

AT Specialty Petitioner's Guide

PUBLISHED APRIL 2020

RE-RELEASED DECEMBER 2023



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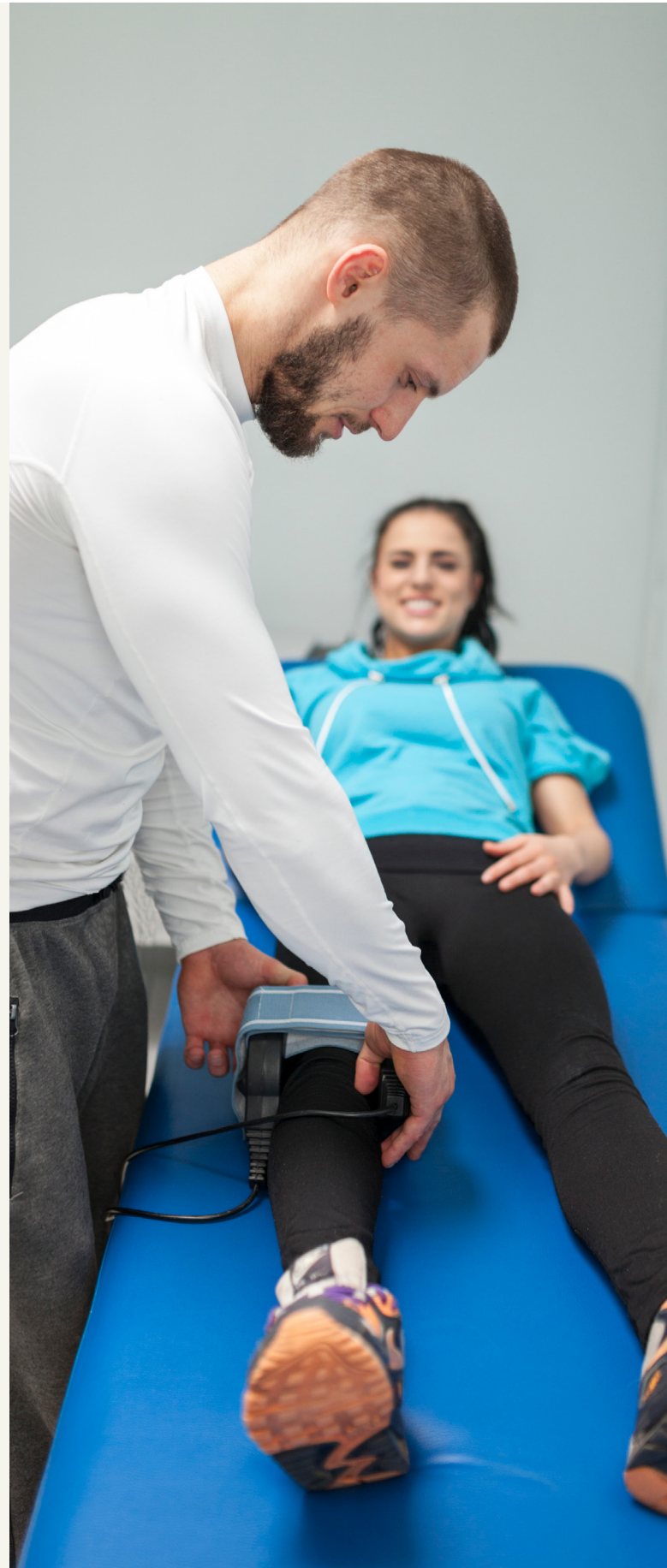
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Introduction

The BOC, through the BOC Specialty Council, recognizes specialty certification in certain areas of practice within the athletic training profession. The purpose of the BOC Specialty Council is to guide the recognition and validation of athletic training specialties as well as oversee the credentialing of Athletic Trainers (ATs) who have demonstrated advanced knowledge, skills and abilities in the respective area of specialization. This document outlines the procedures to be taken to petition for the recognition of a new athletic training specialty area of practice.

SPECIALTY CERTIFICATION DEFINITION

BOC specialty certification is a voluntary process by which an AT's mastery of advanced knowledge, skills and experience in a specialized area of clinical practice, exceeding what is required for entry-level AT certification, is demonstrated and measured against defined predetermined standards, such as completing post-professional education, training, and/or experience (e.g. accredited residency) and achieving a passing score on a specialty certification exam. This demonstration serves to enhance the quality of patient care, optimize clinical outcomes, increase cost-effectiveness and improve patients' health-related quality of life in specialized areas of athletic training practice.

PETITION FOR SPECIALTY PRACTICE RECOGNITION

It is important to note that a successful petition for specialty practice recognition is only the first step in a multi-step planning and development process to establish an actual specialty certification credential. Recognizing areas of specialty practice within the profession of athletic training represents a necessary first step towards the eventual development of any areas of specialty recognition via specialty certification. Approval of the petition only denotes that the new specialty area of practice is worthy of further investigation, planning and development towards a specialty certification. Consequently, a successful petition does not culminate in a fully developed specialty certification credential.

The Specialty Council evaluates petitions for specialty recognition against seven criteria. Following each criterion is a set of guidelines. These guidelines are meant to assist petitioners in addressing the criteria by suggesting areas of information, assessments and documentation that the Specialty Council, the public and the profession might find useful when evaluating a petition. The guidelines are not exhaustive. Petitioners are encouraged to submit all documentation thought to be pertinent to the petition, whether indicated in the guidelines or not.



Instructions to Petitioners

WHO MAY PETITION

Any individual or group of individuals may petition the Specialty Council to recognize a specific area of athletic training practice as a specialty. Any petitioner interested in filing a petition with the Specialty Council is encouraged to communicate with all individuals in the proposed specialty area who may have an interest in filing a similar petition, to consolidate resources and coordinate information so that one complete and comprehensive petition is submitted for a proposed specialty.

In the event that more than one petition is submitted to the Specialty Council regarding the same area of athletic training practice, the Specialty Council will accept the first complete petition received as the “petition of record” and refer all subsequent petitioners who have submitted petition(s) in a similar area of specialization, to the originator of the “petition of record” for support, coordination, collaboration and any necessary modification.

STRUCTURE OF PETITION

The petition should address each of the criteria and their associated guidelines, in the order outlined in the guide. The petition should clearly demonstrate to the Specialty Council that the proposed specialty meets all the criteria by providing all of the documentation as stipulated in the guidelines. Petitioners are encouraged to submit all documentation thought to be pertinent to the petition, whether indicated in the guidelines or not.

SIGNATURES

The petition shall be accompanied by no less than 25 unique letters of support from individuals practicing in the proposed specialty area or other professionals familiar with the specialty area. Signatures must be identified by address, title and place of practice. Each signer’s name should also appear in printed format.

DEFINITIONS FOR THE PROPOSED SPECIALTY

The petitioner shall include the following as part of the petition:

- Name for the proposed specialty
- Definition of the proposed specialty
- Title for the specialist

SUBMITTING THE PETITION

The petition must be submitted in electronic format with all accompanying materials so that the report can be distributed for review. Email information to BOC@bocatc.org.

COST

- A non-refundable fee must accompany the submission of a petition. Visit the [BOC website](#) for more information.
- All costs associated with the development of the petition will be borne by the petitioner, unless other approved arrangements have been made by the Specialty Council.
- All expenses associated with appearing at interviews and/or open hearings will be borne by the petitioner.
- Should the petition be approved, the petitioner may be responsible for assisting in securing the funding needed for the practice analysis.

QUESTIONS AND CLARIFICATIONS

Potential petitioners are invited to contact the Specialty Council with any questions or requests for clarifications concerning the information in this guide. Questions concerning policy for complex procedural issues should be submitted electronically to the staff liaison. See [page 8](#) for an outline of the petition process from submission to decision.



Criterion

I. NEED

Specialized skills and knowledge are needed to improve patient outcomes and the health and welfare of the public. The Specialty Council defines need as a condition requiring supply.

Guidelines for Petitioners

- Identify specific health and/or patient care needs which could be improved, enhanced and effectively met by ATs in the proposed specialty.
- Describe and document with evidence, how patient health and well-being may be enhanced by the services of practitioners with the proposed specialty.
- Describe how the practitioners in the proposed specialty will address the needs as described above.
- Describe the reasons why ATs with this specialty, compared to ATs without the specialty, can better meet the needs as described above.
- If these needs as described above are currently being met by other areas of athletic training specialty practice, describe how these needs can be met more effectively by ATs in the proposed specialty.

II. DEMAND

There exists a significant and clear health demand to provide the necessary rationale and justification for the proposed specialty. The Specialty Council defines demand as a willingness and ability to purchase a commodity or service.

Guidelines for Petitioners

- Include statements by at least two individuals in each of the categories listed below regarding the demand for ATs with specialized training and knowledge to provide specialized services in the proposed specialty area of practice including:
 - Non-AT health professional leaders, planners and/or administrators.
 - AT practitioners who are not practicing in the proposed specialty.
 - Members of the public.
- Provide estimates of the number of positions for ATs with specialized training and knowledge in the proposed specialty that are currently filled and those that are currently unfilled. Identify these positions by practice settings. Describe the sources and methods used to determine these estimates.
- Demonstrate a sustained or increased demand for ATs with specialized knowledge and training by including estimates of filled and unfilled positions for ATs in the proposed specialty in each of the past three years (e.g., position announcements). Identify the types of practice settings for these ATs (e.g., academic, hospital, managed health care, community). Describe the sources and methods used to determine these estimates.



III. NUMBER AND TIME

The area of specialization includes a reasonable number of individuals who devote most of their professional practice time to the specialty area. This criterion also helps ensure that the expenses connected with the development and administration of any future certification and recertification processes will be economically justifiable for the public and the profession. The Specialty Council defines this criterion as it relates to the number of practitioners and the amount of time spent in the practice of the specialty.

Guidelines for Petitioners

- For the ATs currently practicing in the proposed specialty area, estimate the percentage of time they devote exclusively to the practice of the proposed specialty. Describe the sources and methods used to determine these estimates.
- Estimate the number of ATs who would likely seek BOC Specialty Council credentialing in the proposed specialty during the first five years in which credentialing would be available. Describe the sources and methods used to determine these estimates.

IV. SPECIALIZED KNOWLEDGE

Must build upon professional education and one or more of the current practice domains of athletic training, including the biological, physical and behavioral sciences to develop a greater depth of knowledge and skills related to the proposed specialty. Procedural or technical services and the specific environment in which the athletic training specialty is practiced are not applicable to this criterion. The Specialty Council defines specialized knowledge to be the facts, information and skills acquired by a person through post-professional education and experience; including the theoretical and/or practical understanding of a subject. In this section of the petition, respondents are requested to focus commentary on the area(s) of specialized knowledge rather than how this knowledge is attained.

Guidelines for Petitioners

- Describe in detail the specialized knowledge of the domains of athletic training required for the proposed specialty.
- Explain the relationship of this specialized knowledge to the biological, physical and behavioral sciences that underlie the domains of athletic training.
- Discuss in detail how this specialized knowledge differs from the knowledge base of a BOC credentialed AT and those specialty areas already recognized by the Specialty Council (e.g., Orthopedics).

V. SPECIALIZED FUNCTIONS

Represents an identifiable field of athletic training practice which requires specialized functioning by the practitioner and is distinct from other BOC recognized athletic training specialties. The Specialty Council defines specialized functions as the distinctive action, activity or purpose of the individual.

Guidelines for Petitioners

- Specify and describe in detail, the specialized functions performed routinely by practitioners in the proposed specialty which are either not performed by ATs in general or which are better performed by practitioners in the proposed specialty.
- Describe the special skills required to perform functions specified above.
- Discuss in detail how these specialized functions differ from the functioning of a BOC credentialed ATs and those athletic training specialties already recognized by the Specialty Council.



VI. EDUCATION AND EXPERIENCE

Post-professional athletic training programs, residencies or other organizations should offer recognized education and experiential learning opportunities to those seeking advanced knowledge and skills in the area of specialty practice. The Specialty Council defines education broadly as the action or process of gaining knowledge, skills and understanding, and experience as the direct participation in events/activities related to learning.

Guidelines for Petitioners

- Describe in detail the education and experience required to acquire such specialized knowledge and skills.
- Discuss how such education, training and experience differ from the education and experience of a credentialed, entry-level AT.
- Provide a comprehensive listing of such programs, detailing sponsoring organizations or institutions, locations and individuals in charge.
- Describe in detail the nature of education programs in the area of specialty practice including their length, content and objectives.
- Provide in detail the specific eligibility criteria, for both residency and non-residency educated individuals, required to develop such specialized knowledge and skills, including but not limited to, college/university courses, certifications, continuing education courses, training and number of experience hours.

VII. TRANSMISSION OF KNOWLEDGE

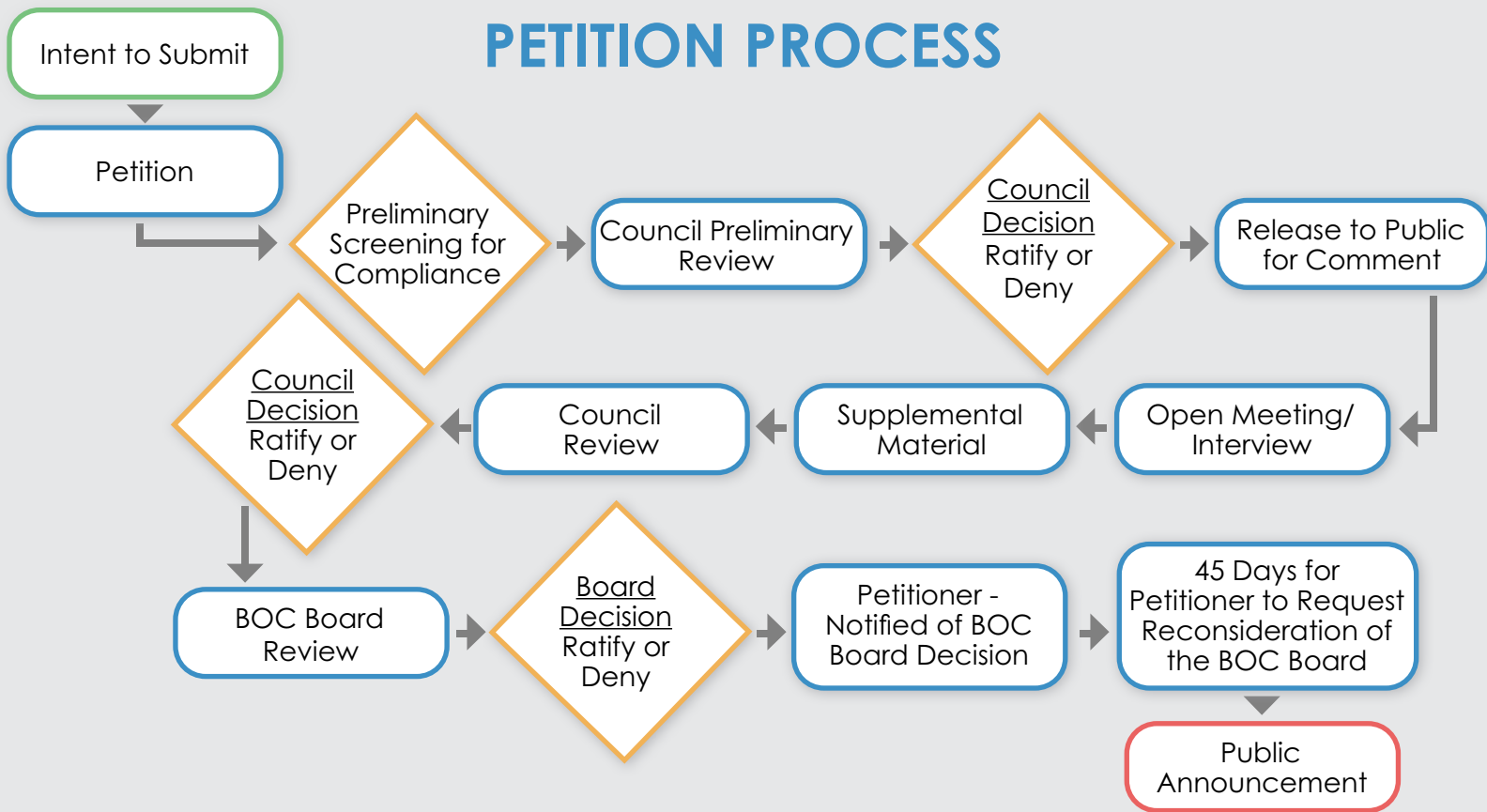
Ensure that there is an adequate transmission of specialized knowledge through professional, scientific and technical literature immediately related to the specialty area. The Specialty Council defines transmission of knowledge as the creation, organization, capture or distribution of information.

Guidelines for Petitioners

- Identify journals and other periodicals dealing specifically with the proposed specialty.
- Provide a comprehensive bibliography of articles in the professional literature dealing with the proposed specialty published during the three most recent calendar years.
- Include copies of a sample of peer-reviewed articles dealing with the proposed specialty.
- Describe methods of knowledge transmission through symposia, seminars, workshops, etc. and enclose representative programs concerning these activities.
- Provide the number of such events, which occur on an annual basis, and estimate average and total attendance at such programs.



Procedures for Considering Petitions



INTENT TO SUBMIT AND PETITION

The petitioner should contact the BOC Specialty Council staff liaison in writing declaring the intent to submit a petition. When the petition is completed, the petitioner should submit the petition materials to staff liaison.

The sequence is a procedural outline, with projected timelines, regarding consideration of petitions by the Specialty Council. The Specialty Council, in consultation with the petitioner, may adjust timelines as needed.

PRELIMINARY SCREENING FOR COMPLIANCE

Preliminary screening for completeness of petition by staff liaison within 15 business days of receipt of petition.

- If the petition is complete and ready for preliminary review by the Specialty Council, the staff liaison will notify the petitioner electronically that the petition will be forwarded to the Specialty Council for preliminary review.
- In the event the petition is found to be incomplete or additional information is needed, the petitioner will be notified electronically of such within 15 business days of receipt of the petition.
- The 15 business day period restarts once the amended petition or additional information is received by the staff liaison.

SPECIALTY COUNCIL PRELIMINARY REVIEW

Staff liaison submits petition for preliminary review by the Specialty Council. Preliminary review by the Specialty Council is completed to determine if the petition clearly addresses all criteria so that the petition may be released to the profession and the public for comment and further consideration within 90 business days of completion of the preliminary screening by staff liaison. The purpose of this review is not to pass judgment on the petition as a whole, or on any of its parts, but to assure that there is sufficient information upon which the public and the profession may comment.

- If the petition is determined to be ready for the next step, the petitioner will be notified electronically by the staff liaison.
- In the event the petition is found to be incomplete or additional information is needed, the petitioner will be notified of such electronically by the staff liaison within 90 business days of completion of the preliminary screening.
- The 90 business day period restarts once the amended petition or additional information is received by the staff liaison.

RELEASE TO THE PUBLIC FOR COMMENT

If the petition is released to the profession and the public requesting comments in support of or in opposition to the petition, appropriate news releases and correspondence are generated by the Specialty Council within 120 business days of completion of the preliminary screening by the staff liaison.

OPEN MEETING/INTERVIEW

Possible petitioner interview within 120 business days of completion of the preliminary screening by the staff liaison. One open hearing will be held to solicit input from the athletic training profession, other health professions, third-party payers and the public. This hearing will be scheduled to occur following completion of the preliminary screening by the staff liaison.

SUPPLEMENTAL MATERIALS

Supplemental material may be submitted by the petitioner upon request of the Specialty Council or at the petitioner's own discretion. Submission of supplemental materials may cause the Specialty Council to pose additional questions to the petitioner.

SPECIALTY COUNCIL REVIEW AND DECISION

Once the requisite open hearing has been held, final evaluation and decision will take place during the next subsequent Specialty Council meeting. The Specialty Council will review all matters of record concerning the petition, including any supplemental material.

A recommendation to approve a petition is based on a balancing of all factors pertinent to the criteria. The vote of the Specialty Council will be carried out in accordance with its governing policies. All recommendations passed by Specialty Council are submitted to the BOC Board of Directors for their consideration and ratification. No decisions are final until ratification from the BOC board.

BOC BOARD OF DIRECTORS REVIEW AND DECISION

The BOC Board of Directors are given the petition for consideration and ratification. No decisions are final until ratification from the board. If the petition is ratified by the BOC board, an announcement of the board's decision will be released to the public and the profession.

In the event that the BOC board decides not to recognize the specialty area, the petitioner will be informed of the decision and advised within 30 business days of the board's decision. The petitioner will also be advised that within 45 business days of this notification, a request for reconsideration of the decision may be made to the board, in accordance with its governing policies. After the reconsideration period has passed, an announcement of the board's decision will be then be released to the public and the profession.

In the event that a petition is denied and the time for reconsideration has expired, a period of at least one year must elapse before Specialty Council will consider another petition for the same specialty.

Glossary

Criterion - Relates to the number of practitioners and the amount of time spent in the practice of the specialty.

Education - Defined broadly as the action or process of gaining knowledge, skills and understanding, and experience as the direct participation in events/activities related to learning.

Demand - A willingness and ability to purchase a commodity or service.

Need - A condition requiring supply.

Petitioner - Described as any individual or group of individuals petitioning the Specialty Council to recognize a specific area of athletic training practice as a specialty. Any individual or group interested in filing a petition with the Specialty Council is encouraged to communicate with all individuals in the proposed specialty area who may have an interest in filing a similar petition, to consolidate resources and coordinate information so that one complete and comprehensive petition is submitted for a proposed specialty.

Specialization - A specific line of study and expertise in a larger body of knowledge or line of study or work.

Specialized Knowledge - The facts, information and skills acquired by a person through post-professional education and experience, including the theoretical and/or practical understanding of a subject.

Specialized Functions - The distinctive action, activity or purpose of the individual.

Transmission of Knowledge - The creation, organization, capture or distribution of information. The information needs to be peer-reviewed evidence or some other criteria for establishing a minimum level of credibility and provided in AMA style.

