

2023 Program Review Report - Sports Medicine



Program Review - Sports Medicine

Program Summary

2023-2024

Prepared by: Lisa Lorenzi

What are the strengths of your area?: 1. The Sports Medicine Program had two former students return to COS as Master's entry level interns for the Athletic Training programs to be supervised by our staff in preparation for their career as Athletic Trainers. We had one student in the fall and one in the spring, both of whom went on the graduate, pass their board certification exam, and became employed in the local assessed 10 SLO assessments for 4 different SMED courses and found all but one SLO to be satisfactory. Compared to previous results, I believe these outcomes to be satisfactory. The HW60/SMED 60 course tends to have less satisfactory results than the Sports Medicine program courses. This could be due to more general student population or non-sports medicine/exercise science majors enrolling in the course to take as an elective. I high school communities. These graduate students also provided valuable mentorship and influence to current sports medicine students who are striving towards these specific goals. Two other students in Masters programs also achieved this same accomplishment and one also took a job in the community. This is a full-circle achievement of students who have graduated from the Sports Medicine Program and it's continued overall success. We will continue our relationship with Fresno State University and University of Idaho to provide students with an internship that also helps influence and educate current students in new techniques and current trends in athletic training.

2. The Sports Medicine Program continues to update the medical protocols as recommended by the National Collegiate Athletic Association (NCAA), Centers of Disease Control and Prevention (CDC), California Community College Athletic Association (CCCAA) and the county of Tulare. Other update concerning concussions, environmental conditions heat conditions and air quality from the CCCAA (bylaws of the CCCAA) has been implemented for the safety of our student athletes. There were a number of practices and games that were altered to ensure student safety due to inclement weather. Without the proper tools and regulations, normal activities may have put our student-athletes at risk.

3. In 2022-23 seven students from the Sports Medicine Program transferred to four-year colleges/universities. Five of the students received an AS degree in Sports Medicine while the others received an AA degree in Kinesiology/Health. Students met the requirements for transfer into Kinesiology and Exercise Science undergraduate options. Additionally, one student completed the pre-requisite coursework and clinical hours to gain admission into a Master's Entry Level Degree program in Athletic training and one is eligible to apply at the end of the semester. Disaggregated data reveals that statistically groups of race and gender are succeeding comparable to the college's statistics

4. Overall enrollment has increased in the sports medicine program from 16.5 students in 2021-22 to 21 students in fall of 2022 and 25 students in spring of 2023. This is around a 20% increase. The college continues to increase enrollment to pre-pandemic levels which benefits all programs. Additionally, I have been recruiting students out of sports medicine and first aid courses as well as reaching out to local high schools and counselors.

5. The Assistant Athletic Trainer was successfully re-classified to Athletic trainer in June 2023. This re-established equality and equity for both Athletic trainers employed in the classified position. The two shared the same duties and responsibilities and are now also both paid under the same salary schedule. The salary now reflects what other athletic trainers in our region are also being paid for their positions.

What improvements are needed?: 1. After reviewing the data located under College of the Sequoias Program Review Dashboard, the following data needs to be addressed:

a) Full-Time Equivalent Students (FTES)/Full-Time Equivalent Faculty (FTEF) Ratio for the Sports medicine Department decreased

the last two program reviews from 13.21% (2019-20), 11.64% (202-21), 10.84% (2021-22) and 2022-23 it increased to 12.11% whereas the target is 17.5%. However this target is aimed for 35 students enrolled per course. Because this is a specialty course and requires a lot of skill-based one-on-one instruction, more than 25 students in the courses would not lead to better quality learning. Students in an English course of max 25 students has a target of 12.5%. So reaching near this level seems more accurate given the non-mainstream component of the major which is comparable to other colleges.

The previous decreases could be due to lack of marketing, the pandemic, and the elevation of entering the workforce of athletic training to a master's level degree vs bachelors.

The other reason my have to do with the amount of science courses required to complete this major. Exercise Science/Sports Medicine/Athletic training prepares students to meet the pre-required courses to enter these graduate programs. However, the courses require a lot of academic focus and challenge, and some students are not equipped to handle this kind of a load coming out of high school. The other option of Kinesiology requires less intensive coursework and therefore students may then opt for that major instead and slowly acquire the pre-required courses in their later years at the university level.

2. Increase enrollment and degree completion of the Sports Medicine AS degree/program.

Current course enrollments for sports medicine courses has plateaued in past semesters. While we are seeing a slight increase in the number of students overall, the enrollment in these courses is not at a desirable level. For the foundation course SMED 40 the enrollments are as follows: Fall 2022: 27 students, Spring 2023: 17 students, Fall 2023: 19 students. This decrease in enrollment is perplexing, but I continue to get students who indicate that they were not notified that the sports medicine program existed. More marketing and meeting with new counselors and feeder high schools is needed to bring awareness and exposure to our program.

Secondly, to help increase degree completions I believe an alteration in the degree may be necessary. Looking over current degree requirements for an AS in Sports medicine requires a large number of units with a daunting courseload. While all of these courses will help prepare a student for a future admission into Athletic Training, Physical Therapy, or other graduate medical program, some of the courses can also be taken as electives at the university level when the student is academically more prepared to handle some of the more difficult or challenging courses. This will need to be discussed with the counselor and dean for revision.

3. Addition of Athletic trainer to current staff. Currently there are two full-time classified athletic trainers and one faculty with 80% teaching and 20% athletic training load. In the last few years we have increased the number of student-athletes from 359 in 2018-19 to 425-450 in the last two years. This is a significant increase in workload and the number of students who are then exposed to activity and thus injured has increased. Additionally, soccer and football have added a non-traditional season in the spring that further caused an increase in injuries and thus workload. On average, the athletic training clinic sees 80-100 student-athletes and some for multiple issues. These visits last between 5 minutes for taping/bandaging to an hour or more for evaluation, treatment and rehabilitation. With an increase in the number of student-athletes, there is not enough staff to provide quality care to our student-athlete's needs on a daily basis. When an event happens, this takes one staff member away for a minimum 4 hours to cover warm-ups, event time and post-game clean-up. The extra time needed to staff the clinic overflows into the the faculty workload of preparation and grading, or being able to teach clinical students one-on-one. We have also increased our insurance claims by 37% from 2022-23. This trend shows that we had more severe injuries necessitating evaluation by a physician or that we also had more injuries in general from previous years. Additionally, the AMCIA tool is a calculator used by the NATA to indicate how many athletic trainers an institution should have for appropriate care and coverage. According to calculations specifically for COS with its number of sports, athletes, events/practices, we should have 4.3 athletic trainers (document attached). With an increase in the number of students and injuries, an additional full-time classified Athletic Trainer is necessary.

Describe any external opportunities or challenges.: The CCCAA has adopted a non-traditional padded practice season for football as of Spring 23 (CCCAA Constituion and Bylaws: Bylaw 3.17) Previously, no padded practices were allowed. This new legislation allowed our football team to have 5 weeks of padded practices. Typically the spring is devoted to conditioning and non-contact activity. With this addition, we experienced several injuries requiring further evaluation by a physician. Five different athletes had injuries needing an insurance claim, and other athletes sustained injuries we would not normally see in non-contact practices. This is an increase in exposure to injury and thus resulted in more overall injuries.

The sport of football is the leader in significant injuries, insurance claims, and overall number of injuries .The football team has significantly increased it's numbers over the past 3 years. The addition of this season also increased administrative activities for additional physical exams, paperwork and concussion testing, and equipment fitting.

The industry of athletic training is seeing an increase in the types of settings for employment. Companies like Amazon, Fed Ex, PG&E, and other industrial and large corporations have begun to employ athletic trainers to care for the on-site employees. With

competitive salaries and more convenient work hours that allow work-life balance, there appears to be a decreased number of interested candidates working in the collegiate and secondary school setting. California Community Colleges have had numerous job openings in the past year that have been difficult to fill or a low number of applicants.

The CCCAA also updated to their environmental health and safety guidelines for student-athletes during training and competition. With increasing climate temperatures reaching new record levels and for more days per year, athletic trainers are tasked with monitoring Wet Bulb Globe Temperature to ensure safe practice/competition conditions. In order to monitor conditions currently we have to send someone outside to collect a measurement. By using a Kestral Heat Stress monitor, we can mount this device to our outdoor areas and use Bluetooth technology to alert us when conditions become unsafe for our student. This would cost around \$650.

Overall SLO Achievement: I assessed 10 SLO assessments for 4 different SMED courses and found all but one SLO to be satisfactory. Compared to previous results, I believe these outcomes to be satisfactory. The HW60/SMED 60 course tends to have less satisfactory results than the Sports Medicine program courses. This could be due to more general student population or non-sports medicine/exercise science majors enrolling in the course to take as an elective.

Changes Based on SLO Achievement: Only subtle pedagogies will be employed to continue to help students achieve the SLO. These include more hands-on techniques and scenario-based or real-life learning examples. This tends to help things become realistic and more likely to be retained.

Overall PLO Achievement: With a continued recovery from the pandemic, success rates with SMED courses have been improving. Students are starting to come back to the classroom in the traditional format, but still face challenges at home with employment, family responsibilities, and other involvements. Success rates in 2 courses (SMED 40, SMED 60) have improved from previous years (SMED 40: 79%- 85% in 2022-23, 62% - 75% in SMED 60), while SMED 152, have regressed since 2020-21(91% to 72%). In 2020-21 the environment was focused on small group learning due to restrictions in class size. These smaller groups actually help improve individual skills and learning. In 2021-22, students were emerging from an online-only environment to a face-to-face format using hands-on skills, especially in SMED 151 & 153. However, many students were wanting to remain in an online format for convenience or personal preference and active participation became a challenge. While trying to accommodate student's personal challenges unrelated to school, at times this resulted in a lack of participation which then affected knowledge retention and skill achievement. With more students participating in the current year, this should help improve overall success rates and educational motivation from peer-to-peer contact and connection.

Changes Based on PLO Achievement: No current changes to the PLOs or assessment methods at this time. Improvement plans going forward would include more student engagement activities in the classroom and lab to keep students connected and learning. More and more students are further engaged in learning when they don't have take notes or listen to a boring lecture. It will take time to create meaningful activities and lessons for students to engage more. With time, more ideas and activities will be developed. I would also like to visit a few universities and tour their athletic training and physical therapy areas such as Fresno State University. Many students have never visited a university and are often left to their own imagination. By having students set foot on these campuses like Fresno State students start looking into their future and can become more motivated to succeed and take the next steps into their success.

Outcome cycle evaluation: At this time, the program is meeting it's schedule that it has established. Students are completing their degrees in a timely manner, and with dual-enrollment allowing students to start 6-9 units ahead when coming in to COS, this helps further their ability to stay on-track with their degrees. A deeper look into re-organizing the degree will further help students accomplish their respective goals.

Action: 2023-24 Providing injury care for Student-athletes

Hire additional athletic trainer to current staff.

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Implementation Timeline: 2023 - 2024

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Identify related course/program outcomes: Injury Management

Person(s) Responsible (Name and Position): Lisa Lorenzi

Rationale (With supporting data): Currently there are two full-time classified athletic trainers and one faculty with 80% teaching and 20% athletic training load. In the last few years we have increased the number of student-athletes from 359 in 2018-19 to 425-450 in the last two years. This is a significant increase in workload and the number of students who are then exposed to activity and thus injured has increased. Additionally, soccer and football have added a non-traditional season in the spring that further caused an increase in injuries and thus workload. On average, the athletic training clinic sees 80-100 student-athletes and some for multiple issues. These visits last between 5 minutes for taping/bandaging to an hour or more for evaluation,

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treatment and rehabilitation. With an increase in the number of student-athletes, there is not enough staff to provide quality care to our student-athlete's needs on a daily basis. When an event happens, this takes one staff member away for a minimum 4 hours to cover warm-ups, event time and post-game clean-up. The extra time needed to staff the clinic overflows into the the faculty workload of preparation and grading, or being able to teach clinical students one-on-one. We have also increased our insurance claims by 37% from 2022-23. This trend shows that we had more severe injuries necessitating evaluation by a physician or that we also had more injuries in general from previous years. Additionally, the AMCIA tool is a calculator used by the NATA to indicate how many athletic trainers an institution should have for appropriate care and coverage. According to calculations specifically for COS with its number of sports, athletes, events/practices, we should have 4.3 athletic trainers (document attached). With an increase in the number of students and injuries, an additional full-time classified Athletic Trainer is necessary.

Priority: High

Safety Issue: Yes

External Mandate: No

Safety/Mandate Explanation: COS athletic department has increased the number of student athletes by 25% from the past few years. There has also been an addition of non-traditional season competition for contact sports such as football and soccer which has increased the number of exposures to injury and thus the number of overall injuries. We have seen an increase in the number of student-athletes seeking injury care and management on a daily basis.