



## **Standards for BOC Approved Providers**

Continuing education and professional development providers (“providers”) and their activities/courses/programs (“programs”) must align with the *Standards for BOC Approved Providers* (“Standards”). The Standards are divided into six functional sections. Each section contains Standards that define the required responsibilities of BOC Approved Providers.

### **SECTION 1: ADMINISTRATION**

- 1.1 Establish processes for developing, administering and documenting programs.
  - 1.1.1 Maintain compliance with the standards outlined in this document. It is the responsibility of the provider to demonstrate knowledge of and compliance with the Standards through written documentation.
  - 1.1.2 Incorporate programs that promote the use of current, valid and/or evidence based practices.
  - 1.1.3 Identify and provide a supportive learning environment with the physical, technical and educational materials necessary to support the program.
  - 1.1.4 Maintain documentation of the processes used to develop, administer, deliver, conduct and assess the program and participants.
  - 1.1.5 Maintain cumulative records with appropriate security for a period of five years.
- 1.2 Develop cosponsor agreements that clearly define the working relationship between parties. This includes documentation of the completion and provision of various tasks, ensuring that the programs of both parties are in compliance with the Standards.
- 1.3 Ensure that commercial support does not interfere with the independence and objectivity of instructors.
  - 1.3.1 Providers and presenters must adhere to the standards for declaring conflicts of interest as defined in Section 2.5 of these Standards.
  - 1.3.2 The purpose of a program cannot be the promotion of goods and services to the participants.
  - 1.3.3 Content determined as sales oriented (i.e., designed to “sell” services or products or “product-specific narrative”) shall be excluded in the determination of contact minutes/hours.
- 1.4 Document ownership of the copyright, license or permission for the use of any protected materials used within a program.
- 1.5 Document changes in administrator/primary contact for programming and ensure that the new administrator/primary contact understands and is in compliance with the Standards.
- 1.6 Provide sufficient information to allow prospective participants to judge the value and appropriateness of the program (e.g., abstract, learning objectives, intended level of audience (i.e., essential, advanced, mastery).
- 1.7 Provide each learner, in a timely fashion, with a statement of credit upon successful completion of the program.
- 1.8 Provide evidence (e.g. curriculum vitae, bio) that instructors chosen to lead programs are qualified by education and/or experience to provide instruction in the relevant subject matter as defined in Section 4.

- 1.9 Ensure that financial resources are available to sustain the programs undertaken. For example, resources should be available for continued program improvement and for secure maintenance of program records.

## **SECTION 2: BUSINESS PRACTICES**

### **2.1 Code of Ethics**

Providers are guided by the following principles of professional conduct as they interact with Athletic Trainers (ATs). Providers will:

- 2.1.1 Adhere to all standards and guidelines as described by the BOC.
- 2.1.2 Maintain the integrity and copyright of all proprietary BOC documents and materials.
- 2.1.3 Be truthful in statements to the BOC, ATs and the public.
- 2.1.4 Comply with all applicable business, employment and copyright laws.
- 2.1.5 Provide equal and fair treatment to all program participants.
- 2.1.6 Comply with the BOC audit system.
- 2.1.7 Uphold and enhance public appreciation and trust for the profession of athletic training.
- 2.1.8 Maintain the confidentiality of all participant information.

### **2.2 Appropriate Language**

Use language that does not show personal or professional bias or cultural insensitivity.

### **2.3 Non-Discriminatory Practices**

Ensure that programs are available and accessible to all appropriate participants. Further, providers shall ensure no unlawful discrimination is associated with programming or related programs.

### **2.4 Copyright**

Ensure that copyright permission of materials used by program developers, presenters or others are identified on all program materials, including audio-visual and program related materials.

### **2.5 Conflict of Interest**

Make public potential and actual conflicts of interest and financial gain associated with any programs, presenters or providers. Disclosure of potential conflict for program sponsors must also be addressed. This includes, at a minimum, identifying any and all sponsors in printed program materials.

### **2.6 Cancellation/Refund Policy**

If a fee is charged for programs, a policy must address cancellations and refunds. This policy shall be clearly indicated to potential participants.

## **SECTION 3: CONTENT**

- 3.1 Utilize educational methods that are appropriate to the:
  - 3.1.1 Stated objectives for the program
  - 3.1.2 Characteristics or composition (especially skill level) of the intended audience
  - 3.1.3 Facilities and instructional medium (e.g., video, lecture) used for the program
- 3.2 For participation programs (beyond 30% of program time) group size must be limited to ensure adequate interaction with instructors/evaluators.
- 3.3 Structure each program for the transfer of knowledge, application and/or practice based needs of the AT. Content must be based on evidence that is generally accepted by healthcare professionals. Examples of types of program structures may include any of the following:
  - 3.3.1 Knowledge based : Participants gain factual knowledge
  - 3.3.2 Activity based : Participants apply information learned in the time frame allotted

- 3.3.3 Practice based: Participants systematically acquire specific knowledge, skills, attitudes and performance behaviors that expand or enhance practice competencies
- 3.4 Develop program outcomes, as well as learning objectives that define the knowledge and/or skills the AT is expected to acquire through the completion of the program.

#### **SECTION 4: DEVELOPMENT and INSTRUCTION**

##### **4.1 Program Developers must:**

- 4.1.1 Be knowledgeable of the domains of athletic training. Credit shall not be awarded for educational programs that 1) do not fall into one of these domains or 2) are presented below the level of an entry-level Certified Athletic Trainer.
- 4.1.2 Provider must ensure that the facilities are appropriate for proposed educational programs and that the proposed educational programs meet the learning objectives of the program.
- 4.1.3 Obtain a curriculum vitae that highlights pertinent information on an instructor's education and professional training, as well as work, publication and presentation history. This record must be produced for any audit conducted by or on behalf of the BOC.
- 4.1.4 Offer educational materials for each program that will enhance participant understanding of the content and foster application to clinical practice.
- 4.1.5 Notify potential enrollees of any required materials and equipment, and provide specific descriptions of each.
- 4.1.6 Develop clearly-defined policies on honoraria and expense reimbursement for instructors/authors.

##### **4.2 Instructor Qualifications**

- 4.2.1 Instructors of educational programs must have documented experience, education and/or training to allow attendees to meet the learning objectives.
- 4.2.2 Instructors should be selected based upon their knowledge of the subject matter; experience and teaching ability; and ability to meet the educational needs of the AT.

#### **SECTION 5: ASSESSMENT**

- 5.1 Each learning objective (see Section 3) must have an appropriate, corresponding strategy for assessment of learning.
  - 5.1.1 The strategy must be content-oriented and must provide feedback to participants so that they can assess their mastery of the material.
- 5.2 The provider must develop and use assessment strategies that:
  - 5.2.1 Are appropriate to the chosen objectives and educational methods.
  - 5.2.2 Measure the extent to which program objectives have been accomplished.
- 5.3 The provider may select formal and informal techniques for assessment of learning.
  - 5.3.1 Informal techniques typically involve participant discussions.
  - 5.3.2 Formal techniques, such as tests and quizzes, are typically individualized, written and graded.
- 5.4 The provider shall give feedback about the assessment to the participant in an appropriate, timely and constructive manner.

#### **SECTION 6: REVIEW and EVALUATION**

##### **6.1 Evaluation**

- 6.1.1 Providers must develop and conduct evaluations of each program.
- 6.1.2 Feedback from participants should be provided on the following areas:
  - 6.1.2.1 Applicability of program to meet educational needs
    - 6.1.2.1.1 Program content was practically useful, comprehensive, appropriate and adequately in-depth
  - 6.1.2.2 Achievement of stated objectives

- 6.1.2.3 Effectiveness of teaching and learning methods
- 6.1.2.4 Quality and effectiveness of faculty
- 6.1.2.5 Usefulness of educational materials
- 6.1.2.6 Appropriateness of learning assessment programs
- 6.1.2.7 Perception of bias or commercialism

## 6.2 Review

- 6.2.1 Data collected is thoroughly evaluated and used to make improvements in future presentations.
- 6.2.2 Presenters are informed of feedback to help improve teaching and learning methods as well as quality and effectiveness of presentations.
- 6.2.3 An independent or internal review shall be conducted no less than annually to determine the effectiveness of the program. The review should evaluate:
  - 6.2.3.1 Achievement of the overall goals of the program
  - 6.2.3.2 The extent to which the evaluation effectively and appropriately assesses:
    - 6.2.3.2.1 Educational objectives
    - 6.2.3.2.2 Quality of the instruction process
    - 6.2.3.2.3 Participants' perception of enhanced professional effectiveness
  - 6.2.3.3 Appropriateness of evaluation methods and consistency with the scope of the program

## GLOSSARY

**Assessment** (learning) – A tool that allows the participant to demonstrate or confirm his or her learning relative to stated program objectives. In addition, assessment allows participants to explain how they plan to incorporate the new skill and/or knowledge into their clinical practice to improve patient outcomes.

**Conflict of Interest** - A situation in which social, professional, or financial considerations have the potential to compromise or bias objectivity. An apparent conflict of interest is one in which a reasonable person would think that the provider's objectivity is likely to be compromised. A conflict of interest exists whether or not decisions are affected by a personal interest; a conflict of interest implies only the potential for bias, not a likelihood.

**Copyright** - Copyright is a form of protection provided by the laws of the United States (title 17, *U. S. Code*) to the authors of "original works of authorship," including literary, dramatic, musical, artistic, and certain other intellectual works. This protection is available to both published and unpublished works. Visit [www.copyright.gov](http://www.copyright.gov) for more information.

**Domains of Athletic Training** - There are five domains of athletic training. The content of each program must fall within at least one of these content areas:

1. Injury/Illness Prevention and Wellness
2. Clinical Evaluation and Diagnosis
3. Immediate and Emergency Care
4. Treatment and Rehabilitation
5. Organization and Professional Health and Well-Being

**Evaluation** (program) – An appraisal tool that allows the participant to provide program feedback to help the provider determine the effectiveness of a program and/or the administration of a program.

**Evidence Based Practice** - The most common definition of EBP is taken from Dr. David Sackett, a pioneer in evidence based practice. EBP is "the conscientious, explicit and judicious use of current best evidence

in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available external clinical evidence from systematic research." EBP is the integration of clinical expertise, patient values, and the best research evidence into the decision making process for patient care.

**Participation Programs** – A program that requires active participation by the attendee, such as a hands-on workshop or a learning lab.