11:57:20 From Lindsey Eberman (she/her/hers) : Might suggest using speaker view to see who is speaking

11:57:37 From Lindsey Eberman (she/her/hers) : Apparently it also prevents you from screen fatigue

11:58:14 From Sara Brown : Thanks, Lindsey. Good idea.

11:58:57 From Andy Winterstein : Great idea

12:05:01 From Kenneth Games : Often times I think we may get caught in the weeds of planning and having everything perfect and sometimes that may hinder action. I just saw a post from Sara Blakely (founder of Spanx)...I think she has some really sage advice here... "Follow your purpose. Lead with your story. Focus on the product. The rest will work itself out."

12:05:36 From DJ Gililland : Great point Kent!

12:05:42 From Sara Brown : Love this idea of critically examining admissions criteria. How do we know who will be successful?

12:06:42 From Matt Lewis : Great quote, thanks for sharing!

12:07:00 From Laura Kunkel : We've been working on analyzing admissions data to predict who will be successful.

12:07:54 From Sara Brown : Laura K: Looking forward to the results of this. How are you figuring out what admissions data to use? The challenge is always how do you know about what you don't have?

12:08:55 From Lindsey Eberman (she/her/hers) : We talked about whether the AATE would fund a project to survey recent graduates about debt and income for those certified within the last 5 years...

12:09:38 From Sara Brown : Glad the AATE has a Research Network!

12:10:09 From Laura Kunkel : Right now we are looking at GRE, prereq grades, GPA and last 60 GPA. Don't have enough data to really know yet but I am seeing trends with quan GRE and last 60 GPA, which makes perfect sense.

12:11:00 From Lindsey Eberman (she/her/hers) : Eric said the system is broken... let's break the system, but we have to be at the table to talk about the rebuild

12:11:04 From Andy Winterstein : We eliminated GRE to remove that obstacle and cost. A growing trend on my campus

12:11:14 From DJ Gililland : Great point! We have to up market ourselves if we expect our alumni to up market themselves

12:11:23 From Laura Kunkel : I'm going to be really interested to see if the GRE is really a predictor - is it necessary?

12:11:23 From Jessica Martinez : We have eliminated GRE as well.

12:11:33 From DJ Gililland : We eliminated GRE as well

12:11:54 From Lindsey Schroeder : We eliminated the GRE too

12:12:02 From Stacey Gaven : We have also eliminated GRE

12:12:04 From Dorice Hankemeier : We eliminated GRE as well. Our whole institution dropped it

12:12:12 From Dennis Fontaine : NO GRE for any Merrimack Grad Programs

12:12:38 From Michelle Odai : We do not require the GRE at FIU

12:12:49 From Laura Kunkel : Good to know all of this!

12:13:46 From Lindsey Eberman (she/her/hers) : Hey everyone - if you took notes, please dump them in the chat!

12:13:50 From Lindsey Eberman (she/her/hers) : From the group work.

12:16:56 From Stacey Gaven : Group 5: Advocacy and demonstrating worth through the program for students so they have these tools when they are practicing clinicians, Educating those who work on inhouse recruitment at your institution; admissions, academic advisors, preceptors, institution AT staff about your program; Affiliation agreements with neighboring institutions that don't have AT programs and working to establish a student pipeline

12:17:20 From Kenneth Games : Comments from Group 6:

1. How do we stand out as programs with so much regional competition?
2. Identifying areas of distinction? Specialized areas within a professional program
3. Investing in educating faculty on marketing strategies and engagement with perspective students
4. Identify program strengths; identify things within your program that can set you apart
5. Consider how to choose and use clinical immersion experiences to help program stand out
6. Look at your preceptors and their additional qualifications to market unique experiences for students
7. Continuing to utilize telehealth as a mechanism for patient care experiences
8. Some classes lend themselves to hybrid/online delivery - that can open up opportunities for programs
9. How can faculty add value to the program or institution? – How do we up market ourselves.

12:20:34 From Cassidy Evans : Group 2: (1) Widen admissions criteria into athletic training programs. We need data on this to help determine where that line should be to help balance other standards. (2) Getting upmarket preceptors and clinical rotations, and getting rid of

other lower ones. Particularly getting rid of poor preceptors. Barriers of who can be a preceptor in those upper level, non traditional, sites if an AT or physician is not present? (Like nurses, PAs, etc) (3) ATs need to get involved in other areas of their organizations to fit the overall mission of the university or organization. Such as teaching anatomy or in other departments, etc. (4) Start switching or utilizing a hybrid model of online/in class teaching.

12:23:48 From Nate Newman : Group 4: Telemedicine/telehealth is a perfect tool to use our broad skill set. We can do screenings, order tests, and provide value through this medium. Discussed ways to set up telehealth/medicine to fill healthcare needs in the community.
One point to add on ways to engrain your program on the community came from Rick (dental programs). Dental programs were being cut and they changed messaging to be the "front porch" for the institution by providing outreach to the community. Also want to get program engrained throughout the institution. Discussed ways to demonstrate program uniqueness. Focused on incorporating special aspects and other programs at institution (e.g., public health) into program. Mark Laursen mentioned a book Blue Ocean Strategies. Focusing on finding new spaces to market to. Finally, briefly discussed ways to make programs financially sustainable. One quick idea was to look at institutional business plans. For example, offering summer classes to increase revenue.

12:25:21 From Lindsey Schroeder : Due to the nature of the unusual spring semester and the disruptions student's had in taking the BOC exam, has the CAATE thought about the enforcement of Standards 6&7

12:27:25 From DJ Gililland : Will there be any additional guidelines on clinical education delivery if clinical site closures increase?

12:27:41 From Jen Earl-Boehm : @ Eric- Is the CAATE planning additional statements on program delivery models, and the need to submit program changes? (e.g. flipping from concurrent didactic/clinical education to didactic first, then clinical second)

12:27:48 From BC Charles : Given the data you presented earlier on program challenges - what discussions /initiatives are being directed towards deans or provosts?

12:29:15 From Sara Brown : Hi Everyone - Feel free to stay on for the questions or to grab a coffee or something to eat. We'll be returning to this same Zoom link for our next session at 11:45 CDT.

12:30:17 From DJ Gililland : Thank you! Absolutely agree… Appreciate you!

12:30:33 From Spencer Connell : Thank you for the insight, Eric!

12:30:42 From Andy Winterstein : Thank you so much Dr. Sauers

12:31:02 From Eric Sauers : I'm happy to stick around if any has questions.

12:32:53 From Spencer Connell : Thank you!