Ethical Considerations for the Athletic Training Professional

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Ethics is the study of the rules, standards and principles that determine the right conduct among members in a society.

- Ethical rules are based on moral values.
- Right conduct refers to behavior that is proper, fitting, or conforms to legal or moral expectations.
- In a profession, ethics provides a foundation from which to judge the rightness or wrongness of an action.
- Ethics are commonly referred to as the “conscience” of a person or profession.
Ethical Practice is Linked to Professional Ethos

• Ethos is the fundamental character or spirit of a culture, influencing the beliefs, practices, and the moral element of a group.
• The values, norms, and beliefs represent core elements of ethos.
• Norms, values, and beliefs are shaped by external (social, cultural, historic) and internal (organizational-NATA) influences.
• Professional ethos evolves over time; ethos is shaped and reshaped through maturation and experience.
• Ethos helps make better decisions.
• Ethical standards and practice are the foundation of professional ethos, enhancing professional integrity & clinical reasoning.
Ethical Standards Are Important

- Ethical standards overlap with legal issues.
- Thus, what is ethical may not be legal, AND, what is legal may not be ethical. There is a difference (e.g., confidentiality issues).
- Professional codes of ethics almost universally dictate that it is unethical to engage in any illegal activity.
- Athletic training, like all professions, is defined by certain characteristics that set it apart from nonprofessional groups.
- Athletic training has established high standards of ethical behavior by members of the profession- the NATA has set our ethical standards.
- These standards are the **NATA Code of Ethics**, which is guide for appropriate conduct for members of our profession.
Principle 1
Members Shall Practice with Compassion, Respecting the Rights, Welfare, and Dignity of Others

• 1.1. Members shall render quality patient care regardless of the patient’s race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.

• 1.2. Member’s duty to the patient is the first concern, and therefore members are obligated to place the welfare and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.

• 1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient’s care without a release unless required by law.
Consider

You are the assistant athletic trainer in the college setting. You note that a fellow assistant athletic trainer on the staff goes out of his way to not care for female student-athletes. He expresses a bias against female student-athletes, preferring to care for only male student-athletes. Whenever he is forced to assess a female student-athlete, he performs a brief exam and tells the female student-athlete to “grab an ice bag” for every injury.
Principle 2
Members Shall Comply With the Laws and Regulations Governing the Practice of Athletic Training, National Athletic Trainers’ Association (NATA) Membership Standards, and the NATA Code of Ethics

• 2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.

• 2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.

• 2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.

• 2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.


Principle 2 (continued)

• 2.5. Members must not file, nor encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

• 2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.
You are the secretary of a state athletic trainers’ association. The treasurer of the association was discovered to have stolen about $5,000 from the association’s bank account to be used for personal expenses. After an investigation confirmed the theft, an agreement was reached with the prosecuting attorney’s office that no criminal charges were to be filed as long as the stolen funds were repaid immediately, resign from the association, and resigns his position at his high school where he was employed as an athletic trainer.
Consider

Over the course of six months, the sports medicine department pharmacy noted that a large amount of prescriptions for oxycodone has been ordered by the team orthopedist. A check of records for the student-athletes involved reveal no time-loss injuries or surgeries to these student-athletes. The athletic trainer assigned to the team has chronic pain for his past knee injury. An investigation by the university revealed that the athletic trainer in question had taken some prescription forms and forged student-athlete names and the surgeon’s signature to obtain the oxycodone.
Principle 3: Members Shall Maintain and Promote High Standards in Their Provision of Services

• 3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.

• 3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

• 3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.
Principle 3: (continued)

• 3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

• 3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

• 3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.
Consider

During pre-season camp in August, student-athletes would suffer from heat cramps and exhaustion. In order to provide relief from their condition, an athletic trainer is performing IVs. Though the athletic trainer is not a phlebotomist, EMT, or paramedic, getting the physician to the training room for care is inconvenient and going to the hospital would disrupt team schedules. The athletic trainer has in the past observed the physician performing dozens of IVs. The IVs are performed without incident and the student-athlete is able to return to activity the same day.
Consider

An athletic trainer goes to a seminar to obtain CEUs. She attends a one hour session where the value of Active Release Technique (ART) is discussed and demonstrated by an ART instructor. Returning to her position at a community college, this athletic trainer starts applying techniques she believes are ART based on watching this demonstration.

During a session of applying ART to a student-athlete, a nerve injury to the student-athlete’s elbow occurs, resulting in a disabling contracture of their forearm. This injury results in referrals to hand specialists, surgery, specialized physical therapy, a year-long absence from sport, and unfortunately, a lawsuit against the athletic trainer applying ART.
Principle 4: Members Shall Not Engage in Conduct That Could Be Construed as a Conflict of Interest, Reflects Negatively on the Athletic Training Profession, or Jeopardizes a Patient’s Health and Well-Being.

• 4.1. Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.

• 4.2. All NATA members, whether current or past, shall not use the NATA logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

• 4.3. Members shall not place financial gain above the patient’s welfare and shall not participate in any arrangement that exploits the patient.
Principle 4:
Members Shall Not Engage in Conduct That Could Be Construed as a Conflict of Interest, Reflects Negatively on the Athletic Training Profession, or Jeopardizes a Patient’s Health and Well-Being

• 4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

• 4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.
Consider

An athletic trainer at the university setting works at a school with a nationally ranked men’s basketball team. The athletic trainer has over $50,000 in outstanding student loans. He also has a desire to purchase a house his wife has her heart set on. The athletic trainer, though he doesn’t work with the basketball team, knows the starting center is being treated for a chronic knee injury that has limited the athlete in practice, and despite treatment, the center will only play at 75% against the school rival on national TV this Saturday. Additionally, the athletic trainer is aware that the starting point guard has been ill with a stomach virus and is dehydrated going into the contest.

The athletic trainer “runs into” an acquaintance the day before the game. The acquaintance reveals he is a representative of a “businessman” who is betting heavily on the game, which the athletic trainer’s team is favored by 2 points. The acquaintance is interested in obtaining information on the health of the team for a “finders fee” paid to the athletic trainer. Not only for this game, but for future games and other sports. The athletic trainer informs the acquaintance of the knee injury and ill player, then himself places a bet against his team for the game.
Extending Sports Wagering Studies Outside of the Student-Athlete Population: NCAA Division I Athletic Trainers’ Gambling Behaviors

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Studies have been conducted on the scope of sports wagering by student-athletes, as this population has the ability to control performances, game outcome, and/or provide insightful game related information (NCAA, 2004; NCAA, 2008; NCAA, 2013a). Not far from this notion, yet unrepresented in the literature, is the review of athletic trainers as it relates to sports wagering and gambling. Specifically, athletic trainers may possess confidential information regarding the mental and physical well-being of student-athletes and therefore might be valuable resources for those who want to obtain confidential health related information to increase their chances of winning a sports wager. Thus, the purpose of this study was to ascertain the scope of athletic trainers’ involvement in gambling and sports wagering. This study employed a non-experimental, exploratory, mixed-survey design to help determine possible gambling and sports wagering behaviors of athletic trainers. All NCAA Division I certified athletic trainers with publicly available e-mail addresses were targeted. Twenty-eight percent of those targeted (N=453) responded to the survey. Findings indicated that almost 38% of the athletic trainers have placed monetary bets on sporting events and almost 16% indicated they did so in the last 12 months. As such, this study provided rationale to extend sports wagering studies outside of the student-athlete population. Mathner, Martin, Carroll & Neal
Consider

A newly certified athletic trainer, fresh out of graduate school, obtains an athletic trainer position at a secondary school. The athletic trainer works long hours, leaving little time for a social life. During his care for a senior women’s soccer player, the athletic trainer strikes up a friendship with the athlete, finding they share many things in common as they are only six or seven years apart in age. The athletic trainer learns the player comes from a broken home and befriends the student-athlete.

Following the women’s soccer season, the athletic trainer and women’s soccer player share texts and calls on various topics, with the player stopping in the training room to say hello several times a week. The athletic trainer then quietly starts dating the senior athlete because of the high school policy prohibiting staff from dating students.
Ensure that the NATA Code of Ethics and the Membership Standards, Eligibility, Requirements, and Membership Sanctions and Procedures are Enforced.
COPE Role and Function
All Districts Have Representatives and At-Large Members

• Education of membership on the NATA Code of Ethics and Membership Standards and the process of adjudicating complaints.
• Periodically reviewing and recommending changes in the Code of Ethics and Standards, as well as procedures for processing complaints.
• Addressing complaints of alleged violations of the Code of Ethics and Standards.
• Responding to requests for interpretations of the Code of Ethics and Standards.
• Ensuring that the Code of Ethics and Standards, as well as the complaint process, are not in conflict with any federal or state laws, rules and regulations, or any policies of the NATA.
The fundamental goal of the ethics complaint process is to eliminate unethical behavior, rather than impose sanctions.

- If the member is under indictment, or under investigation by a licensing board, certifying body, or professional organization, COPE may suspend consideration of the matter until a judgment is reached.

- Confidential (unless required otherwise by law)

- Stepwise process.
Complaint Process

• Written complaint to NATA national office or COPE member.
• Complaint goes to COPE chair, who will determine if the complaint warrants a Preliminary Review Panel (PRP) assignment. 2 COPE members are assigned to the PRP by the Chair.
• PRP then establishes whether the allegation has merit and determines if any further investigation is needed. If PRP determines the allegations have merit, the member in question will be notified by certified mail.
• The Chair then convenes a Judicial Panel (JP) of 3 different COPE members to conduct a thorough investigation of the allegations and render their findings to the Chair.
COPE Judgments

• If no finding of violations, no further action is taken.
• If a violation has been found to take place, the member has the right to an appeal after being notified by the Chair.

Sanctions:
• Denial of membership
• Cancellation of membership
• Non-renewal of membership
• Suspension of membership
• Public censure
• Private reprimand

Member may apply for reinstatement of eligibility or membership (after 1 year)