, district and national level. Locally, we aim to enroll DAT students who will elevate the visibility of our program, department, college and university though service and community engagement. Our DAT program would be the only one offered among the Top 10 Public University and Association of American Universities member institutions.

F. Identify any established or planned educational sites at which the program is expected to be offered and indicate whether it will be offered only at sites other than the main campus.

The DAT program is 100% residential and only offered on the main Gainesville campus.

INSTITUTIONAL AND STATE LEVEL ACCOUNTABILITY

II. Need and Demand

A. Need: Describe national, state, and/or local data that support the need for more people to be prepared in this program at this level. Reference national, state, and/or local plans or reports that support the need for this program and requests for the proposed program which have emanated from a perceived need by agencies or industries in your service area. Cite any specific need for research and service that the program would fulfill.

The Strategic Alliance for the Athletic Training Profession, led by the accreditation arm (CAATE) has approved and initiated a professional transition of Athletic Training preparatory programs. Effective Fall 2022, Athletic Training programs must either transition to a professional degree offered at the graduate (Master's degree) level or no longer enroll Athletic Training students. With the changing programmatic landscape, ATs will look to DAT programs, Residency or Internship experiences for post-professional training opportunities. Transition to practice for ATs continues to be an area of attention; with increased demands on professional level knowledge ATs feel the strain to adequately master skills. *Note: The CAATE will release new and expanded curricular content standards for professional programs (anticipated May/June 2018).* Employers frequently cite concerns about readiness for clinical autonomy and some value the post-professional education experience as the route to clinical decision making and practitioner confidence http://natajournals.org/doi/pdf/10.4085/1062-6050-49.3.67 . Many Athletic Training program faculty encourage newly-credentialed ATs to seek opportunities to further develop clinical skills. These elements of the current athletic training landscape support the need for high-quality post-professional experiences, such as the University of Florida's proposed DAT. While the predominant applicant pool is newly credentialed ATs; some applicants may include established clinicians looking to enhance/change clinical practice environments and improve didactic or clinical skills. Student recruitment efforts will attempt to reach all demographics to ensure diverse enrollment across the DAT. According to the "Degree Change FAQ" on the NATA website https://www.nata.org/career-education/education/resources-tools/degree-change-faqs) a potential positive impact within the professional degree shift includes increased diversity of students enrolled in professional level programs offered at the graduate level. Therefore, by extension, if more minority/diverse students earn AT credentialing that could increase the diversity among post-professional program enrollment.

Additional relevant data: Based on the current pathway to certification (Bachelors level) the Occupational Outlook Handbook (OOH) from the Bureau of Labor Statistics 2016-2026, the job outlook for AT is 22% (much faster than average). According to the OOH, *"Demand for athletic trainers is expected to increase as people become more aware of the effects of sports-related injuries, and as the middle-aged and older population remains active."* Long Term Occupational Projections (projections central website): Athletic Trainers (Florida) projected change is 25% and across the United States projected change 21% (average annual job openings are 1,040). The projection period for "long term data" (from projections central) is 2014-2024.

With the increased need for ATs in the health industry/job market, coupled with the degree transition nationally and expansion of knowledge and skills required to become an AT, we anticipate the need for advance clinical training to drive the need for post-professional experiences (i.e., DAT).

B. Demand: Describe data that support the assumption that students will enroll in the proposed program. Include descriptions of surveys or other communications with prospective students.

Our current post-professional Athletic Training program (MS – APK, specialization in Athletic Training) annually receives 80-100 applications and typically accepts 12-15 students who earn funding support for graduate study. We foresee the enrollment demand in the DAT to remain as high, or exceed, the current applicant numbers. Through collaborations with UFHealth/College of Medicine Physicians, Student Health Care Center, College of Arts and the University Athletic Association we will have funding assistance available to off-set tuition expenses for students in the program. Eligibility for application to the DAT program requires national credential (or eligibility to sit for the BOC examination) in Athletic Training (awarded by the Board of Certification). Transition to practice issue still exist for ATs and as the professional degree transitions to a Masters' level, the DAT benefits both the students and employers who seek to hire individuals trained to provide the highest level of clinical care. The DAT degree would provide additional job opportunities not available to students who seek employment immediately following the professional level degree (e.g. clinical faculty appointment within professional degrees offered at the MS level).

The Athletic Training Strategic Alliance Inter-Agency Terminology Work Group (national ad hoc committee within the profession) recently released a document "Athletic Training Glossary", and defined the terms "Post-Professional Clinical Doctorate" and "Certificate of Added Qualification" https://www.nata.org/about/athletic-training/athletic-training-glossary. Within the profession, most ATs are now aware of the degree transition and better appreciate the potential need for DAT trained individuals. Hiring practices will ultimately drive the demand; if an employer desires an AT with any prior experience before hiring then the DAT program/degree would provide students the opportunity to receive 2 years of post-certification autonomous clinical experience. Our DAT graduates will have the competitive edge with experience, training, CAQ, networking and areas of distinction/expertise from faculty. vs. students attempting to enter the workforce with only the professional degree.

NATA Salary survey (published in January 2017) provides self-reported data from approximately 25% of the certified AT members within the professional organization. Approximately 68% of respondents reported having a Master's degree (post-professional education 1-2 years) and have about $6,000 higher salary compared to those with only a Bachelor's degree (professional degree for certification). Graduates with a post-professional degree have the opportunity to earn higher average wages; higher salary employment opportunities could foster the continued need and/or demand for ATs to seek post-professional educational program when the professional degree shifts to a graduate level. Therefore programs offering post-professional advanced education (e.g., DAT) would provide students with a potential pathway to higher average salaries.

C. If substantially similar programs (generally at the four-digit CIP Code or 60 percent similar in core courses), either private or public exist in the state, identify the institution(s) and geographic location(s). Summarize the outcome(s) of communication with such programs with regard to the potential impact on their enrollment and opportunities for possible collaboration (instruction and research). In Appendix C, provide data that support the need for an additional program.

While no formal communication between our program and FIU occurred, informal review of their materials occurred in the following capacities: review of the pre-proposal document, review and assignment of course numbering (note: Dr. Patricia Tripp, athletic training faculty member serves as the Discipline coordinator for the Statewide Course Numbering System ATR taxonomy) and review of BOG staff analysis of the FIU DAT proposal.

During the Board of Governors fall meeting (November 8-9, 2017) at the University of Central Florida, the Governors considered a proposal for Florida International University's Doctor of Athletic Training Program (anticipated enrollment date Fall 2018). The FIU program is a hybrid format (online with brief

summer intensive experience once during the program) and offers two areas of specialty (injury/illness prevention and entrepreneurial leadership). The program initiated at FIU has different curricular content, instruction style, instructional faculty qualification, cost and areas of emphasis compared to the University of Florida DAT program. However, both programs will share a CIP code, degree title and potential accreditation status.

> The only information currently available for the recently approved DAT at FIU is the mission http://cnhs.fiu.edu/at/about-us/mission-vision/index.html and curricular plan of study http://cnhs.fiu.edu/at/_assets/ASSET%20DOCs/DAT-Curriculum.pdf. The CAATE standards require a minimum of 3 full-time 1.0 FTE faculty to support the professional level Master of Science in athletic training program; FIU lists four faculty, plus the department chair on the DAT program website. However, it is unclear the organizational structure and division of teaching, advising and scholarship of the faculty who currently instruct within the Master of Science professional level athletic training program and those who will serve the DAT.

Student demographics would drive enrollment for each program. With FIU's program offering an online opportunity, they would more likely capture place-bound, established clinicians, with current employment, seeking the additional DAT degree for career or salary advancement. Whereas the residential program offered through the University of Florida would capture newly credentialed ATs who seek opportunities to enhance clinical practice, mitigate transition to practice issues, advance employability and develop knowledge from preeminent faculty and clinical preceptors. We do not foresee collaboration across the programs.

Although no formal communication between our proposed DAT program faculty and the faculty within the FIU program occurred, the ATR discipline coordinator for the SUS (Dr. Patricia Tripp, University of Florida Athletic Training program faculty member) reviewed and numbered all FIU courses sent to the SCNS in September 2017 and none of the courses correlate to the UF proposed curriculum. All UF courses have unique numeric identifiers and none of the course descriptions overlap with FIU content (note: clinical experience courses exist in both programs, as expected for any advanced clinical practice degree; however, learning outcomes and course descriptions differ). After review of the pre-proposal submitted by FIU for the DAT program and the BOG Staff Analysis of the FIU program, it is clear the programs exhibit vast differences. The residential DAT program developed at the University of Florida offers unique attributes and expertise within programmatic delivery (e.g., areas of distinction, faculty expertise, and clinical opportunities), learning outcomes, resources and mission/vision for the DAT program. Students enrolling in the DAT program at the University of Florida are seeking advanced clinical practice knowledge from a residential experience and likely desire increased networking and expanded opportunities for post-graduate employment.

During the external consultation visit and evaluation, Dr. Mark Merrick provided context for demand and highlighted the significant differences between the proposed DAT program offered at FIU and the current proposal (see above, Section I, subsection C on page 3). We included highlights of his comments in Appendix C as it relates to this topic; however, please refer to the full external consultation report (Appendix D) for additional information.

D. Use Table 1 in Appendix A (1-A for undergraduate and 1-B for graduate) to categorize projected student headcount (HC) and Full Time Equivalents (FTE) according to primary sources. Generally undergraduate FTE will be calculated as 30 credit hours per year and graduate FTE will be calculated as 24 credit hours per year. Describe the rationale underlying enrollment projections. If students within the institution are expected to change majors to enroll in the proposed program at its inception, describe the shifts from disciplines that will likely occur.

We project enrollment in the post-professional, advanced clinical DAT program to start with 10-12 students, most if not all with funding assistance from program affiliates (e.g., providing local healthcare services in the Gainesville/University community). As the full professional degree transition occurs in Athletic Training (after Fall 2022) and the need for post-professional training at the Doctoral level

increases, we anticipate additional growth. Two additional factors which could continue to increase enrollment include additional funding support and expansion of credentialing requirements by hiring authorities. Students will complete 54 credit hours during the 2-year program (which includes summer sessions); numbers represent demographics of current graduate post-professional program. Projected enrollment at Year 5 considered current funding, projected funding sources and preceptor availability for selected areas of distinction (e.g., CAQ). The didactic and clinical education utilizing current facilities, faculty, and equipment for the DAT can accommodate approximately 15 student per admission cohort (i.e., 12 with funding and 3 without). Note: the Master's post-professional program offered within the Department annually receives 85-100 applications for the 10-12 funded positions; we anticipate similar application numbers for the DAT program.

E. Indicate what steps will be taken to achieve a diverse student body in this program. If the proposed program substantially duplicates a program at FAMU or FIU, provide, (in consultation with the affected university), an analysis of how the program might have an impact upon that university's ability to attract students of races different from that which is predominant on their campus in the subject program. <u>The university's Equal Opportunity Officer shall review this section of the proposal and then sign and date Appendix B to indicate that the analysis required by this subsection has been completed</u>.

As stated in IIC above, the DAT program proposed does not duplicate the anticipated offering at FIU which is planned to start in Fall 2018 and no program for Athletic Training exists at FAMU. Our recruitment efforts will attempt to reach all demographics to ensure diverse enrollment. We feel the projected expense for the UF DAT program (see Appendix A, Table 2) and tuition assistance/funding availability for students within the DAT may provide an opportunity to increase enrollment across diverse populations (e.g., race, socioeconomic status, etc.).

III. Budget

A. Use Table 2 in Appendix A to display projected costs and associated funding sources for Year 1 and Year 5 of program operation. Use Table 3 in Appendix A to show how existing Education & General funds will be shifted to support the new program in Year 1. In narrative form, summarize the contents of both tables, identifying the source of both current and new resources to be devoted to the proposed program. (Data for Year 1 and Year 5 reflect snapshots in time rather than cumulative costs.)

Based on the data, the DAT program is a cost conscious and financially viable program. Data within Table 2: Budget Table capture the following: Year 1 numbers are based on 1. Current faculty salaries (with fringe at 27.4%) at 50% load; during DAT program Year 1, each faculty will need to teach out the students within their respective programs (BSAT and MS APK – concentration AT), 2. Hiring a new staff member with competitive salary (~$50,000 with fringe at 45%), and 3. Operating expenses (e.g., accreditation, faculty professional development, student lab experiences at Harrell building, marketing and promotion, alumni relations, etc.). Year 5 numbers are based on the same expenses, but with increased faculty effort and a 10% increase in salaries (faculty and staff), plus affords additional student experience needs (e.g., expenses at Harrell building learning center). Our program will continue to receive funding support from the Department of Orthopaedic and the University Athletic Association, Inc. Within the Table 2, we showed the $160,000 gift in the Endowments, which off-sets the other E&G expenses.

B. Please explain whether the university intends to operate the program through continuing education, seek approval for market tuition rate, or establish a differentiated graduate-level tuition. Provide a rationale for doing so and a timeline for seeking Board of Governors' approval, if appropriate. Please include the expected rate of tuition that the university plans to charge for this program and use this amount when calculating cost entries in Table 2.

We do not intend to seek market rate or differential tuition for the DAT program. Our DAT students would pay the standard in or out of state graduate tuition rate (as applicable) throughout their matriculation in the DAT program. Our DAT program plans to offer tuition assistance opportunities (e.g., clinical work experience and/or scholarships) to further decrease the financial burden for the students.

C. If other programs will be impacted by a reallocation of resources for the proposed program, identify the impacted programs and provide a justification for reallocating resources. Specifically address the potential negative impacts that implementation of the proposed program will have on related undergraduate programs (i.e., shift in faculty effort, reallocation of instructional resources, reduced enrollment rates, greater use of adjunct faculty and teaching assistants). Explain what steps will be taken to mitigate any such impacts. Also, discuss the potential positive impacts that the proposed program might have on related undergraduate programs (i.e., increased undergraduate research opportunities, improved quality of instruction associated with cutting-edge research, improved labs and library resources).

Development and implementation of the DAT program in the Department of Applied Physiology & Kinesiology will utilize resources (e.g., faculty, facilities and equipment) currently dedicated to the two AT programs (Bachelors and Masters degrees) housed in APK. The Bachelor of Science in Athletic Training program is a residential program offered at the Gainesville campus and will terminate in May 2021 (pending BOG approval). Termination of the BSAT program will have a negligible impact on undergraduate enrollment in the Department of Applied Physiology & Kinesiology. As a limited access program, the BSAT program enrolls a maximum of 20 students annually. Future students will likely matriculate as part of the BSAPK degree; the APK undergraduate curriculum committee in conjunction with the AT Program faculty have begun transitioning the BSAPK specializations to capture and retain the students who would have applied for admission into the BSAT program. Pending sunset approval, the BSAT Program will be removed from the 2018 catalog; allowing any UF student enrolled at UF prior to May 2018 and any transfer eligible student to remain a viable candidate for admission through the 2019 cohort (Summer B 2019 last admission). With the termination of the BSAT program, the undergraduate student experiences occupied by the athletic training students (e.g., University Athletic Association, OSMI) could possibly accommodate more APK interns or other pre-health/clinical students.

Termination of the Master of Science in APK concentration in Athletic Training program will occur in May 2021 (pending University/BOT/BOG approval). Pending sunset approval, the concentration will be removed from the 2020-2021 Graduate Catalog, allowing the students who entered in Fall 2019 to complete matriculation. Once approved/degree changes finalized, the three Athletic Training faculty members currently employed to teach and mentor students within the BSAT professional level Athletic Training Program and MS (Athletic Training Specialization) will serve as the three faculty (Director, Associate Director and Clinical Coordinator) for the new DAT program. Resources currently allocated for the BSAT and MS (Athletic Training Concentration) will be utilized within the DAT (e.g., classroom teaching and learning spaces, clinical lab facilities, affiliate sites for clinical rotations, etc.). New course material and supply and/or equipment fees will be added to the DAT courses as appropriate.

D. Describe other potential impacts on related programs or departments (e.g., increased need for general education or common prerequisite courses, or increased need for required or elective courses outside of the proposed major).

Students within the DAT program will complete didactic degree requirements within the Department of Applied Physiology & Kinesiology. Affiliate and/or Courtesy faculty appointments and collaborations with local clinics, hospitals, sports health departments, schools, and colleges/universities, etc. will afford clinical hours for completion of areas of distinction and CAQ requirements. Relationships at these clinical sites currently exist as part of the BSAT and MS (Athletic Training concentration) and therefore we do not anticipate additional impact.

E. Describe what steps have been taken to obtain information regarding resources (financial and in-kind) available outside the institution (businesses, industrial organizations, governmental entities, etc.). Describe the external resources that appear to be available to support the proposed program.

The DAT program would receive support (financial and in-kind) through current and ongoing relationships with UFHealth/College of Medicine, College of Arts, Student Health Care Center and University Athletic Association. Additional opportunities to increase financial support for students, equipment and supplies may evolve through alumni giving and College of Health and Human Performance development office. Additional opportunities for research and grant collaboration may occur via the ongoing and continued relationships between the athletic training faculty and inter-professional colleagues (e.g., Orthopedics, Physical Medicine and Rehabilitation).

IV. Projected Benefit of the Program to the University, Local Community, and State

Use information from Tables 1 and 2 in Appendix A, and the supporting narrative for "Need and Demand" to prepare a concise statement that describes the projected benefit to the university, local community, and the state if the program is implemented. The projected benefits can be both quantitative and qualitative in nature, but there needs to be a clear distinction made between the two in the narrative.

As a land, sea and space grant institution, programs offered at the University of Florida have regional, national and international impact. Creating a residential DAT program, which offers students a funded, advanced clinical practice degree increases the available healthcare providers within the local Gainesville area and surrounding communities, thereby improving patient access and care for local underserved populations. The educational experience (didactic and clinical) provided within the DAT program, affords students with advanced clinical practice knowledge to ultimately improve patient outcomes through an evidence-based and patient-centered approach. Any opportunity to increase patient education, injury/illness prevention and provide cost-effective and evidence-based care to manage acute and chronic injury or illness decreases the burden on healthcare costs. Our students will have the ability to make an impact both on healthcare access and cost for their patients.

Students and faculty within the DAT program, through clinical outreach and service, will improve the lives of individuals within the University, local and State of Florida communities. The DAT program will offer students funding support in exchange for clinical healthcare service at affiliated sites (e.g., Gainesville High School, Eastside High School, Buchholz High School, Hawthorne Middle/High School, etc.). With a large socioeconomic disparity among minorities in Alachua County (e.g., 45% black children live in poverty), the on campus, no cost healthcare access of an AT helps mitigate risk associated with sport and afford quality healthcare to patients who would otherwise not be able to afford it or access it in a timely manner.

Currently 10% of applicants to the post-professional MS program are students enrolled at colleges/universities in Florida; we expect that trend to continue for the DAT program. State of Florida jobs 2016 data report that ATs will have a 17.8% growth in Florida by 2024. In addition, the Bureau of Labor Statistics reports that from 2014 to 2024, employment of ATs is projected to grow by 21%, which is 'much faster than the average' for all occupations (7%) http://www.bls.gov/ooh/healthcare/athletic-trainers.htm.

Global initiatives to improve healthcare among physically active individuals has allowed ATs to gain employment outside the United States (e.g., Canada, Ireland, Japan, China, and Taiwan). Therefore our DAT program has the potential to recruit students from Florida, nationally and internationally. Employment opportunities within Florida and nationally could expand further if youth sport safety initiatives ultimately force employment of ATs within the secondary schools across the country. Currently the only state, which requires the employment of an AT at each secondary school is Hawaii.

However, the Florida High School Athletic Association strongly recommends an "AT to be present for all sporting events, including practices, where athletes are at risk for concussion or for those classified as a collision sport, whenever possible" (FHSAA Handbook 2017-2018, 40.2 Appropriate Healthcare Professional).

The DAT program will offer clinical and applied research opportunities and encourage interdisciplinary collaboration across the University and within the Gainesville area community. Clinical research opportunities fostered within the DAT program and in collaboration with medical experts may provide opportunities to enhance patient-outcomes; as clinical scholars DAT students will complete applied research projects that contribute to Category C (strength of recommendation taxonomy) or Level IV or V evidence (Oxford Centre for evidence-based medicine).

V. Access and Articulation – Bachelor's Degrees Only

A. If the total number of credit hours to earn a degree exceeds 120, provide a justification for an exception to the policy of a 120 maximum and submit a separate request to the Board of Governors for an exception along with notification of the program's approval. (See criteria in Board of Governors Regulation 6C-8.014)

Not applicable

B. List program prerequisites and provide assurance that they are the same as the approved common prerequisites for other such degree programs within the SUS (see link to the Common Prerequisite Manual on the resource page for new program proposal). The courses in the Common Prerequisite Counseling Manual are intended to be those that are required of both native and transfer students prior to entrance to the major program, not simply lower-level courses that are required prior to graduation. The common prerequisites and substitute courses are mandatory for all institution programs listed, and must be approved by the Articulation Coordinating Committee (ACC). This requirement includes those programs designated as "limited access."

If the proposed prerequisites are not listed in the Manual, provide a rationale for a request for exception to the policy of common prerequisites. NOTE: Typically, all lower-division courses required for admission into the major will be considered prerequisites. The curriculum can require lower-division courses that are not prerequisites for admission into the major, as long as those courses are built into the curriculum for the upper-level 60 credit hours. If there are already common prerequisites for other degree programs with the same proposed CIP, every effort must be made to utilize the previously approved prerequisites instead of recommending an additional "track" of prerequisites for that CIP. Additional tracks may not be approved by the ACC, thereby holding up the full approval of the degree program. Programs will not be entered into the State University System Inventory until any exceptions to the approved common prerequisites are approved by the ACC.

Not applicable

C. If the university intends to seek formal Limited Access status for the proposed program, provide a rationale that includes an analysis of diversity issues with respect to such a designation. Explain how the university will ensure that Florida College System transfer students are not disadvantaged by the Limited Access status. NOTE: The policy and criteria for Limited Access are identified in Board of Governors Regulation 6C-8.013. Submit the Limited Access Program Request form along with this document.

Not applicable

D. If the proposed program is an AS-to-BS capstone, ensure that it adheres to the guidelines approved by the Articulation Coordinating Committee for such programs, as set forth in Rule 6A-10.024 (see link to the Statewide Articulation Manual on the resource page for new program proposal). List the prerequisites, if any, including the specific AS degrees which may transfer into the program.

Not applicable

INSTITUTIONAL READINESS

VI. Related Institutional Mission and Strength

A. Describe how the goals of the proposed program relate to the institutional mission statement as contained in the SUS Strategic Plan and the University Strategic Plan (see link to the SUS Strategic Plan on the resource page for new program proposal).

The University of Florida's DAT has the potential to contribute most significantly to the University's Strategic Plan under *Goal #5: A strengthened public engagement of the university's programs with local, national and international communities; Objective #1: Increased engagement and outreach of UF programs leading to positive impacts in such areas as health, the economy, environment and community.* Faculty members in Athletic Training will continue to earn national recognition and provide professional service through state, district and national committees; thereby promoting the positive impact of the DAT among peer institutions. Students completing the DAT program have the potential for national and international impact within healthcare, given the areas of distinction (e.g., orthopedics, teaching and leadership, manual therapy, sport performance) projected for the DAT program. The combination of external accreditation, which allows for benchmarking against peer institutions, along with setting the post-professional standard for clinical practice advancement through the development of a residential DAT program, fosters the foundation of excellence standard expected of programs at the University of Florida.

B. Describe how the proposed program specifically relates to existing institutional strengths, such as programs of emphasis, other academic programs, and/or institutes and centers.

Interdisciplinary and nationally recognized/ranked healthcare programs and institutes are as part of the UFHealth and University of Florida campus. The DAT program has an ongoing and continued professional relationship with these entities (e.g., College of Medicine, Orthopaedics and Sports Medicine Institute); allowing our program to integrate experts and resources to optimize student learning. As mentioned in Sections ID and IE of this proposal, graduates of the DAT program add to the number of post-professional/graduate degrees in Health and as part of CIP 51 Healthcare, also meet critical workforce needs across the state and nationally.

C. Provide a narrative of the planning process leading up to submission of this proposal. Include a chronology in table format of the activities, listing both university personnel directly involved and external individuals who participated in planning. Provide a timetable of events necessary for the implementation of the proposed program.

The process towards submission of the DAT program proposal involved detailed planning and lengthy discussion, requiring careful consideration related to department/faculty support, facilities, stakeholder support, College and University impact and professional trends within Athletic Training. Initial planning discussions began in 2013 following a National Athletic Trainers' Association Educators' Conference, where discussions emphasized the transition to practice gap apparent with the expanding/evolving profession of Athletic Training. Since multiple factors impacted the timing or viability of a new program, which didn't exist nationally yet, the DAT program remained an idea for consideration. Once the CAATE and the Strategic Alliance formally announced the timeline for professional degree transition, the conversation surrounding the University of Florida DAT program took a more serious and dedicated tone. Administration and faculty changes delayed the discussion; however, the Department and College

level support seen in 2016 provided the impetus to create the DAT program. At the time of initial discussion, there were only four DAT programs (Indiana State University, AT Still University, Temple University, University of Idaho) offered nationally, with only one accredited by the CAATE; two additional have been created (Moravian College and Florida International University – effective Fall 2018), but there is still only one CAATE accredited DAT program (Indiana State University).

Our DAT program will – 1. Be the only DAT program offered within the Association of American Universities (AAU), 2. Offer students four areas of distinction options, which lead to CAQ, 3. Earn accreditation from the CAATE by 2022 (assuming approved to enroll students in Summer B 2020), 4. Provide funding support for students (thereby being the most cost-effective of the DAT program nationally) and 5. Be the only 100% residential advanced practice DAT program nationally. We plan to create a nationally recognized program, which will allow the University of Florida to lead and set the standard for DAT programs across the country.

The DAT program advisory committee assists with developing a new and unique residential program for post-professional education within Athletic Training. Our DAT advisory committee was formed in 2016 and consists of 2 clinical/administrative AT members from the University Athletic Association (Sports Health), 3 AT faculty members within the Department of Applied Physiology and Kinesiology, 1 faculty member from the Office of Inter-professional Education/Health Science Complex, and 1 physician/doctor of pharmacy clinician from the Department of Orthopaedics and Sports Medicine (College of Medicine). In addition to our DAT advisory committee, our Department Chair, Associate Dean for Academic and Student Affairs, along with the Provost Office have been engaged with review and/or recommendation during various levels of the process for programmatic and curricular development.

The continued engagement of the DAT advisory committee members have yielded the following: preproposal document, new curriculum proposal (18 new courses), new program proposal document, academic assessment plan, areas of distinction, CAQ teams (creation of assessment method for the CAQ), preceptors to serve as supervisors within each area of distinction and inter-professional perspectives to ensure the DAT program has the utmost in academic integrity.

DAT Advisory Committee Members:
Co-Chair: Brady Tripp, PhD, LAT, ATC
Co-Chair: Patricia Tripp, PhD, LAT, ATC, CSCS
Member: Christopher Brown, PhD, LAT, ATC, CSCS
Member: David Werner, MAT, LAT, ATC [UAA/Sports Health]
Member: Jon Michelini, MS, LAT, ATC [UAA/Sports Health] (effective 8-2017)
Former Member: John Barrett, MS, LAT, ATC [UAA/Sports Health] (served until 7-2017)
Member: Erik Black, PhD [Health Science Complex, Inter-Professional Education]
Member: M. Seth Smith, MD, PharmD [UFHealth Orthopaedics and Sports Medicine]

Areas of Distinction Teams (CAQ development):
<u>Teaching/Leadership</u>
Joslyn Ahlgren, PhD
Erik Black, PhD
Patricia Tripp, PhD, LAT, ATC, CSCS (team leader)
Brady Tripp, PhD, LAT, ATC

<u>Sport Performance</u>
Christopher Brown, PhD, LAT, ATC, CSCS (team leader)
Jon Michelini, MS, LAT, ATC
Tommy Stich, MS, LAT, ATC, CSCS, FMS
Matt DeLancey, CSCS, USAW, PES, CES
Paul Chandler, CSCS

Manual Therapy
Andy Klock, MSESS, LAT, ATC, ASTYM
Spencer Thomas, MS, LAT, ATC CES, PES, ART
Brady Tripp, PhD, LAT, ATC (team leader)
Patricia Tripp, PhD, LAT, ATC, CSCS

Orthopaedics
M. Seth Smith, MD, CAQ-SM, PharmD
Brady Tripp, PhD, LAT, ATC (team leader)
Cassie Winkfield, MS, LAT, ATC, OTC
Jason Zaremski, MD, CAQ-SM, FACSM, FAAPMR

Clinical Preceptor/Affiliate Faculty within Areas of Distinction (*projections and ^additional pending):
Teaching/Leadership^
Joslyn Ahlgren, PhD
Christopher Brown, PhD, LAT, ATC, CSCS
Brady Tripp, PhD, LAT, ATC
Patricia Tripp, PhD, LAT, ATC, CSCS

Sport Performance
Matt DeLancey, CSCS, USAW, PES, CES
Paul Chandler, CSCS
Scott Greenberg, DPT, PT, CSCS, USTFCCCA
Kathleen Davis, MS, LAT, ATC, CSCS
Magnolia Parke PTs (e.g., Brittany Barrie and Josh Barabas)

Manual Therapy
Andy Klock, MSESS, LAT, ATC, ASTYM
Spencer Thomas, MS, LAT, ATC CES, PES, ART
Tommy Stich, MS, LAT, ATC, CSCS, FMS
Massage Therapists – University Sports Massage*
Alcide Chiropractic*
West Family Chiropractic*

Orthopaedics
M. Seth Smith, MD, CAQ-SM, PharmD
Cassie Winkfield, MS, LAT, ATC, OTC
Jason Zaremski, MD, CAQ-SM, FACSM, FAAPMR
Bryan Prine, MD – OrthoCare*
Kevin Vincent, MD, PhD - Running Medicine Clinic*
Dan Herman, MD, PhD - Running Medicine Clinic*
Mike Moser, MD - Sports Surgery*
Kevin Farmer, MD - Sports Surgery*
Cooper Dean, MD - MSK Radiology*
TBD - Sports Cardiology^
Sarah Molinari, MD - Pediatric Orthopedics*

Planning Process

Date	Participants	Planning Activity
April 2013	Brady Tripp, Pattie Tripp, Dept. Chair: Mike Delp	Discussion about AT program transitions (data from ATEC, January 2013 – Dallas)
August 2014	Brady Tripp, Pattie Tripp, Interim Dept. Chair: Steve Dodd	Proposal for Department Faculty Meeting (MSAT – professional and DAT

		– post-professional)
April-May 2015	CAATE Announcement Mandate MS professional level transition or terminate (Fall 2022)	Feasibility Meetings with Assoc. Dean: Chris Janelle
October 2015	Dept. Chair: Tom Clanton, Pattie Tripp	Meeting (MSAT – professional and DAT – post-professional; faculty hire)
November 2015-February 2016	Search and Screen Committee, Dept. Chair: Tom Clanton	Hire new Clinical Education Coordinator for AT Program; Facility enhancement
January 2016	Associate Provost (Angel), Dept. Chair: Tom Clanton, Assoc. Dean: Chris Janelle	Meeting (MSAT – professional and DAT – post-professional)
March 2016	Brian Marchman (Distance Learning), Dept. Chair: Tom Clanton and Assoc. Dean: Chris Janelle	Meeting and Market Analysis Discussion for DAT only
April 2016	Dept. Chair: Tom Clanton, Brady Tripp, Pattie Tripp	Meeting DAT proposal for Dean Reid
May 2016	Dept. Chair: Tom Clanton and Dean Mike Reid	Meeting DAT proposal
May 2016	Dept. Chair: Tom Clanton, Pattie Tripp	Meeting DAT proposal
July 2016	Dept. Chair: Tom Clanton, Assistant Athletic Director: Dave Werner, Brady Tripp, Pattie Tripp	Meeting AT Transition process and timeline/stakeholder impact
August 2016	Dept. Chair: Tom Clanton, Brady Tripp, Pattie Tripp	Department Faculty Meeting – APK Approval for DAT plan; Facility enhancement projected for Fall 2017

Events Leading to Implementation

Date	Implementation Activity
August 2016	Formation of DAT Advisory Committee
October 2016	DAT Advisory Committee Meeting (Curriculum Map, Areas of Distinction, pre-Proposal Document, Academic Assessment Plan, Accreditation requirements, Committee Expectations)
November 2016	DAT Advisory Committee Meeting (Academic Assessment Plan, Outcome measures, Areas of Distinction, Funding, New Courses, BSAT Sunset)
December 2016	New DAT program Pre-Proposal submitted to Provost
January 2017	DAT Advisory Committee Meeting (Curriculum mapping, outcomes, new courses, clinical experience for Areas of Distinction, Marketing materials, timeline for projects)
February 2017	BSAT Sunset Paperwork submitted, Pre-Proposal DAT approved at CVAP
September 2017	New DAT Curriculum (18 new courses) submitted through approvals
October 2017	DAT Advisory Committee Meeting (Area of Distinction teams and preceptors, assessment measures- CAQ, marketing materials, define DAT vs. PhD, new program full proposal document)
November 2017	DRAFT Full DAT Proposal Advisory Committee
November 2017	External Reviewer Contracted; Facilities Enhancement
December 2017	DRAFT Full DAT Proposal submitted to Provost/Administration (CAQ Team meetings, development of Academic Assessment Plan and CAQ process)
January 2018	Document Review – External Consultant Notification to SACS via Office of Assessment
February 2018	Onsite Visit/Evaluation – External Consultant
February 2018	DAT Proposal submitted to Department Curriculum Committee
March/April 2018	DAT Proposal submitted to College Curriculum Committee

April/May 2018	DAT Proposal submitted to University Curriculum Committee
Fall 2018	DAT Proposal submitted to Board of Trustees
Spring 2019	DAT Proposal submitted to Board of Governors
Fall 2019	Sunset Paperwork MS AT Concentration Submit Voluntary Withdrawal of CAATE Accreditation for BSAT (teach out plan, last graduates May 2021)
Fall 2019	Marketing, student recruitment for DAT (enrollment Summer B 2020)
Summer B 2020	Enrollment begins for first cohort of DAT students Initiate Self-Study Process for CAATE post-professional accreditation (due July 2021) with projected onsite visitation Spring 2022 (expected accreditation awarded Spring/Summer CAATE Commissioners Meeting 2022)

VII. Program Quality Indicators - Reviews and Accreditation

Identify program reviews, accreditation visits, or internal reviews for any university degree programs related to the proposed program, especially any within the same academic unit. List all recommendations and summarize the institution's progress in implementing the recommendations.

The University of Florida Doctor of Nursing Practice degree (post-professional clinical degree) offered in the College of Nursing and the University of Florida Doctor of Audiology (post-professional clinical degree) offered within the College of Agriculture and Life Sciences and College of Medicine have similar framework and advanced practice missions for Nursing and Audiology respectively. Our DAT program, unique to other healthcare programs offered at the University of Florida will have similarities in credits, clinical scholarship and advanced practice mission to these programs.

During the development of the DAT program/curriculum, the DAT advisory committee used the current post-professional accreditation standards provided by the CAATE https://caate.net/post-professional-programs/, considered the projected new CAATE standards for professional Athletic Training program knowledge (anticipated implementation Fall 2019), standards of professional practice (effective January 2018) from the Board of Certification and incorporated the Institutes of Medicine Core Competencies (e.g., provide patient-centered care, work in interdisciplinary teams, employ evidence-based practice, apply quality improvement and utilize informatics) when developing curriculum, programmatic goals, learning outcomes and assessment plans for the areas of distinction (e.g., CAQ, academic assessment plan, etc.).

VIII. Curriculum

A. Describe the specific expected student learning outcomes associated with the proposed program. If a bachelor's degree program, include a web link to the Academic Learning Compact or include the document itself as an appendix.

Program Goals:

1. Meet the post-professional standards and abide by the guidelines set forth by the Commission on Accreditation of Athletic Training Education (CAATE).
2. Provide advanced clinical practice knowledge in the domains of athletic training and afford students areas of distinction that meet their needs for transition to practice as a post-professional clinician.
3. Promote professionalism and the importance of ethical practice employing patient-centered care.
4. Ensure quality, advanced clinical practice experiences in the areas of distinction (orthopaedics, manual therapy, sports performance and teaching/leadership).
5. Engage in scholarly experiences to promote quality advanced clinical practice, which includes integration of evidence-based tools for optimal patient outcomes.

Student Learning Outcomes:

Content

1. Examine, appraise and employ proper evidence based care to ensure adherence to the practice

domains of athletic training.
2. Develop advanced clinical skills to improve patient outcomes using advanced diagnostics and therapeutic intervention tools.
3. Develop scholarly expertise through clinical research and incorporate evidence-based practice strategies for optimal patient care.
4. Employ proper administration and leadership strategies to effectively manage patient care.
5. Examine the role of continuing education, professional engagement and mentorship for optimal professional development in athletic training.

Critical Thinking

6. Appraise the importance and characteristics of professionalism, moral reasoning and ethical behavior, and employ these characteristics during clinical practice.

Communication

7. Incorporate effective communication, team and leadership skills to ensure effective inter-professional clinical practice and optimal patient outcomes.
8. Develop and apply quality improvement methodologies to ensure effective clinical practice and optimal patient outcomes.

B. Describe the admission standards and graduation requirements for the program.

Minimum Requirements for DAT program Admission:

1. Credentialed by the BOC as an AT at time of admission (certified-eligible candidates may apply)
2. Licensed or license eligible in Florida to practice as an AT
   *Students must meet all requirements by the FLDOH http://floridasathletictraining.gov/
3. GRE score minimum of 146 Verbal and 146 Quantitative
4. GPA of 3.0 (on a 4.0 scale) or better within professional level Athletic Training program courses
5. Completion of Portfolio Process (outlined below)
6. Admission to the University of Florida* (online application – separate from DAT program admission)

Portfolio Requirements:

- Completion of CAATE Athletic Training Program (or earned certification as an AT prior to CAATE accreditation).
- 3 Letters of Recommendation (minimum of one from Athletic Training Faculty and minimum of one from Supervisor/Preceptor)
- Letter of Intent (Please draft a typed/professional letter addressed to the DAT Admission Committee. Please include information that helps the committee understand why the applicant chose a career in Athletic Training, academic/professional goals, relevant experiences that shaped the applicants reason for select the DAT program, intended area of distinction preference, etc.). If applying for specific funding assistance, please list preferences and clinical opportunities.
- Resume (emphasis on Athletic Training experience and professional engagement)
- Official GRE Scores (Minimum Requirements of 146 Verbal and 146 Quantitative [400 and 550 respectively under old scoring system] – official scores must be sent UF institutional code #5812)
- Official transcripts from all colleges and universities previously attended. (Submit original copies only to both DAT program and University of Florida*)
- Completed CAATE Athletic Training Curriculum GPA > 3.0/4.0 *(Official Transcript and Advising Form)*
- Comply with Communicable Disease Policies *(Signed Active Communicable Disease Policies Form)*
- Current Immunization Record [HBV Vaccination or signed waiver, Meningococcal Meningitis Vaccine or signed waiver, Tuberculosis Skin Test (PPD negative), MMR, Td (Tetanus)/Diphtheria or/and Tdap within last 10 years, Varicella (Chicken pox) vaccine or history of disease and Flu vaccination for the current season] *(Immunization, Wellness and Health Insurance Attestation Form)*
- Attestation by medical provider student meets immunization and Technical Standards requirements *Technical Standards Form – includes Wellness Attestation by Healthcare Provider)*
- Health Insurance Coverage *(Immunization and Health Insurance Attestation Form)*
  - *Graduate Student Insurance available through Student Health Care Center*
- Meet Technical Standards with or without accommodations *(Technical Standards Form)*

- Admission into the University of Florida's Department of Applied Physiology and Kinesiology
- Upon selection for admission consideration, candidates must complete an interview with DAT Admission Committee

Selection Criteria:
Selection of DAT students and awards of funding support is competitive based on successful completion of the portfolio process for admission. Once an applicant's file is complete, it is reviewed by the DAT admission committee. To be accepted, the majority of the DAT admission committee must approve the application for admission based on criteria previously listed, AND at least one member must be available to act as an advisor for the area of distinction. Admission occurs once each academic year, and begins the Summer B term. Students may earn admission to the DAT without funding support. The AT Program notifies candidates on or before April 1st regarding admission and funding support.

Retention Requirements:
Once accepted into the DAT program, students will be required to complete a two-year didactic and clinical based program. Students must complete 46 credit hours and fulfill all AT Program requirements for retention and graduation to successfully earn the Doctor of Athletic Training degree. Students are required to complete all program retention requirements listed below on or before first day of the DAT program (Summer B term). Some program requirements incur additional expenses to the student, above those already paid to the University through tuition, fees and laboratory/equipment course fees. The actual expenses may vary, however the DAT Program provides good-faith estimates.

- Maintain good standing with the Board of Certification, including continuing education requirements (see fees on the BOC website)
- Maintain good standing with the FLDOH, including license and continuing education requirements (see fees on the FLDOH Athletic Training website; requires Background Check different than Level II Background Check listed below)
- Bloodborne Pathogens Training Certificate (Students should complete the UF Environmental Health and Safety Training for BBP (UF_EHS850C – Clinical Audience) via the "myTraining" site and provide the completion certificate, valid through the end of the application semester)
- Complete HIPAA Training via "myTraining" (see instructions for access at the UF Privacy Office website) and the Confidentiality Statement (health) information via the left-hand menu of the Privacy website. Students must provide a copy of the HIPAA certificate and signed Confidentiality (health) statement. Important note: HIPAA and Confidentiality training expires December 31 annually so you will need to renew in January of the application year; all students should have training current through the application year.
- Emergency Cardiac Care (ECC) Certification *(Provide a Copy of the Card)*; for details regarding acceptable ECC certification, please refer to the Board of Certification requirement.
- Membership within the National Athletic Trainers' Association and associated District and State Levels (see fees on the NATA website)
- Professional Liability Insurance (minimum coverage 1 million/3 million) (e.g., HPSO professional liability approximately $230 annually)
- Level II Background Check through School Board Alachua County (approximately $60)

Graduation Requirements:

- Maintenance of the DAT program Retention Requirements
- Didactic success with a B (3.0/4.0) or better in each DAT course (18 courses)
- Successful completion of comprehensive examination for DAT degree
- Successful completion of at least one area of distinction CAQ

C. Describe the curricular framework for the proposed program, including number of credit hours and composition of required core courses, restricted electives, unrestricted electives, thesis requirements, and dissertation requirements. Identify the total numbers of semester credit hours for the degree.

The DAT program will include 6 semesters (54 credit hours) of didactic coursework. Students will select an area of distinction (4 available) and complete clinical hours, projects, seminar attendance and/or other designated experiences to fulfill the certificate of added qualification for the selected area of distinction. Within the coursework, students will be ask to complete a scholarly activity, which may include manuscript and/or presentation at professional conference; however, the program does not require a formalized thesis or dissertation project. Students will meet expectations of graduation upon successful completion of all courses (with a 3.0/4.0) or higher. Certificates of added qualification will be awarded by the DAT program to students who complete all requirements for area(s) of distinction. Advanced clinical experience courses (4) will capture the experiential learning completed for an area of distinction for each student.

D. Provide a sequenced course of study for all majors, concentrations, or areas of emphasis within the proposed program.

YEAR I Course Sequence (23 Credits) The DAT curriculum includes 18 courses (total: 54 credits)			
Summer I (Year I) (2020) DAT-1	**CR**		
ATR 7108c Clinical Management in AT	**3**		
TOTAL	**3**		
Fall Semester I (2020) DAT-1	**CR**	**Spring Semester I (2021) DAT-1**	**CR**
ATR 7210c Evidence Based Musculoskeletal Examination I	3	ATR 7211c Evidence Based Musculoskeletal Examination II	3
ATR 7309c Evidence Based Therapeutic Intervention	3	ATR 7318c Sport Performance & Intervention	3
ATR 7229c Diagnostic Imaging for Athletic Trainers	3	ATR 7438c Clinical Techniques and Pharmacology for Athletic Trainers I	3
ATR 7818c Advanced Clinical Experience I	3	ATR 7828c Advanced Clinical Experience II	3
TOTAL	**12**	**TOTAL**	**12**
YEAR II Course Sequence (23 Credits)			
Summer II (Year II) (2021) DAT-1	**CR**		
ATR 7128cAdvanced Cadaveric Dissection	3		
TOTAL	**3**		
Fall Semester II (2021) DAT-1	**CR**	**Spring Semester II (2022) DAT-1**	**CR**
ATR 7209c Movement Screening and Assessment	3	ATR 7509 Leadership and Mentoring in AT Clinical Practice	3
ATR 7439c Clinical Techniques and Pharmacology for Athletic Trainers II	3	ATR 7519 Administration in Athletic Training	3
ATR 7628 Clinical Research in Athletic Training I	3	ATR 7629 Clinical Research in Athletic Training II	3
ATR 7838c Advanced Clinical Experience III	3	ATR 7848c Advanced Clinical Experience IV	3
TOTAL	**12**	**TOTAL**	**12**

E. Provide a one- or two-sentence description of each required or elective course.

ATR 7108c Clinical Management in Athletic Training
Designed to enhance the independent clinical practice of new athletic training practitioners. Content

focuses on creating effective, comprehensive policy and procedures (e.g., emergency management, pre-participation evaluation and clearance) for appropriate clinical management of traumatic and environmental conditions. Appropriate documentation, practice standards and communication skills discussed and practiced. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7128c Advanced Cadaveric Dissection
Advanced clinical anatomy course, employing human cadaver dissection as a means to learn the major musculoskeletal, vascular, and nervous structures relevant to the field and practice of Athletic Training. Students will be responsible for dissecting the human cadaver and discussing applications of gross anatomy knowledge. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7209c Movement Screening and Assessment
Athletic Trainers will advance foundational knowledge to effectively implement and interpret screening tools for injury prevention, management and comprehensive therapeutic intervention programming. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7210c Evidence Based Musculoskeletal Examination I
Athletic Trainers develop skills and appraise the principles and procedures used in the musculoskeletal assessment of upper-extremity function and dysfunction. Topics include the statistical evaluation of diagnostic tests, 3-dimensional kinematics, interpreting contemporary diagnostic tests and treatment of upper-extremity pathology/dysfunction and critical reviews of related research. Pre-requisite: ATR 7108c Clinical Management in Athletic Training.

ATR 7211c Evidence Based Musculoskeletal Examination II
Athletic Trainers develop skills and appraise the principles and procedures used in the musculoskeletal assessment of lower-extremity function and dysfunction. Topics include the statistical evaluation of diagnostic tests, 3-dimensional kinematics, interpreting contemporary diagnostic tests and treatment of upper-extremity pathology/dysfunction and critical reviews of related research. ATR 7210c Evidence Based Musculoskeletal Examination I.

ATR 7229c Diagnostic Imaging for Athletic Trainers
Provides Athletic Trainers background information on the physics, physiology, appropriate use and appraisal of diagnostic imaging techniques used in sports medicine including: radiography, magnetic resonance imaging, ultrasonography and nuclear medicine. Athletic Trainers develop skills interpreting diagnostic imaging and analyze the principles and procedures used in each technique. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7309c Evidence Based Therapeutic Intervention
Prepares athletic trainers to utilize current evidence when designing and implementing therapeutic intervention programs for optimal patient outcomes. Students will incorporate disablement model framework, disability measures and documentation tools to guide intervention strategies. Discussion will include complimentary or alternative therapies, injury prevention programs and protocol-based vs. criteria-based rehabilitation approaches. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7318c Sport Performance and Intervention
Furthers the Athletic Trainers' therapeutic and functional performance knowledge and advances clinical skills in the design and implementation of exercise and nutrition programs for the prevention, management and enhancement of activity/performance. ATR 7309c Evidence-Based Therapeutic Intervention.

ATR 7438c Clinical Techniques and Pharmacology for Athletic Trainers I
Designed to advance Athletic Trainers application and implementation of pharmacology; including medications commonly used among physically active patients. Athletic Trainers will advance their skills and experience with using techniques employed clinically for diagnostics, management and treatment

intervention for injury, illness and emergent conditions. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7439c Clinical Techniques and Pharmacology for Athletic Trainers II
Provides the Athletic Trainer with advanced clinical diagnostic skills to assess patients using medical evaluation procedures and employ appropriate and culturally sensitive therapeutic intervention or referral strategies for injury, illness and emergent conditions. ATR 7438c Clinical Techniques and Pharmacology for Athletic Trainers I.

ATR 7509 Leadership and Mentoring in AT Clinical Practice
Provides Athletic Trainers with specific knowledge of learning theories, teachings methods, clinical transition to practice and the role of mentorship and professional engagement in athletic training. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7519 Administration in Athletic Training
Offers Athletic Trainers an in-depth examination of the standards, policies and practices of a healthcare organization; allowing for safe, effective and quality patient care. Discussions will include current topics related to professional development, credentialing and legislative issues. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7628 Clinical Research in Athletic Training I
Equips Athletic Trainers with the knowledge, skills and abilities necessary to make independent judgments about the validity, results, and application of clinical research and to implement evidence-based clinical practice in their careers. Content addressed will enhance professional writing, scholarship appraisal and application of current evidence for improved patient outcomes. Pre-requisite: Admission into the Doctor of Athletic Training program.

ATR 7629 Clinical Research in Athletic Training II
Advances the research experience for Athletic Trainers and fosters the integration of evidence-based clinical practice for improved patient outcomes. Students will improve professional writing skills and scholarship appraisal and produce a scholarly work (e.g., presentation, publication). ATR 7628 Clinical Research in Athletic Training I.

ATR 7818c Advanced Clinical Experience I
Allows Athletic Trainers to develop a specialized body of knowledge and skills through scholarly appraisal, seminar attendance, clinical experiences; designed to promote integration and synthesis of cognitive and psychomotor skills learned in previous semesters. One of a series of courses affording didactic and clinical integration of content within the specialty. ATR 7108c Clinical Management in Athletic Training.

ATR 7828c Advanced Clinical Experience II
Allows Athletic Trainers to develop a specialized body of knowledge and skills through scholarly appraisal, seminar attendance, clinical experiences; designed to promote integration and synthesis of cognitive and psychomotor skills learned in previous semesters. One of a series of courses affording didactic and clinical integration of content within the specialty. ATR 7818c Advanced Clinical Experience I.

ATR 7838c Advanced Clinical Experience III
Allows Athletic Trainers to develop a specialized body of knowledge and skills through scholarly appraisal, seminar attendance, clinical experiences; designed to promote integration and synthesis of cognitive and psychomotor skills learned in previous semesters. One of a series of courses affording didactic and clinical integration of content within the specialty. ATR 7828c Advanced Clinical Experience II.

ATR 7848c Advanced Clinical Experience IV
Allows Athletic Trainers to develop a specialized body of knowledge and skills through scholarly appraisal, seminar attendance, clinical experiences; designed to promote integration and synthesis of cognitive and psychomotor skills learned in previous semesters. One of a series of courses affording didactic and clinical integration of content within the specialty. ATR 7838c Advanced Clinical Experience III.

F. For degree programs in the science and technology disciplines, discuss how industry-driven competencies were identified and incorporated into the curriculum and indicate whether any industry advisory council exists to provide input for curriculum development and student assessment.

The Strategic Alliance for Athletic Training influences and/or regulates the content knowledge expectations of ATs. The NATA has the Executive Committee on Education *(mission: "The Executive Committee for Education informs and assists the profession in setting the direction for athletic training education. Emphasizing a commitment to improving patient care through an evidence-based approach, the ECE proactively influences best educational practices that reflect athletic training's interprofessional nature and commitment to learning")*, the NATA Foundation Pronouncements Committee formulates Position Statements *("Scientifically based, peer reviewed research with a team of authors who are experts on the subject")* for professional practice, the Board of Certification (for athletic training) regulates the continuing education and standards of practice (e.g., role delineation/practice analysis) for certification and the CAATE regulates the professional knowledge content areas and standards for professional preparation towards certification as an AT. The CAATE also serves as the accrediting agency for Athletic Training programs (professional, post-professional, and residency).

When developing the DAT, the advisory committee considered the following items: 1. Current and future CAATE standards for professional accreditation (expected implementation Fall 2019), 2. Board of Certification continuing education requirements, 3. Current state practice regulations (e.g., FLDOH), and 4. Other guidelines currently held within the profession (e.g., code of ethics, professional responsibility, position statements) to design a comprehensive, advanced practice degree that would afford graduates the skills and expertise to enter the profession and make an immediate impact (e.g., collegiate sport, administration, academics, clinic, emerging settings, etc.).

G. For all programs, list the specialized accreditation agencies and learned societies that would be concerned with the proposed program. Will the university seek accreditation for the program if it is available? If not, why? Provide a brief timeline for seeking accreditation, if appropriate.

The CAATE accredits programs at the following levels: professional (required), post-professional (optional) and residency (optional). The DAT program is a post-professional program and we intend to seek accreditation. The timeline for accreditation is below:

1. Summer 2019: Submit intent to apply as a post-professional program to the CAATE (requires BOT/BOG/FLDOE approval of degree prior to submission)
2. Academic Year 2020-2021: Conduct Self-Study of DAT program (1st admission cohort Summer B 2020); Due to CAATE Office by July 1, 2021
3. Academic Year 2021-2022: On-Site Visit/CAATE Evaluation (1st graduating class May 2020)
    a. Note: CAATE usually requires programs to have taught and/or be teaching the entire curriculum before onsite visitation so the CAATE Commission may require a Spring 2022 Site Visit
    b. Note: post-professional accreditation through the CAATE is not a requirement therefore it is not needed prior to enrollment of the 1st cohort
    c. Note: CAATE Commission makes accreditation decisions in May/August after the Site Visitation; students in the DAT graduating in May 2022 will be awarded a certificate from the CAATE validating he/she "graduated from accredited DAT Post-Professional program" (if requested)

H. For doctoral programs, list the accreditation agencies and learned societies that would be concerned with corresponding bachelor's or master's programs associated with the proposed program. Are the programs accredited? If not, why?

The CAATE has created a mandate timeline for professional level Athletic Training programs to transition from a BSAT to an MAT/MSAT, with the final student admissible to a currently accredited BSAT program no later than Fall 2022. Professional level Athletic Training programs have a CAATE accreditation requirement; post-professional Athletic Training programs have optional accreditation. Nationally – the CAATE accredits over 300 Professional Level Athletic Training Programs, which will transition or voluntarily withdraw over the next 5-7 years. Additional new professional Athletic Training programs will come on board; current information available on the accreditation website http://caate.net/find-programs/

I. Briefly describe the anticipated delivery system for the proposed program (e.g., traditional delivery on main campus; traditional delivery at branch campuses or centers; or nontraditional delivery such as distance or distributed learning, self-paced instruction, or external degree programs). If the proposed delivery system will require specialized services or greater than normal financial support, include projected costs in Table 2 in Appendix A. Provide a narrative describing the feasibility of delivering the proposed program through collaboration with other universities, both public and private. Cite specific queries made of other institutions with respect to shared courses, distance/distributed learning technologies, and joint-use facilities for research or internships.

The DAT program will be delivered as a 100% residential program on main campus. Faculty will incorporate various teaching strategies including flipped classroom and traditional didactic educational models. Advanced clinical experience courses and hours expected for completion of the area of distinction CAQ will use DAT program affiliates or courtesy faculty and facilities within the immediate vicinity of the main campus. Some of the affiliated clinics/locations for assistance with area of distinction clinical hours include those listed below. Funding assistance for clinical work will occur in collaboration with University and Gainesville Area schools/clinics and may include some additional clinics/sites identified with ^.

1. University of Florida Department of Applied Physiology & Kinesiology
2. College of Medicine/UF Health Family Medicine Clinics (e.g., Old Town, Main Street, Student Health)
3. University Athletic Association (e.g., Sports Health^, Strength & Conditioning, Concussion Research^)
4. UF Health/Orthopaedics and Sports Medicine Institute (e.g., OrthoCare, Florida Surgical Center, Sports Medicine, Research, Pediatrics, Cardiology, etc.)
5. University Sports Massage
6. West Family Chiropractic^
7. Run Safe Run Fast
8. UFHealth Magnolia Park (Physical Therapy/Rehabilitation)
9. College of Arts, School of Theatre and Dance^
10. UF Health Department of Orthopaedic Outreach^
    a. University of Florida RecSports
    b. School Board Alachua County
    c. Santa Fe College
    d. School Board Gilchrist County
    e. School Board Columbia County
    f. St. Francis Catholic High School
    g. PK Yonge Developmental Research School
    h. Oak Hall School

IX. Faculty Participation

A. Use Table 4 in Appendix A to identify existing and anticipated full-time (not visiting or adjunct) faculty who will participate in the proposed program through Year 5. Include (a) faculty code associated with the source of funding for the position; (b) name; (c) highest degree held; (d) academic discipline or specialization; (e) contract status (tenure, tenure-earning, or multi-year annual [MYA]); (f) contract length in months; and (g) percent of annual effort that will be directed toward the proposed program (instruction, advising, supervising internships and practica, and supervising thesis or dissertation hours).

See Appendix A – Table 4 for faculty participation

B. Use Table 2 in Appendix A to display the costs and associated funding resources for existing and anticipated full-time faculty (as identified in Table 4 in Appendix A). Costs for visiting and adjunct faculty should be included in the category of Other Personnel Services (OPS). Provide a narrative summarizing projected costs and funding sources.

With three core faculty, teaching space and equipment already resourced for the current athletic training programs (Bachelor and Master Levels), expenses related to the program include reallocation of salary and operating expenses (e.g., marketing, accreditation fees, professional development, educational opportunities, etc.). New funding, as allocated within the proposed budget, includes salary support for administrative staff needs (column 3). As the DAT program grows, additional educational, equipment and/or marketing (as an example) needs will incur increased expense (noted as $10,000 in column 10). Salary figures in Year 1 (column 1) were calculated based on the teaching allocation (Table 4 in Appendix A) and used current (FY 2017-2018) salaries for the three, core faculty teaching in year 1. Operating expenses were estimated based on the accreditation, marketing and educational demands projected for year 1. The Athletic Training programs (BSAT and MS in APK concentration in Athletic Training) currently receive financial support from the ongoing relationship with the University Athletic Association, Inc. and the Department of Orthopaedics (College of Medicine, University of Florida). Column 6 accounts for the 50% value of the funding support, which will be allocated to the DAT for year 1 (the remaining 50% will be used to support the "teach out" needs for the terminating programs at the Bachelor and Master degree level). The year 5 values for salaries (column 9) include an estimated increase from FY 2017-2018 of 10% for faculty (Table 4, Appendix A) and staff expenses. The full financial support awarded from the UAA and Orthopaedics appears in column 13 at the current (FY 2017-2018) value.

C. Provide in the appendices the abbreviated curriculum vitae (CV) for each existing faculty member (do not include information for visiting or adjunct faculty).

See Appendix E – Abbreviated CV for DAT program Core Faculty

Christopher Brown, PhD, LAT, ATC, CSCS
Clinical Assistant Professor
Clinical Education Coordinator, Doctor of Athletic Training Program

Brady Tripp, PhD, LAT, ATC
Clinical Associate Professor
Director, Doctor of Athletic Training Program

Patricia Tripp, PhD, LAT, ATC, CSCS
Clinical Associate Professor
Associate Director, Doctor of Athletic Training Program

D. Provide evidence that the academic unit(s) associated with this new degree have been productive in teaching, research, and service. Such evidence may include trends over time for average course load, FTE productivity, student HC in major or service courses, degrees granted, external funding attracted, as well as qualitative indicators of excellence.

The Department of Applied Physiology and Kinesiology (APK) at the University of Florida has long tradition of being one of the top programs in the US. In 2017 it was ranked 4th by the National Academy of Kinesiology and has been continuously ranked in the top 10 for many years by all available rankings. Based on metrics used by the University of Florida Administration to compare academic programs against other top Research Universities, APK is ranked number one in 2017. Our Research Portfolio includes greater than $4 million dollars in research support, largely from NIH, NASA and the DOD. The Department has fourteen tenure track faculty, six full time lecturer faculty, three research professors and three clinical athletic training faculty. Outside of the three, full time athletic training faculty, three other faculty are credentialed athletic trainers. The Department has a support staff of 7 full time equivalents who support the management of all aspects of the Department. Within the last two years, faculty within our Department have been awarded the Teacher-Scholar of the Year for the entire University (Scotty Powers), the University Teacher of the Year (Josie Ahlgren) and the University Doctoral Advisor/Mentoring Award (Evangelos Christou). In addition, our primary undergraduate advisor was awarded Advisor of the Year for the University. The Department has over 900 resident undergraduate majors in three different concentrations. It maintains a census of greater than 33 Ph.D. students, all of whom are fully supported, and approximately 60 masters students within 4 different tracks. The program is well underway for beginning an online MS program in Human Performance, beginning fall of 2018. The Department faculty voted 95% in favor of offering the Doctor of Athletic Training and is excited about how this program will contribute to our national reputation and to our long-term legacy as a one of the top programs in exercise science and kinesiology, nationally.

X. Non-Faculty Resources

A. Describe library resources currently available to implement and/or sustain the proposed program through Year 5. Provide the total number of volumes and serials available in this discipline and related fields. List major journals that are available to the university's students. Include a signed statement from the Library Director that this subsection and subsection B have been reviewed and approved.

Leilani Freund (Library Liaison/Subject Specialist) provided the following summary of resources within the UF Library System. Using the following subject headings: athletic trainers, sports medicine, sports injuries, sports physiology, doping in sports, orthopaedics (and sports) the resources include: **1505 Print Books, 416 e-Books, 330 Streaming Video (in Kanopy) under the "Sports & Fitness" category and 101 current, active athletic training and sports medicine journals identified as being owned by the University of Florida through the library catalog, Sport Discus database, and the Physical Therapy & Sports Medicine Collection database**.

Note: the serial titles listed under individual databases such as Sport Discus number in the thousands and include the full text of magazines, trade journals, and professional journals as well as academic journals, so the list of 100 really only scratches the surface. The 100 journals are a good representation of the core academic journal titles required for the AT program, but the UF libraries have many, many more.

Athletic Training and Sports Medicine Academic Journals

- Acta Orthopaedica
- AMAA journal: journal of the American Medical Athletic Association
- American journal of physical medicine & rehabilitation
- American journal of public health (American Public Health Association)
- American Journal of Sports Medicine (American Orthopaedic Society)
- American journal of sports medicine (Sage Publications)
- Annual review of physiology
- Apunts: medicina de l'esport (Catalan and Spanish)
- Archives of physical medicine and rehabilitation
- Asian journal of Sports Medicine (Tehran, Iran – in English)
- Athletic therapy today
- Athletic training education journal

- Baltic Journal of Health & Physical Activity
- Biology of sport (Institute of Sport, Poland – in English)
- Biomedical human kinetics (Poland – in English)
- BMC sports science, medicine, & rehabilitation (BioMed Central)
- BMJ open sport & exercise medicine (online)
- British journal of sports medicine
- Clinical journal of sport medicine
- Co-Kinetic Journal (formerly SportEX Medicine / United Kingdom)
- Concussion litigation reporter
- Current sports medicine reports
- European journal of applied physiology
- European journal of sport science : EJSS
- Exercise and sport sciences reviews
- Hrvatski športskomedicinski vjesnik (Zagreb / Croation, some English)
- IDEA fitness journal
- Injury prevention (BMJ Group)
- International journal of applied sports sciences : IJASS (Korea – in English)
- International journal of athletic therapy & training
- International journal of coaching science
- International journal of kinesiology & sports science
- International journal of sport and health science (Japan – in English)
- International journal of sport nutrition and exercise metabolism
- International journal of sport psychology (mainly in English, print version only)
- International journal of sports medicine
- International journal of sports physical therapy
- International journal of sports physiology & performance
- International journal of sports science and coaching
- International journal of sports sciences and fitness
- JOSPT: the Journal of orthopaedic and sports physical therapy (American Physical Therapy Association)
- Journal of acute care physical therapy
- Journal of applied biomechanics
- Journal of applied physiology
- Journal of applied sport management
- Journal of athletic training (National Athletic Trainers' Association)
- Journal of bone and joint surgery (JPSS)
- Journal of exercise physiology online (American Society of Exercise Physiologists)
- Journal of human kinetics (Poland – in English)
- Journal of human sport and exercise (Spain – most articles in English)
- Journal of leisure research
- Journal of medicine and science in tennis (Society for Tennis Medicine)
- Journal of outdoor recreation, education, and leadership
- Journal of quantitative analysis in sports
- Journal of science and medicine in sport (Australia)
- Journal of sport and health science (Shanghai University of Sport)
- Journal of sport behavior
- Journal of sport rehabilitation
- Journal of sports medicine
- Journal of sports medicine and physical fitness (Italy – mostly in English)
- Journal of sports science & medicine (Turkey – in English)
- Journal of sports sciences
- Knee surgery, sports traumatology, arthroscopy : official journal of the ESSKA
- Korean journal of sports medicine

- Medicina sportiva bohemica & slovaca (mostly in Czech)
- Medicina sportive (Poland – English edition)
- Medicine and science in sports and exercise
- Montenegrin journal of sports science and medicine (in English)
- Movement & sport sciences (Paris: Journal of the Association for Research in Sports and Physical Activity)
- Operative techniques in sports medicine
- Orthopaedic journal of sports medicine
- Palaestra (Forum of sport, physical education and recreation for those with disabilities)
- Performance enhancement & health (Oxford)
- Physical therapy : journal of the American Physical Therapy Association
- Physical therapy in sport
- Physician and sportsmedicine
- Professionalization of exercise physiology online: PEPonline.
- Pure power (Body Intellect, Inc. Colorado Springs)
- Quest (Routledge)
- Research in Sports Medicine
- Revista brasileira de ciências do esporte : orgão de divulgação oficial do Colégio Brasileiro de Ciências do Esporte. (In Portuguese with English summaries)
- Revista brasileira de medicina do esporte: órgão oficial da Sociedade Brasileira de Medicina do Esporte.(Portuguese with some English articles and abstracts)
- Revista internacional de medicina y ciencias de la actividad física y del deporte (in Spanish, some English abstracts)
- Running & fitnews (official publication of the American Running & Fitness Association)
- Saudi journal of sports medicine (in English)
- Scandinavian journal of medicine & science in sports (English)
- Schweizerische Zeitschrift für Sportmedizin und Sporttraumatologie: Revue suisse de médecine et de traumatologie du sport.(French, German, Italian with English summaries)
- Science & sports (France / Société française de médicine du sport – mostly in French, some English)
- South African journal of sports medicine
- Sport & geneeskunde (Netherlands / in Dutch with English summaries)
- Sport health (Australian Sports Medicine Federation)
- Sport sciences for health (Italy – in English)
- Sportorthopädie-Sporttraumatologie : Organ des Gesellschaft für Orthopädisch-Traumatologische Sportmedizin (German, with English titles and summaries)
- Sports biomechanics
- Sports health (American Orthopaedic Society for Sports Medicine)
- Sports medicine (New Zealand)
- Sports medicine and arthroscopy review
- Sports medicine journal / Medicina Sportiva (mostly English)
- Sportscience (New Zealand, Internet Society for Sport Science)
- Sportverletzung Sportschaden (Germany – in German)
- Women in sport & physical activity journal

Key Databases for athletic training, sports management, and sports medicine

- AccessMedicine.com
- AgeLine
- Alt-HealthWatch (Via EBSCOHost)
- BIOSIS Citation Index
- BMJ Journals
- CAB Abstracts / CAB Direct
- CINAHL

- Dissertations and Theses: Full Text (ProQuest)
- Elsevier Health
- FreeBooks4Doctors
- Free Medical Journals
- HAPI - Health & Psychosocial Instruments Online
- Health & Safety Science Abstracts
- Health and Wellness Resource Center and Alternative Health Module
- Health Reference Center - Academic
- Health Source: Nursing/Academic Edition (EBSCOHost)
- MEDLINE (via PubMed)
- MedlinePlus
- MICROMEDEX® Healthcare Series
- Nursing and Allied Health Collection
- Physical Therapy & Sports Medicine Collection
- PsycINFO (via EBSCOHost)
- PubMed (with UF links)
- ScienceDirect
- SciFinder Scholar
- SPORTDiscus with Full Text
- University of Florida Electronic Theses & Dissertations
- Web of Science (In Web of Knowledge)

B. Describe additional library resources that are needed to implement and/or sustain the program through Year 5. Include projected costs of additional library resources in Table 2 in Appendix A. Please include the signature of the Library Director in Appendix B.

No additional library resources required to implement the Doctor of Athletic Training program needed, above those which currently exist.

C. Describe classroom, teaching laboratory, research laboratory, office, and other types of space that are necessary and currently available to implement the proposed program through Year 5.

Space allocation for the Doctor of Athletic Training program will utilize the spaces current allocated for the Athletic Training programs (Bachelor and Master's concentration). To effectively implement the Doctor of Athletic Training program, the faculty will utilize the following spaces:
Yon Hall 1: Classroom (343 sq ft)
Yon Hall 3: Motion Analysis Teaching Laboratory (730 sq ft)
Yon Hall 9: Practical Exam Room (208 sq ft)
Yon 11: Classroom (761 sq ft)
Florida Gym Room 122: Faculty Office (114 sq ft)
Florida Gym Room 148: Faculty Office (136 sq ft)
Florida Gym Room 160: Faculty (157 sq ft)

To facilitate additional learning and/or laboratory experiences, we will also retain access to the Florida Gymnasium (main floor), RecSports fitness facilities and/or the Harrell Building (Anaclerio Learning Center) as per currently available to the Athletic Training programs.

D. Describe additional classroom, teaching laboratory, research laboratory, office, and other space needed to implement and/or maintain the proposed program through Year 5. Include any projected Instruction and Research (I&R) costs of additional space in Table 2 in Appendix A. Do not include costs for new construction because that information should be provided in response to X (E) below.

The Doctor of Athletic Training program does not require additional space above that already allocated/accessible within the current Athletic Training programs (described in Section X. Part C).

E. If a new capital expenditure for instructional or research space is required, indicate where this item appears on the university's fixed capital outlay priority list. Table 2 in Appendix A includes only Instruction and Research (I&R) costs. If non-I&R costs, such as indirect costs affecting libraries and student services, are expected to increase as a result of the program, describe and estimate those expenses in narrative form below. It is expected that high enrollment programs in particular would necessitate increased costs in non-I&R activities.

Not applicable

F. Describe specialized equipment that is currently available to implement the proposed program through Year 5. Focus primarily on instructional and research requirements.

The Doctor of Athletic Training program will utilize equipment and instructional resources currently available within the Athletic Training programs (Bachelors and Master's concentration). Equipment (see table below) will supplement the following courses:

ATR 7108c Clinical Management in AT
ATR 7210c Evidence Based Musculoskeletal Examination I
ATR 7211c Evidence Based Musculoskeletal Examination II
ATR 7309c Evidence Based Therapeutic Intervention
ATR 7318c Sport Performance & Intervention
ATR 7229c Diagnostic Imaging for Athletic Trainers
ATR 7438c Clinical Techniques and Pharmacology for Athletic Trainers I
ATR 7439c Clinical Techniques and Pharmacology for Athletic Trainers II
ATR 7209c Movement Screening and Assessment
ATR 7818c Advanced Clinical Experience I
ATR 7828c Advanced Clinical Experience II
ATR 7838c Advanced Clinical Experience III
ATR 7848c Advanced Clinical Experience IV

Category	Equipment Name	Function and Use
Thermal and Compression Modalities	Game Ready System	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Thermal and Compression Modalities	Pulse Leg Recovery System	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Thermal and Compression Modalities	Compression Unites	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Thermal and Compression Modalities	Parafin Bath and Wax	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Thermal and Compression Modalities	Whirlpools	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Thermal and Compression Modalities	Ice Machine	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.

Thermal and Compression Modalities	Hydroculator Packs and Covers	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Electrical, Sound, and Magnetic Modalities	Combo/US Unit	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Electrical, Sound, and Magnetic Modalities	Intelect Short Wave Diathermy	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Electrical, Sound, and Magnetic Modalities	Diagnostic Musculoskeletal Ultrasound	Training athletic training students in proper injury diagnostics and anatomy. Prepares students for equipment they will use in the field.
Mechanical and Light Modalities	Traction Units and Belts	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Mechanical and Light Modalities	Biofeedback Unit	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Mechanical and Light Modalities	Manual Therapy Tool-Kit	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Patient Positioning	Portable Examination Tables	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Patient Positioning	Prone Pillow/Body Bolsters	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Range of Motion	Goniometers and Diagnostics	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Range of Motion	Flexibility/Stretching Tools	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Range of Motion	Prostretch	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Range of Motion	BAPS Board	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Balance and Proprioception	BOSU	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Balance and Proprioception	Airex and Dynadiscs	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Balance and Proprioception	Stability Systems	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.

Balance and Proprioception	Mini-Trampoline	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Body Blade	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Plyometric Boxes	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Ergometers/Urgometers	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Hand/Cuff Weights and Rack	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Therapy Bands and Materials	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Medicine Balls	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Rebounder Trampoline and Balls	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Fitter and Slide Board	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Body Bars	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Gray Cook Bands	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Resistance Training	Speed/Agility Ladders	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Exercise Testing and Patient Assessment	Body Fat Analysis Equipment	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Exercise Testing and Patient Assessment	FMS Test Kits	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Exercise Testing and Patient Assessment	Y-Balance Kit	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Exercise Testing and Patient Assessment	Reach and Jump Board	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Exercise Testing and Patient Assessment	Alignabod Portable	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.

Environmental and Hydration Measures	Sling Psychrometer	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Environmental and Hydration Measures	Refractometer	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Spine Boards, Straps and Splinting	Spine Boards and Straps	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
AED Trainers and CPR Manikins	AED Trainers and CPR Manikins	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
General Medical Equipment	Otoscope and Opthalamscope	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
General Medical Equipment	Digital Stethascope	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
General Medical Equipment	Life/form® Adult Venipuncture And Injection Training Arm (Light Skin) and Replacement Supplies	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
General Medical Equipment	Life/form® Suture And Stapling Practice Trainer and Sutures	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
General Medical Equipment	Life/form® Interactive Suture Trainer (Light Skin)	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Sports Equipment and Equipment Removal	Shoulder Pads/Protective Gear	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Sports Equipment and Equipment Removal	Helmet Removal Tools	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.
Sports Equipment and Equipment Removal	Sports Equipment	Training athletic training students in proper injury care. Prepares students for equipment they will use in the field.

Additional Equipment available within the Movement Analysis (Yon Hall 3) and Practical Examination (Yon Hall 9) spaces:

Sharp 60" Class 4K (2160p) Smart LED TV
TV Mounting
100" Epson Whiteboard
Epson BrightLink 695Wi

Ipads
Ipad Stands
appleTV
Coach's Eye Software License (15 seats)
Trigger Point E-Stim Attachment
Portable Treatment Tables

G. Describe additional specialized equipment that will be needed to implement and/or sustain the proposed program through Year 5. Include projected costs of additional equipment in Table 2 in Appendix A.

Not applicable

H. Describe any additional special categories of resources needed to implement the program through Year 5 (access to proprietary research facilities, specialized services, extended travel, etc.). Include projected costs of special resources in Table 2 in Appendix A.

In addition to the classroom/instructional space listed in Section X Non-Faculty Resources, Subsection C, we would need to retain access/use of Harrell Building Anaclario Learning Center (fee based usage currently afforded to Athletic Training program students) and storage/access for the cadaver at Health Science Complex for the new ATR 7128c Advanced Cadaveric Dissection (currently afforded to the MS APK concentration in Athletic Training students as part of ATR 6124 Clinical Anatomy for Athletic Training). The expenses associated with use of the Anaclerio Learning Center are approximately $5,000 annually and the cost ($2500) associated with the cadaver course are partially absorbed via student fees.

I. Describe fellowships, scholarships, and graduate assistantships to be allocated to the proposed program through Year 5. Include the projected costs in Table 2 in Appendix A.

Funding support for DAT students may include clinical practice work funded by affiliate contracts and/or other Colleges/Affiliates across the University of Florida campus. Scholarships may be available through the College of Health and Human Performance.

Current Funding Support:
1. Affiliated Support Contracts available in collaboration with Department of Orthopaedics at OSMI: School Board Alachua County (6), PK Yonge Developmental Research School (1), Oak Hall School, St. Francis Catholic High School, Gilchrist County (2), Columbia County (2), and Santa Fe College
2. University of Florida RecSports (4)
3. University Athletic Association, Inc. (1-2)
4. College of Arts, School of Theatre and Dance (1)

Additional Projected Funding Support:
1. University of Florida Student Health Care Center (1-2)
2. UFHealth College of Medicine/Family Medicine (1)
3. College of Health and Human Performance (1)

Additional Projected Scholarships:
1. College of Health and Human Performance Scholarships (2-3)

J. Describe currently available sites for internship and practicum experiences, if appropriate to the program. Describe plans to seek additional sites in Years 1 through 5.

See above list provided within Section VIII Curriculum, Subsection I.

APPENDIX A

Tables: Graduate Enrollment, Budget, Reallocation and Faculty

APPENDIX A

TABLE 1-A
PROJECTED HEADCOUNT FROM POTENTIAL SOURCES
(Baccalaureate Degree Program)

Source of Students (Non-duplicated headcount in any given year)*	Year 1		Year 2		Year 3		Year 4		Year 5	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Upper-level students who are transferring from other majors within the university**	0	0	0	0	0	0	0	0	0	0
Students who initially entered the university as FTIC students and who are progressing from the lower to the upper level***	0	0	0	0	0	0	0	0	0	0
Florida College System transfers to the upper level***	0	0	0	0	0	0	0	0	0	0
Transfers to the upper level from other Florida colleges and universities***	0	0	0	0	0	0	0	0	0	0
Transfers from out of state colleges and universities***	0	0	0	0	0	0	0	0	0	0
Other (Explain)***	0	0	0	0	0	0	0	0	0	0
Totals	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

* List projected annual headcount of students enrolled in the degree program. List projected yearly cumulative ENROLLMENTS instead of admissions.
** If numbers appear in this category, they should go DOWN in later years.
*** Do not include individuals counted in any PRIOR CATEGORY in a given COLUMN.

APPENDIX A

TABLE 1-B
PROJECTED HEADCOUNT FROM POTENTIAL SOURCES
(Graduate Degree Program)

Source of Students (Non-duplicated headcount in any given year)*	Year 1		Year 2		Year 3		Year 4		Year 5	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Individuals drawn from agencies/industries in your service area (e.g., older returning students)	1	1.125	1	1.125	0	0	0	0	0	0
Students who transfer from other graduate programs within the university**	0	0	0	0	0	0	0	0	0	0
Individuals who have recently graduated from preceding degree programs at this university	2	2.25	2	2.25	0	0	0	0	0	0
Individuals who graduated from preceding degree programs at other Florida public universities	2	2.25	2	2.25	3	3.375	4	4.5	4	4.5
Individuals who graduated from preceding degree programs at non-public Florida institutions	0	0	0	0	0	0	0	0	0	0
Additional in-state residents***	0	0	0	0	0	0	0	0	0	0
Additional out-of-state residents***	6	6.75	15	16.875	18	20.25	18	20.25	19	21.375
Additional foreign residents***	0	0	0	0	0	0	0	0	0	0
Other (Explain)***	0	0	0	0	0	0	0	0	0	0
Totals	**11**	**12.375**	**20**	**22.5**	**21**	**23.625**	**22**	**24.75**	**23**	**25.875**

* List projected annual headcount of students enrolled in the degree program. List projected yearly cumulative ENROLLMENTS instead of admissions.
** If numbers appear in this category, they should go DOWN in later years.
*** Do not include individuals counted in any PRIOR category in a given COLUMN.

APPENDIX A

TABLE 2

PROJECTED COSTS AND FUNDING SOURCES

Instruction & Research Costs (non-cumulative)	Year 1 Funding Source								Year 5 Funding Source						
	Reallocated Base* (E&G)	Enrollment Growth (E&G)	New Recurring (E&G)	New Non-Recurring (E&G)	Contracts & Grants (C&G)	Philanthropy Endowments	Enterprise Auxiliary Funds	**Subtotal coulumns 1+…+7**	Continuing Base** (E&G)	New Enrollment Growth (E&G)	Other*** (E&G)	Contracts & Grants (C&G)	Philanthropy Endowments	Enterprise Auxiliary Funds	**Subtotal coulumns 9+…+ 14**
Columns	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Faculty Salaries and Benefits	179,800	0	0	0	0	80,000	0	**$99,800**	345,000	0	0	0	160,000	0	**$185,000**
A & P Salaries and Benefits	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
USPS Salaries and Benefits	0	0	72,500	0	0	0	0	**$72,500**	79,750	0	0	0	0	0	**$79,750**
Other Personal Services	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
Assistantships & Fellowships	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
Library	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
Expenses	25,000	0	0	0	0	0	0	**$25,000**	25,000	10,000	0	0	0	0	**$35,000**
Operating Capital Outlay	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
Special Categories	0	0	0	0	0	0	0	**$0**	0	0	0	0	0	0	**$0**
Total Costs	**$204,800**	**$0**	**$72,500**	**$0**	**$0**	**$80,000**	**$0**	**$197,300**	**$449,750**	**$10,000**	**$0**	**$0**	**$160,000**	**$0**	**$299,750**

*Identify reallocation sources in Table 3.

**Includes recurring E&G funded costs ("reallocated base," "enrollment growth," and "new recurring") from Years 1-4 that continue into Year 5.

***Identify if non-recurring.

Faculty and Staff Summary

Total Positions	Year 1	Year 5
Faculty (person-years)	118.75	231.25
A & P (FTE)	0	0
USPS (FTE)	0	0

Calculated Cost per Student FTE

	Year 1	Year 5
Total E&G Funding	$197,300	$299,750
Annual Student FTE	12.375	25.875
E&G Cost per FTE	$15,943	$11,585

Table 2 Column Explanations

Reallocated Base* (E&G)	1	E&G funds that are already available in the university's budget and will be reallocated to support the new program. Please include these funds in the Table 3 – Anticipated reallocation of E&G funds and indicate their source.
Enrollment Growth (E&G)	2	Additional E&G funds allocated from the tuition and fees trust fund contingent on enrollment increases.
New Recurring (E&G)	3	Recurring funds appropriated by the Legislature to support implementation of the program.
New Non-Recurring (E&G)	4	Non-recurring funds appropriated by the Legislature to support implementation of the program. Please provide an explanation of the source of these funds in the budget section (section III. A.) of the proposal. These funds can include initial investments, such as infrastructure.
Contracts & Grants (C&G)	5	Contracts and grants funding available for the program.
Philanthropy Endowments	6	Funds provided through the foundation or other Direct Support Organizations (DSO) to support of the program.
Enterprise Auxiliary Funds	7	Use this column for continuing education or market rate programs and provide a rationale in section III.B. in support of the selected tuition model.
Subtotal coulumns 1+…+7	8	Subtotal of values included in columns 1 through 7.
Continuing Base** (E&G)	9	Includes the sum of columns 1, 2, and 3 over time.
New Enrollment Growth (E&G)	10	See explanation provided for column 2.
Other*** (E&G)	11	These are specific funds provided by the Legislature to support implementation of the program.
Contracts & Grants (C&G)	12	See explanation provided for column 5.
Philanthropy Endowments	13	See explanation provided for column 6.
Enterprise Auxiliary Funds	14	Use this column for continuing education or market rate programs and provide a rationale in section III.B. in support of the selected tuition model.
Subtotal coulumns 9+…+ 14	15	Subtotal of values included in columns 9 through 14.

APPENDIX A

TABLE 3
ANTICIPATED REALLOCATION OF EDUCATION & GENERAL FUNDS*

Program and/or E&G account from which current funds will be reallocated during Year 1	Base before reallocation	Amount to be reallocated	Base after reallocation
Faculty Salaries - Dean's Office Funding	283,560	179,800	**$103,760**
Athletic Training Program Foundation Account	160,000	80,000	**$80,000**
	0	0	
	0	0	
	0	0	
	0	0	
Totals	$443,560	$259,800	**$183,760**

*** If not reallocating funds, please submit a zeroed Table 3**

APPENDIX A

TABLE 4
ANTICIPATED FACULTY PARTICIPATION

Faculty Code	Faculty Name or "New Hire" Highest Degree Held Academic Discipline or Speciality	Rank	Contract Status	Initial Date for Participation in Program	Mos. Contract Year 1	FTE Year 1	% Effort for Prg. Year 1	PY Year 1	Mos. Contract Year 5	FTE Year 5	% Effort for Prg. Year 5	PY Year 5
D	Brady Tripp, PhD, LAT, ATC Athletic Training	Clinical Associate Professor	Non-Tenure	Summer B 2020	2	0.13	50.00	6.25	2	0.13	50.00	6.25
D	Patricia Tripp, PhD, LAT, ATC, CSCS Athletic Training	Clinical Associate Professor	Non-Tenure	Summer B 2020	2	0.13	50.00	6.25	2	0.13	50.00	6.25
A	Brady Tripp, PhD, LAT, ATC Athletic Training	Clinical Associate Professor	Non-Tenure	Fall 2020	9	0.75	50.00	37.50	9	0.75	100.00	75.00
A	Patricia Tripp, PhD, LAT, ATC, CSCS Athletic Training	Clinical Associate Professor	Non-Tenure	Fall 2020	9	0.75	50.00	37.50	9	0.75	100.00	75.00
A	Christopher Brown, PhD, LAT, ATC, CSCS Athletic Training	Clinical Assistant Professor	Non-Tenure	Fall 2020	9	0.75	25.00	18.75	9	0.75	75.00	56.25
D	Joslyn Ahlgren, PhD Applied Physiology & Kinesiology	Senior Lecturer	Non-Tenure	Summer A 2021	2	0.13	100.00	12.50	2	0.13	100.00	12.50
	New Hire, Degree Academic Discipline				0	0.00	0.00	0.00	0	0.00	0.00	0.00
	New Hire, Degree Academic Discipline				0	0.00	0.00	0.00	0	0.00	0.00	0.00
	New Hire, Degree Academic Discipline				0	0.00	0.00	0.00	0	0.00	0.00	0.00
	New Hire, Degree Academic Discipline				0	0.00	0.00	0.00	0	0.00	0.00	0.00
	Total Person-Years (PY)							**118.75**				**231.25**

Faculty Code		Source of Funding	PY Workload by Budget Classsification Year 1		Year 5
A	Existing faculty on a regular line	Current Education & General Revenue	93.75		206.25
B	New faculty to be hired on a vacant line	Current Education & General Revenue	0.00		0.00
C	New faculty to be hired on a new line	New Education & General Revenue	0.00		0.00
D	Existing faculty hired on contracts/grants	Contracts/Grants	25.00		25.00
E	New faculty to be hired on contracts/grants	Contracts/Grants	0.00		0.00
		Overall Totals for	**Year 1** 118.75		**Year 5** 231.25

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.

Signature of Equal Opportunity Officer	**Date** 3/28/18
Signature of Library Director	**Date**

This appendix was created to facilitate the collection of signatures in support of the proposal. Signatures in this section illustrate that the Equal Opportunity Officer has reviewed section II.E of the proposal and the Library Director has reviewed sections X.A and X.B.

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.

Signature of Equal Opportunity Officer	**Date**
	3/22/18
Signature of Library Director	**Date**

This appendix was created to facilitate the collection of signatures in support of the proposal. Signatures in this section illustrate that the Equal Opportunity Officer has reviewed section II.E of the proposal and the Library Director has reviewed sections X.A and X.B.

APPENDIX C

The program proposal was reviewed by Mark Merrick, PhD, AT, ATC, FNATA of The Ohio State University. Dr. Merrick's review provides context regarding demand and similarity as it relates to State University System programs. The following are excerpts from his full review, found in Appendix D.

- The Land, Sea and Space Grant mission and flagship nature of the University of Florida's academic and athletic programs uniquely positions the proposed Doctor of Athletic Training to be a significant player in the marketplace from its inception. No other DAT program exists in this niche and it is a niche that should be uniquely attractive to prospective students both within the state of Florida and nationally.
- The early entry of the University of Florida's proposed Doctor of Athletic Training into a limited but growing pool of DAT programs positions it to be a key influencer of the future direction of these programs. Within the state, there is currently one other DAT program, at Florida International University. While existing in the same state, the FIU program is substantially different than the proposed program at the University of Florida and it appears each has carved out a unique niche that should produce very little overlap in demand.
- The proposed Doctor of Athletic Training degree program at the University of Florida offers a unique, well-crafted and compelling curriculum specifically designed to fill an identified educational niche.
- Another innovative aspect of the proposed program is the inclusion of self-selected areas of specialized training leading to Certificates of Added Qualification (CAQ's). This is a truly novel approach that blends the best elements of a post-professional degree program with some of the narrow specialization that would typically be found only in non-degree clinical residency training. This innovative feature provides in-demand skills training and should be both attractive and beneficial to students.
- The recent and growing partnership with the Anaclerio Learning Center where the program will engage in medical simulation and standardized patient experiences is a clear strength. Likewise, the opportunity for Athletic Training students to engage in existing community based interprofessional education with other health care professions will also be vital to the integration of these students into the patient centered health programs and accountable care organizations that will serve the needs of the residents of the state in the future.
- The proposed Doctor of Athletic Training degree program is well conceived, appropriately resourced, and promises to offer a novel and valuable program that benefits its students, institution, community, and the residents of the state of Florida.
- The clinical practice partnerships are one of the greatest strengths of the proposed program. Advanced practice programs are often limited by their ability to find experienced and sufficiently advanced practitioners to mentor the students. The proposal identifies and partners with a core group of well-respected practitioners who are eager, engaged, and vital to the program.
- In short, the proposed program is well positioned for success and I fully support this proposal. It is my belief that it will quickly develop a strong reputation and be among the most important DAT programs in the nation.

APPENDIX D

External Review Letter of Support

THE OHIO STATE UNIVERSITY

College of Medicine
School of Health & Rehabilitation Sciences

Division of Athletic Training

228 Atwell Hall
453 W.10th Avenue
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http://go.osu.edu/athletictraining

March 9, 2018

External Consultant's Report
University of Florida Doctor of Athletic Training Proposal

Mark Merrick, PhD, AT, ATC, FNATA
The Ohio State University College of Medicine - School of Health & Rehabilitation Sciences
Director, Division of Athletic Training
Past President, Commission on Accreditation of Athletic Training Education (CAATE)
Member, Global Forum on Innovation in Health Professions' Education, National Academy of Medicine

Background

The proposed Doctor of Athletic Training (DAT) degree within the Department of Applied Physiology & Kinesiology in the University of Florida's College of Health & Human Performance is a post-professional, clinical doctorate that will prepare already credentialed Athletic Trainers for advanced clinical practice, provide additional transition to clinical practice for recently credentialed professionals, and also provide them a Certificate of Added Qualification (CAQ) within one of several specialization areas. This is not a research doctorate in along the lines of the Ph.D., nor a professional practice (entry level) degree such as the M.D., or Doctor of Physical Therapy, but is instead conceptually similar to the Doctor of Nursing Practice degree in that is provides existing practitioners with advanced training to prepare them for advanced practice and clinical practice leadership.

Nationally, the genesis of the DAT degree is the 2015 consensus decision by the Athletic Training Strategic Alliance that entry-level educational preparation of Athletic Trainers will occur exclusively at the Master's degree level. This change is in response to increasingly complex and comprehensive educational requirements and the changing landscape of health care. This consensus decision has been implemented through a change in Athletic Training Professional Education Standards from the Commission on Accreditation of Athletic Training Education (CAATE). Currently, Athletic Trainers receive their professional (entry-level) education through either a baccalaureate or master's degree program. However, the updated accreditation standards curtail matriculation into professional baccalaureate degree programs after the autumn term of 2022 as educational content expands. As, professional education will be unified at the master's degree level, the CAATE was deliberate in reserving a space for advance practice post-professional education at the doctoral level. It is anticipated that as all professional AT degree programs transition to the master's degree, the handful of existing Athletic Training post-professional master's degree programs will also transition to the doctoral degree,

A national summit on the future of the Doctor of Athletic Training degree was hosted by the University of Idaho in the autumn of 2015 where representatives from the existing DAT

programs, institutions planning transitions to the DAT, and educational thought leaders gathered to discuss the role and purpose of the DAT as well as its integration into Athletic Training educational structure. At this summit, there was general consensus that the DAT programs would see growth and an expanded role following the transition to the professional master's degree. However, there were several different perspectives concerning the identity and role of the DAT programs. As such, the current state of the DAT nationally is that there is not a unified vision for its structure, purpose, or implementation. The current thought is that these elements will continue to evolve and come into focus as institutions carve out a niche with their DAT programs. This presents an opportunity for flagship institutions such as the University of Florida to not only establish their own vision for their DAT programs, but to also influence the national direction and identity for these programs. The timing of the creation of this program at an institution of the caliber of the University of Florida is ideal.

Athletic Training as a Discipline

Athletic Training is a primary care health care discipline with a historical focus in sports medicine, but that also has branched out into a variety of non-sport health care settings over recent decades. Nationally there are over 70,000 Certified Athletic Trainers and the practice of Athletic Training is regulated in 49 states with a regulator proposal currently under review in California, the only state without regulation. In order to practice, Athletic Trainers must pass a national board examination administered by the Board of Certification for the Athletic Trainer (BOC) and that culminates in the awarding of the ATC® credential. The BOC describes Athletic Trainers as follows:

> "Athletic Trainers (ATs) are healthcare professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the states' statutes, rules and regulations. As a part of the healthcare team, services provided by ATs include injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions. *Athletic training is recognized by the American Medical Association (AMA) as a healthcare profession."

Similarly, Athletic Training's member organization, the National Athletic Trainers Association (NATA), also adds,

> "ATs are highly qualified, multi-skilled health care professionals, and are under the allied health professions category as defined by Health Resources Services Administration (HRSA) and Department of Health and Human Services (HHS). Athletic trainers are assigned National Provider Identifier (NPI) numbers, and the taxonomy code for athletic trainers is 2255A2300X. Athletic trainers are listed in the Bureau of Labor Statistics in the "professional and related occupations" section. They are mid-level health care professionals."

Athletic Training education is accredited by the CAATE at three levels: professional (entry-level) degree programs, post-professional degree programs, and post-professional residency

programs (non-degree specialty practice training). Recently, the NATA launched a Board of Athletic Training Specialties (BATS) that is working with the credentialing body (BOC) to create additional post-professional advanced practice certifications in specialty practice areas such as orthopedics and rehabilitation. Most athletic trainers obtained their professional education in a baccalaureate degree program. Roughly two-thirds of new Athletic Trainers immediately enter a graduate degree program upon completion of their bachelor's degree and over 70% of Athletic Trainers hold a master's degree or higher.

Evaluation of Program Proposal

Needs and Demand

As discussed in the Background section above, the timing of the University of Florida's Doctor of Athletic Training proposal is ideal. Currently, over 4,000 professional Athletic Training students sit for the national board examination each year and there are over 70,000 Certified Athletic Trainers nationally. The Doctor of Athletic Training degree affords these practitioners with a pathway to advanced practice education. As the master's degree becomes the only pathway to entry-level practice in Athletic Training, the existing post-professional master's degrees are expected to fall out of favor, as there is little anticipated demand for practitioners to seek a second master's degree. When this is coupled with a rapidly growing trend of university athletic departments no longer offering masters level graduate assistantships for Athletic Trainers as part of their staffing plan, a post-professional void is created. The rise of the still very new Doctor of Athletic Training degree is expected to help fill this void, as will the specialty practice non-degree residency programs. As such, ready demand for DAT programs is anticipated going forward, however the available pool of DAT programs appears insufficient to meet this demand.

Nationally, there are currently only a handful of DAT programs, only one of which (Indiana State University) has received external accreditation from the CAATE as of the timing of this review. An examination of the existing programs reveals that the strongest national competitors are A.T. Still University in Arizona, Indiana State University, and the University of Idaho, but several other universities have programs including Rocky Mountain University of Health Professions, Temple University, Moravian College, and a new program at the Florida International University. Noticeably, all of these institutions have a different culture, identity, mission and niche than that of the University of Florida. The Land, Sea and Space Grant mission and flagship nature of the University of Florida's academic and athletic programs uniquely positions the proposed Doctor of Athletic Training to be a significant player in the marketplace from its inception. No other DAT program exists in this niche and it is a niche that should be uniquely attractive to prospective students both within the state of Florida and nationally. The early entry of the University of Florida's proposed Doctor of Athletic Training into a limited but growing pool of DAT programs positions it to be a key influencer of the future direction of these programs. Within the state, there is currently one other DAT program, at Florida International University. While existing in the same state, the FIU program is substantially different from the proposed program at the University of Florida and it appears each has carved out a unique niche that should produce very little overlap in demand. The two programs are designed for different purposes, cater to

different student pools, and offer substantially different curricula, both of which are in demand and offer benefit to the residents of Florida.

Program Quality and Innovation

The proposed Doctor of Athletic Training degree program at the University of Florida offers a unique, well-crafted and compelling curriculum specifically designed to fill an identified educational niche. As of the writing of this review, it will be the nation's only fully residential DAT program. Some programs such as the one at Indiana State offer a hybrid model with both on-campus and distance options, while others such as Rocky Mountain University of Health Professions are virtually entirely online. Those programs anticipate a pool of students who are already in clinical practice and who are seeking the DAT in order to advance their practice or move into practice leadership roles. While there is certainly a pool of candidates for such programs, the University of Florida's DAT envisions a different pool of students. Rather than catering to practicing professionals, the proposed program squarely targets new graduates of professional master's programs. It specifically offers an opportunity for extended and mentored transition to practice for these new professionals while at the same time offering them both advanced practice education and areas of specialization as well. The Executive Committee for Education of the National Athletic Trainers' Association has identified transition to practice as one of the greatest needs within Athletic Training education and the proposed program intentionally seeks to capitalize on that need.

Another innovative aspect of the proposed program is the inclusion of self-selected areas of specialized training leading to Certificates of Added Qualification (CAQ's). This is a truly novel approach that blends the best elements of a post-professional degree program with some of the narrow specialization that would typically be found only in non-degree clinical residency training. This innovative feature provides in-demand skills training and should be both attractive and beneficial to students. The CAQs chosen for the program reflect the expertise and opportunities available at the institution and also offer the ability to be expanded or replaced in the future as demand and resources warrant. Further, these CAQ's may be particularly valuable when considered in the context of impending specialty certification in Athletic Training that is being created by the Board of Athletic Training Specialties (BATS). The program is encouraged to reach out the BATS as they develop eligibility guidelines for Athletic Training specialty certification to promote synergy.

Beyond its innovative design and features, the program appears to be well crafted. The content, sequencing, and assessment within the program are not only appropriate to achieve the programs objectives, but are examples of best practices within post-professional Athletic Training education. In fact, the assessment plan is among the strongest I have encountered in a post-professional Athletic Training program. Likewise, the program has integrated mentored advanced clinical practice experiences in a variety of settings by collaborating within the university and community. From my interactions with several key clinical practice partners, the synergy, buy-in, ownership and enthusiasm for the program are deeply rooted and the partnerships appear ready to thrive. This benefits not only the students in the program, but also the patients across these clinical practice sites. Likewise, the proposed program has also

reached out across the university to collaborate with other health care education programs outside of its own department and college. These partnerships will be vital to implementing the interprofessional education that has become the gold standard in health care. Going forward, these partnerships will need to be carefully maintained and the program is strongly encouraged to continue to cultivate such partnerships in medicine and other health care programs whenever possible. As Athletic Training more fully integrates into the mainstream health care world beyond sports, these partnerships will become increasingly vital to the success of the program and the professional socialization of the program's students and faculty into the broader health care marketplace.

Faculty Qualifications

The program has a small core of well prepared, respected, and committed faculty. While the faculty number is small, the nature of their faculty appointments provides sufficient time and focus to meet the needs of this small program provided that the program has sufficient administrative support. Three non-tenure stream faculty in addition to numerous clinical practice partners provide for the necessary breadth of viewpoint and are consistent with the advanced clinical practice nature of this post-professional clinical doctorate as opposed to a research doctorate, which would require different faculty qualifications and appointment types. The full-time faculty are well known to me and within the Athletic Training education community. They are engaged in the discipline through leadership and service rolls at the state and national level. These roles are valuable in mentoring and leading by example the students who will become future clinical practice leaders. As mentioned above, the CAQs that will be offered through the proposed program are a direct reflection of the expertise of the full-time faculty and clinical practice partners and the faculty are well prepared to offer them.

Resources

Adequate resources have been identified in the proposal to meet classroom space, instructional, clinical practice, and other needs. While the classroom space is sufficient, ongoing efforts to upgrade, modernize and expand equipment inventories to instruct in changing practice skills will need to remain a priority. The recent and growing partnership with the Anaclerio Learning Center where the program will engage in medical simulation and standardized patient experiences is a clear strength. Likewise, the opportunity for Athletic Training students to engage in existing community based interprofessional education with other health care professions will also be vital to the integration of these students into the patient centered health programs and accountable care organizations that will serve the needs of the residents of the state in the future. Every effort to leverage and expand these opportunities will be a benefit to the program, its students, the institution, and the residents of Florida. The program enjoys the support of its sponsoring department, but at the same time has been afforded the independence necessary to focus on the program's unique mission within the department and college.

The proposal identifies a need for program administrative support and provides a budget model to ensure that support is available and to operate a quality program. Given the modest faculty size, this support will be essential to operating a quality program that is on par with the other

health care programs across the institution, state, and nation. Accreditation requirements and the unique nature of health care education necessitate an administrative burden that is different from and somewhat greater than that of non-health care programs or those without specialty accreditation.

One of the most important resource needs for graduate programs is financial support for students. The proposed program has worked diligently with partners across the institution and community to identify sufficient funding streams to support the proposed student enrollments. These resources are vital to the health and success of the program and every effort to maintain and expand them will pay dividends. Sufficient oversight of the funding streams by the program will be needed so that clinical performance and academic progress work synergistically.

The clinical practice partnerships are one of the greatest strengths of the proposed program. Advanced practice programs are often limited by their ability to find experienced and sufficiently advanced practitioners to mentor the students. The proposal identifies and partners with a core group of well-respected practitioners who are eager, engaged, and vital to the program. They represent a significant strength of the proposal and are vital to achieving its vision.

Summary and Recommendation

The proposed Doctor of Athletic Training degree program is well conceived, appropriately resourced, and promises to offer a novel and valuable program that benefits its students, institution, community, and the residents of the state of Florida. The program has thoughtfully and deliberately focused on a unique niche not addressed by other DAT programs either within the state or even nationally. Its graduates will be benefit from the program's focus on transition to practice as well as the embedded specialty focus areas, which may afford pathways to specialty certification not normally available to graduates of other DAT programs.

The program graduates will also benefit from cross-college interprofessional collaborations that will more importantly benefit the patients for whom they will provide care. As the changing world of health care focuses more and more on team-based approaches to achieve a patient centered, evidence driven, outcomes focused approach to care, the collaborations being established in the proposed program will be increasing valuable.

The program faculty and clinical partners are well qualified and, more importantly, fully bought in to the partnership and the vision for the program. This distributed sense of ownership is a foundational strength of the program. These partnerships provide not only clinical sites and advanced practice mentors, but also the funding resources to provide financial support to students.

Finally, the program is being proposed at a unique point in time where there is both an opportunity and a strong means for the proposed program to help shape the direction, purpose, and structure of Doctor of Athletic Training programs nationwide. This is fitting given the flagship nature, land/sea grant heritage, unmatched clinical partnerships, and well established brand of the University of Florida. No other DAT program in the nation brings these elements to

bear in the way this program can and that positions the program with the opportunity to become a national leader in an emerging market.

In short, the proposed program is well positioned for success and I fully support this proposal. It is my belief that it will quickly develop a strong reputation and be among the most important DAT programs in the nation. It has been a pleasure to evaluate this proposal and I am eager to watch the program take shape over the next few years.

Respectfully Submitted,

Mark A. Merrick, PhD, AT, ATC, FNATA
Director, Division of Athletic Training
Past-President, Commission on Accreditation of Athletic Training Education
Member, Global Forum on Innovation in Health Professions' Education, National Academy of Medicine

APPENDIX E

Abbreviated Curriculum Vitae – Athletic Training Core Faculty

Christopher Brown, PhD, LAT, ATC, CSCS
Clinical Assistant Professor
Clinical Education Coordinator, Doctor of Athletic Training Program

Brady Tripp, PhD, LAT, ATC
Clinical Associate Professor
Director, Doctor of Athletic Training Program

Patricia Tripp, PhD, LAT, ATC, CSCS
Clinical Associate Professor
Associate Director, Doctor of Athletic Training Program

Christopher D. Brown Ph.D., LAT, ATC, CSCS

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Education

Ph.D. Rocky Mountain University of Health Professions: Athletic Training (2013)
M.S. George Washington University: Clinical Exercise Physiology (2006)
B.S. Wingate University: Athletic Training (2004)

Professional Appointments

2016-Present: Clinical Assistant Professor/Clinical Education Coordinator, Department of Applied Physiology and Kinesiology, University of Florida.
2013-2016: Assistant Professor and Clinical Education Coordinator, School of Human Performance and Recreation, University of Southern Mississippi
2008-2013: Assistant Professor and Head Athletic Trainer, Department of Exercise Science, Sterling College
2007-2008: Interim Head Athletic Trainer, School of Human Performance and Leisure Sciences, Barry University
2006-2007: Assistant Athletic Trainer, School of Human Performance and Leisure Sciences, Barry University

Manuscript in Review

- Green R, **Brown CD**, Gordon E, Martin D. Therapeutic Recreation in the Public Schools: *A Community Partnership. Progress in Community Health Partnerships: Research, Education, and Action*
- Perreault M, **Brown CD**, Doan R, Dolbow D. The effect of mental and physical practice on clinical skill learning. *Athletic Training Education Journal.*

Publications

- **Brown CD**, Potteiger K, Keeley K, Lundgren A, David S. Entry Requirements for Undergraduate Athletic Training Programs. *Internet Journal of Allied Health Sciences and Practice*. 2017:15(1).
- Bremner CB, Holcomb WR, **Brown CD**, Perreault ME. The Effectiveness of Neuromuscular Electrical Stimulation in Improving Voluntary Activation of the Quadriceps: A Critically Appraised Topic. *Journal of Sport Rehabilitation*. 2017:26:316-323.
- **Brown CD**, David S, Monaco M. Athletic training students' perceptions of electronic textbooks and computer use in the classroom. *Internet Journal of Allied Health Sciences and Practice*. 2016;14(1):Article 10.
- Bremner CB, Holcomb WR, **Brown CD**. Assessment of Comfort During NMES-Induced Quadriceps Contractions at Two Knee Joint Angles. *Athletic Training and Sports Healthcare*. 2015;7(4):1-8.
- Bremner CB, Holcomb WR, **Brown CD**. Knee Joint Influences Neuromuscular Electrical Stimulation-Induced Torque. *Athletic Training and Sports Healthcare.* 2015;7(4):165-172.
- Keeley K, Potteiger K, **Brown CD**. Athletic training education: there's an app for

that. *Athletic Training Education Journal*. 2015;10(2):190–199.

- **Brown CD**, Keeley K, Potteiger K. The use of apps in Athletic Training, Part I: apps for sideline management. *International Journal of Athletic Therapy and Training.* 2015;20(3):13-19.
- Potteiger K, **Brown CD**, Keeley K. The use of apps in Athletic Training, Part II: applications for clinical management. *International Journal of Athletic Therapy and Training.* 2015;20(3):20-24.
- **Brown CD**, Lauber CA, Cappaert TA. The effect of Dexamethasone Iontophoresis on decreasing pain and improving function in patients with musculoskeletal conditions. *Journal of Sport Rehabilitation*. 2015;24:327-331.
- Dolbow DR, **Brown CD**, Robertson DR. The effects of transcutaneous electrical nerve stimulation on osteoarthritic knees: a literature review. *International Journal of Orthopedics and Rehabilitation*. 2014;1:44-48.
- Potteiger K, **Brown CD**, Kahanov L. Altering the athletic training curriculum: a unique perspective on learning over time. *Athletic Training Education Journal.* 2012;7(2):60-69.
- **Brown CD**, Lauber CA. Evidence-based guidelines for utilization of dexamethasone iontophoresis. *International Journal of Athletic Therapy and Training*. 2011;16(4):33-36.

Grant Activity

1. (Co-PI with S. David) Mid-America Athletic Trainers' Association (2017) Validity and reliability of devices and apps to assess outdoor temperature and relative humidity. ($500)
2. (Co-Investigator with F. Green, P.I.) Gulf States Health Policy Center (2017) Extracurricular athletic opportunities for underserved secondary school students with disabilities. ($49,999)

Professional Certifications and Memberships

NATABOC Certified Athletic Trainer #050402252
NSCA Certified Strength and Conditioning Specialist #7247838841
National Provider Identification (NPI)# 1720184179
Licensed Athletic Trainer #AL4510
American Red Cross: BLS for the Healthcare Provider
American Red Cross: BLS for the Healthcare Provider Instructor
American Red Cross: Emergency Medical Response Instructor
American Red Cross: First Aid/CPR/AED Instructor
Member- National Athletic Trainer's Association
Member- National Strength and Conditioning Association
Member- Southeast Athletic Trainers' Association
Member- Florida Athletic Trainers' Association

Brady L. Tripp, PhD, LAT, ATC

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EDUCATION

Doctor of Philosophy: University of Kentucky, Lexington, KY, May 2005
Concentration: Biomechanics
Master of Education: University of Virginia, Charlottesville, VA, June 2002
NATA Accredited Post-Professional Athletic Training Program
Bachelors of Science: Northeastern University, Boston, MA, June 1998
CAAHEP Accredited Athletic Training Program

RECENT ACADEMIC EXPERIENCE

University of Florida, Gainesville, FL (July 2008 – present)
Graduate Athletic Training Program
- Clinical Associate Professor & Program Director (August 2013 – present)
- Clinical Assistant Professor & Program Director (August 2008 – August 2013)

Florida International University, Miami, FL (August 2005 – July 2008)
Graduate Athletic Training Program
- Assistant Professor & Director & Clinical Coordinator (August 2007 – July 2008)
- Assistant Professor & Clinical Coordinator (August 2005 – August 2007)

Professional Athletic Training Program
- Director of Clinical Education and Preceptor (August 2005 – August 2007)

Berkshire School, Sheffield, MA (August 1998 – June 2001)
- Faculty, Biology and Sports Medicine Department

RECENT SCHOLARLY PUBLICATIONS

Books, Contributor of Chapter(s)
- Greenberg B, Russo SA, **Tripp BL**. Concussions. In: The Color Atlas of Physical Therapy, pg 450-456, (Ed: Shamus E) McGraw-Hill, New York, NY, 2014.
- **Tripp BL**, Moser M. Shoulder Injuries. In: Athletic Training and Sports Medicine: An Integrated Approach, pg 272-351, (Ed: Starkey C), Jones & Bartlett Learning, Burlington, MA, ISBN-13: 978-0-7637-9609-9, 2013.
- **Tripp BL**. Upper Extremity Therapeutic Exercises. In: Athletic Training and Sports Medicine: An Integrated Approach, pg 459-481, (Ed: Starkey C), Jones & Bartlett Learning, Burlington, MA, ISBN-13: 978-0-7637-9609-9, 2013.

Papers in Peer-Reviewed Professional Journals (Students are *italicized*)
- **Tripp BL**, Eberman LE, Smith MS. Exertional Heat Illnesses and Environmental Conditions During High School Football Practices. The American Journal of Sports Medicine, 43(10): 2490-2495, 2015.
- *Cournoyer J*, **Tripp BL**. Concussion Knowledge in High School Football Players. Journal of Athletic Training, 49(5): 654–658, 2014.
- *Sulewski AL*, **Tripp BL**, Wikstrom EA. Acquisition and Transfer of Postural Control is not Improved in those with CAI following a 3-day Balance Training Program. Athletic Training & Sports Health Care, 4(4): 165-172, 2012.
- **Tripp BL**, *Quintero D, Dwelly P, An YW*, Christie K. Comparison of Spinal Kinematics and Variability in Low- and High Handicap Golfers. Journal of Applied Golf Research, 10(10): ISSN 2161, 2012.
- *Eberman LE*, **Tripp BL**. Effect of Performance Feedback on Perceived Knowledge and Likelihood to Pursue Continuing Education. Athletic Training Education Journal, 6(2): 69-75, 2011.
- *Ristori CA, Eberman LE*, **Tripp BL**, Kaminski TW. Athletic Training Student Learning Style. International Journal of Athletic Training and Therapy, 16(2): 33 – 37, 2011.

- Uhl TL, **Tripp BL**, *Gecewich BD*, Shapiro R, Kibler WB. Evaluation of Clinical Assessment Methods for Scapular Dyskinesis. Arthroscopy: The Journal of Arthroscopic and Related Surgery, 25(11): 1240-1248, 2009.
- **Tripp BL**, *Faust D*, Jacobs P. Elbow Joint Position Sense After Neuromuscular Training With Handheld Vibration. Journal of Athletic Training, 44(6): 617-623, 2009.
- *Dwelly PM*, **Tripp BL**, McGinn PA, Gorin S. Glenohumeral Rotational Range of Motion in Collegiate Overhead-Throwing Athletes During an Athletic Season. Journal of Athletic Training, 44(6): 611-616, 2009.
- **Tripp BL**, *Dwelly PM*, *Eberman LE*. Handheld Vibration Effects Shoulder Motion. International Journal of Sports Medicine, 30(12):868-871, 2009.
- **Tripp, BL**. Principles of Restoring Function and Sensorimotor Control in Patients with Shoulder Dysfunction. Clinics in Sports Medicine, 27(3): 507-519, 2008.

RECENT SERVICE GRANTS AND CONTRACTS AWARDED

Funding Agency: Alachua County School Board
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $1,016,726

Funding Agency: Oak Hall School
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $147,158

Funding Agency: P.K. Yonge Developmental School
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $147,158

Funding Agency: Columbia County School Board
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $294,317

Funding Agency: Gilchrist County School Board
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $294,317

Funding Agency: Santa Fe College
- Dates of Annual Agreements: 2008–2016
- Total Amount of Funding (Direct and Indirect): $147,158

RECENT HONORS AND AWARDS

Recipient, ATAF Most Distinguished Athletic Trainer Award (July 2016)
Recipient, HHP Professional Development Grant $5000 (December 2014-December 2015)

PROFESSIONAL SERVICE, MEMBERSHIPS AND CERTIFICATIONS

Co-Chair, SEATA Research and Education Committee (2012-Present)
Member, SEATA Clinical Symposium Oversight Committee (2012 – Present)
Athletic Trainer, Certified (ATC) Board of Certification #079802413; 1998
Licensed Athletic Trainer (LAT), Florida Department of Health #AL 2054; 2006
Golf Medical Professional, Level-2 Certified, Titleist Performance Institute; 2007

Patricia M. Tripp, PhD, LAT, ATC, CSCS

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EDUCATION

Doctor of Philosophy: University of Kentucky, Lexington, KY, May 2004
Concentration: Kinesiology and Health Promotion/Biomechanics
Master of Science: Auburn University, Auburn, AL, May 2001
Concentration: Exercise Science, concentration in Motor Behavior and Biomechanics
Bachelors of Science: University of Florida, Gainesville, FL, December 1998 (*Cum Laude*)
Concentration: Exercise and Sport Science, concentration in Athletic Training

RECENT ACADEMIC EXPERIENCE

University of Florida, Gainesville, FL (July 2008 – present)
CAATE Accredited Athletic Training Program

- Clinical Associate Professor & Program Director (August 2013 – present)
- Program Director & Clinical Education Coordinator (August 2014 – August 2016)
- Clinical Assistant Professor & Program Director (August 2008 – August 2013)

Nova Southeastern University, Ft. Lauderdale, FL (August 2005 – June 2008)
CAATE Accredited Athletic Training Program

- Assistant Professor & Clinical Site Coordinator

University of South Carolina, Columbia, SC (July 2004-July 2005)
CAATE Accredited Athletic Training Program

- Adjunct Faculty and Clinical Preceptor

RECENT PEER-REVIEWED SCHOLARLY PUBLICATIONS

Manuscripts in Review

- Adams, AC, Fleming, KB, **Tripp PM.** Hip Pain in a Collegiate Gymnast. International Journal of Athletic Therapy and Training *(Submitted February 2017, revisions May 2017)*
- Kruithof, E, Thomas, SA, **Tripp PM.** Knee Pain in a Collegiate Wide Receiver. International Journal of Athletic Therapy and Training *(Submitted February 2017, revisions May 2017)*

Manuscripts

- Rosen, MJ, Barrett, JJ, **Tripp, PM.** Valgus Extension Overload Injury in a Collegiate Division I Softball Pitcher. International Journal of Athletic Therapy and Training 18(3): 28-32, 2013.
- Solger, EA, Schweim, JJ, **Tripp PM**. Proximal and Distal Tibiofibular Articulation Injury in a Collegiate Football Quarterback. International Journal of Athletic Therapy and Training 18(3): 24-27, 2013.
- Porter, AC, Andrews, CN, **Tripp PM**. Axillary Hidradenitis Suppurativa in a Female Collegiate Basketball Player. International Journal of Athletic Therapy and Training 18(3): 20-23, 2013.
- Ornella, AJ, Thomas, SA, **Tripp PM**. Arteriovenous Malformation in a Collegiate Football Player. International Journal of Athletic Therapy and Training 18(1): 12-14, 2013.
- Serra, RV, Pass, AN, **Tripp, PM**. An Acute Lunate Dislocation in a Collegiate Football Player. Athletic Training & Sports Health Care 4(6): 285-288, 2012.
- Whale, CE, Pass, AN, **Tripp, PM**. Chronic Groin Pain in a Collegiate Football Running Back. International Journal of Athletic Therapy and Training 17(3): 41-44, 2012.
- Maseda, NH, Clark, JL, **Tripp, PM.** Superior Sternoclavicular Joint Dislocation in a High School Athlete: A Case Review. Athletic Training & Sports Health Care 1(6): 286-288, 2009.
- Dwelly PM, Tripp BL, **Tripp, PA,** Eberman, LE, Gorin S. Effect of an Athletic Season on Glenohumeral Range of Motion in Collegiate Overhead-Throwing Athletes. Journal of Athletic Training 44(6): 611-616, 2009.
- Seeley MK, Uhl TL, **McGinn PA,** McCrory J, Kibler WB, Shapiro R. A Comparison of Muscle Activation Patterns of Traditional and Abbreviated Serves. Sport Biomechanics 7(2):428-59, 2008.

Patricia M. Tripp, PhD, LAT, ATC, CSCS

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RECENT PROFESSIONAL SERVICE/COMMITTEE EXPERIENCE

Co-Chair, Education Resources Comm., NATA Research & Education Foundation (June 2015 – present)
Vice President, Athletic Trainers' Association of Florida (January 2015 – present)
District IX Chair, NATA Research & Education Foundation Board of Directors (June 2012 – present)
Co-Chair, SEATA Athletic Training Student Symposium [Foundations Section] (April 2014 – present)
Member, NATA International Committee (June 2012 – June 2016)
Co-Chair, ATAF, Educational Programming Planning Committee (June 2012 – July 2014)
Laboratory Director, SEATA Athletic Training Student Symposium (August 2011 – April 2014)
Member, ATAF, Educational Programming Planning Committee (September 2009 – June 2012)
Faculty, SEATA Athletic Training Student Symposium (February 2008 – present)
Discipline Coordinator, Athletic Training (ATR) for State of Florida (September 2008 – present)

RECENT GRANTS, HONORS, AND AWARDS

Recipient, ATAF Most Distinguished Athletic Trainer Award (July 2017)
Recipient, HHP Teacher of the Year (2016-2017); Awarded $2000 stipend
Recipient, NATA Research & Education Foundation Volunteer Service Award (June 2016)
Recipient, SEATA Most Distinguished Athletic Trainer Award (March 2016)
Runner-up, HHP Teacher of the Year (2015-2016); Awarded $500 stipend
Superior Accomplishment Award – Division 3 Academic Affairs/Academic Personnel (2016)
Recipient, HHP Professional Development Grant $5000 (December 2015-December 2016)
Recipient, HHP Junior Faculty (NT category) International Educator of the Year (October 2014)
Recipient, NATA Athletic Trainer Service Award (awarded June 2013)
Nominee, NATA Young Professionals' Committee National Distinction Award (December 2012)
Nominee, HHP Teacher of the Year (2012-13)
Recipient, ATAF College/University Athletic Trainer of the Year (April 2012)

PROFESSIONAL MEMBERSHIPS AND CERTIFICATIONS

Certified Athletic Trainer – Board of Certification #***019902400***
Certified Strength & Conditioning Specialist #***200218359***
Certified Functional Movement Screen Level 1 (May 2016)
Certified Selective Functional Movement Assessment Level 1 (May 2016)
Member – National Athletic Trainers' Association (NATA)
Member – Southeast Athletic Trainers' Association (SEATA)
Member –Athletic Trainers' Association of Florida (ATAF)
Licensed Athletic Trainer – State of Florida ***AL 2075***
Certified South Carolina Athletic Trainer **SCAT #633** (July 2004-July 2006)
Certified Examiner – Board of Certification (June 2000-April 2007)
Clinical Instructor Educator Certificate (June 2004)
National Provider Identification (NPI) #***1992926836***
Emergency Cardiac Care Certification (CPR-Professional Rescuer)
Instructor Certification – American Red Cross BLS Healthcare Provider
Instructor Certification – American Red Cross CPR-Professional Rescuer (exp. June 2016)