



# Community Facing Athletic Trainer

ATTR 639 | Fall 2022  
Public Health in Athletic Training

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This report represents original student work and recommendations prepared by students in the Indiana State University Sustainable City Program for the City of Sullivan. Text and images contained in this report may not be used without permission from Indiana State University. All information provided is not subject to publication.

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Mayor John Hasten, *City of Marshall*

Nora Swalls, Executive Director, *Marshall Area Chamber of Commerce*

Denise Pine-Mattas, MD, *Cork Medical*

## ABOUT SC

The Sustainable Cities (SC) Program is an experiential learning partnership focusing on sustainability and cities in Indiana. Disciplines across the institution are tasked with addressing sustainability issues in a specific community by integrating these into experiential projects for ISU students. These problems range from strategic planning recommendations to community needs assessment, and understanding the impacts of waste strategies to mapping trail systems, and many other issues.

This is a year-long partnership, in which students and faculty in courses collaborate with one specific community partner on these projects. Communities throughout Indiana have leaders who want to make real change. These leaders are passionate about moving their cities forward into the future, but are often limited by lack of resources, staff, and budget.

The SC Program utilizes the innovation and energy of students and faculty to provide ideas that will address these issues. This relationship reinforces and strengthens our Indiana communities.

Each ISU course and community partner will produce tangible and relevant outcomes for the community partner while providing ISU students with real world project completion. This report serves as this outcome.

## SC PLANNING COMMITTEE

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## ABOUT MARSHALL, IL

The City of Marshall is the county seat of Clark County, Illinois and approximately 20 miles west of Terre Haute. The population is approximately 3,500. The city serves as a hub for the towns of Martinsville, Moonshine, Oilfield, Westfield, West Union, Casey, and Darwin. The first major improved highway, National Road, was built through Marshall. Eight years after its construction, Marshall was organized in 1835 and named after U.S. Supreme Court Chief Justice John Marshall. The city was incorporated on May 14th, 1873. The total area of the incorporated city is 3.6 miles. Marshall has a rich history in this region surrounding the Civil War and has many historical touchpoints. Marshall is close in proximity to the Wabash Valley and is considered part of the Wabash Valley. Today, Marshall has the highest population in the county at approximately 3,947. This is a vibrant community in the Wabash Valley and has great community leadership. Mayor John Hasten and so many community members have shown dedication to the growth of Marshall. Mayor John Hasten is leading the city through a new master plan and intends to leverage opportunities within the community for sustainable development. Marshall faces many similar social, environmental, and economic challenges to other rural towns and other challenges that are unique to the city itself.

## COURSE PARTICIPANTS

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## EXECUTIVE SUMMARY

In summary upon meeting with professionals of the Marshall community, it was highlighted that an athletic trainer (AT) is needed to serve as a community-facing health professional within the Marshall community in order to provide access to high-quality injury prevention, evaluation, and care. The main objectives for the project included performing a needs assessment to determine the potential costs and resources necessary to provide a community-facing athletic trainer within the Marshall community, sharing perspectives on how athletic trainers can provide services to serve the health needs in the Marshall community, and determining the best strategies for providing access to athletic trainers in the Marshall community.

During the needs assessment it was found that the Marshall community is made up of mostly farmers, manufacturing industrial workers, and educators. It was also found that musculoskeletal (MSK) injuries are common within this demographic and often go untreated due to the fear of missing work to access healthcare due to limited office hours as well as potentially fear of having to take an unknown amount of time off due to the injury itself which could affect their livelihood.

After informative conversations with Marshall leaders it was determined that the AT will be employed through either Union Hospital or Horizon Health and the AT will be housed in Cork Medical or Horizon Health as well as serving as an outreach provider for community businesses, making \$50,000-\$60,000/year.

After discussing the benefits of having an AT within the Marshall community we concluded that there are various benefits to having AT services provided for the community of Marshall starting with the most important factor, farmers, due to the fact that they suffer from chronic conditions. Having these services available could possibly eliminate the time by having an open-clinic/walk-in clinic that can provide an initial evaluation, treatment, and patient education to help improve the health of the farmers. Another benefit would be providing services to the industrial population of Marshall, providing care for acute, chronic, and emergency conditions, in the past they have had to outsource to a very busy/booked PT clinic. Another benefit of our services include collaboration with local physical therapists and chiropractors that work at Cork Medical or other health clinics in the community. The AT working alongside other medical providers can use their unique skill set that allows them to work in all realms of healthcare and utilize them to provide care and prevention for all injuries and conditions whether it be acute, chronic, or simply educating the patient on injury prevention and wellness.

Our strategies for implementing this plan include: The AT might be employed through Union Hospital or Horizon Health. The AT would work five days a week. They

go to ZF manufacturing, AGI Manufacturing, and Charles industries one day a week or bi weekly each to work as outreach services. For the remaining three days of the week, they would work half the day in collaboration with Will, the physical therapist in the community. The AT's off days are scheduled for Friday and Sunday. With the AT working on Saturdays, they could be available for the community members who cannot be seen during the week. Lastly, public transportation will be available according to the time and location of AT services.

In conclusion, providing an athletic trainer to the Marshall community, will serve as an exceptional resource for all. In a city where there is limited access to healthcare services, an athletic trainer will be very beneficial. ATs are not just seen in the sports setting, but provide services in the industrial setting, hospitals, clinics, offices, military, and doctor's offices.

# INTRODUCTION

In an initial planning meeting with Marshall Mayor John Hasten, the mayor identified the potential need for an athletic trainer to serve as a community-facing health professional within the Marshall community in order to provide access to high-quality injury prevention, evaluation, and care.

The agreed-upon objectives for this project were to:

- Perform a needs assessment to determine the potential costs and resources necessary to provide a community-facing athletic trainer within the Marshall community.
- Share perspectives on how athletic trainers can provide services to serve the health needs in the Marshall community.
- Determine the best strategies for providing access to athletic trainers in the Marshall community.

Students collaborated with Nora Swalls, Executive Director of the Marshall Area Chamber of Commerce, and with Dr. Denise Pine-Mattas, local family medicine physician at Cork Medical, to perform the initial needs assessment before researching and developing the rest of this report.

# NEEDS ASSESSMENT FOR COMMUNITY ATHLETIC TRAINER

The Marshall community by majority is made up of farmers, manufacturing industrial workers, and educators. Musculoskeletal (MSK) injuries are common within this demographic and often go untreated due to the fear of missing work to access healthcare due to limited office hours as well as potentially fear of having to take an unknown amount of time off due to the injury itself which could affect their livelihood. Having a certified athletic trainer (AT) able to provide their unique set of skills and knowledge of MSK injury, rehabilitation, and much more through a walk in clinic, outreach - actually visiting the large manufacturing plants, along with partnerships with Physical Therapists and other healthcare providers in the community will provide copious benefits to the Marshall community overall.

The AT will be employed through either Union Hospital or Horizon Health, both of which have clinics located in the Marshall Community. Based on the NATA salary survey, an AT in this setting should expect to make between \$50,000 & 60,000 yearly. This will vary based on the final job description and requirements of the position. The employer will also need to supply AT with a computer, ideally a laptop due to outreach so they are able to access electronic medical records. This will cost approximately \$2,000 depending on brand, but should be supplied by the employer.

The AT will have an office within either Cork Medical or Horizon Health. This is where His/Her/Their 'home' office will be. They will be able to take walk-in's and scheduled appointments here. As well, based on the need vocalized by community leaders, part of the AT's day (maybe ½) will be spent assisting Will, the physical therapist in the community. The AT will also take two of these days for outreach and actually have locations at the three larger manufacturing plants where employees can be seen. AT should be paid mileage from the clinic to the manufacturing plant to help compensate for distance in order to do the outreach. This will be expanded on further in later sections. The major manufacturing plants within the community include the following:

- ZF Manufacturing which employs about 600 individuals - 1 Day per week
- AGI Manufacturing which employs about 200 individuals - 1 Day bi-weekly
- Charles Industries which employs about 125 individuals - 1 day bi-weekly

The need to provide for the AT will include a private room at each location where examination can occur. The AT will need to either have a portable table for examination, or each plant will need to provide an examination table for AT use. The portable table

will cost about \$500. Employers will also need to supply AT with an emergency first aid kit to travel with (\$200-750), the manufacturing plants should have some supplies, but it would be beneficial for the AT to have their own stocked kit to travel with them.

Advertisement needs to be a partnership with the employer and community. The employer can provide flyers and advertisements in pre-existing clinics. Community should plan for between \$500-1,000 of advertisement which could include social media, newspaper articles (multiple weeks), flyers around town, radio station advertisements, etc.

The AT will be joining pre-existing clinics, so there is not a large need for supplies, but this would need to be assessed by employers, due to not knowing exactly what resources each location has, but it is assumed that there is not a large need here to purchase much new equipment. Overall, it is expected that the AT will be paid between \$50,000 & \$60,000 salary, commensurate benefits, mileage (negotiated in contract), and other costs ranging from \$3,500 & \$6,000 additional costs operationally in the first year.

## **BENEFITS OF PROVIDING COMMUNITY ATHLETIC TRAINER**

Having an AT available to the Marshall community provides many benefits. AT's have a unique skill set and knowledge which includes but is not limited to: emergency care, MSK injuries - diagnosis; referral; and management, rehabilitation, behavioral health, and more. MSK injuries are common in active populations and populations who work in assembly line type jobs and the Marshall community is made up of both of these populations. The majority of the community is reported to be farmers or manufacturing plant employees. Due to the prevalence of MSK injury in these populations, having an AT available for walk-in hours and someone that can potentially provide the diagnosis, management, and rehabilitation all in one location rather than having to see multiple providers for each entity of the injury is extremely beneficial to the busy working class. By being able to get advice on such injuries in all one location, the stubborn farmer may be more likely to be seen and have their condition managed due to less time missed. This is true for industrial workers as well. AT's are able to provide advice on management of the chronic injuries that are often seen at manufacturing plants which can help the individual return to work and manage their condition rather than being told to rest or take time off and come back in a few weeks which could affect their livelihood. This is not to say that AT's will never advise that an individual take time off, but they are

trained in more rehabilitation and conservative management techniques that may offer a more appealing management style to these types of individuals.

A setting that is growing in popularity within athletic training is the industrial setting. AT's are qualified to treat acute and chronic injuries that often occur within these assembly line type jobs, but they are also trained and qualified to respond to emergency situations. AT's can manage emergency situations that may occur until emergency medical services are able to arrive which may drastically improve the outcomes of the injured individual by being able to have medical care provided significantly sooner. Industrial employers are often briefly trained in first aid, but having qualified healthcare provided in the immediate vicinity greatly improves these outcomes. The article [Industrial Medicine and Athletic Training: Cost Effectiveness in the Non-Traditional Setting](#) by Gregory Zimmerman, MSA, ATC expands on some of the potential benefits of opening the door for employing athletic trainers in this setting.

Not only are athletic trainers beneficial for the farmers and industrial settings alike, but they can work in collaboration with local physical therapists and chiropractors that work at Cork Medical or other health clinics in the community. Understanding that there is already a large need for physical therapists in the community, it could be beneficial for the AT to partner with the existing medical providers who both are already trusted within the community, and aid in rehabilitation for part of the AT's day. This could also aid in getting a good rapport with the community due to already working with a widely respected and trusted community health provider.

The AT working alongside other medical providers can use their unique skill set that allows them to work in all realms of healthcare and utilize them to provide care and prevention for all injuries and conditions whether it be acute, chronic, or simply educating the patient on injury prevention and wellness. This offers the community an option to visit the AT at a walk-in clinic rather than wait for an appointment at the physician's office. This strategy can save the community time and money over time.

## STRATEGIES FOR PROVIDING COMMUNITY ACCESS TO ATHLETIC TRAINER

The AT will likely be employed through Union Hospital or Horizon Health, but of which have established facilities within the Marshall community. If they are employed through Union, their main location will be at Cork Medical, if they are through Horizon Health they will have a space located at the walk-in clinic. The AT will provide collaborative services with Will, the community physical therapist, as well as other

healthcare providers, but the main collaboration which will be established within their contact should be with Will.

The AT will be on a 5 day a week work schedule. The day off is flexible, but at first the AT should work on Saturday which will allow for community members who work throughout the week to attend the walk-in clinic without missing work. This would also open up the opportunity for additional outreach by covering your sporting events which may occur on the weekend. AT will have Sunday, and one additional day off throughout the week. Throughout the week, the AT will partner with community PT Will for half of their day (week days, Saturday will be for walk-in & sports coverage PRN) and the other half of the day will be spent either at the clinic or on-site at one of the three main manufacturing plants. ZF will have one day a week and Charles industries and AGI will each get one day every other week. This was determined by the number of employees at each location. the AT will have a break from 12-2 everyday. 1 hour unpaid lunch and the other hour will be paid for travel from location to location and any preparation that is needed between locations.

A schedule may look something like the following:

	<b>Mon</b>	<b>Tue</b>	<b>Wed</b>	<b>Thur</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>
<b>Morning 9am-12pm</b>	PT Clinic	PT Clinic	PT Clinic	PT Clinic	<b>Off</b>	Walk-in	<b>Off</b>
<b>Break 12-2</b> (Allow for lunch and travel)							
<b>Afternoon 2pm-6pm</b>	Walk in	ZF	AGI/CI	Walk in	<b>Off</b>	Youth Sports or Walk in	<b>Off</b>

The AT could set up medical booths at Marshall Community events such as farmers markets to provide more community members with the opportunity to receive athletic training services, or provide educational opportunities about what an AT can offer. The AT has copious opportunities for different forms of outreach and educational opportunities which in turn could lead to higher utilization of the AT services that are being provided. With AT's having a wide variety of knowledge, this gives the community opportunities to attend educational seminars related to general healthcare. Being able to interact with the community through multiple aspects of healthcare including injury

management and diagnosis/referral, rehabilitation services, emergency exercises at sporting events, and education provides a large benefit to the community as a whole.

To further aid in assurance of access to athletic training services, there could be scheduled times that public transportation could pick up community members and transport them to and from the main location of the AT. This could be designated days and times or just ensuring that the medical center the AT is housed at is on the list of stops for public transportation.

## CONCLUSION

In closing, providing an athletic trainer to the Marshall community, will serve as an exceptional resource for all. In a city where there is limited access to healthcare services, an athletic trainer will be very beneficial. ATs are not just seen in the sports setting, but provide services in the industrial setting, hospitals, clinics, offices, military, and doctor's offices. Because of the continuous knowledge and skill work that an AT can provide, this will allow citizens to have an additional healthcare provider for evaluations, rehabilitation and treatment services. Being an additional voice to the community allows more individuals to be seen, heard, and assisted with ongoing injuries and pathologies that they might have been dealing with for a while. Improving daily living for individuals is one of the reasons athletic trainers exist. As a flexible healthcare provider who can travel, more patients will benefit from being seen and assisted regarding their problems. An athletic trainer's job is to ultimately serve the community, and providing services to the Marshall community will solve several problems that have been ongoing.

## REFERENCES

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