Willow Spring High School

Sports Medicine Student Assistant

Handbook



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Table of Contents

INTRODUCTION…… ……3

MISSION STATEMENT & REQUIREMENTS…..……4

PROFESSIONAL APPEARANCE & CONDUCT…….……5

BEHAVIOR CODE OF CONDUCT……..……..6

ATHLETIC TRAINING ROOM REGULATIONS……7

SMSA PRACTICE/GAME RESPONSIBILITIES……..……8

DISCIPLINARY PROCESS/CORRECTIVE

ACTION…….…….9-10

STUDENT INFORMATION

SHEET……..……..……11

STUDENT RECOMMENDATION

FORM……..12

PARENT PERMISSION

FORM……..13

CONFIDENTIALITY

FORM……..……14

Introduction

Greetings and Welcome to the Willow Spring High School Sports Medicine Program! By entering into this program, you have set yourselves apart from the normal high school student. Expectations and standards are at a much higher level than that of a normal high school student as well. As an extension of the Athletic Department, you will represent your institution in new environments. This gives an individual a possible two seasons to participate in a school sport. It is **NOT** discouraged to have an afterschool job while being involved in this program, but you are responsible for your school assignments and communicating with the Certified Athletic Trainer about your attendance. Part of the standards of a Sports Medicine Student Assistant include, but are not limited to, professional conduct, dress code, and ability to work with others.

This experience requires an enormous commitment and an abundant amount of dedication. Practices/games will be scheduled for times after school and some may occur on the weekend and holidays, excluding Sunday. This program is designed to be student oriented in that "You will get out of it whatever you put into it!" With that being said, this program cannot only provide a very educational experience, but also add a very intricate part to a young adolescents' social and maturation process.

In conclusion, I again welcome you to the program. My door is always open for any of your questions, comments, and suggestions. I look forward to working with you and directing your Athletic Training/Sports Medicine endeavors and helping you meet any other educational goals that you may have.

Derrick Bridges, MA, LAT, ATC

Head Athletic Trainer

Mission Statement

The Sports Medicine Program at Willow Spring High School has the two-fold purpose of educating Sports Medicine Student Assistants interested in the field of Athletic Training and Sports Medicine while providing a high standard of care for the student athletes. Education of the students will be accomplished by providing an educational experience that effectively combines classroom instruction and practical experiences. This allows the students to maintain and improve their knowledge and skill in the area of Athletic Training, while preparing them to be college and career ready in the 21st century. An acceptable standard of care for our student-athletes will be accomplished as health care services are provided in accordance with our team physician. Combining these purposes will permit Sports Medicine Student Assistants to participate in delivering a high standard of care actively and accurately to our students.

Program Requirements

By entering the Sports Medicine Program at Willow Spring High School, you will be expected to meet requirements to enable your participation. Part of the expectations of a Sports Medicine Student Assistant include, but are not limited to:

- A minimum GPA of 2.0
- Being available for afterschool activities (practices, games, etc.). Students must obtain their own transportation following practices and games.
- Sports Medicine Student Assistants are required to clock a minimum of 5 hours per week.
- Sports Medicine Student Assistants will be required to attend a minimum of 1-2 practices per week. If Sports Medicine Student Assistants do not meet the practice requirements they will not be allowed to participate in game-day activities.
- Students will demonstrate growth in techniques taught in an aide role - assisting with specified tapings, wrappings, modality usage, field setup/breakdown.

Professional Appearance and Conduct

Dress Code:

Neatness, cleanliness, and proper attire enhance the appearance of a Sports Medicine Student Assistant (SMSA) and inspire confidence in the SMSA's ability. SMSA's are not only expected to dress professionally when they are in the Athletic Training Room, on the practice field, or a game, but they should also be mindful that they represent the Athletic Training Program when they are not assisting in the capacity as a SMSA.

Games, Practices, & Athletic Training Room:

The preferred tops that would be an appropriate, plain colored t-shirt (any color other than white) with appropriate shorts/pants should be worn (no short shorts or ripped jeans). A collared (polo style) shirt and khaki shorts/pants are required for games. SMSA's will also wear sneakers or shoes that are functional for Athletic Training (no crocs, flip flops, or open toed shoes).

Conduct:

1. SMSA's are an extension of the Athletic Training Department, but in **NO WAY** should you act as you are the Certified Athletic Trainer whether at home or away events.
2. SMSA's are expected to conduct themselves in a professional manner promoting a positive image as they are a representation of the program and the sport staff.
3. Conduct is measured by how the SMSA's dress, how he/she performs his/her duties, how he/she communicates with staff Athletic Trainer, other SMSAs, athletes, coaches, and by the SMSA's ability to demonstrate ethical and moral behavior particularly when he/she is in the public eye.
4. Examples of misconduct include but are not limited to decline in academics, any type of suspension (ISS or OSS), insubordination, theft, violence or threat of violence, being under the influence of drugs or alcohol, or breach of confidentiality. In light of any type of misconduct, the SMSA may be removed from the program immediately with little consideration for reinstatement.

Policy on romantic relationships with athletes:

Sports medicine student assistants shall always serve as role models to athletes and other sports medicine student assistants with whom they have the privilege of working. If the SMSA chooses to have a romantic relationship with an athlete, they will show no public displays of affection while acting within the SMSA capacity.

Misconduct of any kind will result in disciplinary actions being taken against the SMSA.

Behavior Code

1. **Respect Professional Confidentiality** – Any matters regarding an athlete's health, medical records, or status are not to be repeated to anyone outside of the athletic training facility.
2. **Accept Responsibility** – The SMSA represents the school and the Sports Medicine Staff. Always act in a mature, responsible, courteous manner. Students must remember that administrators, coaches, parents, and athletes see them as an extension of the athletic staff and the entire Sports Medicine Program.
3. **Know Your Limits** - SMSA's are only permitted to perform those duties in which they have been trained and are cleared to do. If in doubt, **do nothing and ask first!** Act only under the supervision of a certified athletic trainer. SMSA's may or may not be asked for an opinion in regard to emergency situations. Remember, in the absence of a certified athletic trainer or other medical professional, the coach and the athlete's parents are the higher sources of authority.
4. **Demonstrate a Desire to Learn** – Ask questions and learn from every situation.
5. **Take Initiative** – "See it, Do it" type of mentality. Anticipate without being reminded to do something.
6. **Identify yourself** – Introducing yourself to staff and athletes as well as visiting teams. Coaches will often appreciate assistance when they know it is from a SMSA.
7. **Practice and Develop Good Taping and First Aid Skills** – The majority of the SMSA's responsibilities fall under these two categories. Become recognized as highly competent in these skills.
8. **Be Dependable** – Show up on time, know responsibilities as well as game and practice assignments, and carry them out according to level of importance.
9. **Learn to communicate** – Communicate with the certified athletic trainer about what is going on. Build professional communication skills with coaches and athletes. A good rapport with these individuals is essential to productively interacting as a SMSA on a daily basis.

WSHS Athletic Training Room Rules & Regulations

1) Only 3 student-athletes inside the Athletic Training Room at a time to receive taping, treatment, or rehabilitation
2) No athlete will receive care without first having their name, injury site, and the date care was administered recorded in the daily treatment/sign- in log.
3) No athlete is allowed in the Athletic Training Room except those receiving injury care or those who have been given permission by a member of the Athletic Training Staff.
4) Athletic Training Room hours and treatment times will be established and communicated to the athletes and coaches. You are expected to adhere to these scheduled times.
5) No one is allowed in the athletic training room facilities except under the supervision or with the permission of a member of the athletic training staff.
6) No supplies are to be taken from the Athletic Training Room without consent from an Athletic Training Staff Member. Reusable items such as elastic bandages, crutches, etc., are to be returned in good condition.
7) When a treatment or rehabilitation program is suggested for you, you are expected to cooperate and carry it out. If you fail to follow the prescribed procedures, this information may be forwarded to your coach/parent.
8) Athletes are **NOT** to bring practice and/or game equipment into the Athletic Training Room.
9) Athletes are **NOT** to place shoes on tables or taping counters.
10) Athletes are **NOT** to wear cleats in the Athletic Training Facility.
11) Athletes must refrain from abusive, racist, sexist, obscene, or inappropriate language (profanity, etc.) and behavior.

SMSA Practice Responsibilities

1) Arrive **BEFORE** the athletes are scheduled to arrive, as directed by the supervising AT.
2) Have the athletic training kit properly stocked and at the practice site.
3) Ensure Setup & Breakdown procedures are completed at the practice site.
4) Do not leave the practice site unless you first notify supervising AT.
5) Complete all paperwork before leaving.
6) Provide treatment for athletes before and after practice.
7) Clean and return all equipment to the appropriate storage areas at the end of practice.

SMSA Game Responsibilities

1) Arrive before the athletes are scheduled to arrive, as directed by the supervising AT.
2) Greet and introduce yourself to the visiting Athletic Trainer or First Responder & Students.
3) Ensure the Athletic Training kit is properly stocked and is at the game site.
4) Ensure all other necessary emergency medical equipment is at the game site.
5) Provide treatments for the athletes before and after games.
6) Follow Setup & Breakdown procedures completed at the game site.
7) Do not leave the game site without first notifying the Athletic Trainer.
8) Complete all paperwork before leaving.
9) Clean and return all equipment to the appropriate storage areas at the end of the game.

Disciplinary Process/Corrective Action

Purpose: To establish fair and appropriate guidelines for performing disciplinary measures as a means of correcting or improving job performance and/or terminating a Sports Medicine Student Assistant (SMSA).

Policy:

1) The primary objective of any disciplinary procedure is to improve job performance, conduct, and/or attendance in a fair objective way.
2) It is the responsibility of all Sports Medicine Student Assistant to conform to system policies and standards of conduct, performance, and attendance.
3) If a Sports Medicine Student Assistant is not conforming in any area either a coaching process or formal positive disciplinary steps shall occur. The appropriate step in a given situation depends on the seriousness of the problem and the Sports Medicine Student Assistant's prior record. Although every attempt should be made to operate within these guidelines, the ATC has the obligation to terminate the Sports Medicine Student Assistant, as necessary.
4) While termination is not a step in the positive discipline process, it is a step taken when positive discipline measure efforts have failed or when a Sports Medicine Student Assistant commits an offense that is so serious that progression through the formal levels of positive discipline is not warranted.

Procedures:

1) The ATC shall determine that performance, conduct, or attendance needs improvement.
2) The ATC shall determine whether coaching is appropriate or whether one of the formal corrective action steps shall be taken.
3) The ATC:
    a. Shall describe the behavior or job performance that does not meet requirements.
    b. Describe the expected behavior or job performance.
    c. Explain the importance of the expected behavior and the consequences of continued sub-standard performance.
    d. Document a summary of the discussion, including an action plan for improvement.
    e. Observe and provide feedback to the Sports Medicine Student Assistant.
4) The positive discipline process includes:
    a. Oral reminder
    b. Written reminder
    c. The Sports Medicine Student Assistant can receive two written reminders before he/she is no longer part of the program. Three written reminders will result in termination.
5) Termination is the last resort.
    a. Sports Medicine Student Assistant will be given a written notice stating the reason for his/her dismissal.

OFFENSE	CONSEQUENCE
Inappropriate Dress in the Athletic Training Room, at Practice, or at a Game	SMSA will either be sent home or not allowed to count observation hours for the day.
Failure of a Class	SMSA will be put on Academic Probation for 1 semester. Return is questionable.
C average or below in Sports Medicine Classes	SMSA will be on Academic Probation until grade is above C average
GPA drops below a 2.0	Students are not allowed to participate in the SMSA Program. If in the program, SMSA will be on academic probation until GPA is above 2.0
7 or more days absent	Students will be placed on academic probation for 1 semester. Return is questionable if student does not appeal absences since failure of classes are likely
Breach of confidentiality	Immediate removal from the program and unable to return.
Public display of affection while working as a SMSA	SMSA will be sent home for the day and not allowed to return for one (1) week

Sports Medicine Student Assistant Information Sheet

First Name: _____

Last Name: _____

School Email: _____

Birthday: _____

Grade Level: _____

Current GPA: _____

Class Schedule: 1st Period _____

2nd Period _____

3rd Period _____

4th Period _____

Emergency Contact Information

Name of Parent/Guardian: _____

Home Telephone Number: _____

Cell Phone Number: _____

Name of Parent/Guardian: _____

Home Telephone Number: _____

Cell Phone Number: _____

Sports Medicine Student Assistant Recommendation Form

Applicant Name (Print): _____

Reference's Name (Print): _____

Instructions: After considering each factor below, rate the above-named student applicant's performance by placing a check in the boxes appropriate

Rate on the factors below:	Unacceptable	Poor	Fair	Good	Excellent
Dependability: Student can be counted on to follow Instructions, be on time, and fulfill responsibilities.					
Attitude: Amount of interest and enthusiasm shown daily with respect to school/work.					
Adaptability: Student can perform a variety of assignments.					
Initiative: Student performs duties without being told or shown what to do.					
Courtesy and Cooperation: Student exhibits courtesy and cooperation with others.					
Professionalism: Student conducts themselves so that their knowledge and skill are respected by others.					
Personal Appearance: Student dresses in a professional and appropriate manner.					
Perseverance: Student pursues objectives with great determination and patience.					
Responsibility: Student accepts accountability for one's words and actions					
Maturity: Student acts in a mature manner.					

Additional comments can be written on the back of this form.

Please place recommendation in an envelope and give to WS Athletic Trainers for review

Reference's Signature: _____ Date: _____

Parent Permission Form

Dear Parent/Guardian,

Your child has expressed an interest in working as a Sports Medicine Student Assistant for the _____ school year. For your son or daughter to become a member of this program, I need your permission for him/her to participate. Please sign the bottom of this page to give the Willow Spring High School Sports Medicine Program permission to include your son or daughter in the program. Your signature also indicates your support of the following:

1. Your son/daughter will be covering sporting events (both home and some away) and practices during after school hours and evenings for a minimum of 1 sports season. It is your responsibility to provide transportation to and from home events and after away events.

2. Your son/daughter will be required to maintain a minimum GPA of 2.0.

3. Your son/daughter will be required to adhere to the program's dress code outlined in this handbook.

4. As a Sports Medicine Student Assistant, your son/daughter may have access to many of the student-athletes medical records. It is essential that they maintain confidentiality. Confidentiality is both a legal and moral obligation of those individuals working in a health care setting. Any breach of confidentiality will result in disciplinary action.

5. Your son/daughter must follow the rules and regulations that are outlined in the Willow Spring High School Sports Medicine Student Assistant Handbook.

Please Sign Below:

I understand and agree with the above regulations as well as those outlined in the Willow Spring High School Sports Medicine Student Assistant Handbook.

_____

Signature of Parent/Guardian Date

_____

Signature of Student Date

CONFIDENTIALITY AGREEMENT

I, _____ understand that as a condition of my participation in the Sports Medicine Student Assistant program at Willow Spring High School, I must safeguard the privacy, security, and integrity of patient records at all times. I agree to abide by all state and federal laws and regulations governing the security and confidentiality of individual identifiable medical information and records. I agree that I will not engage in behavior that may cause a breach of confidentiality or the appearance of a breach, whether intentional or not.

This includes but is not limited to:

- Discussing information contained in files or distributing confidential files to others
- Discussing a patient's confidential information with another student or instructor where it can be overheard by other individuals (e.g., discussing a patient in a hallway or classroom)
- Discussing a patient with friends; other students, other professionals, or anyone, inside or outside the Clinic, not directly involved in the care of patient or in a consultative role regarding the patient's care
- Leaving records unsecured in an open area where individuals not involved in the care of that patient can view them
- Leaving computer workstation screens with identifiable patient information unattended or unlocked so that anyone may view or access patient's confidential medical information
- Saving identifiable patient information on computer disk or hard drive
- Transmitting reports with identifiable confidential information via email
- Removing any reports or erasing raw data from the patient registration

As an SMSA, I understand that I may be disciplined, including termination, for violating state or federal statutes or school policy regarding confidentiality and privacy of protected information. I understand that I may be subject to legal action if I violate state or federal statutes regarding protected health information.

By my signature, I agree to abide by all the premises and principles contained in this agreement.

_____ _____

Student Signature Date

By my signature, I, as a parent, understand the importance of this confidentiality agreement and the expectation and ramifications of such agreement for my child.

_____ _____

Parent/Guardian Signature Date