



PRESENTS

ATHLETIC TRAINER & TEAM PHYSICIAN

Effective Communication & Team Collaboration

PRESENTED BY:

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COMMUNICATION

Communicate

/ko-mu-ni-kate/

1. To pass on information, news or thoughts.
2. To spread to another or others.

COMMUNICATION & MEDICAL ERRORS

US MALPRACTICE CASE STUDY FINDS:

- Nearly 2,000 patient deaths and \$1.7 billion in malpractice costs could have been avoided if medical staff and patients communicated better
- Communication failures were a factor in 30 percent of malpractice cases in 2016
- In 24,000 malpractice cases from 2009 to 2013, 7,000 were due to communication failures either between medical professionals or between medical professional and patient



LAWSUIT

Background: A patient was receiving physical therapy after undergoing three right ankle surgeries, including ankle reconstruction and removal of hardware, in less than 18 months

- On the third visit, an athletic trainer, who was working under the guidance of a physical therapist, instructed the patient to perform right foot hop exercises, even though the plan of care restricted such exercises
- During this exercise, the patient felt immediate pain and returned to their orthopedic surgeon
- Following evaluation by the orthopedic surgeon, it was determined that a fourth surgery would be needed
- At trial, the AT testified that she had not read the plan of care before working with the patient and therefore knew very little about the patient and their injury
- Settlement unknown

LAWSUIT

BACKGROUND: An athlete walked into the ATR during a school practice to get ice following being hit on the lateral aspect of the leg with a helmet.

- After a thorough evaluation the athletic trainer gave the athlete ice and instructed the athlete to leave the ice on the area for no more than 15-20 minutes.
- The following day the athlete came for ice once again and the athletic trainer once again advised to leave the ice on for no more than 15-20 minutes.
- The athletic trainer saw the athlete much later out at practice with ice bag still adhered to her leg. Advised the athlete to take the bag off and spoke about the negative effects of leaving the ice on longer than advised.
- The following day the athlete reported to the athletic trainer that her foot was dropping while walking and that she had numbness and tingling following icing. Athletic trainer advised being seen by school physician.
- Team physician diagnosed an injury to the peroneal nerve with differential diagnosis of knee contusion and extended use of ice
- Two years later, the athlete filed a lawsuit against the athletic trainer with one of the claims being “Failing to inform or instruct the athlete of the dangers or risks involved in the application of the ice pack/wrap”
- This case was dismissed due to the proper documentation by the athletic trainer during the athletes course of treatment

JAG-ONE
PHYSICAL THERAPY

7 Cs of Communication Checklist

Clear	Make objective clear. Avoid complex words & phrases.
Concise	Keep it clear and to the point. Avoid filler words & sentences.
Concrete	Be specific not vague. Use facts and figures to support your message.
Correct	Try to avoid typos. Use correct facts and figures. Use the right level of language.
Coherent	Does your message make sense? Ensure it flows logically. Avoid covering too much.
Complete	Does the message contain everything it needs to? Include a call-to-action.
Courteous	Being polite builds goodwill. Ensure message is tactful.

BARRIERS

BARRIERS TO EFFECTIVE COMMUNICATION

1. PERSONALITY DIFFERENCES
2. PROFESSIONAL HIERARCHY
3. INTER-PROFESSIONAL & INTRA-PROFESSIONAL RIVALRIES
4. DIFFERENCES IN LANGUAGE & JARGON
5. DIFFERENCES IN SCHEDULE & PROFESSIONAL ROUTINE
6. VARYING LEVELS OF QUALIFICATIONS, STATUS, AND PREPARATION
7. FEAR OF DILUTED PROFESSIONAL IDENTITY
8. COMPLEXITY OF CARE
9. EMPHASIS ON RAPID DECISION MAKING



ATHLETIC HEALTHCARE TEAM



COMPONENTS OF SUCCESSFUL TEAMWORK

1. OPEN COMMUNICATION
2. CLEAR DIRECTION
3. CLEAR AND KNOWN TASKS FOR TEAM MEMBERS
4. RESPECTFUL ATMOSPHERE
5. SHARED RESPONSIBILITY FOR TEAM SUCCESS
6. CLEAR AND KNOWN DECISION MAKING PROCEDURES
7. REGULAR AND ROUTINE COMMUNICATION & INFORMATION SHARING
8. ENABLING ENVIRONMENT, INCLUDING ACCESS TO NEEDED RESOURCES





ARE YOU ABIDING BY
YOUR PLAN OF CARE?

PLAN OF CARE GUIDELINES

“A LICENSED ATHLETIC TRAINER AND HIS OR HER SUPERVISING PHYSICIAN SHALL MEET AT LEAST ONCE A YEAR TO REVIEW THE PLAN OF CARE AND REVISE IT AS NECESSARY”

- When was the last time you met with your team physician?
- Did you meet in person or through a phone conference?
- Have you updated your plan of care since it was first developed?



PLAN OF CARE GUIDELINES

“A SUPERVISING PHYSICIAN SHALL BE AVAILABLE, EITHER IN PERSON OR THROUGH VOICE COMMUNICATION, WHENEVER A LICENSED ATHLETIC TRAINER IS PRACTICING ATHLETIC TRAINING”

- Do you know how to get in contact with your team physician if he/she is not on-site with you?
- Do you have their cell phone number or only their office number?
- Is it appropriate to text your team physician in regards to athletes & injuries?
- Do you have a back-up plan if your team physician cannot be reached?



PLAN OF CARE GUIDELINES

“A LICENSED ATHLETIC TRAINER WHO PREPARES A RECORD MAINTAINED SOLELY ON A PERSONAL OR OTHER COMPUTER SHALL USE A WRITE PROTECTED PROGRAM THAT:

1. CONTAINS AN INTERNAL PERMANENTLY ACTIVATED DATE AND TIME RECORDATION FOR ALL ENTRIES
 2. AUTOMATICALLY PREPARES A BACK-UP COPY OF THE FILE
 3. AFTER THE LICENSED ATHLETIC TRAINER “SIGNS” BY MEANS OF A CONFIDENTIAL PERSONAL CODE (CPC), THE ENTRY CANNOT BE CHANGED IN ANY MANNER”
- What program do you utilize?
 - Do you utilize a personal or public computer?
 - Do you document all communication made with team physician, athlete, and parent?



PLAN OF CARE GUIDELINES

“A LICENSED ATHLETIC TRAINER SHALL PROVIDE A COPY OF THE ATHLETE’S RECORD WITHIN 30 DAYS OF A WRITTEN REQUEST BY THE ATHLETE OR ANY PERSON WHOM THE ATHLETE HAS DESIGNATED TO RECEIVE THAT RECORD, OR, IF THE ATHLETE IS A MINOR, THE ATHLETE’S LEGAL GUARDIAN”

- What is the process you follow in regards to releasing athlete records?
- Are you aware of who you can speak to in regards to an athletes condition?
- Are you abiding by FERPA and/ or HIPAA guidelines?



FERPA

Family Educational
Rights & Privacy Act



LIABILITY

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT

A FEDERAL LAW DESIGNED TO PROVIDE PRIVACY STANDARDS TO PROTECT PATIENT'S MEDICAL RECORDS AND OTHER HEALTH INFORMATION PROVIDED TO HEALTH PLANS, DOCTORS, HOSPITALS AND OTHER HEALTH CARE PROVIDERS.

How can you be held liable?

- Sharing of information on social media networks (i.e. Facebook, Twitter, Instagram)
- Sharing of information with local news outlets (i.e. school newspaper, town newspaper, local news)



LIABILITY

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT

HOW DOES A HIPAA VIOLATION OCCUR?

SITUATION: Staff member serving as game security takes picture of injured athlete and posts it to their Facebook page



CAPTION READS: Wow. Just spoke with my friend @JamesJonesATC who is the athletic trainer and found out that our star quarterback, Rob Smith, tore his ACL and will be out for the rest of the season. #donttellthescouts #bye_collegescholarship

LIABILITY

FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT

A FEDERAL LAW DESIGNED TO PROTECT THE PRIVACY OF STUDENT EDUCATION RECORDS AND ESTABLISH THE RIGHT OF STUDENTS TO INSPECT AND REVIEW THEIR EDUCATION RECORDS.

- THESE RECORDS INCLUDE BUT ARE NOT LIMITED TO:
 - TRANSCRIPTS
 - HEALTH RECORDS
 - GRADES
 - STUDENT DISCIPLINE FILES

How can you be held liable?

- Sharing of information which would not be otherwise known if not for a school record (i.e. athletic trainer injury reports, treatment records)

FERPA:

Family Educational
Rights & Privacy Act

LIABILITY

FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT

HOW DOES A FERPA VIOLATION OCCUR?

SITUATION: Local newspaper is writing a story on female soccer players who have sustained more than one concussion in their high school playing career. Athletic department is excited to have their team highlighted and gives access to injury reports on the girls soccer team.



LIABILITY

Sports Medicine Licensure Clarity Act

- Passed through Senate in October of 2017
- Signed into law by the President on October 5, 2018

Under the Sports Medicine Licensure Clarity Act:

- Health care services provided by a covered sports medicine professional to an athlete, an athletic team, or a staff member of the team outside of his or her home state would be deemed to have occurred in the professional's primary state of licensure.
- This legislation simply treats medical services in the secondary state as occurring in the primary state if the secondary state's licensure requirements are substantially similar to the primary state.
- Sports medicine professionals can engage in the treatment of injured athletes across state lines without fear of great professional harm, such as loss of license to practice, while protected from monetary loss with professional liability insurance.



COMMUNICATION AND DOCUMENTATION

FIVE WAYS ATHLETIC TRAINERS PROTECT THEIR ATHLETES AND THEMSELVES THROUGH PROPER DOCUMENTATION AND COMMUNICATION

1. IDENTIFYING AND REMEDYING INJURY TRENDS
2. IMPROVING THE QUALITY OF MEDICAL CARE PROVIDED
3. ENSURING THAT THE SCHOOL PROVIDES ADEQUATE MEDICAL SERVICES
4. PROTECT THEIR EMPLOYER FROM LITIGATION
5. PROTECT THEMSELVES FROM LITIGATION



THANK YOU!

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