

Funding Ideas for Athletic Trainers

Compiled by Jill Matyuch Brea Olinda High School jmatyuch@bousd.us
Girls' Athletic Director Representative CIF-SS Executive Council

Mike West

Martin Luther King H.S. Principal

Citrus Belt Area Representative, CIF-SS Executive Council

MWest@rusd.k12.ca.us

There have been a variety of ways schools have tried to fund Athletic Trainers over the years. By far and away, the most successful way is for schools and districts to establish the position and pay for it out of the general fund.

However, I will highlight other ways I have seen it happen in the past for reference purposes:

- **Clinic Contracted:** A school or district will work with a clinic to pay for an athletic trainer part time or perhaps even full time with the AT working at the clinic a portion of the time and at the school the rest. This option can provide good coverage but the school is usually subject to whom the clinic provides and often times, the salary and benefits do not attract quality applicants.
- **Booster Paid:** Schools that have strong funding sources from boosters have found the means to pay for the athletic trainer. This can be part time or full time. Not many schools have the luxury of such a booster organization and for those that do, the funding is only as committed as the booster board is for providing it.
- **District Part Time:** To save money, districts will contract with an athletic trainer for part time work in order to save on benefits and other costs. Again, the quality of applicant drops dramatically in these situations.
- **Grant Funding:** there are times when a grant can come open that would allow for the hiring of an athletic trainer. These grants typically pay for the AT for a specific period of time allowing for the school to develop a process and funding source to take over the cost of the AT at some point.

To do it right, schools need to make the commitment to hire the AT on a full time basis. They will have control of who they hire and be able to make changes during the probationary process. They will get quality applicants who are likely to stay and build their program over time. Depending on the agreement with the school, coverage can be had over weekends and holidays and over summer with a qualified medical provider. Also, there would be time for the necessary paperwork and treatment/injury tracking to take place with a full time person.

In my opinion, promoting full time athletic trainers that are fully district funded is the direction we should be going as an organization.

Carter Paysinger
President CIF-SS Executive Council
ccpaysinger@gmail.com

In addition to Mike's comments, AD's should check with the business department in their district office to find out how a full time Athletic Trainer will impact their district's liability premiums. In many districts the savings are substantial, which could help to offset the cost of a full time AT.

Todd Arrowsmith
West Ranch High School Activities Director
Activities Director Representative CIF-SS Executive Council
tarrowsmith@hartdistrict.org

This is how our district is handling trainers, it has been very successful.

1. Two years ago, Henry Mayo Hospital approached the District and asked for help in getting word out to parents, students and especially coaches about a concussion awareness conference that the hospital was sponsoring. All of our high schools were represented by admin and/or coaches.
2. After the meeting, the District and HMN began discussions which led to the hospital offering to fund six full time ATCs on our high school campuses. The hospital already had one full time ATC assigned to us, and he had been splitting time at two schools. Initially, the plan was to add just two more ATCs, and have three people share the six schools. But the hospital recognized the challenges and concerns of doing that, and they stepped up big time and funded all six.
3. So the ATCs are technically employees of the hospital, they do not work for the District. The hospital vetted them and did their technical interviews to check for expertise. The District then interviewed 12 applicants who had passed screening with the hospital. We selected our six from the larger pool.
4. The District is billed for the ATC salaries. We only pay 50% of their salaries (that's the whole point!). We share the cost with the hospital plus they pick up the benefits.

5. The hospital also outfitted the ATCs with shirts and medical kits. The paid for these up front. The District has allotted funds to each school to keep its medical kits and training room supplies replenished.

7. There is designated ATC supervisor, employed by the hospital who is my direct liaison with the hospital. He directs the ATCs work, system wide, although we have established a culture of our ATCs being part of the staff at their school, and being committed to their particular site. They are part of their school's athletic department.

8. The District is also receiving funding support from AutoNation (about \$40,000). That's committed for three years, and renewable after that, at their discretion.

Our model of hospital support is based on something similar between Glendale Adventist and the Glendale City Schools. However, in their case, the hospital provides funding to the District and the District is the employer of the ATCs.