



Australian Government
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Fitness Industry Training Package
SRF04
Volume V of V

Fitness Industry Training Package SRF04

Volume V of V



Volume
V of V



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SRF04 FITNESS TRAINING PACKAGE

VOLUME 5

To be reviewed by 30 September 2007

The contents of this volume refer only to the endorsed components of SRF04 Fitness Training Package. This volume should not be read in isolation but in the context of the Training Package as a whole. Please refer to the following page for details of other volumes in this Training Package.

This volume contains:

Volume 5 Fitness Specific Units of Competency

Associated Fitness Training Package volumes contain:

Volume 1 Qualifications Framework, Assessment Guidelines, Competency Standards and Mapping Tables

Volume 2 Generic Units of Competency

Volume 3 Generic Units of Competency

Volume 4 Generic Units of Competency

SRF04 Fitness Training Package

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Department of Education, Science and Training
GPO Box 9880
CANBERRA CITY ACT 2601

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Published by: *Australian Training Products Ltd*
PO Box 12211
MELBOURNE VIC 8006
Level 25 150 Lonsdale St
MELBOURNE VIC 3000
Telephone: (03) 9655 0600
Facsimile: (03) 9639 4684
Email: sales@atpl.net.au
Website: www.atpl.net.au

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SUMMARY OF AQF QUALIFICATIONS IN SRF04 FITNESS TRAINING PACKAGE

Code	Title
SRO10106	Certificate I in Sport and Recreation
SRO20106	Certificate II in Sport and Recreation
SRO30106	Certificate III in Sport and Recreation
SRF30206	Certificate III in Fitness
SRO40106	Certificate IV in Sport and Recreation
SRF40206	Certificate IV in Fitness
SRO50106	Diploma of Sport and Recreation
SRO50406	Diploma of Facility Management
SRF50206	Diploma of Fitness
THT50203	Diploma of Event Management
SRO60106	Advanced Diploma of Sport and Recreation

SUMMARY MAPPING OF SRF04 FITNESS TRAINING PACKAGE TO SRF01 NATIONAL FITNESS INDUSTRY TRAINING PACKAGE

Code	Relate to	Nature of relationship
-	Removed SRF20201	Transferred fitness specific units of competency to SRC20204 Certificate II in Community Recreation
SRF30206	Replaces SRF30201	Change in unit content and packaging of units
SRF40206	Replaces SRF40201	Change in unit content and packaging of units
SRF50206	New qualification	Not applicable
SRO10106	Replaces SRO10199	Change in unit content and packaging of units
SRO20106	Replaces SRO20199	Change in unit content and packaging of units
SRO30106	Replaces SRO30199	Change in unit content and packaging of units
SRO40106	Replaces SRO40199	Change in unit content and packaging of units
SRO50106	Replaces SRO50199	Change in unit content and packaging of units
SRO50406	New qualification	Not applicable
SRO60106	Replaces SRO60199	Change in unit content and packaging of units
THT50203	Imported qualification	Not applicable

IMPORTANT

Training Packages are living documents. Changes are periodically made to reflect the latest industry practices.

As a user of the Training Package, and before commencing any form of training or assessment, you must ensure delivery is from the current version.

Ensure you are complying with this requirement by:

- Checking the version identifier code of the version you currently have (located on the imprint page, just below the copyright statement)
- Accessing the Australian Training Products website and comparing the version identifier. This information is displayed in the sample of the Training Package
- Where the Australian Training Products website shows a different version, the Modification History, again shown on the Australian Training Products website in the Training Package sample, will display the changes made in all versions.

Australian Training Products website for version comparison: <http://www.atpl.net.au>

The Modification History is also visible on the website of the developer of the Training Package: <http://www.insportandrecreation.net>

Changes in units of competency and packaging of qualifications are reflected on the National Training Information Service which displays only current information: <http://www.ntis.gov.au>

MODIFICATION HISTORY

Please refer to the National Training Information Service for the latest version of units of competency and qualification information (<http://www.ntis.gov.au>).

Training Package	Version	Release Date	Authorisation	Comments
SRF04	2	13 September 2006	NQC	- Repackaging of ALL SRF qualifications. Core BSB and ICAITU units moved to the elective stream, where appropriate - Inclusion of the Units of Competency from TAA04 to replace the BSZ98 Training and Assessment units
SRF04	1	24 September 2004	NTQC	Primary release
SRF01	1.00	17 January 2001	NTQC	Primary release

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CHCAC12C	PROVIDE SERVICES TO AN OLDER PERSON WITH COMPLEX NEEDS
ADC	Aged care

DESCRIPTION: This unit describes the knowledge and skills required by workers to provide services to the older person with complex or special care needs under supervision of a relevant professional.

ELEMENT	PERFORMANCE CRITERIA
1 Evaluate and prioritise the needs of an older person with complex care issues	1.1 An understanding of the impact of dual/multiple diagnosis can have on identifying and prioritizing needs is demonstrated 1.2 Purpose designed tools are utilised to assess specific problems of the older person according to job role and responsibilities 1.3 Advice is sought from health professionals and other relevant personnel when analysing and interpreting assessment data 1.4 The impact of complex care issues on the carer/s are recognised
2 Liaise and negotiate with appropriate personnel in the development of a service delivery plan	2.1 Best practice guidelines are utilised when choosing strategies to address complex and/or special needs 2.2 Liaise is undertaken with relevant experts when developing service delivery plans 2.3 Goals are negotiated and established with the older person, their advocate/s and/or their significant other/s that aim to achieve maximum quality of life 2.4 Resources are accessed and/or negotiate in order to deliver identified services 2.5 Community support agencies are accessed to facilitate the achievement of established goals
3 Co-ordinate the delivery of the service delivery plan	3.1 Services and care activities are delegated to appropriately skilled workers 3.2 The worker recognise when a service and/or care worker is no longer able to provide the level of service required 3.3 Support and respite is provided for the carer/s 3.4 All service providers' understanding of the service delivery plan and their roles and responsibilities within that plan is determined
4 Co-ordinate the monitoring, evaluation and review of the service delivery plan	4.1 All service providers' understanding of the mechanism/s for providing feedback on the effectiveness of the service delivery plan is determined 4.2 Feedback is sought from all service providers when evaluating effectiveness of the service delivery plan and re-prioritising care needs 4.3 Feedback is sought from the older person and/or their advocate when evaluating effectiveness of the service delivery plan 4.4 Advice and assistance is sought from relevant health professionals when the older person's goals are not being reached

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	may include <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • prospective individuals to the service or services • veterans/war widows
Contexts	may include <ul style="list-style-type: none"> • older person's own dwelling • independent living accommodation • residential aged care facilities • community or government agency
Complex and special needs	may include an older person with one or more of the following <ul style="list-style-type: none"> • mental health problem • dementia • terminal illness • chronic pain • developmental or acquired disability • dysphagia • acquired brain injury • alcohol and other drug misuse/abuse problem • chronic health problem
Data collection methods	may include <ul style="list-style-type: none"> • use of industry specific assessment tools • use of best practice focus assessment tools • interviews • observation • review of previous health records • consultation with the older person, their advocate/s, informal carer/s and/or significant other/s
Health records	may include <ul style="list-style-type: none"> • assessments • plans of care • case histories • progress notes • test results • referral records

	<ul style="list-style-type: none"> • observation charts • medication charts
Appropriate resources	<p>may include</p> <ul style="list-style-type: none"> • financial • aids and equipment • qualified health specialists (wound consultants, continence advisors, palliative care consultants)
Reporting	<p>may be, and include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face ○ case conferences • non-verbal (written) <ul style="list-style-type: none"> ○ progress report ○ case notes ○ incident reports
Appropriate personnel	<p>may include</p> <ul style="list-style-type: none"> • aboriginal and torres strait islander health worker • carer • dietician • diversional therapist • drug and alcohol worker • geriatrician • neuropsychologist and behaviour consultant for people with an acquired brain injury • occupational therapist • pain specialist • palliative care specialist • pharmacist • physiotherapist • psychiatrist • psychologist • registered nurse • respiratory technician • social worker • speech pathologist • wound consultant
Consultation/collaboration	<p>may include</p> <ul style="list-style-type: none"> • liaison • asking and clarifying • seeking feedback • providing information and reports • identifying and exploring perceptions and expectations • negotiation

The sport and recreation industry	covers <ul style="list-style-type: none">• industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ demonstrate understanding and adherence to own work role and responsibilities ○ recognise own limitations and the need for assistance ○ follow organisational policies, protocols and procedures ○ work collaboratively with colleagues, health professionals and other services ○ understand and apply the basic knowledge of physiology and psychology of ageing and principles of assessment in determining, monitoring and evaluating the service needs of the older person with complex or special needs as it related to the work role ○ prioritise and manage the changing service needs of clients with complex and special care needs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols and practices of the organisation in relation to Unit Descriptor and work role ○ Understanding of the physiology and psychology of ageing ○ Understanding of the manifestations and presentation of common health problems associated with ageing ○ Impact of cultural and individual differences of service plan development and delivery ○ Role and function of various health professionals ○ Types of community services and the services each provides ○ Role of carers ○ Principles and practices of assessment of individuals with complex and/or special needs ○ Strategies for conducting assessment of older people with complex and/or special needs ○ Assessment tools used in the assessment of complex and/or special needs ○ Strategies for analysing and interpreting data ○ Processes and practices in developing and managing service delivery plans ○ Principles and practices of case management • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow and give work-related instructions and directions and the ability to seek clarification and comments from clients,

	<p>colleagues, health professionals and other service providers. Industry work roles will require workers to possess a literacy level that will enable them to, read and write client's service delivery plans, record in health records, complete assessment tools and write reports and submissions</p> <ul style="list-style-type: none"> ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess effective verbal and non-verbal communication skills that will enable them to ask questions, clarify understanding and meaning, recognise and interpret non-verbal cues, adapt communication styles to meet specific needs, provide information and express encouragement and support ○ Numeracy skills required to fulfil work role in a safe manner and as specified by the organisation. Industry work roles will require workers to be able to perform mathematical functions, such as addition and subtraction up to three digit numbers and multiplication and division of single and double-digit numbers ○ Problem solving skills that require negotiation and medication skills to resolve problems of a difficult nature within organisational protocols ○ Ability to collaborate and network with a variety of stakeholders in order to achieve service objectives
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to appropriate workplace where assessment can take place ○ relevant organisational policy, protocols and procedures ○ access to resources normally used in the workplace ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Methods of assessment <ul style="list-style-type: none"> ○ Observation of work activities ○ Observation of simulation and/or role play ○ Written tasks ○ Relevant formal and informal education/training courses ○ Case studies and scenarios

	<ul style="list-style-type: none">○ Interviews/questioning○ Role plays• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC17A	SUPPORT THE OLDER PERSON TO MAINTAIN THEIR INDEPENDENCE
ADC	Aged care

DESCRIPTION: This unit describes the knowledge and skills required by the worker to support the older person to maintain their independence with instrumental activities of living.

ELEMENT	PERFORMANCE CRITERIA
1 Support the older person with their instrumental activities of living	1.1 Older person are encouraged to utilise support services where appropriate 1.2 The scope of the service to be provided is clearly explained to the older person and/or their advocate 1.3 The needs of the older person are identified from the service delivery plans and from consultation with a supervisor 1.4 Visits and service delivery accommodates the older person's established routines and customs where possible 1.5 Work is performed in a manner that acknowledges that the services are being provided in the client's own house 1.6 Services are provided in a manner that enables the older person to direct the processes where appropriate 1.7 Support/assistance is provided in accordance with organisational policy, protocols and procedures 1.8 Appropriate use of equipment to support/assist the older person with activities of living within work role and responsibility is demonstrated
2 Recognise and report changes in an older person's ability to undertake instrumental activities of living	2.1 The older person's activities and environment are monitored to identify increased need for 2.2 The older person's inability to undertake activities of living independently are reported to a supervisor 2.3 The older person is supported/assisted to modify or adapt the environment or activity to facilitate independence 2.4 Aids and/or equipment to support/assist the older person undertake activities of living independently are sought
3 Support the older person to maintain an environment that maximized independence, safety and security	3.1 The older person is encouraged and supported/assisted to maintain their environment 3.2 Support is provided to promote security of the older person's environment 3.3 The environment is adapted or modified, in consultation with the older person, to maximize safety and comfort 3.4 Hazards are recognised and addressed in accordance with organisational policy and protocols

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older person	<p>may include</p> <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community
Contexts	<p>may include</p> <ul style="list-style-type: none"> • the older person's own dwelling • independent living accommodation • residential aged care facilities
Instrumental activities of living	<p>may include</p> <ul style="list-style-type: none"> • home maintenance • garden maintenance • transport and attendance at appointments and social and recreational activities • domestic cleaning • domestic laundry • meal preparation • shopping • attendance to financial matters and personal correspondence • pet care
Reporting	<p>may be and include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non-verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ incident reports
Aids and equipment	<p>may include</p> <ul style="list-style-type: none"> • domestic appliances utilised for cleaning, laundering and meal preparation • gardening equipment • personal and security alarms • mobility devices
Hazards	<p>may include</p> <ul style="list-style-type: none"> • poor or inappropriate lighting

	<ul style="list-style-type: none"> • slippery or uneven floor surfaces • physical obstructions, eg, furniture and equipment • poor home and domestic appliance maintenance • inadequate heating and cooling devices • inappropriate footwear and clothing
<p>The sport and recreation industry</p>	<p>covers</p> <ul style="list-style-type: none"> • industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understand and adhere to own work role and responsibilities ○ Follow organisational policies, protocols and procedures ○ Liaise and report appropriately to supervisor ○ Monitor older person's ability to undertake instrumental activities of living and providing support/assistance in accordance with service delivery plans ○ Accommodate older person's established routines and customs and right to direct service delivery processes
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols and practices of the organisation in relation to Unit Descriptor and work role ○ Understanding of the importance of community engagement and the ability to undertake instrumental activities of living for older people ○ Principles and practices of confidentiality and privacy ○ Principles and practices associated with providing services in a client's own living environment ○ Strategies for supporting/assisting an older person to undertake instrumental activities of living independently ○ Services and aids available to support independence with instrumental activities of living ○ Referral mechanisms ○ Safety and security risks associated with ageing ○ Hazards in an older person's environment ○ Strategies for minimising hazards in older person's environments • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess a literacy level that will enable them to interpret international safety signs, read client's service delivery plans, make notations in clients records and complete workplace forms and records. ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek

	<p>clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess oral communication skills that will enable them to ask questions, clarify understanding, recognise and interpret non-verbal cues, provide information and express encouragement.</p> <ul style="list-style-type: none"> ○ Numeracy skills required to fulfil work role in a safe manner and as specified by the organisation. Industry work roles will require workers to be able to perform basic mathematical functions, such as addition and subtraction up to three digit numbers and multiplication and division of single and double digit numbers. ○ Basic problem solving skills to resolve problems of limited difficulty within organisational protocols ○ Ability to work effectively with clients, colleagues and supervisors.
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ Access to appropriate workplace where assessment can take place ○ Relevant organisational policy, protocols and procedures ○ Access to equipment and resources normally used in the workplace ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Methods of assessment <ul style="list-style-type: none"> ○ Observation in the workplace ○ Written assignments/projects ○ Case study and scenario analysis ○ Questioning ○ Role play simulation ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–

These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:

1. Use routine approaches
2. Select from routine approaches
3. Establish new approaches

NOTE: The key competencies weren't identified in the originating Package

- **Collecting, analysing and organising information —**
- **Communicating ideas and information —**
- **Planning and organising activities —**
- **Working with teams and others —**
- **Using mathematical ideas and techniques —**
- **Solving problems —**
- **Using technology —**

Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.

CHCAC1C	PROVIDE SUPPORT TO AN OLDER PERSON
ADC	Aged care

DESCRIPTION: This unit covers the knowledge and skills required by workers within their designated role and responsibilities to support an older person maintain their quality of life.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of the physical and psychosocial aspects of ageing	1.1 Strategies that the older person may adopt to promote healthy lifestyle practices are outlined 1.2 Physical changes associated with ageing are taken into account when delivering services 1.3 The older person's interests and life activities are recognised and accommodated when delivering services 1.4 The older person is assisted to recognise the impact physical changes associated with ageing may have on their activities of living
2 Establish and maintain appropriate relationship with older people	2.1 Self introduction occurs appropriately 2.2 Courtesy toward the older person is demonstrated 2.3 Short interpersonal exchanges with the older person occur to develop, establish and maintain relationships 2.4 All interactions with the older person aim at generating a trusting relationship 2.5 Confidentiality and privacy of the older person is maintained within organisational policy and protocols 2.6 Support is provided to the older person to maintain social and community networks
3 Assist the older person to identify and meet their needs	3.1 The older person is assisted to identify their own needs 3.2 Support is provided to the older person to enable them to direct their own support services, where appropriate 3.3 Support is provided in accordance with organisational policy and protocols 3.4 Support is provided to the older person to participate in social and recreational activities as requested 3.5 Support is provided to the older person to meet spiritual, cultural. Emotional and sexuality within organisational policy and protocols 3.6 Assistance is sought when it is not possible to provide appropriate support to the older person
4 Respond to situations of risk to the older person within role and responsibilities	4.1 Assistance is provided to maintain a safe and healthy environment 4.2 Situations of risk, or potential risk, to the older person are identified and reported to a supervisor 4.3 Situations of risks, potential risk, are responded to appropriately and communicated to a supervisor 4.4 Strategies to minimise risk are implemented and communicate to a supervisor and colleagues 4.5 Uncharacteristic or inappropriate behaviour is reported to a supervisor

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	may include <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • prospective individuals to the service or services • veterans/war widows
Environments	may include <ul style="list-style-type: none"> • older persons' own dwelling • independent living accommodation • residential aged care facilities • community centres
Needs of the older person	may include <ul style="list-style-type: none"> • physical • emotional • cognitive • cultural • spiritual • sexual • social • recreational • educational • safety and security • privacy and confidentiality
Needs of the aged person	may include <ul style="list-style-type: none"> • physical, sexual and emotional • support and care • financial • household assistance and maintenance • religious • cultural • spiritual • ceremonial • recreational • social

Support	<p>may include</p> <ul style="list-style-type: none"> • home maintenance service • garden maintenance services • transport services • cleaning services • laundry services • meal preparation and/or delivery services • shopping services • home modification services
Reporting	<p>may be, and include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non-verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ hazards and incident reports ○ care plans
Behaviours that may require support and management	<p>may include</p> <ul style="list-style-type: none"> • agitation • aggression (physical and/or verbal) • sleeplessness • depression • withdrawn • disorientation • confusion • emotional distress • disinhibition • impulsivity • perseveration • self-mutilation
Situations of risk or potential risk	<p>may include</p> <ul style="list-style-type: none"> • evidence of self-neglect • behaviours of concern • impaired judgement and problem solving abilities • impaired cognitive functioning • sudden or unexpected change in health status include sensory loss • environmental hazards <ul style="list-style-type: none"> ○ slippery or uneven floor surfaces ○ physical obstructions, eg, furniture and equipment ○ poor home maintenance ○ poor or inappropriate lighting ○ inadequate heating and cooling devices ○ inadequate security • social rights infringements

Appropriate communication and relationship building processes	may include <ul style="list-style-type: none"> • courtesy • empathy • non-judgemental care • observing and listening • respect of individual difference
Organisational policies and procedures	may include <ul style="list-style-type: none"> • NBV guidelines of professional practices • gerontological competencies of personal care assistants • accreditation standards • ANCI competencies • occupational health and safety policy and procedures
The sport and recreation industry	covers <ul style="list-style-type: none"> • industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understand and adhere to own work role and responsibilities ○ Follow organisational policies and protocols ○ Liaise and report appropriately to supervisor ○ Understand and apply physical and psychosocial aspects of ageing in supporting older people to maintain their quality of life ○ Adopt a non-judgemental and accepting attitudes when establishing and maintaining relationships with older people
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols, and practices of the organisation in relation to Unit descriptor and work role ○ Basic understanding of the ageing process ○ Basic understanding of the impact of acquired brain injury (eg from stroke, substance abuse or trauma) on behaviour and functioning ○ Contemporary social aspects of ageing ○ Impact of 'normal' ageing on an older person's ability to remain independent ○ Basic understanding of the importance of social, recreational, cultural and spiritual activities for older people ○ Factors contributing to an older person's ability to remain active in the community ○ Strategies for supporting the older person's to maintain social networks and community involvement ○ Role of carers ○ Services and aids available to support independence ○ Referral mechanisms ○ Principles and practices of confidentiality and privacy ○ Safety and security risks associated with ageing ○ Strategies for minimising risks for older people ○ Principles and practices for establishing and maintaining appropriate relationships with older people • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess a literacy level that will enable them to interpret international safety signs, read client's service delivery plans,

	<p>make notations in clients records and complete workplace forms and records</p> <ul style="list-style-type: none"> ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess oral communication skills that will enable them to ask questions, clarify understanding, recognise and interpret non-verbal cues, provide information and express encouragement ○ Numeracy skills required to fulfil work role in a safe manner and as specified by the organisation. Industry work roles will require workers to be able to perform basic mathematical functions, such as addition and subtraction up to three digit numbers and multiplication and division of single and double-digit numbers ○ Basic problem solving skills to resolve problems of limited difficulty within organisational protocols ○ Ability to work effectively with clients, colleagues and supervisors
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ appropriate workplace where assessment can take place ○ relevant organisational policy, protocols and procedures ○ equipment and resources normally used in the workplace ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• Method of assessment<ul style="list-style-type: none">○ Observation in the workplace○ Written assignments/projects○ Case study and scenario analysis○ Questioning○ Role play simulation• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC2C	PROVIDE PERSONAL CARE
ADC	Aged care

DESCRIPTION: This unit describes the knowledge and skills required by workers to support or assist the older person with their personal care needs within their service delivery plan.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of changes associated with ageing	1.1 Strategies that the older person may adopt to promote healthy lifestyle practices are outlined 1.2 Physical changes associated with ageing are taken into account when delivering services 1.3 Knowledge of common problems associated with ageing are utilised when delivering services 1.4 The older person is assisted to recognise the impact that changes associated with ageing may have on their activities of living 1.5 Situations of risk or potential risk associated with ageing are communicated to the older person
2 Recognise and report changes in an older person's personal care needs	2.1 Demonstrate an appropriate use of equipment and procedures to assess the older person's needs within work role and responsibility 2.2 Report changes in an older person's care needs to a supervisor 2.3 Situations of risk or potential risk associated with ageing are responded to appropriately and reported to a supervisor 2.4 Changes in an older person's preferences, as a result of a change in physical appearance, are reported to a supervisor
3 Support or assist the older person to meet their personal care needs	3.1 Support or assistance is provided in accordance with the older person's service delivery plan and organisational policies, protocols and procedures 3.2 Support or assistance is provided with technical care activities in accordance with the older person's service delivery plan and organisational policies, protocols and procedures 3.3 Difficulties in meeting an older person's needs are clarified with the older person or a supervisor and addressed within organisational protocols 3.4 Processes and aids for providing assistance are identified and used as appropriate 3.5 Older people are provided with information to assist them in meeting their personal care needs 3.6 Confidentiality, privacy and dignity of the older person are maintained within organisational policy and protocols 3.7 Services are delivered in a manner that supports the older person's preferences 3.8 Work is performed to the standard required by the organisation

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	may include <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • veterans
Contexts	may include <ul style="list-style-type: none"> • older person's own dwelling • independent living accommodation • residential aged care facilities
Needs of the older person	may include <ul style="list-style-type: none"> • physical • emotional • cognitive • cultural • spiritual • sexual • educational • safety and security
Assessment skills	may include <ul style="list-style-type: none"> • taking and recording temperature • taking and recording a pulse rate • taking and recording a respiratory rate • taking and recording blood pressure • taking and recording a blood sugar level • measuring and recording a weight • collecting a urine, sputum or faecal specimen • monitoring and recognizing changes in cognitive ability
Personal care	may include <ul style="list-style-type: none"> • personal hygiene <ul style="list-style-type: none"> ○ washing ○ dressing and undressing ○ grooming ○ hair and nail care ○ oral hygiene • mobilisation and transfer • elimination • hydration and nutrition including dysphagia

	<ul style="list-style-type: none"> • respiration • skin maintenance
Equipment and aids	<p>may include</p> <ul style="list-style-type: none"> • wheelchairs and other transport devices • mobility aids • lifting and transferring aids • beds • breathing devices • thermometer • sphygmomanometer • scales • stethoscope • glucometer • continence aids • toileting aids • personal audio–visual aids
Simple technical skills	<p>may include</p> <ul style="list-style-type: none"> • simple dressing • catheter care (not including insertion or removal of tubes) • application of prostheses • application of anti–thrombotic stockings • assistance with breathing devices (under direct supervision of a health professional) • simple eye care
Reporting	<p>may be, and include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non–verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ incident reports
Situations of risk or potential risk	<p>may include</p> <ul style="list-style-type: none"> • evidence of self–neglect • dysphagia • uncharacteristic or inappropriate behaviours • impaired judgement and problem solving abilities • cognitive impairment due to acquired brain injury • sudden or unexpected change in client • environmental hazards <ul style="list-style-type: none"> ○ slippery or uneven floor surfaces ○ physical obstructions, eg, furniture and equipment ○ poor home maintenance ○ poor or inappropriate lighting ○ inadequate heating and cooling devices ○ inadequate security

	<ul style="list-style-type: none"> • social rights infringements
The sport and recreation industry	<p>covers</p> <ul style="list-style-type: none"> • industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understand and adhere to own work role and responsibilities ○ Follow organisational policies, protocols and procedures ○ Liaise and report appropriately to supervisor and/or health professional ○ Understand and apply physical and psychosocial aspects of ageing in supporting/assisting the older people meet their personal care needs ○ Acknowledge the older person's abilities and preferences when delivering services
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols, and practices of the organisation in relation to Unit descriptor and work role ○ Basic understanding of the ageing process ○ Basic understanding of the impact of acquired brain injury (eg, caused by stroke, substance abuse or trauma) on behaviour and functioning ○ Safety and security risk associated with ageing ○ Strategies for minimising risks for older people ○ Impact of 'normal' ageing on an older person's ability to meet their personal care needs ○ Basic anatomy and physiology of the human body ○ Overview of the manifestations and presentation of common problems associated with ageing ○ Relevant care needs and strategies related to common problems associated with ageing ○ Skills utilised to collect data for the assessment of an older person ○ Role of carers ○ Common equipment and aids utilised in the delivery of personal care ○ Principles and practices of confidentiality and privacy ○ Principles and practices in undertaking technical skills associated with supporting/assisting the older person to meet personal care needs • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to

	<p>possess a literacy level that will enable them to interpret international safety signs, read client's service delivery plans, make notations in clients records and complete workplace forms and records.</p> <ul style="list-style-type: none"> ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess oral communication skills that will enable them to ask questions, clarify understanding, recognise and interpret non-verbal cues, provide information and express encouragement. ○ Numeracy skills required to fulfil work role in a safe manner and as specified by the organisation. Industry work roles will require workers to be able to perform basic mathematical functions, such as addition and subtraction up to three digit numbers and multiplication and division of single and double-digit numbers. ○ Basic problem solving skills to resolve problems of limited difficulty within organisational protocols ○ Ability to work effectively with clients, colleagues and supervisors
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ appropriate workplace where assessment can take place ○ relevant organisational policy, protocols and procedures ○ equipment and resources normally used in the workplace ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Method of assessment <ul style="list-style-type: none"> ○ Observation in the workplace ○ Written assignments/projects ○ Case study and scenario analysis ○ Questioning ○ Role play simulation ○ Practical care tasks must be assessed by observation in the workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be

	demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC3C	ORIENTATION TO AGED CARE WORK
ADC	Aged care

DESCRIPTION: This unit describes the roles and responsibilities by the worker in their roles as a carer to perform work that reflects an understanding of the structure and profile of the residential aged care sector and key issues facing older people in the community.

This units applied to all workers in the aged care sector, or those with older people.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of the structure and profiles of the aged care sector	1.1 All work reflects an understanding of key issues facing aged people and their carers 1.2 All work undertaken reflects an understanding of the current philosophies of service delivery in the sector 1.3 The impact of ageing demographics on funding and service delivery models is recognised 1.4 All work reflects an understanding of current legislation
2 Demonstrate a commitment to the philosophy of 'positive ageing'	2.1 Personal values and attitudes are taken into account when planning and implementing work activities 2.2 Ageist attitudes are recognised and managed through the support of the appropriate person 2.3 The impact of consumerism on service delivery is recognised 2.4 Work reflects an understanding of the individuality of ageing 2.5 Work practices minimise the effects of stereotypical attitudes and myths on the older person
3 Support the rights and interests of older person	3.1 The older person and/or their advocate/s is encouraged and supported to be aware of their rights and responsibilities 3.2 All work demonstrated a commitment to access and equity principles 3.3 Strategies are adopted to empower the older person and/or their advocate/s in regard to their service requirements 3.4 Information is provided to the older person and/or their advocate/s to facilitate choice in their decision making 3.5 Recognise and report to an appropriate person when an older person's rights and not being upheld 3.6 Services are provided regardless of diversity of race or cultural, spiritual, or sexual preferences 3.7 Information is provided to the older person and/or their advocate/s regarding mechanisms for lodging complaints

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	may include <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • prospective individuals to the service or services
Contexts	may include <ul style="list-style-type: none"> • older person's own dwelling • independent living accommodation • residential aged care facilities • community centres • community/government agencies
Issues facing older people	may include <ul style="list-style-type: none"> • changes that ageing may bring to <ul style="list-style-type: none"> ○ physical processes ○ cognitive function (including dementia) ○ social interaction ○ role and family relationships ○ living arrangements ○ level of independence (financial, community access, self-care) • loss and grief • family carer issues • societal attitudes and expectations
Current philosophies of service delivery	may include <ul style="list-style-type: none"> • changing societal expectations (consumerism) • changing political context (policies and initiatives) • changing economic context • impact of ageing demographics
Rights	may include <ul style="list-style-type: none"> • privacy • confidentiality • dignity • freedom of association • informed choice • to lodge a complaint • right to express ideas and opinions • to an agreed standard of care

	<p>are details in</p> <ul style="list-style-type: none"> • legislation <ul style="list-style-type: none"> ○ residential care manual ○ aged care act • industry and organisational service standards • industry and organisational codes of practice and ethics • accreditation standards • international and national charters • organisational policy and procedure
Principles of access and equity	<p>may include</p> <ul style="list-style-type: none"> • creation of a client orientated culture • non-discriminatory approach to all individuals using or accessing the service • respect for individual differences
Appropriate person/s	<p>may include</p> <ul style="list-style-type: none"> • supervisor • member of senior management • colleagues • carers • health professionals • external agencies (complaints and advocacy services and professional registering authorities) • law enforcement officer
Reporting	<p>may be</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non-verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ incident reports

The sport and recreation industry	covers <ul style="list-style-type: none">• industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understand and adhere to own work role and responsibilities ○ Follow organisational policies and protocols ○ Liaise and report appropriately to person/s ○ Understand and apply the principles of access, equity and client rights when working in the aged care sector ○ Understanding of the structure and profile of the aged care sector ○ Adopting a non–ageist and accepting attitude when working with older people
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols of the organisation in relation to Unit Descriptor and work role ○ Relevant legislation in relation to Unit Descriptor and work role ○ Contemporary issues facing older people in the community ○ Current service delivery models ○ Philosophy of various service delivery models ○ Factors influencing service delivery models in the sector ○ Ageing demographics ○ Understanding attitude, stereotypes and false beliefs associated with ageing ○ Impact of personal values and attitudes on service delivery ○ Rights and responsibilities of older people and those working in the aged care sector ○ Principles of access and equity ○ Role of carers ○ Principles of empowerment and disempowerment ○ Principles and practices of confidentiality and privacy ○ Strategies for supporting an older person and/or their advocate/s to exercise their rights ○ Strategies for managing complaints • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills–literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow work–related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess a literacy level that will enable them to interpret international safety signs, read client’s service delivery plans, make notations in clients records and complete workplace forms and records

	<ul style="list-style-type: none"> ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess oral communication skills that will enable them to ask questions, clarify understanding, recognise and interpret non-verbal cues, provide information and express encouragement. ○ Basic problem solving skills to resolve problems within organisational protocols ○ Ability to work collaboratively with clients, colleagues, supervisors and other services/agencies
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ Access to appropriate workplace where assessment can take place ○ Simulation of realistic workplace setting for assessment ○ Relevant organisational policy, protocols and procedures ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Method of assessment <ul style="list-style-type: none"> ○ Observation in the workplace ○ Written assignments/projects ○ Case study and scenario analysis ○ Questioning ○ Role play simulation ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC4B	ASSIST IN THE PROVISION OF AN APPROPRIATE ENVIRONMENT
ADC	Aged care

DESCRIPTION: Providing support and assistance to provide a clean, comfortable, safe and secure environment.

ELEMENT	PERFORMANCE CRITERIA
1 Support older person to create an environment suitable to needs and preference	1.1 Older person are encouraged and assisted to maintain their environment 1.2 Older persons are assisted to feel secure and comfortable 1.3 Hazards are recognised and addressed as appropriate 1.4 Appropriate aids to support comfort, safety and wellbeing are used 1.5 Older persons established routines, rhythms and customs are facilitated where possible 1.6 Older person are informed of support services and encouraged to use them

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Environment	may include <ul style="list-style-type: none"> • independent living accommodation • residential care facility • aged care establishment • special accommodation house • home • clubs • day centre • hostel • nursing home
Hazards	may include <ul style="list-style-type: none"> • obstructions <ul style="list-style-type: none"> ○ electrical cords ○ rugs ○ furniture ○ appliances • steps • flooring • kitchen appliances • heating
Aids	may include <ul style="list-style-type: none"> • lighting • heating/cooling • personal alarms • clothing • shoes • pillows • beds • rails • shower chairs • wheelchairs
Informing older person	include <ul style="list-style-type: none"> • suggesting, advising, conversing • making pamphlet/information available

Support services	<p>includes</p> <ul style="list-style-type: none"> • laundromats • home support • home and community care • home modification • garden maintenance • meals on wheels • cleaning • case management • day hospitals • podiatry • hairdressing
Assistance	<p>may be given with</p> <ul style="list-style-type: none"> • washing and ironing • bed making • cleaning • home modifications
The sport and recreation industry	<p>covers</p> <ul style="list-style-type: none"> • industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Meet organisational requirements for the provision of an appropriate environment ○ Consult with older person to determine their needs and preferences
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ CHCCOM3B Utilise specialist communication skills to build strong relationships
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant plan of care and own role and responsibilities within it ○ Relevant policies, protocols, and practices of the organisation in relation to own work activities ○ Basic understanding of the importance of social, recreational and cultural activities for older people ○ Common health problems of older people and their effects ○ Basic knowledge of processes of ageing ○ Identification of the main needs of older people ○ Different religious, cultural, spiritual, physical and ceremonial perspectives ○ Depending on the work role or services provided, specific knowledge of particular groups or issues may be required • Required skills <ul style="list-style-type: none"> ○ Interpersonal communication with older people. Communication will involve oral communication skills, including asking questions and providing information. The language used may be English or a community language ○ Reading, writing and numeracy skills required to fulfil job roles as specified by organisation/service. This may range from interpreting symbols to reading and interpreting labels and instructions on different cleaning products measuring and working out ratios when using chemicals. Not all organisations/services will include job roles that require reading, writing and numeracy skills
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to appropriate workplace where assessment can take place ○ simulation of realistic workplace setting for assessment • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit

	<ul style="list-style-type: none"> ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment ● Assessment will primarily be by observations, questioning and evidence sourced from a workplace environment ● Assessment may be gathered over one assessment period but constitute the normal range of environments
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC6C	SUPPORT THE OLDER PERSON TO MEET THEIR EMOTIONAL AND PSYCHOSOCIAL NEEDS
ADC	Aged care

DESCRIPTION: This unit describes the knowledge and skills required by the worker to support the older person to meet their emotional and psychological needs.

ELEMENT	PERFORMANCE CRITERIA
1 Support the older person remain engaged with their social network and the wider community	1.1 The older person's social network is identified 1.2 The older person's social and recreational preferences are determined 1.3 The older person is encouraged and facilitated in their attendance at selected social and recreational activities 1.4 The need to modify or adapt social and recreational activities to meet the specific needs of the older person is recognised and reported to the appropriate person 1.5 The older person is provided with information about community networks and activities available to them
2 Support the older person to meet their emotional and psychological needs	2.1 An understanding of the impact of ageing on the individual's emotional and psychological well-being is demonstrated 2.2 The older person's self esteem and confidence is encouraged and supported 2.3 The older person is support and encouraged to achieve maximum emotional well-being 2.4 Empathy is shown to an older person who is emotionally distressed 2.5 Assistance is sought from an appropriate person when it is not possible to meet the emotional and psychological needs of the older person
3 Recognise and accommodate the older person's cultural and spiritual preferences	3.1 Acceptance of an older person's cultural and spiritual preference is demonstrated 3.2 Work practices accommodate an older person's modesty and privacy according to cultural requirements 3.3 Communication practices demonstrate cultural sensitivity 3.4 The older person's continual participation in cultural spiritual practices and celebrations is facilitated 3.5 The older person is provided with information regarding relevant cultural and spiritual networks available in the community
4 Support the older person who is experiencing loss and grief	4.1 An understanding of the impact of ageing on an individual's experiences of loss and grief is demonstrated 4.2 The stages of loss and grief are recognised 4.3 Signs that an older person is experiencing grief are recognised and reported to an appropriate person 4.4 Appropriate communication strategies are utilised when an older person is expressing their fears and other emotions associated with loss and grief 4.5 The older person and/or their support network is provided with information regarding relevant support services 4.6 Particular needs are acknowledged and referral made to an appropriate individual/agency

5 Recognise and accommodate the older person's expressions of identity and sexuality	<ul style="list-style-type: none">5.1 An understanding of the impact of ageing on an individual's expression of identity and sexuality is demonstrated5.2 The impact of community values and attitudes regarding sexuality and ageing are recognised5.3 Own values and attitudes regarding sexuality are not imposed on others5.4 The older person is supported to express their sexuality within organisational protocols5.5 Different spiritual expressions of sexuality are respected5.6 Unmet needs relating to sexuality and identity are acknowledged and referred to an appropriate person
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	<p>may include</p> <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • prospective individuals to the service or services • veterans/war widows
Environments	<p>may include</p> <ul style="list-style-type: none"> • older person's own dwelling • independent living accommodation • residential aged care facilities • community centres
Emotional needs	<p>may include</p> <ul style="list-style-type: none"> • freedom from fear • freedom from anger • freedom from loneliness • freedom from guilt • freedom from anxiety • acceptance of loss • love and affection • a sense of security and contentment • veterans'/war widows issues
Psychological needs	<p>may include</p> <ul style="list-style-type: none"> • freedom from undue stress • a sense of control • self-esteem • self-determination • personal identity • sense of belonging • life stage acceptance • veteran/war widow related issues
Spiritual needs	<p>may include</p> <ul style="list-style-type: none"> • formal and informal religious observance • need for privacy and an appropriate environment to reflect and/or participate in spiritual activities • ceremonial observances

Cultural needs	<p>may include</p> <ul style="list-style-type: none"> • dress and dietary observance • ceremonial and festive observances • need for continued interaction with cultural community
Sexuality and identity needs	<p>may include</p> <ul style="list-style-type: none"> • love and affection • touch • physical appearance • need for privacy and discretion • access to assistive/protective devices
Types of loss	<p>may include</p> <ul style="list-style-type: none"> • significant other/s • independence • control • status • possessions • relationships • translocation • health
Reactions to loss	<p>may include</p> <ul style="list-style-type: none"> • shock • emotional release • physical distress • panic • guilt • hostility/destructive behaviour • lack of interest/apathy
Stages of grief	<p>may include</p> <ul style="list-style-type: none"> • denial • anger • bargaining • depression • acceptance
Appropriate communication and relationship building processes	<p>may include</p> <ul style="list-style-type: none"> • courtesy • empathy • non-judgemental care • observing and listening • respect for individual differences • cross-cultural communication

Support networks	<p>may include</p> <ul style="list-style-type: none"> • advocates • family members • carers • friends • clergy/pastoral care provider • veteran's/war widow organisations
Community networks	<p>may include</p> <ul style="list-style-type: none"> • ethno-specific organisations • clubs • community centres • support groups • sport and recreational groups • community welfare groups • voluntary organisations • veteran's/war widows organisations
Appropriate persons/agencies	<p>may include</p> <ul style="list-style-type: none"> • supervisor • health professionals (registered nurse, doctor, social worker, diversional therapist, psychologist) • sex therapist • clergy/pastoral care provider • national association of loss and grief • palliative care association • special associations providing support services to individuals with specific health problems/disorders • support group • veteran's/war widows organisations
Reporting	<p>may include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non-verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ incident notes

The sport and recreation industry	<p>covers</p> <ul style="list-style-type: none">• industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understanding and adherence to own work role and responsibilities ○ Following organisational policies and protocols ○ Liaising and reporting appropriately to appropriate persons/agencies ○ Understanding of the emotional, psychological, spiritual, cultural and sexual needs of the older person ○ Adopting a non-judgemental and accepting attitude when supporting the older person to meet their emotional and psychosocial needs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols and practices of the organisation in relation to Unit Descriptor and work role ○ Concepts of recreation and leisure and older people ○ Stereotypes of older people and recreation ○ Strategies to facilitate continued community involvement ○ Developing new networks and facilitating choice ○ Strategies for selecting recreational and leisure activities based on preferences and abilities ○ Emotional and psychological needs of older people ○ Concepts of powerlessness and empowerment ○ Strategies to meet the emotional needs of older people ○ Definition and explanation of the terms 'spirituality' and 'cultural' ○ Expressions of spirituality and culture ○ Effects of spirituality and culture on care delivery ○ Resources and networks that can support the cultural and spiritual needs of older people ○ Principle and practices of cross-cultural communication ○ Types of loss and grief ○ Reactions to loss ○ Stages of grief ○ Factors that influence the outcomes of loss and grief ○ Strategies for supporting an older person who is experiencing loss and grief ○ Strategies for accommodating cultural and spiritual customs surrounding loss and grief ○ Definition and explanation of the terms 'sexuality' and 'personal identity' ○ Expressions of sexuality ○ Cultural and individual differences in expressing sexuality

	<ul style="list-style-type: none"> ○ Beliefs and false beliefs surrounding sexuality and ageing ○ Issues surrounding sexuality and sexual expression in residential settings ○ Strategies for managing inappropriate sexual behaviour ● Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow work related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require a literacy level that will enable workers to interpret international safety signs, read client service delivery plans, make notations in client records and complete workplace forms and records ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill and ability to follow work-related instructions and directions and to seek clarification and comments from supervisors, clients and colleagues ○ Industry work roles will require effective verbal and non-verbal communication skills to ask questions, clarify understanding and meaning, recognise and interpret non-verbal cues, adapt communication styles to meet specific needs, provide information and express encouragement and support including active listening and empathy ○ Basic problem solving skills to resolve problems within organisational protocols ○ Ability to work collaboratively with clients, social networks, colleagues, supervisors and other services/agencies
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to appropriate workplace where assessment can take place ○ relevant organisational policy, protocols and procedures ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Method of assessment <ul style="list-style-type: none"> ○ Observation in the workplace ○ Written assignments/projects ○ Case study and scenario analysis

	<ul style="list-style-type: none">○ Questioning○ Role play simulation● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHCAC7C	PLAN AND MONITOR SERVICE DELIVERY PLANS
ADC	Aged care

DESCRIPTION: This unit describes the knowledge and skills required by the worker to identify the service needs of the older person and to develop and monitor the service delivery plan.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the service needs of the older person	1.1 Assessment tools approved for use in the workplace are selected and utilised appropriately 1.2 The collection of client data is instigated in order to determine service needs 1.3 A variety of appropriate data collection methods are utilised 1.4 Assistance is sought from carer, other service providers and health professionals when gathering data and interpreting findings
2 Consult with the older person and/or their carer when determining the service delivery plan	2.1 The older person and/or significant other/s is encouraged to participate in the data collection process 2.2 Case conferences are facilitated to determine service delivery strategy/s 2.3 The older person's and/or their advocate's right to determine service options to be chosen is acknowledged 2.4 The older person's and/or their advocate's right to refuse the proposed interventions is respected
3 Develop and implement the service delivery plan	3.1 The service delivery plan is developed in collaboration with key stakeholders to ensure it reflects to the needs, identified goals and determined intervention 3.2 Service delivery priorities are determined in conjunction with all stakeholders 3.3 The service delivery plan is documented in a accordance with organisational protocols 3.4 Activities are assigned to appropriate services and/or workers 3.5 Appropriate resources are accessed and allocated in accordance with organisational protocols
4 Monitor and review the service delivery plan	4.1 Feedback is sought from the older person, other service providers and/or workers as to the effectiveness of the plan 4.2 The plan is adapted to reflect any changes required 4.3 Potential risks to the older person and/or the service provider are identified in the provision of determined care 4.4 The worker recognises and reports to their supervisor when the service provider is no longer able to meet the needs of the older person

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Older people	<p>may include</p> <ul style="list-style-type: none"> • individuals living in residential aged care environments • individuals living in the community • prospective individuals to the service or services
Contexts	<p>may include</p> <ul style="list-style-type: none"> • older person's own dwelling • independent living accommodation • residential aged care facilities • community or government agencies
Needs of the older person	<p>may include</p> <ul style="list-style-type: none"> • physical • emotional • psychological • social • cultural • spiritual • sexual • educational • safety and security
Data collection methods	<p>may include</p> <ul style="list-style-type: none"> • use of industry specific assessment tools • use of best practice focus assessment tools • interviews • observation • review of previous health records • consultation with the older person, their advocate/s, informal carer/s and/or significant other/s

Health records	<p>may include</p> <ul style="list-style-type: none"> • assessments • plans of care • case histories • progress notes • test results • referral records • observation charts • medication charts
Appropriate resources	<p>may include those relating to</p> <ul style="list-style-type: none"> • financial • aids and equipment • qualified health specialists (wound consultants, continence advisors, palliative care consultants)
Reporting	<p>may be, and include</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ telephone ○ face to face • non-verbal (written) <ul style="list-style-type: none"> ○ progress reports ○ case notes ○ incident reports
Consultation/collaboration	<p>may include</p> <ul style="list-style-type: none"> • liaison • asking and clarifying • seeking feedback • providing information and reports • identifying and exploring perceptions and expectations • negotiation
Significant others	<p>includes</p> <ul style="list-style-type: none"> • family • carers
The sport and recreation industry	<p>covers</p> <ul style="list-style-type: none"> • industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions

	<ul style="list-style-type: none">• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Understanding and adherence to own work role and responsibilities ○ Recognising own limitations and the need for assistance ○ Following organisational policies, protocols and procedures ○ Working collaboratively with colleagues, health professionals and other services ○ Understanding and applying knowledge of physiology and psychology of ageing and principles of assessment in determining, monitoring and evaluating the service needs of the older person
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ With other community services units of competency is encouraged
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant policies, protocols and practices of the organisation in relation to Unit Descriptor and work role ○ Overview of the physiology and psychology of ageing ○ Impact of 'normal' ageing on an older person's ability to meet their personal care and health needs ○ Overview of the manifestations and presentation of common health problems associated with ageing ○ Relevant care needs and strategies related to common health problems associated with ageing ○ Impact of cultural and individual differences of service plan development and delivery ○ Role and function of various health professionals ○ Role of carer in case conferencing and in the development and monitoring of service plans ○ Types of community services and the services and each provides ○ Eligibility requirements in accessing services ○ Service provision guidelines for all local, State and Commonwealth Programs ○ Principles and practices of assessment ○ Processes and practices in developing and managing service delivery plans ○ Principles of delegation and supervision ○ Strategies for conducting effective case conferences ○ Principles and practices of case management • Required skills <ul style="list-style-type: none"> ○ Reading and writing skills—literacy competence required to fulfil work role in a safe manner and as specified by the organisation/service. This requires a level of skill that enables the worker to follow and give work-related instructions and directions and the ability to seek clarification and comments from clients,

	<p>colleagues, health professionals and other service providers. Industry work roles will require workers to possess a literacy level that will enable them to, read and write client's service delivery plans, record in health records, complete assessment tools and write reports and submissions</p> <ul style="list-style-type: none"> ○ Oral communication skills—language competence required to fulfil work role in a safe manner and as specified by the organisation. This requires a level of skill that enables the worker to follow work-related instructions and directions and the ability to seek clarification and comments from supervisors, clients and colleagues. Industry work roles will require workers to possess effective verbal and non-verbal communication skills that will enable them to ask questions, clarify understanding and meaning, recognise and interpret non-verbal cues, adapt communication styles to meet specific needs, provide information and express encouragement and support ○ Problem solving skills that require negotiation and medication skills to resolve problems of a difficult nature within organisational protocols ○ Ability to collaborate and network with a variety of stakeholders in order to achieve service objectives
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to appropriate workplace where assessment can take place ○ relevant organisational policy, protocols and procedures ○ access to resources normally used in the workplace • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • Method of assessment <ul style="list-style-type: none"> ○ Observation in the workplace ○ Written assignments/projects ○ Case study and scenario analysis ○ Questioning ○ Role play simulation • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any

	evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
–	–	–	–	–	–	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

ALLIED HEALTH NETWORKS

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SRFAHN001A	MAKE REFERRALS AND WORK COLLABORATIVELY WITH ALLIED HEALTH PROFESSIONALS WHERE APPROPRIATE
AHN	Allied health networks

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to make referrals and work collaboratively with allied health professionals in regards to a range of internal/external clients in a fitness specialist setting.

ELEMENT	PERFORMANCE CRITERIA
1 Formulate a referral plan for clients requiring allied health professional expertise or complimentary treatment	1.1 Determine <i>need</i> for referral to <i>allied health professionals</i> 1.2 Communicate to <i>client</i> the <i>need</i> for referral 1.3 Identify a range of <i>allied health professionals</i> and services 1.4 Consider the financial aspects of complementary treatment in consultation with the <i>client</i>
2 Communicate with allied health professionals	2.1 Identify when <i>collaboration</i> with <i>allied health professionals</i> is required 2.2 Communicate with <i>allied health professionals</i> using appropriate practice –specific/medical terminology and in adherence with <i>clinic guidelines</i> 2.3 Communicate with <i>allied health professionals effectively and knowledgeably</i> seeking <i>clarification</i> where necessary
3 Work collaboratively with allied health professionals to organise management of client	3.1 Consult <i>allied health professionals</i> and services to determine the most appropriate source for referral of <i>client</i> 3.2 Consult <i>allied health professionals</i> and services to determine the most appropriate <i>management</i> of <i>client</i> 3.3 The <i>client</i> is included in <i>management</i> planning 3.4 Answer <i>queries</i> regarding the <i>client</i> 3.5 Refer client to <i>allied health professionals</i> where appropriate in accord with industry and organisation's requirements
4 Develop and implement contingency management plan	4.1 Identify the need for <i>contingency management plan</i> 4.2 Communicate the need for <i>contingency management plan</i> to <i>allied health professionals</i> and <i>client</i> 4.3 Establish <i>contingency management plan</i> in <i>collaboration</i> with allied health professional 4.4 Apply <i>contingency management plan</i> to <i>client</i>
5 Evaluate management plan	5.1 Review management and/or <i>contingency management plan</i> at agreed timeframes and as required in <i>collaboration</i> with <i>allied health professional/s</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professionals	[all categories] the following allied health professionals may be suitably credentialed <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Clarification	[all categories] <ul style="list-style-type: none"> • clarification made is sought from <ul style="list-style-type: none"> ○ allied health professional ○ medical dictionary ○ drug and prescription information sources/data bases ○ practice specific texts ○ clinic guidelines ○ relevant handbook ○ designated person/s
Client	[all categories] <ul style="list-style-type: none"> • experienced or inexperience • male or female • of varying age groups • active or inactive

Clinic guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> • telephone protocol • correspondence formats • office practice manual • occupational health and safety • emergency procedures • security, confidentiality and privacy procedures • recording information • cleanliness and hygiene • accessing and updating files • information specific to the practice • comply with local, state and federal legislation • instructions • relevant handbook • designated person/s
Collaboration	<p>[all categories]</p> <ul style="list-style-type: none"> • manage a client as part of a team with allied health professional/s — may or may not be within the same clinic or organisation • develop a cooperative approach to management of client/patient with allied health professional/s to manage a client in a manner that promotes the best possible outcome for the client/patient
Communicate	<p>[all categories]</p> <ul style="list-style-type: none"> • verbal <ul style="list-style-type: none"> ○ face-to-face ○ phone • verbal instructions may include <ul style="list-style-type: none"> ○ confirming appointments ○ answering routine telephone enquiries ○ communicating with a range of allied health professionals on client/patient related matters • written communication may include <ul style="list-style-type: none"> ○ memoranda ○ letters ○ minutes ○ forms ○ correspondence to a range of allied health professionals on client/patient related matters ○ client/patient history questionnaires ○ appointment diaries, cards ○ telephone messages ○ client/patient histories ○ case reports ○ e-mail
Contingency management plan	<p>[all categories]</p> <ul style="list-style-type: none"> • means for recognising unforeseen circumstances that may cause the program to be reviewed such as <ul style="list-style-type: none"> ○ unforeseen illness such as flu or other viruses ○ change to ability to attend exercise sessions ○ client status not improving

	<ul style="list-style-type: none"> ○ client status declining ● planned responses to unforeseen circumstances such as <ul style="list-style-type: none"> ○ changes to current program ○ changes to current program goals ○ entirely new program being implemented ○ client referral
Effectively and knowledgeably	<p>[all categories]</p> <ul style="list-style-type: none"> ● effectively <ul style="list-style-type: none"> ○ promptly ○ in a manner best suited to the scenario, eg, verbal if urgent ○ in a manner that promotes open communication with allied health professional but minimises risk of major disruption to the outcome of client/patient management ● knowledgeably <ul style="list-style-type: none"> ○ using appropriate specific/medical terminology
Management	<p>[all categories]</p> <ul style="list-style-type: none"> ● set timeframes ● set goals/outcomes ● management of client/patient is achieved in collaboration with allied health professionals ● detailed management plan is established ● may involve <ul style="list-style-type: none"> ○ implementation of exercise plan whilst providing ongoing reports to the relevant allied health professionals ○ implementation of exercise plan whilst client/patient is undergoing simultaneous treatment from an allied health professionals ○ implementation of treatment plan in conjunction with medical treatment, eg, medication
Need	<p>[all categories]</p> <ul style="list-style-type: none"> ● client management plan requires complimentary treatment from allied health professionals ● client risk stratification is beyond the expertise of a fitness specialist and requires allied health professional treatment where stratification includes one or more of the following risk factors <ul style="list-style-type: none"> ○ family history (eg, myocardial infarction, coronary revascularization, sudden death before 55 years of age in father or other male first-degree relative or before 65 years of age in mother or other female first degree relative) ○ cigarette smoker ○ hypertension (ie, systolic blood pressure of ≥ 140 mm hg or diastolic ≥ 90 mm hg confirmed by measurement on at least two separate occasions, or taking any antihypertensive medication) ○ hypercholesterolaemia (ie, total serum cholesterol of >200 mg/dl [5.2 mmol/l] or high density lipoprotein cholesterol of <35 mg/dl [0.9 mmol/l], or on lipid-lowering medication) ○ impaired fasting glucose (ie, fasting blood glucose of ≥ 110mg/dl confirmed by measurements on at least 2 separate occasions ○ obesity (ie, body mass index of ≥ 30kg/m² or waist girth of >100 cm ○ sedentary lifestyle (ie, persons not participating in a regular

	<p>exercise program or accumulating 30 minutes or more of moderate physical activity most days of the week)</p> <ul style="list-style-type: none"> ○ accepted recommended levels by recognised authorities, eg, Diabetes Australia, Cardiac Rehabilitation Association <ul style="list-style-type: none"> ● client risk stratification is beyond the expertise of a fitness specialist and requires allied health professional clearance of the fitness activities permissible where stratification includes any of the following symptoms <ul style="list-style-type: none"> ○ pain, discomfort (or other anginal equivalent) in the chest, neck, jaw, arms or other areas that may be due to ischemia ○ shortness of breath at rest or with wild mild exertion ○ dizziness or syncope ○ orthopnea or paroxysmal nocturnal dyspnea ○ palpitations or tachycardia ○ intermittent claudication ○ know heart murmur ○ unusual fatigue or shortness of breath with usual activities ○ illness or sickness ○ disease ○ disorder ○ complaint ○ weakness ○ acute inflammations, eg, signs and symptoms of bursitis and tendonitis ○ infections, eg, fever, temperature, redness ○ fractures ○ recent muscle injury, eg, hamstring tear ○ haematoma, ie, bruising or the potential bruising ○ torn ligaments, ie, joint instability ○ acute and/or sudden joint swelling ○ neck soreness/strain that result in symptoms of neurological origin in the arms and/or restriction of spinal movement ○ pain on movement of any body part ○ inability to bear weight through a limb ○ people with medical problems who are not currently seeking medical treatment ○ heart conditions
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Queries	<p>[all categories]</p> <ul style="list-style-type: none"> • queries are answered in regards to <ul style="list-style-type: none"> ○ referral ○ goals/outcomes ○ planning
Refer	<p>[all categories]</p> <ul style="list-style-type: none"> • instructions or requests of another professional to manage or assist with management of client/patient • should include all detail that will be relevant to on-going management of the client/patient, including case history and prognosis where possible • verbal <ul style="list-style-type: none"> ○ face-to-face ○ phone • written <ul style="list-style-type: none"> ○ letters ○ client/patient histories ○ case reports ○ e-mail
Review	<p>[all categories]</p> <ul style="list-style-type: none"> • evaluate management or contingency management plan for its effectiveness in terms of <ul style="list-style-type: none"> ○ timeframes ○ outcomes ○ financial cost ○ impact on client/patient • recognise improvements to management • recognise positive aspects of management

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ communicate effectively with allied health professionals using appropriate communication strategies ○ demonstrate appreciation of relative merits of treatment options available in regard to cost, benefit and efficiency of such procedures ○ knowledge of the health care profession's characteristics, historical mileposts, aspirations and strengths ○ knowledge of the health-care professionals/services locally, nationally and internationally and of their relationship to other professions and organisations ○ consulting colleagues for special expertise ○ confidentiality, security and privacy of information is maintained ○ instructions are followed ○ demonstrate ability to formulate referral plans and arrange referrals
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Clinic guidelines ○ Practice-specific/medical terminology ○ Relevant local/state/federal legislation ○ Own and others' responsibilities ○ Appropriate forms and recording requirements ○ Appropriate external agencies ○ Appropriate information sources ○ Role of a health professionals and support services ○ Paradigms, including free environment, within which other professions function ○ Knowledge of and ability to apply referral procedures ○ What constitutes a medical emergency or referral

	<ul style="list-style-type: none"> • Required skills <ul style="list-style-type: none"> ○ Literacy skills — follow procedures, policies, cyber instructions, use correct spelling, grammar and punctuation ○ Ability to follow routine oral and written sequenced instructions ○ Language skills — relay information, use appropriate and correct practice-specific/medical terminology, use correct pronunciation and sentence structures, question to clarify terms and context ○ Interpersonal skills — interact with client/patient and others in an appropriate manner ○ Research skills — increase and knowledge of practice-specific/medical terminology ○ Write third party and medico legal reports, certificates and correspondence
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) should <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the National Competency Standards for Assessment: BSZ401A, BSZ402A and BSZ403A
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	3	3	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information – To organise client history, management plan and search for relevant allied health professionals for collaboration • Communicating ideas and information – To liaise with allied health professionals and client/patient • Planning and organising activities – To plan exercise program for client/patient • Working with teams and others — To plan management of client/patient in collaboration with allied health professional • Using mathematical ideas and techniques – To utilise fitness equipment • Solving problems – To manage program and identify changes in client/patient health status • Using technology – Use internet, phone, fax to communicate with allied health professionals and client/patient and search for relevant allied health professionals <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFAHN002A	RECEIVE AND RESPOND TO REHABILITATION REFERRALS FROM ALLIED HEALTH PROFESSIONALS
AHN	Allied health networks

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and knowledge required to receive and respond to rehabilitation referrals from allied health professionals.

ELEMENT	PERFORMANCE CRITERIA
1 Receive rehabilitation referrals from allied health professionals	1.1 <i>Receive rehabilitation referral</i> from <i>allied health professional</i> 1.2 Identify instruction/s of rehabilitation referral from <i>allied health professional</i>
2 Interact with allied health professionals	2.1 <i>Communicate</i> with referring <i>allied health professional</i> in regards to <i>rehabilitation plan</i> of <i>client/patient</i> 2.2 Seek <i>clarification</i> from <i>allied health professional</i> as required 2.3 Relate <i>effectively and knowledgeably</i> with <i>allied health professionals</i>
3 Respond to referrals from allied health professionals	3.1 <i>Consult client/patient</i> in <i>rehabilitation plan</i> 3.2 Answer <i>client/patient queries</i> to <i>rehabilitation plan</i> 3.3 Implement <i>rehabilitation plan</i> as requested by referral 3.4 <i>Document</i> rehabilitation process according to <i>clinic guidelines</i> 3.5 Provide <i>feedback</i> to <i>client/patient</i> 3.6 <i>Report</i> to <i>allied health professional</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Clarification	<p>[all categories]</p> <p>sought from</p> <ul style="list-style-type: none"> • allied health professional • medical dictionary • drug and prescription information sources/data bases • practice specific texts • clinic guidelines • relevant handbook • designated person/s
Client/patient	<p>[all categories]</p> <ul style="list-style-type: none"> • male or female • of varying age groups • may involve but is not limited the following <ul style="list-style-type: none"> ○ illness or sickness ○ disease ○ disorder ○ complaint ○ weakness ○ acute inflammations, eg, signs and symptoms of bursitis and tendonitis ○ infections, eg, fever, temperature, redness ○ fractures ○ recent muscle injury, eg, hamstring tear ○ haematoma, ie, bruising or the potential bruising ○ torn ligaments, ie, joint instability ○ acute and/or sudden joint swelling

	<ul style="list-style-type: none"> ○ neck soreness/strain that result in symptoms of neurological origin in the arms and/or restriction of spinal movement ○ pain on movement of any body part ○ inability to bear weight through a limb ○ people with medical problems who are not currently seeking medical treatment ○ heart conditions
Clinic guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> ● telephone protocol ● correspondence formats ● office practice manual ● occupational health and safety ● emergency procedures ● security, confidentiality and privacy procedures ● recording information ● cleanliness and hygiene ● accessing and updating files ● information specific to the practice ● comply with local, state and federal legislation ● instructions ● relevant handbook ● designated person/s
Communicate	<p>[all categories]</p> <ul style="list-style-type: none"> ● verbal <ul style="list-style-type: none"> ○ face-to-face ○ phone ● verbal instructions may include <ul style="list-style-type: none"> ○ confirming appointments ○ answering routine telephone enquiries ○ communicating with a range of allied health professionals on client/patient related matters ● written communication may include <ul style="list-style-type: none"> ○ memoranda ○ letters ○ minutes ○ forms ○ correspondence to a range of allied health professionals on client/patient related matters ○ client/patient history questionnaires ○ appointment diaries, cards ○ telephone messages ○ client/patient histories ○ case reports ○ e-mail
Consult client/patient	<p>[all categories]</p> <ul style="list-style-type: none"> ● discussion in person or over the phone ● written consent to apply rehabilitation plan ● involve client/patient in rehabilitation plan where possible

Document	<p>[all categories]</p> <ul style="list-style-type: none"> • written or on computer data base • client/patient records – maintaining updated records of entire rehabilitation process, outcomes and plans
Effectively and knowledgeably	<p>[all categories]</p> <ul style="list-style-type: none"> • effectively <ul style="list-style-type: none"> ○ promptly ○ in a manner best suited to the scenario, eg, verbal if urgent ○ in a manner that promotes open communication with allied health professional but minimises risk of major disruption to the outcome of client/patient management • knowledgeably <ul style="list-style-type: none"> ○ using appropriate specific/medical terminology
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • verbal • written • must be given/provided at a time to maximise effectiveness and minimise disruptions
Receive rehabilitation referral	<p>[all categories]</p> <ul style="list-style-type: none"> • instructions to provide part or all of the rehabilitation process to a client • will involve specific instructions to implement an exercise program within the current expertise and knowledge of the receiver • written and oral instructions via a variety of methods including <ul style="list-style-type: none"> ○ prescriptions ○ routine reports ○ notices ○ prescriptions ○ instructions for post-treatment care ○ client/patient notes ○ routine reports ○ test results ○ referrals ○ occupational health and safety signs and instructions ○ diary entries ○ telephone calls ○ oral instructions
Rehabilitation plan	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise prescription • may be short-term or long-term • may continually change under the instruction of the referring health professional depending on the needs of the client/patient • any changes not instructed by referring health professional must be notified to referring health professional prior to implementation • any changes in client/patient condition or status must be notified to allied health professional immediately

Report	[all categories] <ul style="list-style-type: none">• regularly• as requested by allied health professional• at agreed time frames with allied health professional• when changes to management plan occur• when need for contingency plans are recognised• may be verbal• written copy is always provided to allied health professional and stored
Queries	[all categories] <ul style="list-style-type: none">• queries are answered in regards to<ul style="list-style-type: none">○ referral○ goals/outcomes○ planning

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ communicate effectively with allied health professionals using appropriate communication strategies ○ knowledge of the health care profession's characteristics, historical mileposts, aspirations and strengths ○ knowledge of health-care professionals/services locally, nationally and internationally and of their relationship to other professions and organisations ○ identify aspects of referral that are or are not within ability and expertise to implement ○ confidentiality, security and privacy of information is maintained ○ instructions of allied health professional are followed ○ consulting allied health professional for clarification of instructions and condition of client/patient ○ maintaining open communication with referring allied health professional during application of instructions ○ continually provide feedback to allied health professional regarding progress as requested and as required due to achieving/not achieving outlined goals or changes in client/patient status ○ demonstrate ability to receive referrals in a professional manner in accord with guidelines of referring allied health professional and organisation/s
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate

Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Clinic guidelines ○ Practice-specific/medical terminology ○ Relevant local/state/federal legislation ○ Own and others' responsibilities ○ Appropriate forms and recording requirements ○ Appropriate external agencies ○ Appropriate information sources ○ Role of a health professionals and support services ○ Paradigms, including free environment, within which other professions function ○ Knowledge of and ability to apply referral procedures ○ What constitutes a medical emergency or referral • Required skills <ul style="list-style-type: none"> ○ Ability to apply exercise science skills to programming ○ Literacy skills — follow procedures, policies, instructions, use correct spelling, grammar and punctuation ○ Ability to follow routine oral and written sequenced instructions ○ Language skills — relay information, use appropriate and correct practice-specific/medical terminology, use correct pronunciation and sentence structures, question to clarify terms and context ○ Interpersonal skills — interact with client/patient and others in an appropriate manner ○ Research skills — increase knowledge of practice-specific/medical terminology ○ Write third party and medico legal reports, certificates and correspondence
Resource implications	<ul style="list-style-type: none"> • Physical resources – assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources – assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes

	<ul style="list-style-type: none">• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	3	3	2	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information – To analyse referral • Communicating ideas and information – To liaise with referring allied health professional in regards to referral and client/patient • Planning and organising activities – Plan the implementation strategy for referral request/s • Working with teams and others – To manage the client/patient in collaboration with referring allied health professional • Using mathematical ideas and techniques – To utilise equipment • Solving problems – To manage changes to program and/or client health status in conjunction with allied health professional • Using technology – To utilise equipment correctly <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

WATER BASED FITNESS ACTIVITIES

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SRFAQA001B	INSTRUCT WATER BASED FITNESS CLASSES FOR LOW RISK CLIENTS
AQA	Water based fitness activities

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to plan, choreograph and instruct basic water based fitness classes for low risk client groups.

ELEMENT	PERFORMANCE CRITERIA
1 Develop a plan for a water based fitness class	1.1 Include the class <i>phases, music, equipment, concepts</i> , and exercises to be used in each phase, transitions, teaching positions in the plan 1.2 Include <i>instructional techniques</i> in the plan 1.3 Consider <i>pool design</i> and siting when developing the aqua class plan
2 Prepare for delivery of a water based fitness class	2.1 Develop a <i>checklist</i> for the preparation of the class 2.2 Demonstrate and apply an understanding of the physiological and biomechanical changes that are unique to exercise in the water 2.3 Consider the <i>properties of water</i> and the effect of the water environment on <i>specific client groups</i> when developing class plans 2.4 Consider the effects of <i>hydrodynamic</i> principles when developing class plans and instructing clients
3 Display expertise in instructing water based classes, using equipment	3.1 Display competence and form in a range of currently popular formats of water based classes 3.2 Greet clients in a positive manner and inform clients of the purpose of the class 3.3 Use the various pieces of equipment in different formats of water based classes for <i>specific purpose aqua activities</i> 3.4 Describe the conditioning benefits of a range of currently popular formats of water based classes to clients
4 Instruct a water based fitness class	4.1 Screen clients for medical conditions, medication and injuries 4.2 Conduct the class following <i>safety and health</i> guidelines 4.3 Demonstrate effective visual and verbal cues 4.4 Consider the <i>properties of water</i> and the effect of the water environment on <i>specific client groups</i> when instructing clients
5 Observe client performance during a water based fitness class	5.1 Continuously monitor clients exercise intensity, technique and safety during class 5.2 Give effective and positive feedback on incorrect intensity or technique to clients 5.3 Modify the class as required, to ensure clients meet their fitness goals safely and effectively
6 Analyse and improve the effectiveness and benefits of a water based fitness class	6.1 Develop modifications to improve the effectiveness of the <i>water based fitness class</i> 6.2 Implement modifications to the instructional technique in response to results of monitoring 6.3 Give clients the opportunity to comment and/or ask questions 6.4 Identify aspects needing further emphasis and/or attention for intervention in future sessions

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Checklist	[all categories] <ul style="list-style-type: none"> • if music is to be used, music appropriate to the class format is prepared • routines are rehearsed and flowing • instructor is ready well before advertised class time • facility is clean and safe • any equipment needed is laid out in a safe manner • music system and microphone are checked, and appropriate levels are set and tested • any equipment used for particular class formats is set up, used, and put away safely • any equipment used is checked before use
Concepts	[all categories] <ul style="list-style-type: none"> • fast/slow • add on • intensity levels • formations • lines, ie, on pool floor • groups • arm/leg combinations
Equipment	[all categories] <ul style="list-style-type: none"> • kickboards • float belts/vests • neck supports • flippers • balls, rings, sticks • flotation barbells • paddles • webbed gloves • noodles/woggles/cookies/wafers/kick rollers • stretch cords • mats • weight belts • clothing and sun protection <ul style="list-style-type: none"> ○ hats ○ sunglasses ○ sunscreen • shoes • water resistant heart rate monitors • water resistant stop watches

Hydrodynamic	<p>[all categories]</p> <ul style="list-style-type: none"> • specific gravity • buoyancy • pressure • flow • momentum • friction
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • teaching positioning <ul style="list-style-type: none"> ○ in the water ○ out of the water ○ position of the instructor in relation to clients ○ position of the instructor in relation to the environment, such as the sound system • class organisation • class formation • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity ○ pitch • body language • mirror imaging • mannerisms • personality • establishing rapport • monitoring the class response • avoidance of competing against the class
Music	<p>[all categories]</p> <ul style="list-style-type: none"> • motivational music • themes • phrased music • un-phrased music • singing • cultural music <p>selection should consider</p> <ul style="list-style-type: none"> • copyright and legal procedures • major licensing and royalty collection bodies in Australia <ul style="list-style-type: none"> ○ Australasian Mechanical Copyright Owners Society ○ Australasian Performing Rights Association ○ Australian Record Industry Association ○ Phonographic Performance Company of Australia <p>quality depends on</p> <ul style="list-style-type: none"> • type of tape used • taping equipment and techniques • care of tapes and equipment

	<ul style="list-style-type: none"> • volume
Phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation • conditioning • recovery • adaptation
Pool design	<p>[all categories]</p> <ul style="list-style-type: none"> • location of <ul style="list-style-type: none"> ○ first aid rooms ○ change rooms, toilets and showers • pool surface • pool temperature • location of steps or ladders • disabled access • pool depth/s • rails and rings • lane ropes
Properties of water	<p>[all categories]</p> <ul style="list-style-type: none"> • buoyancy • conduction and cooling • compression forces • hydrostatic pressures <ul style="list-style-type: none"> ○ blood movement ○ blood pressure ○ resistance to sharp movements • resists movement
Safety and health	<p>[all categories]</p> <ul style="list-style-type: none"> • effects of the sun when outdoors • effect of glare both indoors and outdoors • safety and pool design • water quality • wind chill factor • first aid considerations • presence of lifeguards • occupational health and safety legislation • maintenance and safety audits

Specific purpose aqua activities	<p>[all categories]</p> <ul style="list-style-type: none"> • sports conditioning • balance and coordination
Specific client groups	<p>[all categories]</p> <ul style="list-style-type: none"> • age • gender • occupation • social interests • level of ability • medical conditions, ie, under the supervision of a health, medical professional or allied health professional • injured, ie, under the supervision of a health, medical professional or allied health professional • specific conditioning or fitness goals • sports groups or individuals
Water based fitness class	<p>[all categories]</p> <ul style="list-style-type: none"> • also known as aqua classes, aqua fitness, aqua exercise, or aquaerobics • fitness classes conducted in a water environment such as an indoor pool, outdoor pool, saltwater pool or enclosed open water

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan an effective water based fitness class ○ evaluate whether conditions are suitable to commence the class ○ appropriately introduce clients to the water based fitness class ○ instruct an effective water based fitness class ○ observe clients and recognise when and how intervention should take place to improve performance ○ conduct the class within accepted health and safety requirements ○ modify instructional methods and activities to improve class delivery
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic anatomy and physiology related to exercise in the water ○ Personal water safety awareness • Required skills <ul style="list-style-type: none"> ○ Experience in a range of water based class formats to a wide range of clients in a commercial and/or community fitness environment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ suitably equipped theory space ○ swimming pool suitable for water based exercise classes in terms of pool depth, pool surfaces, entry, exit, water quality and temperature ○ sound system with consideration for the avoidance of conflict with other users ○ common equipment for water based fitness classes and fitness participants • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for</i>

	<i>Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a "period of time" and/or in a "number of locations", any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFAQA002B	INSTRUCT WATER BASED FITNESS ACTIVITIES FOR MODERATE RISK CLIENTS AND THOSE WITH SPECIFIC FITNESS GOALS
AQA	Water based fitness activities

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to develop a broader range of skills in water based fitness activities current and relevant to instruction in the general fitness industry and apply these skills to specific client groups, moderate risk clients, the use of specific equipment, or a specific workplace.

ELEMENT	PERFORMANCE CRITERIA
1 Plan a range of currently popular water based classes	1.1 Consider short and long term fitness goals of clients for the exercise plan 1.2 Include the phases , music tempo, music character and exercises to be used in each phase, transition, and teaching positions in the plan for a class or water based activity 1.3 Include instructional techniques in the plan for a class or water based activity 1.4 Consider the effects of hydrodynamic principles on specific clients when developing class plans 1.5 Develop a checklist for the preparation of the class
2 Display expertise in a range of currently popular formats of water based fitness classes, including the use of equipment	2.1 Greet clients in a positive manner and inform them of the purpose of the water based fitness class 2.2 Interpret referral and/or pre-exercise screening and seek clarification where necessary from allied health professional or medical professionals 2.3 Describe the specific conditioning benefits of the water based class/es to clients 2.4 Observe clients for water familiarisation and swimming skills 2.5 Demonstrate proficiency in the use of the various pieces of equipment that can be used in different formats of water based classes 2.6 Display competence and form in a range of currently popular formats of water based classes for specific outcomes 2.7 Demonstrate and apply an understanding of the physiological and biomechanical changes that are unique to exercise in the water 2.8 Conduct the water based fitness class following safety and health standards for moderate risk clients and instructor
3 Instruct a range of currently popular water based classes	3.1 Greet clients in a positive manner and inform moderate risk clients of the purpose of the class 3.2 Screen clients for medical conditions, medication and injuries 3.3 Conduct the class or water based activity to fit the aims and styles of a specific water based outcome 3.4 Demonstrate effective visual and verbal cues 3.5 Consider the properties of water and the effect of the water environment on specific client groups when instructing moderate risk clients
4 Observe client performance during a range of currently popular water based classes	4.1 Continuously monitor clients exercise intensity, technique and during the class 4.2 Give effective and positive feedback on incorrect intensity or technique to clients 4.3 Modify the class or water based activity as required to ensure clients meet their fitness goals safely and effectively

5 Analyse the effectiveness and benefits of currently popular water based classes	<ul style="list-style-type: none">5.1 Develop modifications to improve the effectiveness of a range of currently popular water based classes or activities5.2 Implement modifications to <i>instructional technique</i> in response to the results of monitoring5.3 Give clients the opportunity to comment and/or ask questions5.4 Identify aspects needing further emphasis and/or attention for intervention in future sessions
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Checklist	<p>[all categories]</p> <ul style="list-style-type: none"> • if music is to be used, music appropriate to the class format is prepared • routines are rehearsed and flowing • instructor is ready well before advertised class time • facility is clean and safe • any equipment needed is laid out in a safe manner • music system and microphone are checked, and appropriate levels are set and tested • any equipment used for particular class formats is set up, used, and put away safely • any equipment is checked before use
Equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • kickboards • float belts/vests • neck supports • flippers • balls, rings, sticks • flotation barbells • paddles • webbed gloves • noodles/woggles/cookies/wafers/kick rollers • stretch cords • mats • weight belts • clothing and sun protection <ul style="list-style-type: none"> ○ hats ○ sunglasses

	<ul style="list-style-type: none"> ○ sunscreen • shoes • water resistant heart rate monitors • water resistant stop watches <p>used by instructors</p> <ul style="list-style-type: none"> • non-slip mat • aqua frame • tape deck and microphone • earth leakage protection device • clothing and sun protection • lifesaving equipment
Hydrodynamic principles	<p>[all categories]</p> <ul style="list-style-type: none"> • buoyancy • specific gravity • density • hydrostatic pressure • lift • drag • turbulence • resistance <p>affects</p> <ul style="list-style-type: none"> • propulsion • balance and stability • flotation • acceleration
Instructional technique	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional approaches adopted by the instructor to convey instructional content to the client using techniques including <ul style="list-style-type: none"> ○ teaching positioning <ul style="list-style-type: none"> ▪ in the water ▪ out of the water ▪ relation to clients ▪ relation to the environment, such as the sound system ○ class organisation ○ class formation ○ mirror imaging • the instructor should incorporate a range of the following methods and approaches within an aquatic environment, depending on the situation <ul style="list-style-type: none"> ○ verbal communication <ul style="list-style-type: none"> ▪ encouragement ▪ voice clarity ▪ pitch ○ non verbal communication <ul style="list-style-type: none"> ▪ body language ▪ mannerisms ▪ personality ○ demonstration strategies ○ motivational strategies

	<ul style="list-style-type: none"> ○ monitoring, feedback and refinement strategies • avoidance of competing against the class
Moderate risk clients	<p>[all categories]</p> <ul style="list-style-type: none"> • not 'low risk' • chronic disease state • medical condition or injury • under prescribed medication • symptoms of cardio-pulmonary disease • moderate or high risk as identified through risk stratification process by an allied health professional or medical professional • aged and sedentary
Outcomes	<p>[all categories]</p> <ul style="list-style-type: none"> • specific client groups, such as <ul style="list-style-type: none"> ○ sports teams ○ older adults ○ children ○ those with disabilities • specific types of equipment, such as <ul style="list-style-type: none"> ○ sports specific conditioning ○ deep water ○ balance and coordination • specific environments, such as <ul style="list-style-type: none"> ○ community settings ○ heavy resistance ○ water
Phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation • conditioning • recovery • adaptation
Properties of water	<p>[all categories]</p> <ul style="list-style-type: none"> • buoyancy • conduction and cooling • compression forces • hydrostatic pressures <ul style="list-style-type: none"> ○ blood movement ○ blood pressure ○ resistance to sharp movements • resists movement

Safety and health	<p>[all categories]</p> <ul style="list-style-type: none"> • medical conditions, ie, under the supervision of a health or medical professional • injured, ie, under the supervision of a health or medical professional • effects of the sun when outside or through glass • safety and pool design, with emphasis on pool entry • water quality • first aid considerations • presence of lifeguards • pool safety equipment • other facility users • rescue and resuscitation skills • occupational health and safety legislation • maintenance and safety procedures
Specific clients	<p>[all categories]</p> <ul style="list-style-type: none"> • different ages • pregnant • athletes • those with a disability • those with medical conditions, ie, under the supervision of a health or medical professional • those rehabilitating from injury, ie, under the supervision of a health or medical professional • those with specific conditioning or fitness goals
Water based classes	<p>[all categories]</p> <ul style="list-style-type: none"> • also known as aqua classes, aqua exercise, aqua fitness, or aquaerobics • fitness classes conducted in a water environment such as an <ul style="list-style-type: none"> ○ indoor pool ○ outdoor pool ○ saltwater pool ○ enclosed open water • includes <ul style="list-style-type: none"> ○ interval ○ circuit ○ deep water, including running ○ flexibility, mobility and coordination ○ sports conditioning ○ resistance training

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan an effective specific purpose fitness activity ○ explain the outcomes of the specific purpose water based fitness activity format to moderate risk clients ○ explain the conditioning benefits of the specific purpose water based fitness activity format to moderate risk clients ○ follow the safety guidelines particular to the specific purpose water based fitness activity
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups ○ SRXOHS002B Implement and monitor the organisation's Occupational Health and Safety policies, procedures and programs • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic exercise science and hydrodynamic effects related to the water based fitness activity format ○ Intervention strategies to achieve more efficient movements in water • Required skills <ul style="list-style-type: none"> ○ Development of water based fitness activity plans including mapping of suitable music if required to provide a structure for improving or maintaining the fitness of clients ○ Experience in instructing a range of basic water based fitness classes to a wide range of clients in a commercial or community fitness environment ○ Skills in using a range of common water based fitness activity

	<p>equipment</p> <ul style="list-style-type: none"> ○ Use of music in water based fitness classes for client motivation ○ Skills to recover and resuscitate a person in difficulty in the water ○ Feedback and questioning skills to assist clients in the performance of water based exercises
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ suitably equipped theory space ○ swimming pool suitable for water based exercise classes in terms of pool depth, pool surfaces, entry, exit, water quality and temperature ○ sound system with consideration for the avoidance of conflict with other users ○ common equipment for water based fitness classes and fitness participants ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

AQUATICS

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SRCAQU001B	MONITOR POOL WATER QUALITY
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to monitor the water quality of swimming pools/aquatic facilities according to health standards.

ELEMENT	PERFORMANCE CRITERIA
1 Conduct routine pool water tests according to regulations and respond to test irregularities	1.1 Complete <i>routine pool water tests</i> in compliance with <i>public health regulatory requirements</i> and facility procedures 1.2 Compare pool water test results to <i>public health regulatory requirements</i> 1.3 Report pool water test irregularities to the appropriate person for corrective action
2 Respond to contamination incidents	2.1 Implement continued visual checks for <i>pool water quality</i> and initiate corrective actions
3 Record routine pool water tests	3.1 Record pool water test results to aquatic facility specifications and meet the <i>public health regulatory requirements</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Pool water quality	refers to <ul style="list-style-type: none"> • pool water that is maintained within the limits set by public health regulations for microbiological, disinfectant, pH and clarity levels
Public health regulatory requirements	may vary according to state/territory regulations but includes <ul style="list-style-type: none"> • health act • infectious diseases regulations • dangerous goods act and regulations • poisons act • metropolitan water supply, sewerage and drainage by-laws • occupational health and safety act and regulations • environment legislation • local government regulations
Routine pool water tests	may include tests for <ul style="list-style-type: none"> • free chlorine • total bromine • total chlorine • combined chlorine • pH • alkalinity • cyanuric acid • calcium hardness • total hardness • temperature

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ conduct regular pool water tests in compliance with public health regulatory requirements and correctly identify irregularities ○ work within organisation policy and procedures and ○ follow water treatment testing procedures governed by public health regulations for the treatment of public swimming pool water
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Organisation's objectives, policies and procedures ○ Procedures and processes for pool water testing ○ Basic pool water chemistry ○ Relevant occupational health and safety, government and industry regulations and legislative requirements • Required skills <ul style="list-style-type: none"> ○ Communication skills to record pool water test results and report irregularities ○ Use of pool water testing apparatus ○ Visual identification of pool water quality
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ an aquatic facility ○ an effectively simulated work environment or industry approved training centre • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) should <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and

	contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	1	1	1	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU002B	OPERATE AQUATIC FACILITY PLANT AND EQUIPMENT
AQU	Aquatics

DESCRIPTION: This units has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to operate aquatic facility plant and equipment according to standard operating procedures.

ELEMENT	PERFORMANCE CRITERIA
1 Operate aquatic facility plant and equipment	1.1 Operate <i>aquatic facility plant and equipment</i> according to facility procedures, manufacturer's specifications and statutory requirements
2 Conduct routine checks of aquatic facility plant and equipment	2.1 Conduct <i>routine checks of electrical appliances</i> and systems to ensure they meet facility standards 2.2 Conduct <i>routine checks of plumbing appliances</i> and systems to ensure they meet facility standards 2.3 Carry out routine maintenance of <i>aquatic facility plant and equipment</i> according to facility procedures and manufacturer's guidelines 2.4 Monitor use and condition of equipment and facility using established routines and procedures
3 Identify faults in aquatic facility plant and equipment	3.1 Record equipment and facility use and implement and document conditions requiring further action according to facility procedures 3.2 Isolate and report faults and irregularities according to facility procedures
4 Initiate corrective procedures of aquatic facility plant and equipment	4.1 Remove, repair and replace faulty equipment and defective parts according to facility procedures 4.2 Take defective equipment and/or facilities out of operation according to facility safety procedures 4.3 Move defective equipment according to facility and occupational health and safety guidelines for safe lifting, in order to facilitate repair 4.4 Notify appropriate aquatic facility or service personnel of faults and corrective actions initiated 4.5 Record action taken according to organisation and <i>public health regulatory requirements</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aquatic facility plant and equipment	may include <ul style="list-style-type: none"> • circulation plant such as pumps, filters, disinfection systems, plumbing systems, pressure gauges and valves • heating systems, space and water including saunas and spas • lighting and ventilation systems • electrical control units such as fuses and circuit breakers • electrical appliances such as hair dryers, vacuum cleaners, audio equipment, video recorders, video monitors • self contained breathing apparatus
Public health regulatory requirements	may vary according to state/territory regulations but includes <ul style="list-style-type: none"> • health act • infectious diseases regulations • dangerous goods act and regulations • poisons act • metropolitan water supply, sewerage and drainage by-laws • occupational health and safety act and regulations • environment legislation • local government regulations
Routine checks of electrical appliances	are limited to fundamental/basic actions of an unlicensed person <ul style="list-style-type: none"> • integrity of power supply and circuits, visible inspection • testing electronic and mechanical operation • reset circuit breakers • replace batteries and fuses • identify and report visible and electrical hazards
Routine checks of plumbing appliances	are limited to fundamental/basic actions of an unlicensed person <ul style="list-style-type: none"> • integrity of water supply and drainage systems, visible inspection • identifying and isolating water supply faults • identifying water related hazards

Work environment	varies with respect to <ul style="list-style-type: none">• size of the organisation• location• organisational structure• nature of services provided• availability of resources, ie, human, financial, physical
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ conduct routine inspection of aquatic facility plant and equipment ○ operate aquatic facility plant and equipment according to facility procedures and manufacturer's instructions ○ correctly identify faults in plant and equipment ○ implement organisation policy and procedures and ○ correctly initiate corrective procedures to address identified plant and equipment faults
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU004B Maintain pool water quality
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Procedures and processes for plant and equipment operation ○ Relevant occupational health and safety, government and industry regulations and legislative requirements ○ Chemical handling procedures ○ Backwash procedures ○ Filtration processes ○ Plant and equipment manufacturer's specifications ○ Isolation procedures ○ Standard of cleaning required ○ Standard maintenance procedures ○ Types of supplies available for cleaning and maintenance • Required skills <ul style="list-style-type: none"> ○ First aid treatment procedures related to plant and equipment accidents ○ Communication/interpersonal skills ○ Identifying hazards/unclean area/pollution ○ Using cleaning materials and equipment ○ Use of relevant hand tools ○ Operation of plant and equipment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ the plant and equipment of an aquatic facility ○ an effectively simulated work environment or industry approved training centre • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at

	<p>the level above</p> <ul style="list-style-type: none"> ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	1	2	1	–	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU003B	RESPOND TO AN AQUATIC EMERGENCY USING BASIC WATER RESCUE TECHNIQUES
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge to identify and evaluate an aquatic emergency and perform a basic water rescue. These situations will usually involve an individual response.

ELEMENT	PERFORMANCE CRITERIA
1 Identify and evaluate aquatic emergencies which may require basic water rescue techniques	1.1 Identify and explain the <i>factors that contribute to aquatic emergencies which may require basic water rescues</i> 1.2 Identify and explain the <i>characteristics of a person in difficulty</i> 1.3 Communication initial assessment to appropriate personnel in accordance with the <i>accepted best practice principles of aquatic rescues</i> 1.4 Identify and explain an appropriate emergency response for the situation and the <i>people involved</i>
2 Apply the principles of a basic water rescue when required	2.1 Assess the factors involved in conducting a <i>basic water rescue</i> and formulate a <i>rescue plan</i> 2.2 Consider the <i>rescue plan</i> , self-preservation and the safety of bystanders 2.3 Determine the type of rescue required and <i>rescue equipment</i> needed 2.4 Perform a <i>basic water rescue</i> in accordance with <i>accepted best practice principles of aquatic rescues</i>
3 Assess the casualty and plan a course of action	3.1 Observe and describe the condition of the casualty 3.2 Provide treatment appropriate to the casualty's condition in line with approved <i>resuscitation techniques and standards</i>
4 Record and report the incident	4.1 Complete a record of the incident and the action taken using appropriate forms and in line with organisational requirements 4.2 Notify appropriate other personnel and statutory authorities of the incident

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Accepted best practice principles of aquatic rescues	<ul style="list-style-type: none"> • accepted preventative practice adopted throughout the aquatic industry to minimise safety hazards or risks to casualty, bystanders and rescuer • <i>Guidelines</i> and <i>code of conduct</i> policies developed by the peak bodies responsible for lifesaving, such as the Royal Life Saving Society Australia and Surf Life Saving Australia • national organisation regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • employer organisation's policies and procedures • the culture of lifesaving • current and past good practice demonstrated by self or peers in the same or similar situation
Aquatic emergencies	<p>may include</p> <ul style="list-style-type: none"> • envenomation • sudden unconsciousness • spinal injured person • drowning • heart attack • severe bleeding • multiple victims • epileptic seizures • severe asthma attacks
Basic water rescue	<p>techniques would be performed by an individual and must include all of the following</p> <ul style="list-style-type: none"> • non–swimming rescues such as <ul style="list-style-type: none"> ○ reach rescue ○ rope throw rescue ○ throw a flotation aid and • swimming rescues <ul style="list-style-type: none"> ○ accompanied rescue ○ wade rescue ○ non–contact tow ○ contact tow • water search procedures • vice–grip and extended arm roll–over techniques • defensive techniques including blocking, blocking with an aid, reverses • escape techniques including escape from front and rear grasps

Characteristics of a person in difficulty	<p>will vary according to their situation but may include</p> <ul style="list-style-type: none"> • calling for help • vertical body position • minimal or non-supportive leg action • vigorous arm movements • head tilted up and back, face turned to safety or help • submerged (or unconscious) person
Factors that contribute to aquatic emergencies which may require basic water rescues	<p>may include</p> <ul style="list-style-type: none"> • swimming ability • environmental conditions such as <ul style="list-style-type: none"> ○ deep water ○ shallow water ○ river currents ○ surf ○ strong wind • risk taking behaviour • consumption of alcohol or use of illegal drugs • condition of casualty
People involved	<p>may include</p> <ul style="list-style-type: none"> • casualty • bystanders • rescuers • staff
Rescue equipment	<p>may include</p> <ul style="list-style-type: none"> • reaching aids • ropes • flotation aids
Rescue plan	<p>the rescue plan considers the following factors</p> <ul style="list-style-type: none"> • self-preservation • awareness of personal capabilities • available assistance • selection of rescue aids • nature of the area • condition of person in difficulty • priorities of rescue

Resuscitation techniques and standards	must include <ul style="list-style-type: none">• danger, response, airway, breathing, circulation routine• Australian Resuscitation Council Resuscitation Standards• expired air resuscitation techniques<ul style="list-style-type: none">○ mouth to mask○ mouth to nose○ mouth to mouth• cardiopulmonary resuscitation techniques<ul style="list-style-type: none">○ 1 person operator○ 2 person operator
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ identify the factors that contribute to an aquatic emergency ○ correctly identify and evaluate an aquatic emergency requiring basic water rescues ○ determine and implement a basic water rescue plan which minimises risk to self and other bystanders ○ assess the condition of the casualty and apply appropriate treatment in line with approved resuscitation techniques and standards ○ accurately report the incident and notify other relevant personnel according to legislative, regulatory and organisation requirements
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU007B Respond to an aquatic emergency using advanced water rescue techniques
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Factors contributing to aquatic emergencies ○ Characteristics of a person in difficulty ○ Potential dangers in a range of aquatic environments ○ Resuscitation techniques and standards ○ Water rescue equipment ○ Principles of basic water rescues ○ Relevant equipment and safety requirements, including occupational health and safety and legislative requirements • Required skills <ul style="list-style-type: none"> ○ Skills and techniques required to perform basic water rescues ○ Ability to identify factors leading to aquatic emergencies ○ Monitoring/observation skills to identify aquatic emergencies requiring basic water rescues ○ Skills and techniques required to perform resuscitation ○ Fitness and strength level to perform basic water rescues appropriate to the learner's work environment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a swimming pool/aquatic environment and rescue equipment ○ suitable participants ○ rules, policies and regulations of relevant peak bodies and/or employer organisations • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines.

	<p>That is, assessors (or persons within the assessment team) must</p> <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	1	–	2	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU004B	MAINTAIN POOL WATER QUALITY
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge to maintain the water quality of swimming pools/aquatic facilities according to health standards.

ELEMENT	PERFORMANCE CRITERIA
1 Ensure regular water quality tests are conducted according to regulations	1.1 Monitor <i>routine pool water tests</i> results to ensure they are completed in compliance with <i>public health regulatory requirements</i> and facility procedures 1.2 Develop and implement schedules for <i>pool water microbiological testing</i> to meet the <i>public health regulatory requirements</i>
2 Apply principles of pool water quality to adjust disinfectant levels and water balance	2.1 Anticipate bather loading and maintain corrective actions implemented to ensure <i>pool water quality</i> 2.2 Develop and implement processes for the use of chemicals for maintaining disinfectant levels and chemical balance of pool water to meet <i>public health regulatory requirements</i> 2.3 Carry out <i>water treatment procedures</i> in accordance with the aquatic facility's operating plan for the treatment of pool water 2.4 Observe safe handling of chemicals 2.5 Undertake calculation of the amount of chemical required to correct chemical imbalances in pool water as per <i>public health regulatory requirements</i> 2.6 Use chemical dosing equipment for the treatment of pool water in accordance with the manufacturer's specifications and occupational health and safety requirements
3 Record action taken	3.1 Record pool water test results and corrective actions to aquatic facility specifications and meet <i>public health regulatory requirements</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Pool water microbiological testing	may include determinations of <ul style="list-style-type: none"> • standard plate count • coliform count • pseudomonas aeruginosa • legionella • staphylococcus • cryptosporidium
Pool water quality	refers to <ul style="list-style-type: none"> • pool water that is maintained within the limits set by public health regulations for microbiological, disinfectant, ph and clarity levels
Public health regulatory requirements	may vary according to state/territory regulations but includes <ul style="list-style-type: none"> • health act • infectious diseases regulations • dangerous goods act and regulations • poisons act • metropolitan water supply, sewerage and drainage by-laws • occupational health and safety act and regulations • environment legislation • local government regulations
Routine pool water tests	may include tests for <ul style="list-style-type: none"> • free chlorine • total bromine • total chlorine • combined chlorine • pH • alkalinity • cyanuric acid • calcium hardness • total hardness • temperature

Water treatment procedures	<ul style="list-style-type: none">• disinfection with chemicals or procedures including<ul style="list-style-type: none">○ chlorine gas○ sodium hypochlorite○ calcium and lithium hypochlorite○ electrolytic generation of chlorine○ bromine○ sodium bromide with hypochlorite or ozone activator○ chlorine dioxide• super chlorination• shock dosing• dechlorination• chlorine stabilisation with cyanuric acid• control of algae• ozonation• ultraviolet radiation• ph balance• alkalinity adjustments• calcium and total hardness adjustments• lowering total dissolved solids• pool water filtration and recirculation• backwashing• manual removal of visible contaminants
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ develop and implement processes to ensure regular water quality tests are conducted according to public health regulatory requirements ○ develop and implement processes for the use of chemicals for maintaining the correct chemical balance of pool water as governed by public health regulatory requirements ○ implement organisation policy and procedures ○ correctly anticipate pool water loadings and take appropriate corrective action
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU002B Operate aquatic facility plant and equipment
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Procedures and processes for water testing and treatment ○ Pool water chemistry ○ Relevant occupational health and safety, government and industry regulations and legislative requirements ○ Chemical handling procedures ○ Backwash procedures ○ Filtration processes ○ Plant and equipment operation ○ Plant and equipment manufacturer's specifications ○ Isolation procedures ○ Standard of cleaning required ○ Standard maintenance procedures ○ Types of supplies available for cleaning and maintenance • Required skills <ul style="list-style-type: none"> ○ First aid treatment procedures related to pool water chemical accidents ○ Communication/interpersonal skills ○ Identifying hazards/unclean area/pollution ○ Using cleaning materials and equipment

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ an aquatic facility ○ an effectively simulated work environment or industry approved training centre • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	1	2	1	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU006B	SUPERVISE CLIENTS AT AN AQUATIC FACILITY OR ENVIRONMENT
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the knowledge and skills to supervise clients at an aquatic recreation facility or environment to minimise risk.

ELEMENT	PERFORMANCE CRITERIA
1 Identify hazardous behaviours and situations	<p>1.1 Identify factors that contribute to problems that occur in an aquatic facility or environment</p> <p>1.2 Identify people at risk or those who have specific needs when they are in an aquatic facility or environment</p> <p>1.3 Promptly identify hazardous behaviour and activities to the individual and/or other clients</p> <p>1.4 Inspection of the aquatic facility or environment and work environment identifies potential hazards and risks in terms of the safety of staff and clients using the aquatic facility or environment and its services</p>
2 Apply supervision techniques to maintain a safe aquatic facility or environment	<p>2.1 Appropriate application of supervision techniques to the nature of the facility or environment in accordance with the facility standards and occupational health and safety requirements, relevant legislation and industry codes</p> <p>2.2 Appropriate response to problems observed in the situation and clients involved and in accordance with the policy and procedures of the organisation, facility or environment</p> <p>2.3 Adapt communication to suit the specific characteristics of each aquatic environment and its clients and promote compliance with safety rules and regulations</p> <p>2.4 Make approaches in a non-threatening manner to individuals whose situations, behaviour or actions may be hazardous to themselves and/or others</p> <p>2.5 Apply action to clients when they do not comply with safety rules and regulations in accordance with the policy and procedures of the organisation, facility or environment</p> <p>2.6 Comply safety check systems in accordance with the procedures of the organisation, facility or environment</p> <p>2.7 Minimise distractions from active surveillance</p>
3 Assess possible emergency or rescue situations	<p>3.1 Communicate information to the individuals according to the Code of Practice of the aquatic facility</p> <p>3.2 Identify promptly signs of possible casualty or those which indicate a person in difficulty</p> <p>3.3 Use an appropriate response to situations and clients when problems are observed</p> <p>3.4 Assess and communicate emergency situations according to the Code of Practice and emergency plan of the aquatic facility</p>
4 Report and record incidents	<p>4.1 Use of reporting and recording procedures meet regulatory requirements and those of the emergency action plan for the aquatic facility or environment</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aquatic facility and environment	aquatic facilities may include <ul style="list-style-type: none"> • pools and spas • wave pools • pool surrounds • play equipment/areas • shower and changing areas • lakes • rivers • beaches • water slides • dams environmental factors may include <ul style="list-style-type: none"> • weather conditions • reflective glare • ambient light • water clarity or turbidity
Clients	may include <ul style="list-style-type: none"> • participants • supporters • sponsors • members • volunteers • teams • clubs • facility owners • spectators • staff
Hazardous behaviour and activities	may include <ul style="list-style-type: none"> • misuse of equipment • swimming in areas that are unsafe • behaving with disregard for the safety of others and/or self • chewing gum while swimming • activities that are not complementary • diving into shallow water • consumption of alcohol/illegal drugs

People at risk	<p>may include those</p> <ul style="list-style-type: none"> • under the influence of drugs or alcohol • overweight • elderly • with a disability • non–swimmers • injured swimmers • large groups of people visiting the aquatic facility or environment for the first time • in poor health or with a medical condition • young children • flotation users • weak swimmers • inappropriately dressed • two or more people clinging together or to an object
Relevant legislation and industry codes	<p>will vary according to state/territory regulations but may include</p> <ul style="list-style-type: none"> • guidelines or code of conduct policies developed by the peak bodies responsible for lifesaving, such as the Royal Life Saving Society Australia and Surf Life Saving • occupational health and safety • dangerous goods act and regulations • health act • industrial relations • environment legislation • equal employment opportunity • anti–discrimination legislation • local government regulations • child protection act
Signs of possible casualty	<p>may result from</p> <ul style="list-style-type: none"> • accident • illness • injury • medical conditions <p>must be able to identify the characteristics of a person in difficulty</p> <ul style="list-style-type: none"> • non–swimmer • weak swimmer • injured swimmer • unconscious person

Supervision techniques	must include <ul style="list-style-type: none">• communication• positioning• public relations/education• recognition of clients in difficulty• scanning• facility analysis
Work environment	varies with respect to <ul style="list-style-type: none">• size of the organisation• location• organisational structure• nature of services provided• availability of resources<ul style="list-style-type: none">○ human○ financial○ physical

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ apply supervision techniques to maintain a safe aquatic facility or environment ○ promote compliance with the safety rules of the aquatic facility or environment ○ identify and minimise hazards and risks associated with an aquatic facility or environment ○ adapt communication to suit the specific characteristics of each aquatic environment and its clients to promote compliance with safety rules and regulations
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU003B Respond to an aquatic emergency using basic water rescue techniques OR ○ SRCAQU007B Respond to an aquatic emergency using advanced water rescue techniques • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Organisational emergency procedures ○ Relevant occupational health and safety, government and industry regulations and legislative requirements ○ Identification of individuals who may be at risk ○ Signs and symptoms of physical injury ○ Crowd control in emergency situations ○ Hazardous behaviour that poses risks to clients ○ Facility or environment hazards ○ Role of a lifeguard • Required skills <ul style="list-style-type: none"> ○ Communication/interpersonal skills to promote compliance with safety rules and regulations and respond to an aquatic emergency ○ Problem solving skills to determine the appropriate course of action to minimise risks to clients and when required respond to an aquatic emergency ○ Application of supervision techniques in an aquatic environment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ an aquatic facility or environment • Human resources — assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must

	<ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as supervision and judgement this unit of competency must be assessed over a minimum of three (3) sessions with a range of real clients at an aquatic facility or environment in order to ensure consistency in performance
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of supervising a range of real clients at an aquatic facility or environment. The aquatic facility or environment should be safe, with noise to a level experienced with an activity in full operation ● This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	–	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU007B	RESPOND TO AN AQUATIC EMERGENCY USING ADVANCED WATER RESCUE TECHNIQUES
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge to identify and evaluate a major aquatic emergency and perform an advanced water rescue. These situations will usually involve a team response.

ELEMENT	PERFORMANCE CRITERIA
1 Identify and evaluate a major aquatic emergency	1.1 Identify the <i>factors that contribute to major aquatic emergencies</i> 1.2 Communicate initial assessment to appropriate personnel in accordance with <i>accepted best practice principles of aquatic rescues</i> 1.3 Identify an appropriate emergency response for the situation and the <i>people involved</i>
2 Response to a major aquatic emergency is implemented	2.1 Response to the <i>characteristics of a person in difficulty</i> as quickly as possible 2.2 Implement strategies for group control 2.3 Remove clients, staff and other individuals from danger 2.4 Determine involvement of other individuals or the <i>use of bystanders</i> 2.5 Activate emergency systems
3 Apply the principles of an advanced water rescue	3.1 Assess the factors involved in conducting an <i>advanced water rescue</i> and formulate a <i>rescue plan</i> 3.2 The <i>rescue plan</i> considers self-preservation and the safety of bystanders 3.3 Determine the type of rescue required and <i>rescue equipment</i> needed 3.4 Identify hazards and appropriate action taken to prevent further injury to the casualty 3.5 Perform an <i>advanced water rescue</i> in accordance with <i>accepted best practice principles of aquatic rescues</i>
4 Assess the casualty and take an appropriate course of action	4.1 Observe and describe the condition of the casualty 4.2 Assess vital signs and symptoms of shock in accordance with accepted first aid procedures 4.3 Identify and explain appropriate first aid for the casualty's condition 4.4 Provide treatment appropriate to the casualty's condition in line with approved <i>first aid techniques and standards</i>
5 Organise further emergency care as required	5.1 Make contact with emergency services as soon as possible 5.2 Provide accurate information in order to obtain the required assistance from emergency services 5.3 Monitor casualty or arrange further treatment until emergency response team assumes responsibility
6 Record and report the incident	6.1 Complete a record of the incident and action taken using appropriate forms and in line with legislative, regulatory and organisational requirements 6.2 Notify appropriate other personnel and statutory authorities of the incident

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Accepted best practice principles of aquatic rescues	<p>must include</p> <ul style="list-style-type: none"> • accepted preventative practice adopted throughout the aquatic industry to minimise safety hazards or risks to casualty, bystanders and rescuer • <i>Guidelines</i> or <i>Code of Conduct</i> policies developed by the peak bodies responsible for lifesaving, such as The Royal Life Saving Society Australia and Surf Life Saving Australia • national organisation regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • employer organisation's policies and procedures • the culture of lifesaving • current and past good practice demonstrated by self or peers in the same or similar situation
Advanced water rescue	<p>is performed in a team situation and must include use of</p> <ul style="list-style-type: none"> • spineboard • spinal immobilisation collar • oxygen supplemented resuscitation • oxygen therapy
Aquatic emergencies	<p>may include</p> <ul style="list-style-type: none"> • envenomation • sudden unconsciousness • spinal injured person • drowning • heart attack • severe bleeding • multiple victims • epileptic seizures • severe asthma attacks
Characteristics of a person in difficulty	<p>will vary according to the situation but may include</p> <ul style="list-style-type: none"> • calling for help • vertical body position • diagonal body position • minimal or non-supportive leg action • vigorous arm movements • head tilted up and back, face turned to safety or help • submerged
Factors that may	<p>may include</p>

contribute to major aquatic emergencies	<ul style="list-style-type: none"> • swimming ability • environmental conditions such as <ul style="list-style-type: none"> ○ deep water ○ shallow water ○ river currents ○ surf ○ strong wind • risk taking behaviour • consumption of alcohol or use of illegal drugs • number and condition of victims
First aid techniques and standards	<p>must include</p> <ul style="list-style-type: none"> • danger, response, airway, breathing, circulation routine • Australian Resuscitation Council Standards
People involved	<p>may include</p> <ul style="list-style-type: none"> • casualty • bystanders • rescuers • staff
Rescue equipment	<p>will vary according to the situation but may include</p> <ul style="list-style-type: none"> • reaching aids • ropes • flotation aids • flippers • rescue tube • spineboard • spinal immobilisation collar • rescue board • oxygen resuscitation equipment
Rescue plan	<p>the rescue plan considers the following factors</p> <ul style="list-style-type: none"> • self-preservation • awareness of personal capabilities • available assistance • selection of rescue aids • nature of the area • number of people in difficulty • priorities of rescue

Use of bystanders	<p>applies when</p> <ul style="list-style-type: none">• the safety of bystanders is secure• bystanders have appropriate skills• sufficient trained staff are not available <p>may be appropriate to</p> <ul style="list-style-type: none">• identify what happened• bring rescue and first aid equipment• summon emergency services• assist with first aid• assist with reassurance of casualty• assist with individual or multiple casualty care• provide information about casualty• assist with crowd control• assist with immobilisation of casualty• assist with removal of casualty from the water• supervise surrounding areas and activities
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ identify the factors that contribute to an aquatic emergency ○ develop and implement an appropriate emergency response for the situation and the people involved, minimising risk to self and other bystanders ○ respond as part of a team to an aquatic emergency which involves more than one casualty ○ determine type of rescue technique/s required, select the appropriate rescue equipment and carry out the rescue according to accepted industry best practice principles of aquatic rescues ○ assess casualty's condition and apply appropriate first aid treatment in line with approved first aid treatment techniques and standards ○ organise further emergency care as required ○ accurately report the incident and notify other relevant personnel according to legislative, regulatory and organisation requirements
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU003B Respond to an aquatic emergency using basic water rescue techniques ○ SRXFAD001A Provide first aid • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU006B Supervise clients at an aquatic facility or environment
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Factors contributing to aquatic emergencies ○ Appropriate responses to aquatic emergencies ○ Characteristics of a person in difficulty ○ First aid techniques and standards ○ Types of water rescue equipment for advanced water rescues ○ Principles of advanced water rescues ○ Relevant equipment and safety requirements, including occupational health and safety legislative requirements ○ Roles of lifeguards and other personnel during major aquatic emergencies • Required skills <ul style="list-style-type: none"> ○ Skills and techniques required to perform advanced water rescues including the use of appropriate rescue equipment ○ Ability to identify factors leading to aquatic emergencies ○ Communication skills to signal other personnel, activate emergency systems and provide information to relevant others ○ Ability to organise and delegate tasks to implement an aquatic emergency response plan as part of a team ○ Assessment and treatment of casualties according to approved first aid techniques and standards including the use of oxygen

	<p>resuscitation equipment</p> <ul style="list-style-type: none"> ○ Procedures for communicating with emergency services ○ Ability to retrieve an object from the deepest water within the aquatic environment, no greater than 3 metres; if depth is greater than 3 metres assistance may be used, eg, fins ○ Ability to complete a 25 metre swim and 25 metre tow with assisted landing in less than 3 minutes and 15 seconds ○ Fitness and strength level, which may be demonstrated the following <ul style="list-style-type: none"> ▪ swimming 200 metres in less than 6 minutes
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a swimming pool/aquatic environment and advanced water rescue equipment ○ suitable participants ○ rules, policies and regulations of relevant peak bodies and/or employer organisations • Human resources — assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	3	2	1	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU008B	APPLY THE PRINCIPLES OF MOVEMENT IN WATER TO AQUATIC ACTIVITIES
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the knowledge and skills required to apply the principles of movement in water to instruct clients to achieve efficient movements during aquatic activities in water.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse the principles of movement in water	1.1 Identify the <i>principles of movement in water</i> , broken down into component parts and documented
2 Identify the effect of the principles of movement in water on the body	2.1 Identify the <i>factors affecting the movement of a body in water</i> 2.2 Identify and document the methods of increasing the efficiency of movement through water
3 Apply the principles of movement in water to assist clients to develop more efficient movements	3.1 Deliver concise and precise relevant information, explanations and demonstrations to develop efficient movements 3.2 Observe participant's movement through water and give <i>feedback</i> to improve movement on an individualised and/or group basis 3.3 Use <i>technological aids</i> to supplement presentations, where appropriate 3.4 Teach skills and monitor the <i>instructional method</i> during the instruction and assess following the instruction 3.5 Give clients the opportunity to comment and/or ask questions 3.6 Identify aspects needing further emphasis and/or attention for intervention in future sessions

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors affecting the movement of a body in water	<ul style="list-style-type: none"> • Body alignment <ul style="list-style-type: none"> ○ long and short axis ○ smooth tapered shapes • Balance <ul style="list-style-type: none"> ○ head alignment and movement ○ balance of limbs in movement ○ effects of rotation • Core power <ul style="list-style-type: none"> ○ hip rotation to create torque/twisting forces
Feedback	<ul style="list-style-type: none"> • Can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual ○ tactile • Should be an information exchange between participant and instructor regarding progress towards performance goals
Instructional method	<ul style="list-style-type: none"> • Instructional approaches adopted by the instructor to convey instructional content to the participant • Depending on the situation the instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole skill strategies ○ whole, progressive – part, whole strategies ○ progressive part strategies ○ demonstration strategies ○ command and response strategies ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring strategies ○ feedback and refinement strategies ○ guided discovery strategies, setting problems and allowing clients to discover solutions ○ experiential or problem solving strategies

Principles of movement in water	<ul style="list-style-type: none">• Buoyancy• Flotation• Hydrostatic pressure• Propulsion• Lift• Drag• Turbulence• Acceleration• Resistance• Balance and stability
Technological aids	<ul style="list-style-type: none">• Video cameras• Videos of other clients

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ identify and explain the principles of movement in water ○ accurately determine the factors effecting the movement of the body in water ○ evaluate the efficiency of a client's movement through water and provide feedback to improve client's performance
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of or in conjunction with competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ The principles of movement in water ○ The effect of the principles of movement in water on movement in water ○ Intervention strategies to achieve more efficient movements in water ○ Relevant equipment and safety requirements, including occupational Health and Safety and legislative requirements • Required skills <ul style="list-style-type: none"> ○ Skills used to instruct aquatic activities, eg, movement, voice, use of technical aids ○ Ability to provide explanations and demonstrations, ie, self, other clients as models, videos ○ Monitoring/observation skills ○ Feedback and questioning skills ○ Activities are conducted in accordance with the accepted best practice principles of aquatic activities
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a swimming pool and other equipment ○ suitable clients ○ rules, policies and regulations of relevant peak bodies and/or employer organisations • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area

	<ul style="list-style-type: none"> ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information – • Communicating ideas and information – • Planning and organising activities – • Working with teams and others – • Using mathematical ideas and techniques – • Solving problems – • Using technology – Not applicable <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU009B	INSTRUCT WATER FAMILIARISATION, BUOYANCY AND MOBILITY SKILLS
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the knowledge and skills required to use drills, activities and games to instruct water familiarisation, buoyancy and mobility skills.

ELEMENT	PERFORMANCE CRITERIA
1 Identify preferred instructional methods and styles to develop water familiarisation, buoyancy and mobility skills	1.1 Identify and explain <i>instructional methods</i> in the context of specific skills 1.2 Explain types and uses of <i>feedback</i> during instruction 1.3 Explain uses of demonstrations when instructing 1.4 Explain types and uses of questions in the instruction process 1.5 Explain types and uses of <i>instructional styles</i> in relation to a range of situations
2 Assess client's readiness to acquire and perform water familiarisation, buoyancy and mobility skills	2.1 Identify the <i>water familiarisation, buoyancy and mobility skills</i> to be developed 2.2 Introduce new clients to the water in an appropriate manner 2.3 Identify and describe <i>factors which affect skill acquisition</i> of the <i>water familiarisation, buoyancy and mobility skills</i> in relation to skill acquisition of clients 2.4 Assess clients regarding their <i>readiness</i> to acquire the <i>water familiarisation, buoyancy and mobility skills</i> being taught or developed
3 Conduct drills, activities and/or games to instruct water familiarisation, buoyancy and mobility skills	3.1 Select <i>instructional methods</i> to match the client's <i>readiness</i> , the <i>work environment</i> , the activity and the equipment available 3.2 Allocate sufficient space and <i>resources</i> for the activity and/or game 3.3 Deliver concise and precise relevant information, explanations and demonstrations to ensure <i>activities and/or games</i> are in accord with accepted <i>best practice principles of aquatic activities</i> 3.4 Place emphasis on practical involvement while adjusting or refining skills on an individualised basis 3.5 Make modifications to the activity when necessary 3.6 Teach the skill and monitor the instructional method during the instruction and assess following the instruction 3.7 Maintain group control to ensure the safety and enjoyment of the individual and group and a satisfactory outcome to the experience
4 Review and adapt the instruction of water familiarisation, buoyancy and mobility skills in response to feedback	4.1 Make relevant points of emphasis before, during and/or after presentation/s and <i>communicate in a style appropriate to the clients</i> 4.2 Implement modifications to the instructional method in response to results of monitoring 4.3 Give clients the opportunity to comment and/or ask questions 4.4 Identify aspects needing further emphasis and/or attention for intervention in future sessions

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Activities and/or games	<ul style="list-style-type: none"> • that are designed to develop water familiarisation, buoyancy and mobility • such as those described in accepted industry training manuals • should include <ul style="list-style-type: none"> ○ activities to develop water familiarisation, buoyancy and mobility skills ○ relevant modified games
Best practice principles of aquatic activities	<ul style="list-style-type: none"> • accepted preventative practice adopted throughout the aquatic industry to minimise safety hazards or risks • Instructors <i>Code of Conduct</i> policies developed by the peak bodies responsible for the teaching of swimming and water safety such as AUSTSWIM Incorporated, Australian Swimming Incorporated, Australian Swimming Coaches and Teachers Association, The Royal Life Saving Society Australia and Surf Life Saving Australia • national activity organisation regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • employer organisation's policies and procedures • the culture of swimming and water safety • current and past good practice demonstrated by self or peers in the same or similar situation
Communicate in a style appropriate to the clients	<ul style="list-style-type: none"> • age • preferred language • sensory or intellectual impairment, eg, sight loss or hearing loss • the <i>Swimming Teachers Code of Conduct</i> policy
Factors which affect skill acquisition	<ul style="list-style-type: none"> • individual considerations <ul style="list-style-type: none"> ○ stage of development ○ personality ○ physical, intellectual and emotional characteristics ○ physical fitness ○ body type and composition ○ cultural factors • situational factors <ul style="list-style-type: none"> ○ indoor/outdoor venue <ul style="list-style-type: none"> ▪ river ▪ dam ▪ sea ▪ swimming pool ○ weather conditions <ul style="list-style-type: none"> ▪ cold ▪ rain ▪ wind ▪ heat ○ water temperature ○ background noise

	<ul style="list-style-type: none"> ○ distractions ○ class size ○ water depth ○ available water space
Feedback	<ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual ○ tactile • should be an information exchange between participant and instructor regarding progress towards performance goals
Instructional methods	<ul style="list-style-type: none"> • instructional approaches adopted by the instructor to convey instructional content to the participant • depending on the situation the instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole skill strategies ○ whole, progressive — part, whole strategies ○ progressive part strategies ○ demonstration strategies ○ command and response strategies ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring strategies ○ feedback and refinement strategies ○ guided discovery strategies, setting problems and allowing clients to discover solutions ○ experiential or problem solving strategies ○ techniques to encourage the reluctant participant
Instructional styles	<ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the participant • depending on the situation the instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding not-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire, or casual, when appropriate ○ organised and efficient ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in clients
Readiness	<ul style="list-style-type: none"> • cognitive development stage • social and emotional development stage • motor development stage

Resources	<ul style="list-style-type: none"> • human resources — a ratio of instructors to clients that allows for maximum participation in a safe environment • equipment — a ratio of equipment to clients that allows for maximum participation in a safe environment • access to first aid facilities/equipment • appropriate facilities to conduct instruction in a safe environment
Water familiarisation, buoyancy and mobility skills	<ul style="list-style-type: none"> • entering, leaving and moving through the water • getting the face wet, submerging and opening eyes under water • regaining a standing position • breathing activities • safety and rescue skills • front, back and side floating • gliding • torpedo • sculling • treading water • stroke exploration
Work environment	<p>organisational health and safety requirements; safe and appropriate dress; and equipment</p> <ul style="list-style-type: none"> • appropriate swimwear and personal equipment • personal hygiene requirements • technical equipment, clipboards, etc • lifesaving equipment <ul style="list-style-type: none"> ○ ropes ○ reaching poles ○ flotation devices • pool safety equipment as listed in state/territory Occupational Health and Safety requirements for pools • other recommended safety guidelines are <ul style="list-style-type: none"> ○ instructional aids should be inspected before use ○ sun safety guidelines should be followed ○ hydration guidelines should be followed ○ designated pool area should be inspected before use ○ access to first aid facilities/equipment • conditions and external influences include <ul style="list-style-type: none"> ○ environmental/weather conditions ○ other facility users ○ spectators ○ parents ○ other instructors

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ evaluate whether conditions are suitable to commence the session ○ introduce the beginner to the water appropriately ○ instruct water familiarisation, buoyancy and mobility skills ○ observe clients and recognise when and how intervention should take place to improve individual skill performance ○ conduct activities and games to develop water familiarisation, buoyancy and mobility skills in accordance with the accepted best practice principles of aquatic activities ○ modify instructional methods and activities on an individualised and/or group basis to improve skill performance
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU008B Apply the principles of movement in water to aquatic activities • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Water familiarisation, buoyancy and mobility principles ○ Activities and games to instruct water familiarisation, buoyancy and mobility skills ○ Relevant equipment and safety requirements, including occupational health and safety and legislative requirements ○ First aid and water rescue techniques • Required skills <ul style="list-style-type: none"> ○ Application of principles of movement in water ○ Ability to provide explanations and demonstrations, ie, self, other clients as models, videos to assist in the instruction of water familiarisation, buoyancy and mobility skills ○ Monitoring/observation skills to analyse client's performance of water familiarisation, buoyancy and mobility skills ○ Feedback and questioning skills to assist clients to acquire/improve technique ○ Conducting activities and/or games in accordance with the accepted best practice principles of aquatic activities ○ Ability to perform basic water rescue techniques
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a swimming pool and other equipment ○ suitable clients ○ the rules, policies and regulations of relevant peak bodies and/or employer organizations

	<ul style="list-style-type: none"> • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	-	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — Not applicable • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCAQU010B	INSTRUCT WATER SAFETY AND SURVIVAL SKILLS
AQU	Aquatics

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to use drills, activities and games to instruct water safety and survival skills.

ELEMENT	PERFORMANCE CRITERIA
1 Identify preferred instructional methods and styles to develop water safety and survival skills	1.1 Identify and explain instructional methods in the context of specific skills 1.2 Explain types and uses of feedback during instruction 1.3 Explain uses of demonstrations when instructing 1.4 Explain types and uses of questions in the instruction process 1.5 Explain types and uses of instructional styles in relation to a range of situations
2 Assess client's readiness to acquire and perform water safety and survival skills	2.1 Identify water safety and survival skills to be taught or developed 2.2 Introduce new clients to the water in an appropriate manner 2.3 Identify and describe factors which affect acquisition of water safety and survival skills in relation to skill acquisition of clients 2.4 Assess clients regarding their readiness to acquire the water safety and survival skill being taught or developed
3 Conduct drills, activities and/or games to instruct water safety and survival skills	3.1 Select instructional methods to match the client's readiness , the work environment , the activity and the equipment available 3.2 Allocate sufficient space and resources for the drill, activity and/or game 3.3 Deliver concise and precise relevant information, explanations and demonstrations to ensure drills, activities and/or games and in accord with accepted best practice principles of aquatic activities 3.4 Use where appropriate, technological aids to supplement presentations 3.5 Place emphasis on practical involvement while adjusting or refining skills on an individualised basis 3.6 Observe clients to see that the drills, activities and/or games are conducted in accord with the accepted best practice principles of aquatic activities 3.7 Observe client's skill execution and apply correction techniques to improve water safety and survival skill technique on an individualised and/or group basis 3.8 Undertake observation with minimal disruption to the flow of the drill, activity or game 3.9 Make modifications to the activity when necessary 3.10 Teach the skill and monitor the instructional method during the instruction and assess following the instruction 3.11 Maintain group control to ensure the safety and enjoyment of the individual and group and a satisfactory outcome to the experience

<p>4 Conduct drills and activities to develop survival stroke technique</p>	<p>4.1 Select instructional methods to match the client's readiness, the work environment, the activity and the equipment available</p> <p>4.2 Observe client's skill execution and apply correction techniques to improve survival stroke technique on an individualised and/or group basis</p> <p>4.3 Undertake observation with minimal disruption to the flow of the drill or activity</p> <p>4.4 Teach the skill and monitor the instructional method during the instruction and assess following the instruction</p>
<p>5 Review and adapt the instruction of water safety and survival skills in response to feedback</p>	<p>5.1 Make relevant points of emphasis before, during and/or after presentation/s and communicate in a style appropriate to the client</p> <p>5.2 Implement modifications to the instructional method in response to results of the monitoring</p> <p>5.3 Give clients the opportunity to comment and/or ask questions</p> <p>5.4 Identify aspects needing further emphasis and/or attention for intervention in future sessions</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Best practice principles of aquatic activities	<ul style="list-style-type: none"> • accepted preventative practice adopted throughout the swimming/aquatics industry to minimise safety hazards or risks • Instructors <i>Code of Conduct</i> policies developed by the peak bodies responsible for the teaching of swimming and water safety such as AUSTSWIM Incorporated, Australian Swimming Incorporated, Australian Swimming Coaches and Teachers Association, The Royal Life Saving Society Australia and Surf Life Saving Australia • national activity organisation regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • employer organisation's policies and procedures • the culture of swimming and water safety • current and past good practice demonstrated by self or peers in the same or similar situation
Communicate in a style appropriate to the clients	<ul style="list-style-type: none"> • age • preferred language • sensory or intellectual impairment, eg, sight loss or hearing loss • the <i>Swimming Teachers Code of Conduct</i> policy
Drills, activities and/or games	<ul style="list-style-type: none"> • that are designed to develop the survival strokes of swimming • such as those described in accepted industry training manuals • should include <ul style="list-style-type: none"> ○ water safety and survival skill correction drills ○ relevant modified games
Factors which affect acquisition	<ul style="list-style-type: none"> • individual considerations <ul style="list-style-type: none"> ○ stage of development ○ personality ○ physical, intellectual and emotional characteristics ○ physical fitness ○ body type and composition ○ cultural factors • situational factors <ul style="list-style-type: none"> ○ indoor/outdoor venue <ul style="list-style-type: none"> ▪ river ▪ dam ▪ sea ▪ swimming pool ○ weather conditions <ul style="list-style-type: none"> ▪ cold ▪ rain ▪ wind ▪ heat ○ water temperature ○ background noise

	<ul style="list-style-type: none"> ○ distractions ○ class size ○ water depth ○ available water space
Feedback	<ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual ○ tactile • should be an information exchange between participant and instructor regarding progress and their perceived wellbeing • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Instructional methods	<ul style="list-style-type: none"> • instructional approaches adopted by the instructor to convey instructional content to the participant • depending on the situation, the instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole skill strategies ○ whole, progressive — part, whole strategies ○ progressive part strategies ○ demonstration strategies ○ command and response strategies ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring strategies ○ feedback and refinement strategies ○ guided discovery strategies, setting problems and allowing clients to discover solutions ○ experiential or problem solving strategies
Instructional styles	<ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the participant • depending on the situation the instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding not - negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire, or casual when appropriate ○ organised and efficient ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in clients
Readiness	<ul style="list-style-type: none"> • cognitive development stage • social and emotional development stage • motor development stage

Resources	<ul style="list-style-type: none"> • human resources — a ratio of instructors to clients that allows for maximum participation in a safe environment • equipment — a ratio of equipment to clients that allows for maximum participation in a safe environment • access to first aid facilities/equipment • appropriate facilities to conduct instruction in a safe environment
Survival stroke	<ul style="list-style-type: none"> • sidestroke • lifesaving backstroke • breast-stroke
Technological aids	<ul style="list-style-type: none"> • video cameras • videos of other clients
Water safety and survival skills	<ul style="list-style-type: none"> • hazards of aquatic environments • hazards associated with aquatic activities • entering and exiting the water • floating, sculling and treading water • removal of clothing • use of personal flotation devices (PFD), including HELP and huddle • casualty recognition • self-preservation • non-swimming rescue techniques <ul style="list-style-type: none"> ○ reach ○ throw ○ wade ○ row • swimming rescues <ul style="list-style-type: none"> ○ accompanied rescue ○ non-contact ○ contact tow • approach, recovery, defensive and landing techniques • spinal injury management
Work environment	<p>includes organisational health and safety requirements; safe and appropriate dress; and equipment</p> <ul style="list-style-type: none"> • appropriate swimwear and personal equipment • personal hygiene requirements • technical equipment, whiteboard, clipboards etc • lifesaving equipment <ul style="list-style-type: none"> ○ ropes ○ reaching poles ○ flotation devices • pool safety equipment as listed in state/territory occupational health and safety requirements for pools • other recommended safety guidelines are <ul style="list-style-type: none"> ○ instructional aids should be inspected before use ○ sun safety guidelines should be followed ○ hydration guidelines should be followed ○ designated pool area should be inspected before use ○ access to first aid facilities/equipment • conditions and external influences include <ul style="list-style-type: none"> ○ environmental/weather conditions

	<ul style="list-style-type: none">○ other facility users○ spectators○ parents○ other instructors
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ evaluate whether conditions are suitable to commence the session ○ determine the range and type of activities, drills and games required to develop water safety and survival skills appropriate to client readiness ○ instruct water safety and survival skills appropriate to the particular clients ○ observe clients and recognise when and how intervention should take place to improve individual skill performance ○ conduct drills, activities and games to develop water safety and survival skills in accordance with the accepted best practice principles of aquatic activities ○ analyse client's survival stroke technique and provide feedback in order to improve client's stroke technique ○ modify instructional methods and activities on an individualised and/or group basis to improve skill performance ○ structure a session to meet instructional aims by correct sequencing of activities, drills and games
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU008B Apply the principles movement in water to aquatics activities ○ SRCCRO007B Operate in accordance with accepted instructional practices, styles and legal and ethical responsibilities • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCAQU011B Instruct the strokes of swimming
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Water safety and survival skills ○ Drills, activities and games to develop water safety, survival skills and survival strokes ○ Knowledge of relevant equipment and safety requirements, including Occupational Health and Safety and legislative requirements ○ Learning styles ○ First aid and water rescue techniques • Required skills <ul style="list-style-type: none"> ○ Skills used to instruct water safety and survival, eg, movement, voice, use of technical aids, etc ○ Application of principles of movement in water ○ Ability to provide explanations and demonstrations, ie, self, other clients as models, videos, etc ○ Monitoring/observation skills to analyse client's performance of water safety, survival skills and survival strokes ○ Ability to provide instruction to improve survival strokes of swimming

	<ul style="list-style-type: none"> ○ Ability to perform basic water rescue techniques ○ Feedback and questioning skills to assist clients to acquire/improve technique ○ Conducting aquatic drills, activities and games to develop water safety, survival skills and survival strokes in accordance with the accepted best practice principles of aquatic activities
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a swimming pool and other equipment ○ suitable clients ○ rules, policies and regulations of relevant peak bodies and/or employer organizations • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	-	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

COMMUNITY FITNESS PROGRAM

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SRFCFP001A	DELIVER AN APPROVED COMMUNITY FITNESS PROGRAM TO PROMOTE WELLBEING
CFP	Community fitness program

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and knowledge required to deliver in a range of venues an approved community fitness program designed to promoting wellbeing and increase physical activity levels. This unit focuses on delivery of a program that is low in intensity in order to minimise risk and enable delivery to general populations. The unit also applies skills to report on the program, however evaluation remains the responsibility of the approving authority.

ELEMENT	PERFORMANCE CRITERIA
1 Prepare for program delivery	1.1 Investigate and confirm that the program is approved by an approving authority 1.2 Develop a checklist for the delivery of the program 1.3 Locate a venue/facility that provides suitable resources in a community location 1.4 Access to the venue/facility is relevant to the participants needs 1.5 Comply with all health and safety requirements within the venue/facility
2 Deliver an approved community fitness programs, including use of equipment	2.1 Welcome clients in a positive manner 2.2 Inform clients of the benefits of the program 2.3 Screen clients in accordance with program guidelines 2.4 Demonstrate effective visual and verbal cues 2.5 Apply use of various equipment in accordance with program guidelines
3 Observe the clients performance during the program	3.1 Monitor phases , exercise intensity, technique and safety of participants continuously throughout the program and in accordance with program guidelines 3.2 Deliver effective and positive feedback to clients regarding correct program intensity or technique 3.3 Modify activities as required to ensure clients obtain the program outcome safely and effectively within the specifications of the program guidelines
4 Monitor and report on the effectiveness of the program	4.1 Explain to clients the opportunities to comment and/or ask questions 4.2 Implement modifications to instructional technique , in response to monitoring 4.3 Identify aspects needing further emphasis or development, for recording and reporting to approving authority 4.4 Maintain records in accordance with program guidelines

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Access	<p>[all categories]</p> <ul style="list-style-type: none"> • accessibility includes factors such as <ul style="list-style-type: none"> ○ stairs ○ ramps ○ lift ○ vicinity to public transport ○ parking
Approving authority	<p>[all categories]</p> <ul style="list-style-type: none"> • government department, eg, education, health • peak body, eg, Fitness Australia
Checklist	<p>[all categories]</p> <ul style="list-style-type: none"> • if music is to be used, music appropriate to the client and activity is prepared • music system and microphone are checked, and appropriate levels are set and tested • routines are rehearsed and flowing • instructor is ready and accessible well before program start time • facility is clean and safe • any equipment needed is laid out and put away in a safe manner • any equipment is checked before use
Equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • used by clients includes <ul style="list-style-type: none"> ○ balls, rings, sticks ○ dumbbells/barbells ○ noodles ○ bands ○ stability balls/discs ○ mats ○ chairs ○ benches ○ heart rate monitors ○ towels • used by instructors includes <ul style="list-style-type: none"> ○ tape deck and microphone ○ clothing

Health and safety	<p>[all categories]</p> <ul style="list-style-type: none"> • first aid considerations • other facility/venue users • occupational health and safety legislation • maintenance and safety procedures
Instructional Technique	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional approaches adopted by the instructor to convey instructional content to the client using techniques including <ul style="list-style-type: none"> ○ teaching position <ul style="list-style-type: none"> • relation to clients • relation to the environment, such as sound system, lighting, ventilation ○ class organisation ○ class formation ○ mirror imaging • the instructor should incorporate a range of the following methods and approaches within the facility/venue <ul style="list-style-type: none"> ○ verbal communication <ul style="list-style-type: none"> • encouragement • voice clarity • pitch ○ non verbal communication <ul style="list-style-type: none"> • body language • mannerisms • personality ○ demonstration strategies ○ motivational strategies ○ monitoring, feedback, and refinement strategies • avoidance of competing against or within the class
Location	<p>[all categories]</p> <ul style="list-style-type: none"> • central to client base • venues such as <ul style="list-style-type: none"> ○ community hall ○ council facility ○ fitness centre
Monitor	<p>[all categories]</p> <ul style="list-style-type: none"> • monitoring methods includes <ul style="list-style-type: none"> ○ talk test ○ heart rate ○ breathing frequency ○ Rate of Perceived Exertion

Phases	[all categories] <ul style="list-style-type: none">• preparation• conditioning• recovery• adaptation
Records	[all categories] <ul style="list-style-type: none">• written• electronic• oral recording
Resources	[all categories] <ul style="list-style-type: none">• include factors such as<ul style="list-style-type: none">○ well ventilated room○ mirrors○ chairs○ showers/toilets○ car park○ lighting

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria. In particular the ability to <ul style="list-style-type: none"> ○ deliver a community fitness program designed to promote wellbeing appropriate to the client group
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic exercise science related to the program outcome of wellbeing • Required skills <ul style="list-style-type: none"> ○ Experience in instructing community fitness programs in a range of environments ○ Skills in using a range of common fitness equipment ○ Feedback and questioning, record keeping skills
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment.

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information – Interpreting program guidelines • Communicating ideas and information – Instructing participants • Planning and organising activities – Creating a preparatory program checklist • Working with teams and others – Instructing participants • Using mathematical ideas and techniques – Timing and sequencing of program • Solving problems - Identifying incorrect techniques and implementing corrective strategies in accordance with program guidelines • Using technology – To prepare for activity delivery and program coordination <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

COACHING GENERAL PRINCIPLES

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SRSCGP002A	INCLUDE SPECIAL INTEREST GROUPS OR PEOPLE WITH SPECIAL NEEDS
CGP	Coaching general principles

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the use of inclusive teaching and coaching practices to involve special interest groups or people with special needs.

ELEMENT	PERFORMANCE CRITERIA
1 Use preferred teaching methods and coaching/instructional styles to include special interest groups or people with special needs	1.1 Select and implement teaching methods and coaching/instructional styles in the context of specific skills being developed and the needs of the individual/group 1.2 Integrate athletes with special needs into mainstream teams/groups 1.3 Provide feedback to the athlete and other support personnel in accord with the best practice principles of the sport/activity 1.4 Deliver relevant information, explanations and demonstrations concisely and precisely to teach or develop specific skills in accord with the best practice principles of the sport/activity 1.5 Demonstrate questioning and communication skills in accord with the best practice principles of the sport/activity 1.6 Ensure organisation's Occupational Health and Safety requirements are in accordance with requirements for the session
2 Assess athlete's readiness to acquire and perform the activity specific skill/s	2.1 Select the skill or skill/s to be developed 2.2 Identify and describe cultural or physical factors which affect the acquisition of skills of special interest groups or people with special needs in relation to skill acquisition of athletes 2.3 Assess athletes needs regarding their readiness to acquire the skill and perform the activity being taught or developed
3 Conduct drills, activities and games to teach or develop the skills of special interest groups or people with special needs	3.1 Select teaching methods and coaching/instructional styles to match the athlete's readiness, cultural or physical factors , the environment, the activity specific skill/s and the equipment available 3.2 Allocate sufficient space and resources for the drill, activity and/or game and adapt equipment, games and activities for athletes with special needs 3.3 Deliver relevant information, explanations and demonstrations concisely and precisely to conduct drills, activities and/or games, specific to the athlete's cultural or physical factors 3.4 Use where appropriate, special presentation techniques or activities to comply with the needs of special interest groups or people with special needs 3.5 Emphasise practical involvement while adjusting or refining skills on an individualised basis 3.6 Observe athlete's skill execution and apply correction techniques to improve skill execution on an individualised and/or group basis 3.7 Undertake observation with minimal disruption to the flow of the drill, activity or game 3.8 Teach the skill and monitor the teaching method and coaching/instructing style during the instruction and assess following the instruction 3.9 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience
4 Review and adapt	4.1 Make relevant points of emphasis before, during and/or after presentation/s

the teaching of a skill in response to feedback	4.2 Implement modifications to the teaching method and coaching style in response to results of the monitoring 4.3 Give athletes the opportunity to comment and/or ask questions 4.4 Identify aspects needing further emphasis and/or attention for intervention in future training session
5 Demonstrate an understanding of the specific needs of each athlete	5.1 Relate the skills taught specifically to the special interest groups or people with special needs 5.2 Provide increased levels of support and care to athletes with special needs 5.3 Liaise with family and other relevant support personnel regarding athletes with special needs 5.4 Implement the safety and medical considerations of the athlete's specific need

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Best practice principles of the sport/activity	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to <ul style="list-style-type: none"> ○ the sport/activity's Coach's or Instructor's <i>Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coach's Code of Ethics</i> policy ○ national activity organisation regulations and guidelines ○ relevant national, state/territory or local government regulations and guidelines ○ employer organisations policies and procedures ○ the culture of the sport/activity ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the coach or instructor to communicate with the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire (or casual) when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in clients
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • age • preferred method of communication • physical or cultural factors • sensory or intellectual impairment, eg, vision or hearing loss
Cultural or physical factors	<p>[all categories]</p> <ul style="list-style-type: none"> • cultural values

	<ul style="list-style-type: none"> • family structures <ul style="list-style-type: none"> ○ extended family responsibilities ○ family ideals • religious beliefs • place of sport within the community <ul style="list-style-type: none"> ○ traditional ethnic community ○ Australian community • type of disability • communication strategies • level of literacy and numeracy
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual, and/or ○ tactile • should be an information exchange between athlete and coach regarding progress • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Monitoring	<p>[all categories]</p> <ul style="list-style-type: none"> • is through <ul style="list-style-type: none"> ○ questioning and discussions before, during and after training sessions or competitions ○ observations before, during and after training sessions or competitions ○ cross referencing with session and/or agreed program objectives, and/or ○ ongoing functional assessments of skill performance, physical performance and participant well-being as part of the formative evaluation of training program ○ consultation with other personnel or specialists
Organisation's Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • technical and personal equipment as outlined by the specific sport • appropriate environmental safety considerations including <ul style="list-style-type: none"> ○ safe playing area ○ disability access ○ protective equipment, eg, knee and elbow pads, ○ the sport specific <i>Coach's Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coach's Code of Ethics</i> policy

Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • may include <ul style="list-style-type: none"> ○ human/physical ○ equipment ○ materials ○ health and safety provisions ○ indoor/outdoor facilities
Special interest groups or people with special needs	<p>[all categories]</p> <ul style="list-style-type: none"> • people with a disability • indigenous people • non-English speaking background • mature aged athletes • children
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators • other coach/es • sports scientists • sports medicine providers • agents • other health professionals • parents/guardians • other involved/appropriate personnel
Teaching methods	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional or coaching approaches adopted by the instructor or coach to convey instructional content to the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole, part, whole approaches ○ shaping approaches ○ modelling approaches ○ command and response approaches ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring approaches ○ feedback and refinement approaches ○ guided discovery approaches (setting problems and allowing participants to discover solutions), and/or ○ experiential or problem solving approaches

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of inclusive teaching and coaching practices to involve special interest groups or people with special needs in a coaching setting • Assessment of performance should be over a period of time covering all categories within the Range Statements that are applicable in the learners environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ use of teaching methods and coaching styles to include special interest groups or people with special needs ○ assess participants readiness to acquire and perform the activity specific skill/s ○ conduct drills, activities and games to teach or develop the skills of special interest groups or people with special needs ○ review and adapt the teaching of a skill in response to feedback ○ demonstrate an understanding of the specific needs of each athlete
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSCGP001A Operate in accord with accepted coaching practices, styles and legal and ethical responsibilities • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Relevant sport specific unit/s of competency
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant activity/sport specific knowledge ○ Knowledge of assistive devices relevant for the given athlete ○ Relevant modified rules and regulations ○ Knowledge of the disability or special needs of the given athlete ○ Principles of group management ○ Relevant equipment and safety requirements (this may include Occupational Health and Safety and legislative requirements for some sports) ○ Special needs and requirements of <ul style="list-style-type: none"> ▪ People with a disability ▪ Indigenous people ▪ People from a non-English speaking background ▪ Mature aged athletes ▪ Children • Required skills <ul style="list-style-type: none"> ○ Communication skills (written and verbal) in order to effectively coach people or groups with special needs ○ Ability to analyse and interpret information appropriate to effectively coach people or groups with special needs ○ Interpersonal skills in order to build rapport with people and groups with special needs ○ Delivery skills in order to effectively communicate information and tasks to people or groups with special needs

Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ genuine athletes, ie, not the peers of the learner, sport/activity equipment and sport/activity facilities in a coaching setting • Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to a coaching setting
Context for assessment	<ul style="list-style-type: none"> • Competency must be demonstrated in real/actual coaching/instructional situations with genuine athletes, ie, not the peers of the learner • In cases where the learner does not have the opportunity to cover all relevant categories within the Range Statements in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios • Assessment of this unit of competence will usually include observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, athletes or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	1	2	2	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - To conduct coaching sessions, to determine needs of athletes, pertaining to individuals/groups • Communicating ideas and information - To athletes in activities at coaching sessions, to support personnel • Planning and organising activities - Catering for athletes individual needs at coaching sessions and in activities and games • Working with teams and others - Co-ordinating support for athletes with varying needs, liaising with family members and other support personnel • Using mathematical ideas and techniques - Assessing athletes individual stage of development • Solving problems - With athletes in sessions, in conducting sessions, dealing with situations where conflict arises • Using technology - To assist athletes involvement in activities <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSCGP005A	CUSTOMISE COACHING TO INCLUDE CHILDREN
CGP	Coaching general principles

DESCRIPTION: This unit has been developed for the Sport Industry Training Package

This unit covers the customisation of teaching methods and coaching programs to meet the needs of children.

ELEMENT	PERFORMANCE CRITERIA
1 Use preferred teaching methods and coaching/instructional styles to meet the needs of children	1.1 Select and implement teaching methods and coaching/instructional styles in the context of specific skills being developed and the needs of the child 1.2 Provide feedback to the child and other support personnel in accord with the best practice principles of the sport/activity 1.3 Deliver relevant information, explanations and demonstrations concisely and precisely to teach or develop specific skills in accord with the best practice principles of the sport/activity 1.4 Demonstrate questioning and communication skills in accord with the best practice principles of the sport/activity 1.5 Ensure organisation's Occupational Health and Safety requirements are in accordance with requirements for this session
2 Assess readiness of the child to acquire and perform the activity specific skill/s	2.1 Identify the skill or skill/s to be developed 2.2 Identify physical and psychological factors which affect the acquisition of the skills of children 2.3 Assess the individual child regarding their readiness to acquire the skill being taught or developed
3 Conduct drills, activities and games to teach or develop the activity specific skills of children	3.1 Select teaching methods and coaching/instructional styles to match the needs of the child, physical and psychological factors , the environment, the activity specific skill/s and the equipment available 3.2 Allocate sufficient space and resources for the drill, activity and/or game 3.3 Deliver relevant information, explanations and demonstrations concisely and precisely to conduct drills, activities and/or games specific to the needs of the children and physical and psychological factors 3.4 Use special presentation techniques or activities to comply with the needs of children where appropriate 3.5 Emphasise practical involvement while adjusting or refining skills on an individualised basis 3.6 Observe child's skill execution and apply correction techniques to improve skill execution on an individualised and/or group basis 3.7 Undertake observation with minimal disruption to the flow of the drill, activity or game 3.8 Teach the skill, monitor the teaching method and coaching/instructional style during the instruction and assess following the instruction 3.9 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience

4 Review and adapt the teaching of a skill in response to feedback	4.1 Make relevant points of emphasis before, during and/or after presentation/s 4.2 Implement modifications to the teaching method and coaching style in response to results of the monitoring 4.3 Provide children with the opportunity to comment and/or ask questions 4.4 Identify aspects needing further emphasis and/or attention for intervention in future training sessions
5 Demonstrate an understanding of the specific needs of children	5.1 Teach the skills specifically related to the needs of the children , and physical and psychological factors 5.2 Provide support to children when addressing their individual needs and be aware of the cultural or physical factors 5.3 Implement the specific safety and medical considerations of children

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Best practice principles of the sport/activity	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to <ul style="list-style-type: none"> ○ the sport/activity's Coach's or Instructor's <i>Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coach's Code of Ethics</i> policy ○ national activity organisation regulations and guidelines ○ relevant national, state/territory or local government regulations and guidelines ○ employer organisations policies and procedures ○ the culture of the sport/activity ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the coach or instructor to communicate with children • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire (or casual) when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in children
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • age • preferred method of communication • varying communication strategies
Cultural or physical factors	<p>[all categories]</p> <ul style="list-style-type: none"> • cultural values • family structures • extended family responsibilities

	<ul style="list-style-type: none"> • family ideals • religious beliefs • place of sport within the community • traditional ethnic community • Australian community • type of disability • communication strategies • level of literacy and numeracy
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual, and/or ○ tactile • should be an information exchange between child and coach regarding progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Monitoring	<p>[all categories]</p> <ul style="list-style-type: none"> • is through <ul style="list-style-type: none"> ○ questioning and discussions before, during and after training sessions or competitions ○ observations before, during and after training sessions or competitions ○ cross-referencing with session and/or agreed program objectives, and/or ○ ongoing functional assessments of skill performance, physical performance and child well-being as part of the formative evaluation of training program ○ consultation with other personnel or specialists
Needs of children	<p>[all categories]</p> <ul style="list-style-type: none"> • modification of equipment and rules • reasons for children's participation in sport • fun and enjoyment • maximum participation • when to emphasise competition • parent/guardian involvement

Organisation's Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • technical and personal equipment as outlined by the specific sport • appropriate environmental safety considerations including <ul style="list-style-type: none"> ○ safe playing area ○ modification of equipment and rules ○ protective equipment, eg, knee and elbow pads ○ the sport specific <i>Coach's Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coach's Code of Ethics</i> policy ○ weather conditions
Physical and psychological factors	<p>[all categories]</p> <ul style="list-style-type: none"> • physical factors <ul style="list-style-type: none"> ○ growth rates ○ developmental stages ○ safety factors, eg, heat tolerance and hydration • psychological factors <ul style="list-style-type: none"> ○ developmental stages ○ social characteristics ○ attention spans ○ behaviour modification
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • may include <ul style="list-style-type: none"> ○ human/physical ○ equipment ○ materials ○ health and safety provisions ○ indoor/outdoor facilities
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators • other coach/es • sports scientists • sports medicine providers • agents • other health professionals • parents/guardians • other involved/appropriate personnel
Teaching methods	<p>[all categories]</p> <ul style="list-style-type: none"> • coaching or instructional approaches adopted by the coach or instructor to convey instructional content to the child • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations • whole, part, whole approaches • shaping approaches • modelling approaches • command and response approaches

	<ul style="list-style-type: none">• directive approaches through specific set tasks• reciprocal or peer tutoring approaches• feedback and refinement approaches• guided discovery approaches (setting problems and allowing children to discover solutions), and/or• experiential or problem solving approaches
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of how to customise teaching methods and coaching programs to meet the needs of children in a coaching setting • Assessment of performance should be over a period of time covering all categories within the Range Statements that are applicable in the learners environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ use preferred teaching methods and coaching styles to meet the needs of children ○ assess readiness of the child to acquire and perform the activity specific skill/s ○ conduct drills, activities and games to teach or develop the activity specific skills of children ○ review and adapt the teaching of a skill in response to feedback ○ demonstrate an understanding of the specific needs of children
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRSCGP001A Operate in accord with accepted coaching practices, styles and legal and ethical responsibilities • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRXCAI004B Plan a session or program for participants ○ SRXCAI005B Conduct a sport and recreation session for participants ○ SRXCAI006B Organise a sport and recreation program ○ SRXCAI007B Conduct a sport and recreation program
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant activity/sport specific knowledge in relation to coaching children ○ Relevant rules and regulations for coaching children ○ Relevant equipment and safety requirements (this may include Occupational Health and Safety and legislative requirements for some sports) ○ Physical and psychological characteristics of children in order to effectively customise coaching to include children ○ Needs of children participating in sport in order to effectively customise coaching to include children • Required skills <ul style="list-style-type: none"> ○ Communication skills (written and verbal) in order to understand the differing needs of children in a coaching situation and communicate desired coaching outcomes in a manner appropriate to children ○ Varying communication strategies in order to adjust coaching style to meet the needs of individuals ○ Ability to interpret and analyse information appropriate to coaching children in order to ensure they receive correct and relevant information ○ Interpersonal skills in order to build rapport with children and

	ensure the desired coaching outcomes are understood and agreed upon
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ genuine participants, ie, not the peers of the learner, sport/activity equipment and sport/activity facilities in a coaching setting • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to a coaching setting
Context for assessment	<ul style="list-style-type: none"> • Competency must be demonstrated in real/actual coaching/instructional situations with genuine athletes, ie, not the peers of the learner • In cases where the learner does not have the opportunity to cover all relevant categories within the Range Statements in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios • Assessment of this unit of competence will usually include observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, athletes or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Determining a child's readiness to participate, presenting information to children in appropriate ways • Communicating ideas and information - In a manner specific to children • Planning and organising activities - Specific to the needs of children • Working with teams and others - Where support personnel are involved, co-ordinating support personnel • Using mathematical ideas and techniques - Using principles in activities • Solving problems - Use of feedback to adjust drills and activities, resolving conflict when it arises • Using technology - Involving children in activities <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSCGP006A	CUSTOMISE COACHING TO INCLUDE MATURE AGED ATHLETES
CGP	Coaching general principles

DESCRIPTION: This unit has been developed for the Sport Industry Training Package

This unit covers the customisation of teaching methods and coaching programs to meet the needs of mature aged athletes.

ELEMENT	PERFORMANCE CRITERIA
1 Use preferred <i>teaching methods</i> and <i>coaching/instructional styles</i> to meet the <i>needs of mature aged athletes</i>	1.1 Select and implement <i>teaching methods</i> and <i>coaching/instructional styles</i> in the context of specific skills being developed and the <i>needs of mature aged athletes</i> 1.2 Provide <i>feedback</i> to the mature aged athlete and other <i>support personnel</i> in accord with the <i>best practice principles of the sport/activity</i> 1.3 Present relevant information, explanations and demonstrations concisely and precisely to teach or develop specific skills in accord with the <i>best practice principles of the sport/activity</i> 1.4 Demonstrate questioning and <i>communication</i> skills in accord with the <i>best practice principles of the sport/activity</i> 1.5 Ensure <i>organisation's Occupational Health and Safety requirements</i> are in accordance with requirements for the session
2 Assess readiness of the athlete to acquire and perform the activity specific skill/s	2.1 Identify the skill or skill/s to be developed 2.2 Identify <i>physical and psychological factors</i> which affect the acquisition of the skills of mature aged athletes 2.3 Assess the individual athlete regarding their readiness to acquire the skill being taught or developed
3 Conduct drills, activities and games to teach or develop the activity specific skills of mature aged athletes	3.1 Select <i>teaching methods</i> and <i>coaching/instructional styles</i> to match the <i>needs of the mature aged athlete, physical and psychological factors</i> , the environment, the activity specific skill/s and the equipment available 3.2 Allocate sufficient space and <i>resources</i> for the drill, activity and/or game 3.3 Present relevant information, explanations and demonstrations concisely and precisely to conduct drills, activities and/or games, specific to the <i>needs of the mature aged athlete</i> and <i>physical and psychological factors</i> 3.4 Use special presentation techniques or activities to comply with the <i>needs of mature aged athlete</i> , where appropriate 3.5 Emphasise practical involvement while adjusting or refining skills on an individualised basis 3.6 Observe mature aged athletes' skill execution and apply correction techniques to improve skill execution on an individualised and/or group basis 3.7 Undertake observation with minimal disruption to the flow of the drill, activity or game 3.8 Teach the skill, and monitor the <i>teaching method</i> and <i>coaching/instructional style</i> during the instruction and assess following the instruction 3.9 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience

<p>4 Review and adapt the teaching of a skill in response to feedback</p>	<p>4.1 Make relevant points of emphasis before, during and/or after presentation/s 4.2 Implement modifications to the teaching method and coaching/instructional style in response to results of the monitoring 4.3 Provide mature aged athletes the opportunity to comment and/or ask questions 4.4 Identify aspects needing further emphasis and/or attention for intervention in future training sessions</p>
<p>5 Demonstrate an understanding of the specific needs of mature aged athletes</p>	<p>5.1 Teach the skills specifically related to the needs of mature aged athletes and physical and psychological factors 5.2 Implement the specific safety and medical considerations of mature aged athlete</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Best practice principles of the sport/activity	[all categories] <ul style="list-style-type: none"> • refers to <ul style="list-style-type: none"> ○ the sport/activity's Coach's or Instructor's <i>Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coach's Code of Ethics</i> policy ○ national activity organisation regulations and guidelines ○ relevant national, state/territory or local government regulations and guidelines ○ employer organisations policies and procedures ○ the culture of the sport/activity ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instructional styles	[all categories] <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the coach or instructor to communicate with the mature aged athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire (or casual) when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in athletes
Communication	[all categories] <ul style="list-style-type: none"> • age • preferred method of communication • cultural or physical factors • sensory impairment, eg, vision or hearing loss

Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual, and/or ○ tactile • should be an information exchange between athlete and practitioner regarding progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Monitoring	<p>[all categories]</p> <ul style="list-style-type: none"> • is through <ul style="list-style-type: none"> ○ questioning and discussions before, during and after training sessions or competitions ○ observations before, during and after training sessions or competitions ○ cross-referencing with session and/or agreed program objectives ○ ongoing functional assessments of skill performance, physical performance and athlete well-being as part of the formative evaluation of training program ○ consultation with other personnel or specialists
Needs of mature aged athletes	<p>[all categories]</p> <ul style="list-style-type: none"> • modification of equipment and rules • social needs
Organisation's Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • technical and personal equipment as outlined by the specific sport • appropriate environmental safety considerations including <ul style="list-style-type: none"> ○ safe playing area ○ modification of equipment and rules ○ first aid programs ○ protective equipment, eg, knee and elbow pads ○ the sport specific <i>Coach's Code of Conduct</i> policy ○ the Australian Sport Commission <i>Coach's Code of Ethics</i> policy
Physical and psychological factors	<p>[all categories]</p> <ul style="list-style-type: none"> • physical factors <ul style="list-style-type: none"> ○ aging processes ○ safety factors ○ recovery techniques • psychological factors <ul style="list-style-type: none"> ○ social characteristics ○ participation versus competitive motivations
Resources	<p>[all categories]</p>

	<ul style="list-style-type: none"> • may include <ul style="list-style-type: none"> ○ human/physical ○ equipment ○ materials ○ health and safety provisions ○ indoor/outdoor facilities
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators • other coach/es • sports scientists • sports medicine providers • agents • other health professionals • other involved/appropriate personnel
Teaching method	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional or coaching approaches adopted by the instructor or coach to convey instructional content to the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole, part, whole approaches ○ shaping approaches ○ modelling approaches ○ command and response approaches ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring approaches ○ feedback and refinement approaches ○ guided discovery approaches (setting problems and allowing participants to discover solutions), and/or ○ experiential or problem solving approaches

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of how to customise teaching methods and coaching programs to meet the needs of mature aged athletes in a coaching setting • Assessment of performance should be over a period of time covering all categories within the Range Statements that are applicable in the learners environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ use preferred teaching methods and coaching styles to meet the needs of mature aged athletes ○ assess readiness of the mature age athlete to acquire and perform the activity specific skill/s ○ conduct drills, activities and games to teach or develop the activity specific skills of mature aged athletes ○ review and adapt the teaching of a skill in response to feedback ○ demonstrate an understanding of the specific needs of mature aged athletes
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRSCGP001A Operate in accord with accepted coaching practices, styles and legal and ethical responsibilities • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRXCAI004B Plan a session or program for participants ○ SRXCAI005B Conduct a sport and recreation session for participants ○ SRXCAI006B Organise a sport and recreation program ○ SRXCAI007B Conduct a sport and recreation program
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant activity/sport specific knowledge in relation to coaching mature aged athletes ○ Relevant modified rules and regulations for coaching mature aged athletes ○ Relevant equipment and safety requirements (this may include Occupational Health and Safety and legislative requirements for some sports) ○ Physical and psychological characteristics of mature aged athletes in order to effectively customise coaching ○ Needs of mature aged athletes in sport in order to effectively customise coaching • Required skills <ul style="list-style-type: none"> ○ Communication skills (written and verbal) in order to understand the differing needs of mature aged athletes in a coaching situation and communicate your desired coaching outcomes in a manner appropriate ○ Ability to interpret and analyse information appropriately to coaching mature aged athletes in order to ensure they receive correct and relevant information ○ Interpersonal skills in order to build rapport with mature

	aged athletes and ensure the desired coaching outcomes are understood and agreed upon
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ genuine athletes, ie, not the peers of the learner, sport/activity equipment and sport/activity facilities in a coaching setting • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to a coaching setting
Context for assessment	<ul style="list-style-type: none"> • Competency must be demonstrated in real/actual coaching/instructional situations with genuine athletes, ie, not the peers of the learner • In cases where the learner does not have the opportunity to cover all relevant categories within the Range Statements in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios • Assessment of this unit of competence will usually include observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, athletes or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	3	3	3	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - That which impacts on mature aged athletes • Communicating ideas and information - Pertaining to the needs of mature aged athletes • Planning and organising activities - Developing drills, games and activities for skills acquisition and development, adapting feedback • Working with teams and others - Involving and coordinating support personnel • Using mathematical ideas and techniques - In designing games and activities • Solving problems - Adjusting and modify programs and activities, resolving conflict situations • Using technology - To assist with participation in activities <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSCGP007A	CUSTOMISE COACHING TO INCLUDE ATHLETES WITH A DISABILITY
CGP	Coaching general principles

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the use of drills, activities and games to teach or develop intermediate skills of athletes with a disability.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of specific considerations that may be relevant to coaching athletes with a disability	1.1 Demonstrate appropriate attitudes towards <i>athletes with a disability</i> 1.2 Demonstrate an understanding of the ' <i>philosophy of inclusion</i> ' with regards to coaching <i>athletes with a disability</i> 1.3 Discuss the variety of perceptions regarding the terms 'integration' and 'inclusion' regarding coaching <i>athletes with a disability</i> 1.4 Use appropriate terminology when coaching <i>athletes with a disability</i> 1.5 Identify benefits and barriers to participation in sport and physical activity and make <i>modifications and adjustments</i> 1.6 Describe and explain <i>factors that may affect the acquisition of skills by athletes with a disability</i> 1.7 Determine the safety and medical considerations that may influence the involvement of athletes with a disability 1.8 Detail the purpose and philosophy of <i>classification systems</i> that have been developed to assist the involvement of <i>athletes with a disability</i> in sport 1.9 Demonstrate an understanding that the 'athletes choice' is essential in determining sport selection and the degree of inclusion 1.10 Ensure <i>organisation's Occupational Health and Safety requirements</i> are in accordance with requirements for the session
2 Assess the athlete's readiness to acquire and perform sport specific skill/s	2.1 Select the sport specific skill/s to be developed through consultation with the athlete and relevant <i>support personnel</i> 2.2 Use <i>sport specific assessment tools</i> in the first instance, to assess athlete's <i>functional ability</i> and readiness to acquire the intermediate skill being taught or developed 2.3 Use the <i>basic principles of biomechanics</i> in instances where the <i>sport specific assessment tools</i> are not applicable to the individual <i>athletes with a disability</i> to assess the movement patterns of the athlete/s in relation to the specific sports skill/s to be developed 2.4 Detail observable body movements for each stage of the skill in priority of importance to the performance of the skill
3 Use preferred teaching methods and coaching/instructional styles to develop the skills of athletes with a disability	3.1 Develop strategies and processes to include people with a disability at an appropriate and individual level 3.2 Plan a coaching session specific to the needs of the <i>athletes with a disability</i> 3.3 Select and implement <i>teaching methods</i> and <i>coaching/instructional styles</i> in the context of specific skills being developed and factors that may affect the acquisition of skills by <i>athletes with a disability</i>

<p>4 Conduct drills, activities and games to teach or develop the intermediate skills of athletes with a disability</p>	<p>4.1 Detail factors that may affect the acquisition of skills by athletes with a disability and trial modifications and/or adjustments to address them</p> <p>4.2 Select teaching methods and coaching/instructional styles to match the athletes readiness, the environment, the available equipment and the skill/s to be developed</p> <p>4.3 Explain the major conditioning considerations a coach must be aware of when training athletes with a disability and their associated coaching implications</p> <p>4.4 Provide feedback to the athlete and other support personnel in accord with the best practice principles of coaching athletes with a disability</p> <p>4.5 Present relevant information, explanations and demonstrations concisely and precisely to teach or develop specific skills in accord with the best practice principles of coaching athletes with a disability and the best practice principles of the sport/activity</p> <p>4.6 Demonstrate questioning and communication skills in accord with the best practice principles of the sport/activity</p> <p>4.7 Allocate sufficient space and resources for the drill, activity and/or game</p> <p>4.8 Use technological aids where appropriate</p> <p>4.9 Emphasise practical involvement while adjusting or refining skills on an individualised basis</p> <p>4.10 Observe athletes to see that the drills, activities and/or games are conducted in accord with the rules, regulations and policies and accepted best practice principles of the sport/activity</p> <p>4.11 Observe athletes skill execution and apply correction techniques to improve skill execution on an individualised and/or group basis</p> <p>4.12 Undertake observation with minimal disruption to the flow of the drill, activity or game</p> <p>4.13 Teach the skill, monitor the teaching method and coaching/instructional style during the instruction and assess following the instruction</p> <p>4.14 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience</p>
<p>5 Review and adapt teaching methods and coaching/instructional styles</p>	<p>5.1 Implement modifications to the teaching methods and coaching/instructional styles in response to results of the monitoring</p> <p>5.2 Evaluate the effectiveness of a session plan and practical coaching session and identify aspects needing further emphasis and/or attention for intervention in future session</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athletes with a disability	[all categories] <ul style="list-style-type: none"> • sensory impairment <ul style="list-style-type: none"> ○ loss of vision ○ deafness or hearing loss ○ could be congenital or acquired • physical disability <ul style="list-style-type: none"> ○ congenital (Note: This is not an exclusive list) such as <ul style="list-style-type: none"> ▪ cerebral palsy ▪ spina bifida ▪ birth deformity ○ acquired (Note: This is not an exclusive list) such as <ul style="list-style-type: none"> ▪ spinal cord injury ▪ amputation ▪ some head injuries which result in reduced locomotor function • intellectual disability • psychological disorder
Basic principles of biomechanics	[all categories] <ul style="list-style-type: none"> • centre of gravity • base of support • levers • fulcrums • major muscle actions
Best practice principles for coaching athletes with a disability	[all categories] <ul style="list-style-type: none"> • the <i>sport specific Coaches Code of Conduct</i> policy • the Australian Sports Commission <i>Coach's Code of Ethics</i> policy • sport and disability specific policies, eg, <i>Anti doping policy</i>, etc • Australian Sports Commission Harassment free sport policy • Disability Discrimination Act (Federal and State legislation) • Practices and approaches such as those outlined in the Australian Sports Commission <i>Coaching Athletes with a Disability: General Principles</i> manual

Best practice principles of the sport/activity	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to <ul style="list-style-type: none"> ○ the sport/activity's Coaches or Instructor's <i>Code of Conduct</i> policy ○ the Australian Sports Commission <i>Coaches Code of Ethics</i> policy ○ national activity organisation regulations and guidelines ○ relevant national, state/territory or local government regulations and guidelines ○ employer organisations policies and procedures ○ the culture of the sport/activity ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Classification systems	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ sport specific ○ medically based • Classification systems that have 'usually' been developed by International Sports Organisations for the Disabled to enable equitable competition among athletes with similar <ul style="list-style-type: none"> ○ functional ability, or ○ medical condition, or • National or local organisations often modify or combine these classification groupings to enable competition at a local level
Coaching/instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor or coach to communicate with the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire (or casual) when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in clients
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • age • pace and tone • preferred method of communication • physical or cultural factors

	<ul style="list-style-type: none"> • sensory or intellectual impairment, eg, vision or hearing loss
Factors that may affect the acquisition of skills by athletes with a disability	<p>[all categories]</p> <ul style="list-style-type: none"> • previous experience and understanding <ul style="list-style-type: none"> ○ athletes with acquired conditions may have developed an understanding of the movements and objectives of the activity prior to their injury or onset of their condition • limited range of movement, which may result in the need to modify or adjust how the athlete performs the skill/s • difficulty with interpreting the concept and/or purpose of the skill in relation to the overall sport • inability to observe demonstrations or hear instructions which may require the adoption of non - traditional teaching methods, in relation to the culture of the sport, that use alternative senses and modalities
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual, and/or ○ tactile • should be an information exchange between athlete and practitioner regarding treatment progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Functional ability	<p>[all categories]</p> <ul style="list-style-type: none"> • the athletes ability to <ul style="list-style-type: none"> ○ see ○ hear ○ move ○ interpret instructions ○ interpret demonstrations
Modifications and adjustments	<p>[all categories]</p> <ul style="list-style-type: none"> • unlimited range of options such as <ul style="list-style-type: none"> ○ modified games and variations including <ul style="list-style-type: none"> ▪ sitting on court, eg, seated volleyball for people with lower limb dysfunction ▪ reduced court dimensions ▪ rule modifications ▪ introduction of zones ▪ scoring modifications ▪ ball with a bell inside is rolled into the opponent's goal area, ie, for athletes with vision impairment

Monitoring	<p>[all categories]</p> <ul style="list-style-type: none"> • is through <ul style="list-style-type: none"> ○ questioning and discussions before, during and after training sessions or competitions ○ observations before, during and after training sessions or competitions ○ cross-referencing with session and/or agreed program objectives ○ ongoing functional assessments of skill performance, physical performance and athlete well-being as part of the formative evaluation of training program ○ consultation with other personnel or specialists
Organisation's Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • technical and personal equipment as outlined by the specific sport • appropriate environmental safety considerations including <ul style="list-style-type: none"> ○ safe playing area ○ disability access ○ protective equipment, eg, knee and elbow pads ○ the sport specific <i>Coaches Code of Conduct</i> policy ○ the Australian Sport Commission <i>Coach's Code of Conduct</i> policy
Philosophy of inclusion	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to people with a disability having access to, and be able to make informed decisions regarding their participation in all aspects of community life, including sport and physical activity
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • may include <ul style="list-style-type: none"> ○ human/physical ○ equipment ○ materials ○ health and safety provisions ○ indoor/outdoor facilities
Rules and regulations	<p>[all categories]</p> <ul style="list-style-type: none"> • current edition of the laws of the sport specific handbook along with the relevant disability specific rules and regulations
Session plan	<p>[all categories]</p> <ul style="list-style-type: none"> • a warm up • skills session • drills or modified game • conditioning component • cool down
Sport specific assessment tools	<p>[all categories]</p>

	<ul style="list-style-type: none"> • sport specific approaches, based on sport specific knowledge, used by coaches to assess the skill and readiness of athletes to progress such as <ul style="list-style-type: none"> ○ observation ○ video analysis ○ sport specific functional tests ○ competitive performances
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators • other coach/es • sports scientists • sports medicine providers • agents • other health professionals • parents/guardians • other involved/appropriate personnel
Teaching methods	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional or coaching approaches adopted by the instructor or coach to convey instructional content to the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole, part, whole approaches ○ shaping approaches ○ modelling approaches ○ command and response approaches ○ directive approaches through specific set tasks ○ reciprocal or peer tutoring approaches ○ feedback and refinement approaches ○ guided discovery approaches (setting problems and allowing athletes to discover solutions), and/or ○ experiential or problem solving approaches

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge and ability to customise coaching to include athletes with a disability in a coaching setting • Assessment of performance should be over a period of time covering all categories within the Range Statements that are applicable in the learners environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ detail specific considerations that may be relevant to coaching athletes with a disability ○ assess the athlete's readiness to acquire and perform sport specific skill/s ○ identify preferred teaching methods and coaching styles to coach an athlete with a disability ○ conduct drills, activities and games to teach or develop the intermediate skills of athletes with a disability ○ review and adapt teaching methods and coaching styles ○ review and adapt coaching methods to improve effectiveness ○ observe an athlete and recognise when and how intervention should take place to improve individual skill performance ○ adapt sport specific knowledge to the specific needs of an athlete with a disability
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRSCGP001A Operate in accord with accepted coaching practices, styles and legal and ethical responsibilities • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRXCAI004B Plan a session or program for participants ○ SRSCGP002A Include special interest groups or people with special needs
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the intermediate skills relevant for the specific sport ○ Knowledge of drills, activities and games to teach the intermediate skills of the specific sport ○ Knowledge of the rules and regulations of the given sport ○ Knowledge of the relevant modified rules and regulations of the sport and disability ○ Knowledge of relevant disability terminology ○ Knowledge of relevant equipment and safety requirements (this may include Occupational Health and Safety and legislative requirements for some sports) ○ Knowledge of the disability of the given athlete ○ Knowledge of assistive devices relevant for the given athlete • Required skills <ul style="list-style-type: none"> ○ Skills used to apply the rules of the given sport, eg, movement, voice, use of technical aids, judgement, reporting, etc ○ Ability to provide demonstrations, ie, self, other athletes as models, brailing, videos, etc ○ Feedback and questioning skills in order to communicate

	<p>effectively with athletes</p> <ul style="list-style-type: none"> ○ Observation skills in order to successfully observe the individual skill performance and make accurate skill analysis ○ The ability to implement effective coaching techniques in relation to the given sport and the specific needs of the athlete with a disability
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ genuine athletes, ie, not the peers of the learner, sport/activity equipment and sport/activity facilities in a coaching setting ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to a coaching setting
Context for assessment	<ul style="list-style-type: none"> ● Competency must be demonstrated in real/actual coaching/instructional situations with genuine athletes, ie, not the peers of the learner ● In cases where the learner does not have the opportunity to cover all relevant categories within the Range Statements in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios ● Assessment of this unit of competence will usually include observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, athletes or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	3	3	3	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Determining an athletes readiness to participate and acquire skills, adapting to feedback, evaluating session plan, responding to feedback • Communicating ideas and information - Related to drills, activities and games, rules and regulations • Planning and organising activities - Developing session plan, drills, activities and games • Working with teams and others - Support personnel, working with athlete and associated personnel • Using mathematical ideas and techniques - Using terms to aid teaching of skills • Solving problems - Related to programs and activities, resolving conflict when it arises • Using technology - Assisting with athletes participation in activities, providing information <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CHILDREN AND YOUNG ADOLESCENTS

Contents

SRFCHA001A Plan and deliver exercise for children and young adolescents..... Error!
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SRFCHA001A	PLAN AND DELIVER EXERCISE FOR CHILDREN AND YOUNG ADOLESCENTS
CHA	Children and young adolescents

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and attitudes necessary to plan and deliver exercise for low risk children and young adolescents, develop a consultative network, the application of fitness assessment protocols to a potential client group, identification and application of the need to refer, and review exercise programs for children and young adolescents.

ELEMENT	PERFORMANCE CRITERIA
1 Develop a consultative network of other fitness trainers, allied health professionals and medical advisers	1.1 Identify and develop a consultative network of appropriate fitness trainers, allied health professionals and medical advisors 1.2 Develop an understanding of the role of the various members in assessing the fitness/health status of children and in conducting exercise programs in negotiation with consultative network when referral to a member is required 1.3 Utilise a member from the consultative network when applicable demonstrating client empathy and clarity of information
2 Apply fitness assessment protocols and procedures to children or young adolescents	2.1 Demonstrate the appropriate pre-screening and assessment procedures required to determine the risk status of children prior to participation in an exercise program in accordance with organisation policies and procedures 2.2 Identify and exclude children from exercise participation where necessary 2.3 Provide advice for excluded children and their parent/guardian regarding screening and fitness assessment 2.4 Describe the referral process for children and their parent/guardian who have been excluded from participation in an exercise program
3 Develop a plan for an exercise class for children or young adolescents	3.1 Establish client needs 3.2 Develop and document lesson plans for a variety of exercise programs for children and young adolescents
4 Instruct an exercise class for children and young adolescents	4.1 Outline the purpose of the exercise class to the participants including the benefits of exercise for children and young adolescents 4.2 Communicate the benefits of nutrition and physical activity in children to the client group 4.3 Implement appropriate instructional skills for the client group 4.4 Select appropriate equipment for safe use 4.5 Deliver exercise classes for children and young adolescents suitable for the needs and goals of the client group 4.6 Demonstrate how modifications to the exercises can incorporate the physical, social and psychological changes that occur during the stages of growth and development in children 4.7 Demonstrate motivational techniques providing positive and effective feedback to participants
5 Review a range of exercise programs for children and young adolescents	5.1 Observe and critically evaluate a variety of exercise programs for children and young adolescents 5.2 Produce a written evaluation assessing observations

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Benefits of exercise for children and adolescents	[all categories] <ul style="list-style-type: none"> • social and psychological benefits <ul style="list-style-type: none"> ○ changed perception of risk ○ improved self-esteem and self confidence ○ enhanced social and recreational activities ○ increase in social networks and support • health benefits <ul style="list-style-type: none"> ○ maintenance of <ul style="list-style-type: none"> ▪ functional capacity ▪ bone development and peak bone mass ▪ postural strength ▪ immune system ○ prevention of degenerative diseases ○ reduction/prevention injury
Consultative network	[all categories] <ul style="list-style-type: none"> • limitations of a fitness instructor of children and adolescents such as <ul style="list-style-type: none"> ○ child protection legislation ○ professional responsibilities ○ industry requirements ○ privacy of information legislation ○ insurance • network includes <ul style="list-style-type: none"> ○ other trained fitness instructors ○ allied health professionals ○ exercise physiologist ○ dietitians ○ counsellors ○ psychologists ○ physiotherapists ○ other musculoskeletal therapists ○ medical practitioners ○ general practice doctors ○ medical specialists ○ paediatricians
Establish client needs	[all categories] <ul style="list-style-type: none"> • consultation with <ul style="list-style-type: none"> ○ parents/guardians/children ○ allied health professionals ○ medical advisers • baseline fitness assessment protocols and procedures for individuals and groups • creating a positive and encouraging testing environment

	<ul style="list-style-type: none"> ○ creating a child–friendly testing environment ○ developing and modifying fitness tests for children ○ communicating with children and parents ○ word replacement ○ goal setting for children and parents ○ age variations to be considered ● word replacement, ie, appropriate wording to replace <ul style="list-style-type: none"> ○ test ○ cardiovascular ○ fat ○ obese ○ mentally disabled ○ normal child ○ diet ○ lifting weights ● constructing baseline assessment instruments <ul style="list-style-type: none"> ○ cardiovascular assessment techniques: one–to–one and group assessment ○ flexibility assessment techniques: one–to–one and group assessment ○ skill acquisition techniques: one–to–one and group assessment ○ strength assessment techniques: one–to–one and group assessment ○ safety considerations when conducting assessments <ul style="list-style-type: none"> ▪ treadmill safety ▪ cycle ergometer safety ▪ rowing machine safety ▪ resistance equipment safety ▪ training area safety ▪ safety when training children outdoors ○ duty of care ○ equipment and instruments commonly used for assessment ○ when to terminate an exercise test ○ using assessment results and goal setting to prescribe programs ● reporting results <ul style="list-style-type: none"> ○ preparation and report writing
Exercise classes for children and adolescents	<p>[all categories]</p> <ul style="list-style-type: none"> ● exercise selection <ul style="list-style-type: none"> ○ appropriate for needs of children and adolescents ○ accommodates limitations of children and adolescents ○ purpose of the exercise explained to children and adolescents ● required modifications <ul style="list-style-type: none"> ○ explained to clients (including age variations) ○ correct technique ○ incorporated when instructing ● sequence of exercises ● general training principles ● exercise intensity and duration ● safe and appropriate use of equipment ● program progression ● music (if used) <ul style="list-style-type: none"> ○ appropriate selection ○ copyright issues ○ motivating ○ ‘singalong’ ● age variation

	<ul style="list-style-type: none"> ○ class structures for different ages ○ coordination and motor development ○ communication and instructional skill difficulties ○ behavioural change and social needs ○ exercise requirements for different ages ● major factors associated with injury risk in children and adolescents <ul style="list-style-type: none"> ○ biomechanics/exercise technique ○ physical/mental preparation ○ fatigue/recovery ○ intrinsic factors of activities ○ benefits of warm-up and cool-down for children ● child at risk of injury <ul style="list-style-type: none"> ○ poor biomechanics ○ inadequate skill ○ inadequate physical preparation ○ overtraining ○ unrealistic expectations/pushy parents ○ fatigue/overuse
Exercise programs	<p>[all categories]</p> <ul style="list-style-type: none"> ● cardio-vascular exercise for age variations ● water based exercise ● resistance training ● flexibility
Instructional skills	<p>[all categories]</p> <ul style="list-style-type: none"> ● class structures <ul style="list-style-type: none"> ○ written class formats ○ sequence of exercises ○ importance of transitions between exercises or games ○ use of equipment ○ class structure variations ○ safety perimeters within the class structures ○ general training principles and progression ● psychological benefits <ul style="list-style-type: none"> ○ changing the negative perception of exercise in both children and their parents ○ exercise options available to families within the community ○ improving self-esteem and confidence through exercise ● performance <ul style="list-style-type: none"> ○ group activities ○ fun through movement ○ creating atmosphere ○ the art of performance ○ use of themes ○ presenting and utilising instructor personality ○ appearance ● communication skills <ul style="list-style-type: none"> ○ group tasks ○ class control ○ class organisation ○ verbal and visual instructions ○ kids communication ○ safety and education ○ body language ○ technique correction

	<ul style="list-style-type: none"> ○ vocal and word quality ○ motivation techniques ○ strategies for communicating with clients that have special behavioural conditions ○ professional techniques when dealing with parents, teachers, clients and centre managers etc
Lesson plans	<p>[all categories]</p> <ul style="list-style-type: none"> ● how client needs and goals will be identified ● how clients will be screened and assessed as suitable for participation ● an outline of the components of the class ● exercise selection <ul style="list-style-type: none"> ○ describe the purpose of the exercise ○ order/sequence of exercises ○ duration/intensity/volume ○ safety considerations ○ organisation ideas ○ instructional skills ○ equipment to be used ○ suggested progression within an exercise program ● how exercises will be modified to accommodate the physical changes and health conditions associated with developmental age ● how exercises will be modified to accommodate the social and psychological changes that occur with children ● selection of appropriate music (if used)
Nutrition and physical activity in children	<p>[all categories]</p> <ul style="list-style-type: none"> ● general dietary requirements of children <ul style="list-style-type: none"> ○ dietary patterns in children and adolescents ○ 2 – 11 years ○ 12 – 18 years ○ basis of teenage food choices ○ dietary guidelines for children ○ Australian guide to healthy eating ○ analysis of nutrient intake of children ○ guide to daily food needs of children ○ extra nutrient needs of the active child ● food recommendations <ul style="list-style-type: none"> ○ recommendations regarding fat consumption in children ○ recommendations regarding carbohydrate, fluid and protein consumption in children ○ specialised dietary interventions for children ● overweight and obesity <ul style="list-style-type: none"> ○ assessing overweight and obesity in children ○ common health problems in overweight children ○ supporting the overweight child ○ food and exercise choices and obesity ● eating disorder <ul style="list-style-type: none"> ○ signs of an eating disorder ○ the female athlete triad ● hypercholesterolaemia in children: <ul style="list-style-type: none"> ○ cholesterol as a risk factor in childhood and adolescents ○ cut-off levels of total cholesterol for children and adolescents ○ controlling elevated levels of cholesterol in children and adolescents ● diabetes

	<ul style="list-style-type: none"> ○ type 1 diabetes ○ type 2 diabetes ○ diet, exercise and diabetes in children and adolescents ● food intolerance/allergies <ul style="list-style-type: none"> ○ clinical features of food allergy versus intolerance ○ food planning for children with food tolerance/allergy ● referral situations <ul style="list-style-type: none"> ○ conditions requiring specialist dietary advice ○ gastrointestinal disease ○ eating disorders ○ cancer ○ epilepsy ○ liver or renal disease ○ major surgery ○ children on medication
Pre–screening and assessment procedures	<p>[all categories]</p> <ul style="list-style-type: none"> ● developing pre–screen questionnaires for children and parents ● constructing pre exercise questionnaires ● ethical standards involved in the assessment of children ● recognising risk factors in children ● privacy issues associated with information gathered
Stages of growth and development in children	<p>[all categories]</p> <ul style="list-style-type: none"> ● changes in child growth and development <ul style="list-style-type: none"> ○ growth periods during childhood and adolescents ○ markers of growth in children ○ morphological/somatic growth in children ○ sexual maturation in children ○ skeletal maturation ○ assessing stages of growth and development — height and Peak Height Velocity (PHV), weight, body mass index, tanner classification, assessment of bone growth ● effect of exercise on growth and development <ul style="list-style-type: none"> ○ body composition ○ skeletal development ○ overuse and musculoskeletal injuries ○ female athlete triad ● physiological characteristics of the exercising child <ul style="list-style-type: none"> ○ cardiovascular response — volume of oxygen uptake, maximal heart rate, resting heart, heart rate response during exercise; <ul style="list-style-type: none"> ▪ cardiac output ▪ haemoglobin capacity ▪ anaerobic capacity ○ ventilation — breathing frequency, minute ventilation and tidal volume ○ energy cost of exercise ○ thermoregulation ○ metabolic properties ○ muscle mass and strength improvement ○ development of peak bone mass
Written evaluation	<p>[all categories]</p> <ul style="list-style-type: none"> ● description of the client group

	<ul style="list-style-type: none">• description of the class type• evaluation of the screening and assessment process• evaluation of the components of the exercise class/program• evaluation of the suitability of the exercises prescribed to the client group• critical comment on the instructional techniques of the fitness trainer, especially with regard to appropriate and effective communication with the client group• evaluation of the description of any modifications that may have been made to exercises or equipment• evaluation of the success of motivational techniques employed• appropriateness of music (if used)• tabling client feedback• recommendations for possible areas of improvement
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ develop a consultative network consisting of other fitness trainers, allied health professionals and medical advisers ○ undertake appropriate screening assessment in accordance with organisational policies and procedures, excluding children from exercise participation where necessary and providing a referral ○ develop and document a plan for an exercise class for children or young adolescents ○ instruct an exercise class for children and young adolescents ○ review and evaluate exercise programs for children and young adolescents
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Recommended dietary guidelines ○ The fitness industry ○ The allied health sector ○ Basic principles of biomechanics and exercise science ○ Muscle groups and their actions ○ Contra-indications and precautions for exercises • Required skills

	<ul style="list-style-type: none"> ○ Effective communication skills, both oral and written
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of sport and recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	3	3	2	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information – To develop a consultative network • Communicating ideas and information – To instruct class and develop a consultative network • Planning and organising activities – To plan an exercise class for children and young adolescents • Working with teams and others – To liaise with fitness trainers, allied health professionals and medical doctors • Using mathematical ideas and techniques – To analyse age and the stages of growth and development in children • Solving problems – To recognise expertise beyond the Trainer's knowledge and refer client • Using technology – To develop and document reports <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

COMMUNITY RECREATION DEVELOPMENT

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SRCCRD003B	PROMOTE ACCESS, EQUITY AND DIVERSITY IN COMMUNITY RECREATION
CRD	Community recreation development

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to apply the principles of equity and access in a community recreation work environment.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the issues of people from specific communities	1.1 Identify the details of individual and group issues of the people from specific communities through appropriate research and consultation 1.2 Identify the values and structures of the specific community as they impact on individuals and groups
2 Identify particular requirements of people from specific communities in a recreation context	2.1 Identify historical, cultural or physical factors which affect the access of people from specific communities to recreation 2.2 Identify historical, cultural or physical factors which affect the participation of people from specific communities to recreation
3 Respond to particular requirements of people from specific communities in a recreation context	3.1 Undertake all work which reflects understanding and application of the principles of social justice, advocacy, human rights, anti discrimination and confidentiality, practices to address cross cultural issues, relevant equitable access principles and practices, including occupational health, safety and welfare and equal employment opportunity and practices which protect confidentiality 3.2 Use appropriate communication skills to the requirements of the individual client/group 3.3 Use, where appropriate, strategies or activities to comply with the requirements of people from specific communities where appropriate 3.4 Monitor the specific safety and medical considerations of the individual client/group 3.5 Make modifications to the recreation activity or environment to meet the requirements of people from specific communities

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communication	must take into account <ul style="list-style-type: none"> • age • preferred method of communication • physical or cultural factors • sensory or intellectual impairment, eg, vision or hearing loss
Historical, cultural or physical factors	[all categories] <ul style="list-style-type: none"> • cultural values • family structures <ul style="list-style-type: none"> ○ extended family responsibilities ○ family ideals • religious beliefs • place of recreation within <ul style="list-style-type: none"> ○ culturally and linguistically diverse communities ○ Australian community • impact of disability on participation • communication strategies • level of literacy and numeracy • transport • income • confidence • support services
Specific communities	may relate to <ul style="list-style-type: none"> • cultural and linguistic diversity • low income • gender • sexuality • age • general health • alcohol and other drugs abuse • disability, including mental illness • location, eg, urban, rural and remote • income • family systems • religion

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ identify preferred communication methods of individuals or groups from specific communities ○ identify historical, cultural or physical factors which affect the access and participation of people from specific communities ○ determine and implement strategies to overcome cultural or physical factors which affect the access and participation of people from specific communities ○ work effectively with a specific group, validated by community acceptance and the impact of work undertaken ○ apply all relevant anti-discrimination and equal opportunity legislation
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRCCRD004B Facilitate community development through recreation initiatives
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anti-discrimination and Equal Opportunity legislation ○ Relevant modified equipment and activities ○ Social, political, cultural, historical issues that affect or are relevant to specific communities and groups ○ Depending on the work role, specific knowledge of particular groups or issues may be required, including specific requirements of <ul style="list-style-type: none"> ▪ people with a disability, including people with a mental illness ▪ Indigenous people ▪ people from diverse cultural and linguistic backgrounds ▪ alcohol and other drugs ▪ rural/remote environment ▪ gender ▪ age ▪ low income ▪ religion ▪ sexuality ▪ family • Required skills <ul style="list-style-type: none"> ○ Written and verbal communication skills in order to effectively communicate with people from specific communities ○ Ability to analyse and interpret information appropriate to determine strategies to overcome historical, cultural or physical factors which affect the access and participation of people from specific communities

	<ul style="list-style-type: none"> ○ Interpersonal skills in order to build rapport with people from specific communities
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ genuine clients, ie, not the peers of the learner, and facilities in a community recreation setting • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRD005B	APPLY THE PRINCIPLES AND ISSUES OF VOLUNTEERING
CRD	Community recreation development

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to respond effectively to volunteers in a recreation organisation or environment.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the issues in relation to volunteers	1.1 Identify the details of individual and group issues in relation to volunteers through appropriate research and consultation 1.2 Identify societal trends that impact on volunteers and volunteering
2 Identify particular requirements of volunteers in a recreation organisation context	2.1 Identify reasons why organisations involve volunteers in their operations 2.2 Identify and document appropriate roles for volunteers within an organisation or project 2.3 Identify factors which affect the participation of volunteers in recreation 2.4 Determine motivations of volunteers and for volunteering
3 Respond to particular requirements of volunteers in a recreation organisation context	3.1 Translate organisation policy into procedures that address factors affecting participation and meet both organisation needs and volunteer motivations 3.2 Identify lines of communication and information sharing 3.3 Source suitable working conditions and resources to meet volunteer job role requirements 3.4 Utilise record keeping systems for storage of volunteer records

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors which affect participation	<p>[all categories]</p> <ul style="list-style-type: none"> • cultural values • extended family responsibilities • religious belief • ability to meet organisation needs of volunteer role • disability • level of literacy and numeracy • transport • confidence • motivation for volunteering • time available
Motivation of volunteers	<p>[all categories]</p> <ul style="list-style-type: none"> • socialisation • enjoyment • loyalty • desire to do something different • support of family members and/or friends • meet new people • break from routine • sense of involvement • learn new skills • increased self esteem • pathway to employment • travel • acknowledgment • status
Role for volunteers	<p>[all categories]</p> <ul style="list-style-type: none"> • coach • fundraiser • instructor • judge • umpire • referee • administrator • organiser • leader • catering • team support • management of events • projects • finance

	<ul style="list-style-type: none">• administration of facilities• administration of equipment/uniforms• assist with marketing/promotions• technical assistance• maintenance• run events• supervision of children• activity leaders• transport• support person• first aid• medical staff
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ ensure the learner's work practices and procedures address the requirements of the organisation's volunteers in accordance with organisation policy ○ distinguish between appropriate and inappropriate tasks for volunteers within an organisation ○ understand the motivational patterns of volunteers and address factors that may limit their contribution to the organisation
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anti-discrimination and Equal Opportunity legislation ○ Social, political, cultural, historical issues that affect volunteering ○ Contribution made by volunteers to the sport and recreation industry ○ Motivational patterns of volunteers • Required skills <ul style="list-style-type: none"> ○ Written and verbal communication skills in order to effectively communicate with volunteers ○ Ability to analyse and interpret information appropriate to determine strategies to overcome factors which affect the participation of volunteers ○ Interpersonal skills in order to build rapport with volunteers
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ genuine volunteers, ie, not the peers of the learner, in a community recreation setting • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for

	assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
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Consistency in performance	<ul style="list-style-type: none">• Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRD007B	DEVELOP RECREATION PROGRAMS
CRD	Community recreation development

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge necessary for programming of recreation activities in a variety of community recreation settings.

ELEMENT	PERFORMANCE CRITERIA
1 Determine program parameters	1.1 Undertake research to establish client needs and identify target groups 1.2 Analyse organisation aims and objectives with regards to programming implications 1.3 Determine the composition and nature of the programs which will address the identified needs of both clients and the organisation 1.4 Undertake appropriate work to ascertain support, the capacity for a coordinated effort and factors which will affect provision of programs 1.5 Undertake research to identify key people, issues to be addressed, possible strategies and options for action
2 Develop a recreation program plan	2.1 Establish objectives and evaluation procedures 2.2 Undertake appropriate planning and liaison including developing draft plans in consultation with relevant people 2.3 Establish work plans and administration procedures 2.4 Identify resources necessary for the conduct of programs , determine a promotional plan/s and establish a budget 2.5 Determine recreation program content and design to meet industry standards and necessary approvals gained 2.6 Undertake risk audit 2.7 Take into account the cultural, linguistic and special needs of the target group/s
3 Implement the programs	3.1 Obtain and allocate necessary resources required for the conduct of recreation programs 3.2 Implement work plan, administration procedures and promotional strategy 3.3 Monitor, review and modify the recreation program or cancelled if necessary to meet new circumstances 3.4 Conduct the recreation program safely to meet stated outcomes and objectives 3.5 Follow occupational health and safety and the organisation's emergency procedures and industry standards
4 Evaluate the program	4.1 Actively seek feedback on the program 4.2 Assess the recreation program against its planned goals and objectives in accordance with organisational policies and procedures 4.3 Discuss outcomes of the evaluation of the recreation program with relevant people to determine future directions

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Administration procedures	[all categories] <ul style="list-style-type: none"> • registration • receipting • ticketing • confirmation of bookings • transport arrangements
Budget	[all categories] <ul style="list-style-type: none"> • setting fees • costing expenditure • determining income • allocating funds
Feedback	may be qualitative and quantitative <ul style="list-style-type: none"> • evaluation forms • asking people • numbers • surveys • complaints • reaction • feedback from staff • financial information
New circumstances	[all categories] <ul style="list-style-type: none"> • numbers • weather • facility booking falling through • equipment failure • people not arriving, ie, clients or staff • emergencies
Programs	incorporate a coordinated range of recreation, sport and cultural participation activities and events <ul style="list-style-type: none"> • facility based • educational • holiday/vacation care • groups with specific needs • resort recreation

	<ul style="list-style-type: none"> • organisation based
Relevant people	<p>may include</p> <ul style="list-style-type: none"> • residents within a community • businesses within or related to a community • representatives from advocacy and special interest groups • decision makers and community leaders • individuals, groups and communities affected by issues or programs • owners or managers of resources required • supervisors • representatives from grants/funding agencies • representatives from government and non-government organisations • representatives from peak bodies • colleagues and collaborators
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • staff • equipment • venues/facilities • paperwork • transport and logistical arrangements • funds
Target group	<p>[all categories]</p> <ul style="list-style-type: none"> • diverse cultural and linguistic backgrounds • age specific • clients with specific requirements • Aboriginal and Torres Strait Islander peoples • regular clients • new clients • gender specific
Work environment	<p>varies with respect to</p> <ul style="list-style-type: none"> • size of the organisation • location • organisational structure • nature of the program/s provided • availability of resources and technology
Work plan	<p>[all categories]</p> <ul style="list-style-type: none"> • timeframes • schedule of activities/events • promotional plan/s • roles and responsibilities of staff • allocation of resources • permits, approvals and/or permission

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ determine the range of activities and events that the organisation could provide in response to client needs ○ collaborate and consult with relevant people ○ plan programs to meet identified client and organisation needs ○ implement programs ○ monitor, review and evaluate the program
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRCCRD003B Promote access, equity and diversity in community recreation • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Organisation's objectives, policies and procedures ○ Sources of information on client needs and expectations in order to effectively plan a recreation program for clients ○ Resource availability within organisation for recreation programs ○ Resources and support within the community for recreation programs ○ Resource allocation policies within the organisation ○ Insurance policy/arrangements ○ Occupational health and safety legislation relevant to the provision of recreation services ○ Organisation emergency policy and procedures • Required skills <ul style="list-style-type: none"> ○ Basic research skills to identify relevant community sources of information and resources ○ Organisational skills to coordinate resources necessary for recreation initiative ○ Communication skills in order to determine client needs ○ Planning and coordination requirements of a range of activities and events ○ Monitoring, reviewing and modifying programs
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a work environment in order to identify the need for, and plan and provide, a recreational program • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must

	<ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRD008B	WORK EFFECTIVELY WITH GOVERNMENT AND OTHER KEY STAKEHOLDERS
CRD	Community recreation development

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge to develop an effective relationship with key personnel in government and other key agencies to assist with community recreation service delivery.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the role and function of government and other key stakeholders	1.1 Identify the roles and functions of the various levels of government 1.2 Identify key stakeholders which impact on the organisation 1.3 Identify the roles and functions of the various stakeholders 1.4 Identify the structures of key stakeholders relevant to community recreation
2 Identify the key people or positions within government and other key stakeholders	2.1 Identify the key people or positions within the various relevant government departments and agencies 2.2 Identify the key people or positions within the key stakeholders 2.3 Identify decision making processes within key stakeholders and relevant government departments and agencies 2.4 Use informal and/or formal research to obtain knowledge of the information and/or resources available from key people 2.5 Maintain records to enable ease of access and retrieval of information
3 Establish a working relationship with identified key people	3.1 Use effective communication styles to develop trust, confidence and rapport 3.2 Access information and/or resources from key people 3.3 Base interactions with key people on an understanding of bureaucratic and/or organisation structures and dynamics

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Government	includes <ul style="list-style-type: none"> • local • state • federal
Informal and/or formal research	may include <ul style="list-style-type: none"> • informal discussions with colleagues • formal study • reading of brochures/promotional material • trade and general media • product updates and launches • promotional seminars • direct contact with other organisations or people • familiarisations • accessing the internet • attending industry workshops/functions • networking
Information and Resources	may include <ul style="list-style-type: none"> • facilities • equipment • grants/funding • personnel • promotion • nature and extent of services • nature of relationships between departments/agencies • roles and functions of key stakeholders' bodies/personnel
Key stakeholders	may include <ul style="list-style-type: none"> • funding agencies • community organisations • peak bodies • boards of management • enterprises • industry associations • contractors

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ provide an overview of relevant local, state and federal government organisations and agencies ○ provide an overview of relevant key stakeholder roles and decision making structures ○ identify relevant key people/positions as potential sources of resources and information ○ apply researched information and effective communication styles to develop a relationship with relevant key people to access resources and information to meet client/organisation needs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Role and function of government at all levels ○ Role and function of key stakeholders ○ Sources of information on stakeholders and government ○ History of role of government ○ Changing role of government ○ Bureaucratic structures and dynamics • Required skills <ul style="list-style-type: none"> ○ Basic research skills to identify relevant key people as sources of information and resources ○ Analytical skills to determine decision making processes and key people/positions ○ Communication skills in relation to listening, questioning and non-verbal communication
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ stakeholders • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework

	(AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	–	2	–	1	–
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

COMMUNITY RECREATION OPERATIONS

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SRCCRO007B	OPERATE IN ACCORDANCE WITH ACCEPTED INSTRUCTIONAL PRACTICES, STYLES AND LEGAL AND ETHICAL RESPONSIBILITIES
CRO	Community recreation operations

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the application of instructional practices and styles necessary to operate in accord with the legal and ethical responsibility of an instructor. Personnel undertaking this unit would be instructing clients in a community recreation setting. This unit is based on SRSCGP001A but altered to suit the community recreation context.

ELEMENT	PERFORMANCE CRITERIA
1 Access ongoing professional development	1.1 Research and document further education/training opportunities that will enhance the learner's professional development 1.2 Access professional development activities to enhance instruction skills and knowledge 1.3 Demonstrate ability to access ongoing instructor education resources and information
2 Operate in accordance with the legal responsibilities of a instructor	2.1 Demonstrate and explain the legal responsibilities of an instructor 2.2 Apply the legal responsibilities of an instructor to the specific instructional situation, equipment , environment and client group 2.3 Describe and explain the principles of risk management as they relate to an instructor 2.4 Develop and implement risk management plan for the specific instructional situation, environment and client group 2.5 Describe and explain the principles of natural justice
3 Operate in accordance with the ethical responsibilities of a instructor	3.1 Determine the ethical responsibilities of an instructor in relation to rules, policies and regulations of their activity or organisation 3.2 Implement the ethical responsibilities of an instructor in relation to rules, policies and regulations of the activity or organisation 3.3 Implement the principles of client confidentiality 3.4 Implement best practice principles of the activity or organisation
4 Operate in accordance with accepted instructional practices	4.1 Develop session plans prior to the conduct of each session 4.2 Identify common instructional styles 4.3 Explain and justify appropriateness and application of each of these instructional styles in relation to a particular activity, situation and/or client group 4.4 Comply the adopted instructional styles with best practice principles of the activity or organisation 4.5 Explain and demonstrate the responsibilities of a role model
5 Work with colleagues and support personnel	5.1 Conduct communication in a way that engenders respect between all parties 5.2 Identify and pursue strategies for advancing an activity or organisation through working in a collaborative manner with colleagues and other support personnel 5.3 Demonstrate clear non-judgmental communication techniques

6 Develop a philosophy of instruction	<p>6.1 Determine the appropriateness of activities in relation to each client's stage of development</p> <p>6.2 Articulate and justify personal philosophies relating to winning/losing and holistic development of the <i>client</i> in relation to particular situations and <i>client</i> groups</p> <p>6.3 Identify the role of the instructor in regard to required activity specific skills and knowledge according to accepted practices and the culture of the activity</p>
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Activity specific skills	refers to skills specific to the activity which may include <ul style="list-style-type: none"> • physical/motor skills • tactical/mental skills • a combination of physical and tactical, forming a sequence of skills
Best practice principles of the activity or organisation	refers to <ul style="list-style-type: none"> • the activity's coaches or instructors <i>code of conduct</i> policy • the Australian Coaching Council's <i>coaches code of conduct</i> policy • national activity organisation regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • employer organisation's policies and procedures • the culture of the activity • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Client confidentiality	[all categories] <ul style="list-style-type: none"> • information regarding client status and/or wellbeing should not be passed on to other individuals without the permission of the client • refer to best practice principles of the activity or organisation
Clients	[all categories] <ul style="list-style-type: none"> • experienced • inexperienced • adults • children • infants • school or youth groups, tourists, club members and general public • variety of cultural groups • clients with specific requirements
Equipment	can include <ul style="list-style-type: none"> • fixed pieces of apparatus for use by all clients • individual equipment required by each client in order to undertake the activity, eg, kickboard • personal protective or non-protective clothing or attire • technical • audio-visual

	<ul style="list-style-type: none"> • safety
Ethical responsibilities	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to behavioural requirements set down by various peak bodies which govern the way in which an instructor interacts with their client/s and conducts an instructional session • incorporates <ul style="list-style-type: none"> ○ harassment ○ sexual harassment ○ sexual abuse ○ physical abuse ○ client/instructor relationships ○ cheating ○ inclusive/non-discriminatory practices ○ bullying ○ child protection
Information	<p>includes</p> <ul style="list-style-type: none"> ○ expectations and aspirations of clients ○ numbers, ages and gender of clients ○ previous experience and developmental stage of clients, their background, special requirements, available time, expectations or organisations ○ activity national organisation codes and rules as they apply to the range of clients ○ staff and financial resources ○ cultural and political influences ○ involvement and interest of parents ○ details on time ○ necessary equipment, clothing and footwear ○ materials and provision ○ precautions and other health and safety information <p>is collected through</p> <ul style="list-style-type: none"> ○ activity specific performance tests ○ physiological procedures profiling protocols ○ psychological profiling procedures and protocols ○ discussions ○ observation <p>sources include</p> <ul style="list-style-type: none"> ○ clients ○ parents ○ organisations ○ recorded information <p>is imparted</p> <ul style="list-style-type: none"> ○ through demonstrations and explanations ○ through tactile input ○ through self-exploration activity/ies, tasks or projects ○ in writing

	<ul style="list-style-type: none"> ○ verbally
Instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the client • depending on the situation the instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding not-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire, or casual, when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in clients
Legal responsibilities	<p>refers to issues such as</p> <ul style="list-style-type: none"> • duty of care • negligence • waivers and exclusion clauses • insurance • natural justice • contract negotiations • restraint of trade • operating in accord with accepted occupational health and safety standards • complying with local, state and national government legislation and/or requirements
Natural justice	<p>[all categories]</p> <ul style="list-style-type: none"> • right of appeal • right to an explanation, particularly in relation to <ul style="list-style-type: none"> ○ selections ○ suspensions • notice of charges • right to be heard • act without bias

Philosophy of instruction	<p>refers to</p> <ul style="list-style-type: none"> • a set of personal beliefs and practices associated with instruction in relation to issues where there is no clear cut rules, policies or regulations
Principles of risk management	<p>in relation to instruction, refers to issues such as</p> <ul style="list-style-type: none"> • risk identification <ul style="list-style-type: none"> ○ relevant activity specific safety requirements, including safety equipment ○ injury prevention ○ first aid requirements, including cardio–pulmonary resuscitation and life saving skills required for aquatic activities ○ hygiene requirements ○ accident records and reporting ○ medical conditions ○ safety requirements for spectators and competition • risk assessment <ul style="list-style-type: none"> ○ supervision requirements/ratios ○ medical clearances ○ manageable risks ○ emergency plan
Resources	<p>include</p> <ul style="list-style-type: none"> • human • physical • equipment • materials • health and safety provisions • indoor facilities • outdoor facilities • provisions for sessions • supporting material • grants and/or sponsorship
Responsibilities of a role model	<p>[all categories]</p> <ul style="list-style-type: none"> • clients • spectators • parents • administrators • colleagues • other support personnel
Risk management plan	<p>refers to a plan of action to reduce the risks associated with the particular activity and assist the instructor to reduce the chance of breaching their duty of care; it includes</p> <ul style="list-style-type: none"> • risk identification • risk assessment • design of risk elimination or reduction plan • implementation of the plan

	<ul style="list-style-type: none"> • constant evaluation and modification of the plan
Rules, policies and regulations	<p>refers to</p> <ul style="list-style-type: none"> • current edition of the relevant national activity organisation's rules • national activity organisation's rules, policies and procedures regarding competent and ethical instructing, dress requirements and protocols, health and safety and other values underpinning the activity • current edition of the relevant recreation organisation's rules
Session plans	<p>should include</p> <ul style="list-style-type: none"> • aim of the session • sequence of tasks and activities designed to meet the session aim • tasks and activities to match client needs and abilities • resources required to conduct the session
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators/managers • other coaches or instructors • assistants • attendants • other health professionals • parents/guardians • other involved/appropriate personnel

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ access ongoing professional development ○ operate in accordance with the legal responsibilities of an instructor ○ operate in accordance with the ethical responsibilities of an instructor ○ work with colleagues and other support personnel ○ identify, explain and justify common styles of instruction in relation to particular situations and client groups ○ determine the appropriateness of activities in relation to each client's stage of development ○ develop session plans that select and sequence tasks or activities to meet both the session aim and the client's needs ○ articulate and justify personal philosophies relating to winning/losing and holistic development of the client in relation to particular situations and client groups ○ implement the best practice principles of the activity
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after or in conjunction with the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant activity specific knowledge to instruct the skills being included in the session or program ○ Fundamental principles of group management ○ Fundamental principles of growth and development ○ Learning styles ○ Principles of risk management ○ Principles of lesson plans ○ Instructional styles and responsibilities ○ Legislation relevant to instructors ○ Organisation policies and procedures related to instructors • Required skills <ul style="list-style-type: none"> ○ Ability to communicate effectively in order to pass on appropriate information to clients in regard to responsibilities as an instructor ○ Ability to convey and interpret information in order to effectively receive information and pass this on to clients in a manner that is correct and applicable ○ Adequate numeracy and literacy skills in order to effectively and efficiently receive and convey information relevant to clients ○ Planning skills to develop session plans that meet organisation/instructor aims and match client needs and abilities ○ Ability to conduct basic risk assessment and implement a risk

	<p>management plan for the specific instructional situation/environment</p> <ul style="list-style-type: none"> ○ Supervision and group control skills to manage a group of clients in an instructional situation/environment ○ Ability to organise resources and equipment appropriate to the session and/or activity
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ genuine clients, ie, not the peers of the learner, recreation equipment and recreation facilities in an instructional setting • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	3	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRO009B	CONDUCT A RECREATION PROGRAM FOR OLDER PERSONS
CRO	Community recreation operations

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge necessary to conduct a recreation program consisting of a range of suitable physical recreation activities for older persons.

ELEMENT	PERFORMANCE CRITERIA
1 Prepare for a recreation program	1.1 Assess older person's <i>status</i> and condition as suitable for participation in the <i>recreation program</i> prior to commencement 1.2 Determine the <i>range of activities</i> to be utilised in the recreation <i>program</i> in conjunction with clients 1.3 Identify and source <i>resources</i> and <i>work environment</i> required for the recreation <i>program</i> prior to commencement
2 Establish effective communication	2.1 Communicate instructions in a manner suitable to the older person and are clear, accurate and contain all relevant information 2.2 Encourage <i>older persons</i> to seek clarification of information when necessary 2.3 Communicate <i>feedback</i> on activity technique and correct usage of equipment to the <i>older persons</i> at an appropriate time
3 Assist the older person to meet physical welfare and social needs through a recreation program	3.1 Foster older person's self esteem, <i>emotional wellbeing</i> and confidence 3.2 Modify the recreation <i>program</i> , where necessary, based on an assessment of the conditions, older person's <i>status</i> , facilities and equipment 3.3 Conduct activities within the recreation <i>program</i> at a level and pace to suit the capabilities of individuals and/or the group 3.4 Select activities within the recreation <i>program</i> to take into account the structural and functional alterations to the human body as a result of the ageing process 3.5 Select activities within the recreation <i>program</i> are selected to take into account the social interaction needs of <i>older persons</i> 3.6 Provide assistance with the provision and use of aids as appropriate 3.7 Brief <i>older persons</i> on safe and responsible behaviour and make aware of the rules, codes, organisational/health and safety requirements, restrictions and the need to minimise damage to equipment and the environment 3.8 'Warm-up' <i>older persons</i> through the use of safe and appropriate exercises relevant to the proposed activity or <i>session</i> 3.9 Utilise appropriate techniques to motivate clients to maintain an appropriate work rate 3.10 Provide advice on general recreation issues concerning older persons in response to enquiries from participants 3.11 Allocate sufficient time for 'cooling down' and discussions with <i>older persons</i> 3.12 Collect and check issued equipment for damage and wear 3.13 Give <i>older persons</i> are given the opportunity to provide <i>feedback</i> and identify further needs

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communication strategies	[all categories] <ul style="list-style-type: none"> • verbal • modelling/demonstration of activities/movements • hand/arm signals
Emotional wellbeing	[all categories] <ul style="list-style-type: none"> • feelings • state of mind • perception of risk • self-esteem • self confidence
Feedback	may be qualitative and quantitative <ul style="list-style-type: none"> • evaluation forms • asking people • numbers • surveys • complaints • reaction • feedback from staff • financial information
Older persons	[all categories] <ul style="list-style-type: none"> • frail • moderately active
Program	[all categories] <ul style="list-style-type: none"> • a sequence of individual sessions running sequentially or simultaneously, for individuals or groups in which the extent of instruction covers that which is required to allow the client to participate safely and effectively to maintain physical well being • does not include movements, tasks and activities with the aim of physical skill enhancement in order to perform competitively

Range of activities	<p>should include a variety of drills, tasks, games, exercises and activities to facilitate physical well being of the older person in the following areas</p> <ul style="list-style-type: none"> • stretching • strengthening • back care • balance • mobility • posture • coordination
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • staff • equipment • venues/facilities • paperwork • transport and logistical arrangements • funds • music
Session	<p>[all categories]</p> <ul style="list-style-type: none"> • a selection of tasks, games, activities or exercises in which the extent of instruction is to allow the older person to participate safely and effectively • may be a component of a sequenced recreation program of individual activities • does not include movements, tasks and activities with the aim of skill development or enhancement in order to perform competitively • of up to a day's duration, ie, no overnight component
Status	<p>may vary according to</p> <ul style="list-style-type: none"> • impact of medication/pharmaceuticals • chronological age • physiological age • disability • cultural issues • psychological condition • social state • special needs and considerations such as <ul style="list-style-type: none"> ○ arthritis ○ osteoporosis ○ dementia ○ diabetes ○ orthopaedic ○ continence issues ○ cardiorespiratory ○ medications ○ neurological conditions ○ musculoskeletal conditions
Work environment	varies with respect to

	<ul style="list-style-type: none">• size of the organisation• location• organisational structure• nature of the program/s provided• availability of resources and technology
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ determine the range of safe and suitable physical activities and exercises for older persons, both frail and moderately active ○ instruct older persons in the correct technique/guidelines for undertaking physical activities and improving functional ability ○ confirm prior screening of older persons prior to participation in a recreation program ○ provide older persons with appropriate advice on recreation issues within the confines of the program
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRCCRO007B Operate in accordance with accepted instructional practices, styles and legal and ethical responsibilities • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Ageing process and the limitations and abilities of older persons ○ Awareness of screening of older persons for entry into recreation programs ○ Precautions for older persons in recreation programs ○ Stretching and mobility exercises and activities for older persons ○ Strengthening exercises and activities for older persons ○ Posture, back care and coordination exercises and activities for older persons ○ Chair based, floor work and balance exercises and activities for older persons ○ Occupational health and safety legislation relevant to the provision of recreation services ○ Use of music in activity programs ○ Special needs, conditions and considerations of older persons • Required skills <ul style="list-style-type: none"> ○ Monitoring of physical activity within the confines of the recreation program ○ Organisational skills to coordinate resources necessary to conduct a recreation program ○ Communication skills to provide instructions to facilitate the participation of older persons in recreation programs ○ Selection and instruction of an appropriate range of activities and exercises for older persons ○ Modifying activities for risk minimisation to older persons participating in recreation programs

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ older persons to conduct a recreation program • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	—	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRO011B	IMPLEMENT A SALES SYSTEM FOR A RECREATION FACILITY OR ORGANISATION
CRO	Community recreation operations

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge required to implement a generic sales system for a recreation facility or organisation to ensure consistent handling of sales opportunities and measurement of sales productivity.

ELEMENT	PERFORMANCE CRITERIA
1 Design the sales system	1.1 Identify <i>clients'</i> purchasing needs 1.2 Identify organisation needs in regard to a <i>sales system</i> 1.3 Undertake research to identify suitable models as a basis for a <i>sales system</i> 1.4 Design the <i>sales system</i> to meet the requirements of the <i>recreation organisation/facility</i> and expectations of the <i>clients</i> 1.5 Source and prepare necessary <i>resources</i> prior to implementation
2 Ensure sales/service staff are trained	2.1 Determine staff training requirements based on an audit of existing skills and knowledge 2.2 Conduct training to ensure staff understand the basic principles of the <i>sales system</i> and their responsibilities and role in its implementation 2.3 Conduct training to ensure staff have the appropriate sales techniques for promoting recreation products and services to <i>clients</i>
3 Sales system is implemented across recreation facility/organisation	3.1 Accurately determine the nature of incoming calls and enquiries 3.2 Deal with phone calls/enquiries consistently with <i>new business opportunities</i> transferred promptly to staff in the relevant area of the facility/organisation 3.3 Document and follow up <i>new business opportunities</i> according to <i>sales system</i> procedures 3.4 Presentations to interested <i>clients</i> build rapport, link features to benefits and make a trial close 3.5 Ensure staff adhere to <i>legislative and ethical requirements</i> when dealing with <i>clients</i>
4 Monitor performance of sales system	4.1 Establish <i>measurement procedures</i> to provide accurate data on <i>sales system</i> performance 4.2 Set targets for enquiries, leads, tours and conversions for individual staff in accordance with facility/organisation targets 4.3 Hold regular reviews to assess performance against targets 4.4 Reward staff for improvement and good performance in delivering excellent customer service 4.5 Modify <i>sales system</i> according to feedback from staff and <i>clients</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced • inexperienced • adults • children • school or youth groups, tourists, club members and general public • groups from diverse cultural and linguistic backgrounds • clients with specific requirements • existing customers of the facility/organisation • potential new customers of the facility/organisation
Legislative and ethical requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • consumer protection • duty of care • anti-discrimination and equal opportunity
Measurement procedures	<p>[all categories]</p> <ul style="list-style-type: none"> • statistics <ul style="list-style-type: none"> ○ source of customer enquiries from new business cards ○ number of and results from follow ups ○ total number of referrals received ○ results from presentations, complimentary visits or trial lessons ○ number of no shows for appointments from the 'appointment' diary • quality checks <ul style="list-style-type: none"> ○ mystery shopping ○ surveys ○ questioning ○ focus groups • sales review meetings <ul style="list-style-type: none"> ○ individual sales staff performance ○ overall facility/organisation performance ○ staff adherence to sales system
New business opportunities	<p>[all categories]</p> <ul style="list-style-type: none"> • clients new to the facility/service/product/organisation • clients who have not used the facility/service/product/organisation for a period of time
Recreation organisation/facility	may vary according to

	<ul style="list-style-type: none"> • size • type • location
Resources	<p>may include</p> <ul style="list-style-type: none"> • filing system — manual or electronic • scripts for phone calls/enquiries • appointment diaries • message boards • statistics worksheets • record systems — manual or electronic • questionnaires • product/program/service/facility/organisation information • stationary
Sales system	<p>includes</p> <ul style="list-style-type: none"> • customer service philosophy • scripts for handling customer enquiries, ie, telephone and walk in • personal sales skills • product or service knowledge • ethical guidelines • identification of customer needs • methods of communication and how each can be used in the sales process to convey persuasive ideas of messages • new business follow up procedures • face to face sales techniques • customer retention strategies • staff rewards

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan the sales system, based on the client philosophy of the facility/organisation and client expectations ○ ensure each member of staff understands his/her responsibilities and role in implementing the sales system ○ ensure staff are trained to meet their responsibilities in implementing the sales system ○ implement procedures to ensure consistent response to client enquiries/calls ○ have a common strategy for all staff to handle common customer objections ○ ensure all staff can identify and communicate the benefits and features of the facility/organisation's programs, products or services ○ document and review statistics on the performance of the staff involved in the sales system on a regular basis ○ make modifications to the sales system on the basis of results of measurement procedures
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Legislation relevant to consumer protection ○ Principles of successful selling ○ Barriers to communication ○ Features and benefits of facility/organisation products, programs and services • Required skills <ul style="list-style-type: none"> ○ Communication skills in order to effectively communicate with clients and staff ○ Ability to develop and implement procedures and systems for a facility or organisation ○ Analysis and evaluation of measurement tools to assist with continuous improvement of sales system ○ Ability to identify and meet training needs of staff related to implementing a sales system
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment

	<p>Guidelines. That is, assessors (or persons within the assessment team) must</p> <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	3	2	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRCCRO012B	MANAGE CONTRACTS
CRO	Community recreation operations

DESCRIPTION: This unit has been developed for the Community Recreation Industry Training Package and covers the skills and knowledge to administer and monitor contracts related to recreation facilities and organisations. It is based on the Local Government unit LGACOM401A but customised for a community recreation environment.

ELEMENT	PERFORMANCE CRITERIA
1 Establish contract administrative system	1.1 Implement <i>administrative systems for contracts</i> according to organisation policy, procedures and <i>performance measures</i> 1.2 Confirm contract requirements with relevant contract personnel 1.3 Clearly identify contract specifications the outcomes and measures required in the <i>key performance areas</i> 1.4 <i>Conditions of contract</i> cover all relevant areas 1.5 Establish complaint system according to organisation policy and procedures 1.6 Maintain consistent and accurate <i>records of contract progress</i> 1.7 Develop contingency plan in case contractor fails to deliver
2 Monitor contract	2.1 Undertake regular inspections of contract services to ensure compliance with specifications 2.2 Conduct and document regular planned progress meetings between all contract personnel to ensure problems are identified and resolved early and documented 2.3 Identify and document variations between the specified scope of services and the contract and relevant personnel notified without delay 2.4 Carry out <i>testing</i> of services in progress as required by the contract in accordance with legislation, regulation and organisation policy 2.5 Monitor contract costs on a regular basis to ensure that the service is carried out within financial and contractual requirements 2.6 Authorise <i>payments</i> for contract services in accordance with the <i>conditions of contract</i> and organisation <i>contract administrative system</i> 2.7 Monitor transaction costs through an established administrative system
3 Resolve contractual disputes	3.1 Investigate disagreements to identify cause and validity 3.2 Negotiate and agree on terms of resolution 3.3 Follow contract provisions for dispute resolution 3.4 Seek legal and management advice at an early stage of any dispute, to ensure that the contractor has a clear understanding of the organisation's legal position and that the organisation is not exposed to undue legal risk 3.5 Seek appropriate legal advice at any stage in order to clarify any technical aspects of a dispute

4 Implement contract transition	<ul style="list-style-type: none">4.1 Review contract conditions and responsibilities with relevant personnel to ensure satisfactory completion of contract4.2 Authorise contract completion in writing to confirm completed services have been undertaken according to contract objectives and specifications4.3 Reconcile final statement4.4 Evaluate contractor performance/level of service against agreed performance measures4.5 Coordinate end-of-service or renewed contracts to meet organisation requirements4.6 Assess quality of contract documentation
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Conditions of contract	may include clauses relating to <ul style="list-style-type: none"> • definitions and interpretation • obligations of parties • business plan provision • operations report • asset care and maintenance plan • capital expenditure • financial accounting • insurance • furniture fittings and chattels • confidentiality • sponsorship, signage and advertising • fees and charges • term of contract • indemnity • assignment • variations • dispute resolution • defects liability • nature and extent of services • nature of relationships between parties to contract • roles and functions of parties • performance measures • schedules
Contract administrative systems	includes <ul style="list-style-type: none"> • payment procedures • verification of information procedures • variation orders and procedures • dispute resolution • rectification and default system
Contracts	may relate to <ul style="list-style-type: none"> • leases • management agreements • constitutions • employment contracts • sub leases • suppliers • service providers • hire agreements • user rental agreements • vendor rental agreements

	<ul style="list-style-type: none"> • memberships • users/clients
Key performance areas	<p>[all categories]</p> <ul style="list-style-type: none"> • adherence to timelines • financial performance • progress toward objectives • adherence to quality standards • Occupational health and safety • equal employment opportunity practices • marketing objectives • customer management • asset management • staff management • program/service/facility development
Payments	<p>may include</p> <ul style="list-style-type: none"> • progressive • lump sum
Performance measures	<p>may include</p> <ul style="list-style-type: none"> • past performance • current plans • external benchmarks • quality indicators • objective measures • subjective measures • efficiency measures
Records of contract progress	<p>may include</p> <ul style="list-style-type: none"> • photographs • data • progress reports • customer surveys • minutes of meetings
Testing	<p>may include</p> <ul style="list-style-type: none"> • sample • routine checks • audit • observation • meetings • laboratory • Occupational Health and Safety • equal employment opportunity

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ establish effective communication with the contractor ○ maintain files relating to records of meetings, payment, progress reports, file notes and discussions and up-to-date insurance files, WorkCover, occupational health and safety and audit processes ○ establish contract administrative systems to effectively manage a range of contracts
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Occupational health and safety procedures and policies ○ Relevant legislation ○ Organisation policies ○ Contract procedures ○ Fundamental contract law ○ The contract service ○ Performance standards and analysis ○ Complaints procedures ○ Costing processes • Required skills <ul style="list-style-type: none"> ○ Negotiation/liaison with a wide range of people ○ Contingency management to deal with unexpected circumstances arising during the contract period ○ Contract interpretation to clearly understand roles and responsibilities ○ Project management skills to ensure contract conditions are met ○ Conflict resolution to resolve disputes between various parties involved with the contract ○ Communication skills to exchange information, provide clear instructions and seek feedback from various parties involved with the contract ○ Financial skills to produce reports and ensure financial obligations are met within budget
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a community recreation facility or organisation • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment

	<p>Guidelines. That is, assessors (or persons within the assessment team) must</p> <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of community recreation in Australia. For valid and reliable assessment the community recreation activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

CIRCUIT TRAINING CLASS

Contents

SRFCTC001A Plan and instruct a circuit training class..... Error! Bookmark not defined.

SRFCTC001A	PLAN AND INSTRUCT A CIRCUIT TRAINING CLASS
CTC	Circuit training class

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and knowledge required to plan and instruct a circuit training class for low risk clients utilising a broad range of equipment, motivational and instructional techniques.

ELEMENT	PERFORMANCE CRITERIA
1 Develop a circuit training class plan	1.1 Identify possible benefits of class participation by low risk clients 1.2 Develop a circuit training class using the principles of exercise planning for fitness industry client/s 1.3 Define and document the circuit training class outcome/s 1.4 Determine and document an effective and varied exercise repertoire 1.5 Design clear and structured forms/cards for use in a circuit training class 1.6 Allocate phases of the class within the plan 1.7 Identify potentially harmful practices and the reasons why they are avoided in the circuit training class 1.8 Apply current fitness industry standard injury and safety guidelines to the planning of the circuit training class 1.9 Identify if music is appropriate
2 Prepare for class delivery	2.1 Ensure delivery area is free from obstacles prior to commencement of class 2.2 Ensure equipment is in good working order prior to commencement of class 2.3 Quarantine equipment not in good working order in accordance with organisational policies and procedures
3 Establish effective communication and apply standard assessment criteria for participation prior to commencement	3.1 Demonstrate knowledge of appropriate dress and presentation 3.2 Greet clients in a positive manner 3.3 Communicate clearly the objectives of class, the principles and benefits of circuit training to participants 3.4 Confirm participants have completed pre-exercise screening in accordance with organisational policies and procedures 3.5 Redirect non-screened participants in accordance with organisational policies and procedures 3.6 Confirm the suitability of participant attire for class 3.7 Communicate to class the presence of particular types of injuries that would prevent participation in class and confirm with participants that they are free from such restraints
4 Instruct a circuit training class	4.1 Instruct class in accordance with circuit training plan, following structure of forms/cards and the phases allocated within the plan and in accordance with health and safety standards 4.2 Apply an effective instructional technique and an effective motivational technique 4.3 Explain and demonstrate correct technique with various pieces of equipment during circuit training class 4.4 Demonstrate and apply an understanding of the physiological, psychological and biomechanical changes that occur with circuit training 4.5 Continuously monitor the client's intensity, technique and safety during the class 4.6 Provide effective positive feedback on incorrect technique or intensity to client/s displaying client interaction skills 4.7 Demonstrate exercises within the circuit training class in a manner relevant to the client's needs 4.8 Recognise signs and symptoms of overtraining and implement appropriate

	intervention strategies
5 Review circuit training class both during and after class delivery	<p>5.1 Recognise the general factors that suggest a circuit training class should be evaluated</p> <p>5.2 Identify aspects needing further emphasis and/or attention are for intervention in future sessions</p> <p>5.3 Analyse and if appropriate, incorporate client/s likes and dislikes into the circuit training class</p> <p>5.4 Modify the circuit training class plan where relevant to client/s needs</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Benefits	[all categories] <ul style="list-style-type: none"> • physiological • psychological • social
Dress and Presentation	[all categories] <ul style="list-style-type: none"> • dress <ul style="list-style-type: none"> ○ neat and tidy ○ clean ○ appropriate to activity ○ to any workplace requirements • presentation <ul style="list-style-type: none"> ○ professional ○ confident and positive without being overbearing
Evaluated	[all categories] <ul style="list-style-type: none"> • class aims and objectives • client satisfaction • suitability and safety of facilities and equipment
Feedback	[all categories] <ul style="list-style-type: none"> • exercise purpose • exercise technique • appropriate exercise intensity • methods of monitoring intensity • safety • muscle involvement • improvements in training and technique
Health and safety standards	[all categories] <ul style="list-style-type: none"> • other venue/facility users • first aid considerations • occupational health and safety legislation • maintenance and safety procedures • medical conditions ie, under the supervision of a health or medical professional
Industry standard injury and safety	[all categories]

guidelines	<ul style="list-style-type: none"> • peak body guidelines, eg, Fitness Australia, Sports Medicine Australia • government legislative requirements, eg, Workcover
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clear communication lines • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality • demonstration strategies • motivational strategies • avoidance against competing with the client
Low risk clients	<p>[all categories]</p> <ul style="list-style-type: none"> • clients have been screened in accordance with organisational policies and procedures and determined suitable for participation in mainstream fitness activities • experienced or inexperienced • absence of diagnosed disease • different ages • those with specific conditioning goals • athletes
Music	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant music genre such as <ul style="list-style-type: none"> ○ motivational music ○ themes ○ with lyrics or without lyrics ○ cultural music • music selection should consider <ul style="list-style-type: none"> ○ copyright and legal issues ○ major licensing and royalty bodies in Australia • music quality depends on <ul style="list-style-type: none"> ○ type of tape used ○ taping equipment and techniques ○ care of tapes and equipment ○ volume

Phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation • conditioning • recovery • adaptation
Physiological	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular changes • thermoregulation • energy system and substrate utilisation • pulmonary changes • nervous system changes
Potentially harmful practices	<p>[all categories]</p> <ul style="list-style-type: none"> • hyperextension • exercising while sick • exercising in extremes of temperature • multiple repetitions • addition of equipment
Psychological	<p>[all categories]</p> <ul style="list-style-type: none"> • focus • level of self motivation
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to: <ul style="list-style-type: none"> ○ assess the client/s suitability for participation in the class ○ plan structure of class phases and document ○ implement the principles that underlie exercise planning ○ interrelate the components of an exercise plan for specific adaptation ○ instruct delivery of class plan ○ continually monitor several participants at one time during the class ○ implement appropriate intervention strategies upon identification of incorrect technique ○ modify during and after class based on feedback and identification of incorrect techniques ○ assess the participants for suitability for this class
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Familiarity with common fitness and exercise terminology ○ Activity aims and client goal setting ○ Principles of fitness planning ○ Exercise science including anatomy, physiology, biomechanics and nutritional principles as applied to fitness activities • Required skills <ul style="list-style-type: none"> ○ Experience in circuit training, including the ability to perform the class exercise correctly with the available equipment and experience in following a long term exercise class
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment

	<ul style="list-style-type: none"> ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> • weights room • exercise music room • pool • community fitness environment • an outdoor environment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment.
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Pre-screening, monitoring and adjusting techniques during class delivery • Communicating ideas and information — Explaining class objectives to participants and directing participants through the class routine • Planning and organising activities — Developing class plan and ensuring equipment is in good working order prior to commencement of class • Working with teams and others — Instructing participants through the class • Using mathematical ideas and techniques — Timing and implementation of phases during class • Solving problems — Identifying incorrect techniques and implementing corrective strategies • Using technology — Using fitness equipment, documenting class plan, receiving and processing class feedback <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

ENDURANCE TRAINING PROGRAM

Contents

SRFETP001A Plan and instruct an endurance training program.... Error! Bookmark not defined.

SRFETP001A	PLAN AND INSTRUCT AN ENDURANCE TRAINING PROGRAM
ETP	Endurance training program

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and knowledge required to plan and instruct an endurance training program for low risk clients utilising a broad range of equipment, motivational and instructional techniques.

ELEMENT	PERFORMANCE CRITERIA
1 Develop an endurance training program plan	1.1 Identify possible benefits of client participation in an endurance training program by low risk clients 1.2 Develop an endurance training program using the principles and variables of exercise planning for fitness industry client/s 1.3 Define and document the endurance training program outcome/s 1.4 Determine and document an effective and varied exercise repertoire and their expected outcomes including phases of exercise 1.5 Identify potentially harmful practices and the reasons why they are avoided in the endurance training program 1.6 Apply current fitness industry standard injury and safety guidelines to the planning of the endurance training program 1.7 Identify if music is appropriate
2 Prepare for class delivery	2.1 Select an appropriate area to conduct an endurance training program safely 2.2 Ensure equipment is in good working order prior to commencement of class 2.3 Quarantine equipment not in good working order in accordance with organisational policies and procedures
3 Establish effective communication and apply standard assessment criteria for participation prior to commencement	3.1 Demonstrate knowledge of appropriate dress and presentation 3.2 Greet clients in a positive manner 3.3 Communicate clearly the objectives of class, the principles and benefits of circuit training to participants 3.4 Confirm participants have completed pre-exercise screening in accordance with organisational policies and procedures 3.5 Redirect non-screened participants in accordance with organisational policies and procedures 3.6 Confirm the suitability of participant attire for class 3.7 Communicate to class the presence of particular types of injuries that would prevent participation in class and confirm with participants that they are free from such restraints
4 Instruct an endurance training program	4.1 Instruct class in accordance with structure of endurance training plan and in accordance with health and safety standards 4.2 Identify and explain potentially harmful practices and the reasons why they are avoided to the client/s within the context of the program 4.3 Apply an effective instructional technique and an effective motivational technique 4.4 Explain and demonstrate exercises and equipment within the endurance training program in a manner relevant to the client's needs 4.5 Demonstrate and apply an understanding of the physiological, psychological and biomechanical changes that occur with endurance training 4.6 Continuously monitor the client's intensity, technique and safety during the program 4.7 Provide effective positive feedback on incorrect technique or intensity to client/s displaying client interaction skills 4.8 Recognise signs and symptoms of overtraining and implement appropriate

	intervention and prevention strategies
5 Review endurance training program both during and after program delivery	<p>3.1 Recognise the general factors that suggest an endurance training program should be evaluated</p> <p>3.2 Identify aspects needing further emphasis and/or attention are for intervention in future sessions</p> <p>3.3 Analyse and if appropriate, incorporate client/s likes and dislikes into the endurance training program</p> <p>3.4 Modify the endurance training program plan where relevant to client/s needs</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Appropriate area	[all categories] <ul style="list-style-type: none"> • well ventilated • ensuring occupational health and safety is addressed in accordance with legislative requirements and organisational policies and procedures, eg, the area is free of obstacles • adequate space to ensure the absence of physical contact with other clients during all facets of the program
Benefits	[all categories] <ul style="list-style-type: none"> • physiological • psychological • social
Dress and Presentation	[all categories] <ul style="list-style-type: none"> • dress <ul style="list-style-type: none"> ○ neat and tidy ○ clean ○ appropriate to activity ○ to any workplace requirements • presentation <ul style="list-style-type: none"> ○ professional ○ confident and positive without being overbearing
Equipment	[all categories] <ul style="list-style-type: none"> • resistance equipment • heart rate monitor • program card • tubing/bands
Evaluated	[all categories] <ul style="list-style-type: none"> • program aims and objectives • client satisfaction • suitability and safety of facilities and equipment
Feedback	[all categories] <ul style="list-style-type: none"> • exercise purpose • exercise technique • appropriate exercise intensity

	<ul style="list-style-type: none"> • methods of monitoring intensity • safety • muscle involvement • improvements in training and technique
Health and safety standards	<p>[all categories]</p> <ul style="list-style-type: none"> • other venue/facility users • first aid considerations • occupational health and safety legislation • maintenance and safety procedures • medical conditions, ie, under the supervision of a health or medical professional
Industry standard injury and safety guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> • peak body guidelines, eg, Fitness Australia, Sports Medicine Australia • government legislative requirements, eg, Workcover
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clear communication lines • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality • demonstration strategies • motivational strategies • avoidance against competing with the client
Low risk	<p>[all categories]</p> <ul style="list-style-type: none"> • clients have been screened in accordance with organisational policies and procedures and determined suitable for participation in mainstream fitness activities • experienced or inexperienced • absence of diagnosed disease • different ages • those with specific conditioning goals • athletes

Music	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant music genre such as <ul style="list-style-type: none"> ○ motivational music ○ themes ○ with lyrics or without lyrics ○ cultural music • music selection should consider <ul style="list-style-type: none"> ○ copyright and legal issues ○ major licensing and royalty bodies in Australia • music quality depends on <ul style="list-style-type: none"> ○ type of tape used ○ taping equipment and techniques ○ care of tapes and equipment ○ volume
Phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation • conditioning • recovery • adaptation
Physiological	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular changes • thermoregulation • energy system and substrate utilisation • pulmonary changes • nervous system changes
Potentially harmful practices	<p>[all categories]</p> <ul style="list-style-type: none"> • hyperextension • exercising while sick • exercising in extremes of temperature • multiple repetitions • addition of equipment
Psychological	<p>[all categories]</p> <ul style="list-style-type: none"> • focus • level of self motivation

Pre-exercise screening	[all categories] <ul style="list-style-type: none">• initial screening may consist of<ul style="list-style-type: none">○ questionnaire○ interview○ medical clearance• initial screening should determine whether the client<ul style="list-style-type: none">○ has a medical condition○ has an injury○ is on prescribed medication• forms used<ul style="list-style-type: none">○ pre-activity screening questionnaire○ informed consent○ medical clearance• information obtained<ul style="list-style-type: none">○ medical history○ functional limitations○ medication○ lifestyle evaluation○ fitness goals○ exercise history○ time availability
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ assess the client/s suitability for participation in the program ○ plan structure and document of program phases ○ implement the principles that underlie exercise planning ○ interrelate the components of an exercise plan for specific adaptation ○ instruct delivery of program plan ○ continually monitor several participants at one time during the program ○ implement appropriate intervention strategies upon identification of incorrect technique ○ modify during and after program based on feedback and identification of incorrect techniques ○ assess the participants for suitability for this program
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Familiarity with common fitness and exercise terminology ○ Activity aims and client goal setting ○ Principles of fitness planning ○ Exercise science including anatomy, physiology, biomechanics and nutritional principles as applied to fitness activities • Required skills <ul style="list-style-type: none"> ○ Experience in endurance training, including the ability to perform the program exercises correctly with the available equipment and experience in following a long term exercise program
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment

	<ul style="list-style-type: none"> ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ● weights room ● exercise music room ● pool ● community fitness environment ● an outdoor environment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment.
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Pre-screening, monitoring and adjusting techniques during class delivery • Communicating ideas and information — Explaining class objectives to participants and directing participants through the class routine • Planning and organising activities — Developing class plan and ensuring equipment is in good working order prior to commencement of class • Working with teams and others — Instructing participants through the class • Using mathematical ideas and techniques — Timing and implementation of phases during class • Solving problems — Identifying incorrect techniques and implementing corrective strategies • Using technology — Using fitness equipment, documenting class plan, receiving and processing class feedback <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

FITNESS

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SRFFIT001B	PROVIDE ORIENTATION TO CLIENTS PRIOR TO UNDERTAKING A FITNESS PROGRAM
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to identify clients general fitness requirements, provide a basic screening form to clients, and advise client on fitness facilities and services.

ELEMENT	PERFORMANCE CRITERIA
1 Establish rapport with client	1.1 Greet <i>client</i> in a friendly and courteous manner 1.2 Establish the general service the <i>client</i> wishes to access
2 Identify general client fitness requirements	2.1 Assess the <i>requirements</i> and expectations of clients 2.2 Explain the available services and facilities relevant to the client's wishes 2.3 Advise the <i>client</i> on activities to meet identified needs
3 Advise client on the benefits and procedures of fitness appraisal and exercise prescription	3.1 Explain the specific benefits of the fitness activities relevant to the needs of the <i>client</i> 3.2 Advise the benefits of a fitness appraisal and exercise program to the <i>client</i> 3.3 Make an <i>appointment</i> for an appraisal or programming session, if required
4 Deliver and process a basic health screening questionnaire	4.1 Briefly explain the benefits of a pre-exercise <i>health screening</i> 4.2 Administer an industry standard <i>health screening</i> 4.3 Review the <i>health screening</i> questionnaire 4.4 Explain the <i>procedures</i> to be followed before commencing an exercise program when there are health concerns to the <i>client</i> 4.5 Provide information on the exercise program the <i>client</i> has selected 4.6 Book the <i>client</i> in for an <i>appointment</i> with an instructor if an appraisal or program is required 4.7 Report health concerns to a supervisor and/or instructor, if required 4.8 <i>Process</i> and/or file the <i>screening</i> questionnaire

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Appointment	<p>[all categories]</p> <ul style="list-style-type: none"> • the appointment is booked, with the following details entered <ul style="list-style-type: none"> ○ date ○ time ○ client's name ○ purpose of appointment ○ name of instructor • the client is provided with an appointment card with the following details <ul style="list-style-type: none"> ○ name of client ○ date ○ time ○ purpose of appointment ○ name of instructor
Basic health screening	<p>[all categories]</p> <ul style="list-style-type: none"> • advise a client of the appropriate action, normally a visit to a medical practitioner, when <ul style="list-style-type: none"> ○ an existing medical condition is identified ○ an injury is identified ○ a client is taking prescribed medications • the client would normally be advised by the medical practitioner of the guidelines for participation in fitness industry activities, and take these guidelines to a suitably credentialed allied health professional
Client	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • screened • various ages • active or inactive
General	<p>[all categories]</p> <ul style="list-style-type: none"> • the client's fitness experience • whether the client has previously undertaken a screening questionnaire • the client's fitness goals

Procedures	<p>[all categories]</p> <ul style="list-style-type: none"> • where a client has not previously undertaken a fitness appraisal or had a prescribed program <ul style="list-style-type: none"> ○ advise the client of the benefits and need for completing a health screening questionnaire ○ advise a client of the appropriate action when an existing medical condition or injury is identified, or when a client is taking prescribed medications • where a client has recently been assessed and programmed <ul style="list-style-type: none"> ○ advise the client of the most appropriate facilities and services relevant to their fitness goals and current level of fitness
Process	<p>[all categories]</p> <ul style="list-style-type: none"> • the client completes a screening questionnaire <ul style="list-style-type: none"> ○ oral ○ written • staff review the client responses and take appropriate action • staff take reasonable measures to make services and facilities available in a non-discriminatory way
Rapport	<p>[all categories]</p> <ul style="list-style-type: none"> • formal <ul style="list-style-type: none"> ○ provide written information on the organisation's facility, products', and services ○ place the client in a comfortable position ○ place yourself in a position with clear access to the client and any materials required • informal <ul style="list-style-type: none"> ○ provide a friendly and courteous greeting ○ introduce yourself and your position to the client
Reporting procedure	<p>[all categories]</p> <ul style="list-style-type: none"> • timeframes for reports • regular reports • one-off reports
Requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • modifications to current services and resources • additions to services and resources • potential problems and solutions • monitoring services and resources • upgrading services and resources

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ accurately assess client requirements ○ develop appropriate strategies to maintain communication with clients and address their requirements ○ quickly and accurately complete and review a screening questionnaire ○ match client needs with available services
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Sources of information on client needs and expectations ○ Processes to determine needs and expectations of clients and changes in client base and requirements ○ Understanding of the content of basic health screening questionnaires and the process of referral if required ○ Ability to provide the client with details of their appointment • Required skills <ul style="list-style-type: none"> ○ Research skills to determine client needs and future requirements ○ Planning skills to determine resourcing requirements to meet identified needs ○ Communication skills to enable consultation with internal and external clients ○ Problem solving in order to resolve issues with respect to client service and/or resourcing ○ Numeracy skills to conduct statistical analysis of research ○ Literacy skills to enable production of reports and recommendations
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a work environment with clients • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for

	assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	3	2	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT003B	UNDERTAKE CLIENT INDUCTION AND SCREENING
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to prepare an instructor to take a client through a process of screening, a discussion of fitness goals, and a basic fitness appraisal in preparation for writing a fitness program.

ELEMENT	PERFORMANCE CRITERIA
1 Conduct a pre-test screening procedure to identify whether a medical appointment should be recommended to clients	<p>1.1 Conduct a basic screening interview using an industry standards pre-exercise screening tool to obtain information about the health and medical status of a client</p> <p>1.2 Use appropriate questioning techniques to ascertain additional information about medical conditions, injuries or prescribed medication, as required</p> <p>1.3 Provide information to client about the reasons for conducting a fitness appraisal and the risks associated with fitness testing and exercise</p> <p>1.4 Consider client social justice rights under law</p> <p>1.5 Display client empathy and put clients at ease during the fitness screening process</p> <p>1.6 Handle client with sensitivity and with discretion</p> <p>1.7 Use procedures to ensure client confidentiality and privacy</p> <p>1.8 If the client reports no current injuries, no medical conditions, or that they are not taking any prescribed medication, they are directed to a fitness appraisal</p> <p>1.9 If the client has current injuries, a medical condition, or if they are taking any prescribed medication/s, recommend to the client that they make an appointment with a allied health professional or medical practitioner</p> <p>1.10 Discuss the process of screening and appraisal and, their relevance to the development of an individualised exercise program to the client</p>
2 Determine the fitness goals and current physical activity patterns of clients	<p>2.1 Determine the perceived benefits clients see themselves deriving from exercise programs</p> <p>2.2 Record the client's fitness goals</p> <p>2.3 Discuss and record the client's current fitness and lifestyle activities</p> <p>2.4 Provide basic information on the impact of poor lifestyle behaviours on health and fitness to the client</p> <p>2.5 Develop the client's short term and long term goals</p> <p>2.6 Relate the fitness goals to products and services available in the fitness industry</p> <p>2.7 Make recommendations to the client on the likelihood of adherence and techniques that may increase their adherence to exercise</p>

<p>3 Motivate and encourage clients to adhere to exercise programs</p>	<p>3.1 Discuss the client's habits, lifestyle, family situation, likes and dislikes, and individual personality differences which might be relevant to the prescription of an appropriate exercise program</p> <p>3.2 Determine the physical and the psychological characteristics that apply to each stage of fitness</p> <p>3.3 Direct clients to understand and change their behaviours to overcome their own barriers to the continuation of an exercise program</p> <p>3.4 Identify the steps involved in establishing a behavioural change that results in long term adherence to an exercise program</p>
<p>4 Conduct a basic fitness appraisal</p>	<p>4.1 Chose appropriate, valid and reliable basic fitness appraisals, based on the clients fitness goals and current fitness capacity</p> <p>4.2 Conduct basic fitness appraisals ensuring the safety of the client</p> <p>4.3 Explain the results of the fitness appraisals to the client</p> <p>4.4 Record recommendations for a safe program for the client, according to their desired outcomes and demonstrated ability level</p>
<p>5 Interpret and apply the results of a basic fitness appraisal to the fitness program for a client</p>	<p>5.1 Describe to the client how their fitness appraisal results can be applied to a fitness program</p> <p>5.2 Consider the client's health and injury status, including recommendations from an allied health professional or medical practitioner, when developing an exercise program</p> <p>5.3 Consider the client's demonstrated level of fitness when developing an exercise program</p> <p>5.4 Develop a client profile that can be used to write an individualised, safe and effective fitness program</p>
<p>6 Motivate the client</p>	<p>6.1 Motivate and enthuse the client after a basic screening and fitness appraisal</p> <p>6.2 Determine the clients level of commitment to behavioural strategies and establish a behavioural contract</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional or medical practitioner	[all categories] the following allied health professionals may be suitably credentialled <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Client	[all categories] <ul style="list-style-type: none"> • experienced or inexperienced • various ages • screened • active or inactive
Fitness screening	[all categories] <ul style="list-style-type: none"> • questionnaire • interview • clearance letter from an allied health professional or medical practitioner
Fitness appraisal	[all categories] <ul style="list-style-type: none"> • cardiovascular response <ul style="list-style-type: none"> ○ heart rate, such as tri-level aerobic response ○ blood pressure • range of movement • strength • anthropometric, such as <ul style="list-style-type: none"> ○ girth measurements ○ skin folds

Fitness goals	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • mental • social • spiritual
Fitness program	<p>[all categories]</p> <ul style="list-style-type: none"> • motivational strategies for a client • realistic goals • a program structure, such as preparation phase, conditioning phase, recovery phase, and adaptation phase • specific exercises • expected outcomes • a professional presentation
Perceived benefits	<p>[all categories]</p> <ul style="list-style-type: none"> • cosmetic • health • social/recreational • athletic
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability

Social justice rights	[all categories] <ul style="list-style-type: none">• disability discrimination acts• equal opportunity acts
Stages of fitness	[all categories] <ul style="list-style-type: none">• the appropriate form of motivation is used at each level of experience of a client<ul style="list-style-type: none">○ beginner○ relatively fit○ advanced

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ work effectively with a range of clients based on gender, age, physical capacity, fitness goals and level of motivation ○ make effective recommendations to a client that they make an appointment with a medical practitioner or allied health professional, if required ○ utilise a range of fitness assessments based on the fitness goals and physical capacity of the client
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Nil • Required skills <ul style="list-style-type: none"> ○ Ability to apply written and oral communication skills effectively with a range of new fitness industry clients on issues directly related to the commencement of a fitness program
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ industry standard screening tool(s) ○ fitness centre ○ fitness assessment equipment ○ a representative range of industry clients • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>

Consistency in performance	<ul style="list-style-type: none">• Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	3	2	2	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT004B	DEVELOP BASIC FITNESS PROGRAMS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge, skills and motivation needed to develop basic fitness programs for fitness industry clients.

ELEMENT	PERFORMANCE CRITERIA
1 Gather pre-programming information, including a client's current fitness level	1.1 Identify a client's fitness level from their fitness screening and appraisal 1.2 Identify a range of exercises to target specific fitness components 1.3 Identify factors that will effect a client's ability to perform in an exercise program 1.4 Consider medical or injury problems stated by the client during the appraisal, exercise screening, and recommendations from a medical practitioner or allied health professional when a program is developed for a client 1.5 Consider the client's fitness level in a range of areas when developing a client exercise profile 1.6 Design a program that would create a balanced fitness profile, or meets the specific client needs
2 Develop a basic exercise plan of general activities suited to client's needs, lifestyle and exercise preferences	2.1 Plan a general activity program for a client to maximise the positive aspects of their environment and personal attributes for long term adherence to a program 2.2 Incorporate motivation techniques to maximise exercise program adherence 2.3 Develop a general activities plan 2.4 Record recommendations to the client in terms of safety and adherence 2.5 Gain the client's agreement to the exercise plan
3 Develop a fitness program for clients	3.1 Utilise principles of exercise program design to develop fitness programs for clients given all relevant information regarding the client 3.2 Outline the relative contribution to aerobic and anaerobic fitness of a variety of activities relevant to the client 3.3 Apply programming guidelines to developing aerobic, strength, endurance and stretching programs relevant to client's goals and fitness and, the relative benefits desired from the program 3.4 Develop appropriate aerobic fitness, strength, endurance, and stretching programs for clients
4 Give clear and effective instruction ensuring effective services provision and vocal effectiveness	4.1 Demonstrate an effective instructional model 4.2 Instruct a set of exercises so that they can be accurately copied 4.3 Use an appropriate client interaction skills and techniques to show a caring attitude 4.4 Self-evaluate aspects of one's performance as an instructor 4.5 Demonstrate strategies for voice projection and communication that prevent vocal damage in the gymnasium, aqua and/or exercise to music situation

<p>5 Supervise fitness activities in a manner that makes the client feel at ease, safe and motivated</p>	<p>5.1 Provide effective and efficient instructor supervision 5.2 Apply gymnasium rules and etiquette 5.3 Deal with appropriately, negative attitudes and personal difficulties that clients might experience in a fitness activities situation 5.4 Use appropriate behaviour and strategies to assist clients in a variety of situations where clients might feel embarrassed, competitive or aggressive 5.5 Utilise appropriate behaviour and strategies to ensure easy and effective fitness activities 5.6 Time management strategies are displayed during fitness activities and program instruction</p>
<p>6 Review and adapt a client's exercise program in accordance with their progress</p>	<p>6.1 Evaluate parameters of the fitness level being developed in the program 6.2 Obtain feedback from clients on their own personal progress and their degree of satisfaction with service provision at the centre 6.3 Undertake relevant fitness appraisals to monitor a client's fitness development 6.4 Record the clients amended/adapted exercise program on to a program card</p>
<p>7 Display an appropriate instructional style</p>	<p>7.1 Demonstrate the personal qualities of an effective instructor, using styles and behaviours that encourage clients and recognise behaviours that intimidate clients 7.2 Utilise relationship and task-oriented instructional styles, appropriate to the instructors own personality, while relating to clients in a caring, approachable and energetic manner</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional or medical practitioner	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Client	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • various ages • screened • active or inactive
Client goals	<p>[all categories]</p> <p>the instructor considers the following client aims when providing exercise advice</p> <ul style="list-style-type: none"> • current activity status • preferences • health details • fitness results
Fitness appraisals	<p>[all categories]</p> <ul style="list-style-type: none"> • basic sub maximal appraisals of fitness capacity, which may include parameters such as <ul style="list-style-type: none"> ○ cardiovascular response ○ heart rate, such as tri-level aerobic response ○ blood pressure ○ range of movement ○ strength • anthropometric, such as <ul style="list-style-type: none"> ○ girth measurements ○ skin folds

Fitness level	<p>[all categories]</p> <ul style="list-style-type: none"> • physical fitness • motivation • psychological • emotional
Fitness screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is taking prescribed medication • initial screening may consist of a <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ clearance letter from a physician, allied health professional, or other medical professional
Instruction	<p>[all categories]</p> <p>instructing a client in a fitness activity, including</p> <ul style="list-style-type: none"> • a simple explanation to the client • a demonstration of effective exercise technique • setting of intensity and loading • clear communication with client • reinforcement of correct technique and attitude
Medical Professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • general practice doctors • medical specialists
Principles of exercise program design	<p>[all categories]</p> <ul style="list-style-type: none"> • FITT formula <ul style="list-style-type: none"> ○ frequency ○ intensity ○ time ○ type • program phases <ul style="list-style-type: none"> ○ preparation phase ○ conditioning phase ○ recovery phase ○ adaptation phase • program types <ul style="list-style-type: none"> ○ sets and reps ○ circuit ○ single set to failure ○ split routines ○ matrix

Program	[all categories] <ul style="list-style-type: none">• a listing of exercise for a specific client or client group, to include<ul style="list-style-type: none">○ motivational strategies for a client<ul style="list-style-type: none">▪ realistic goals○ a program structure, such as preparation phase, conditioning phase, recovery phase, and adaptation phase○ specific exercises○ expected outcomes○ a professional presentation• exercises for a specific fitness session matched to an exercise plan, incorporating components of fitness such as<ul style="list-style-type: none">○ aerobic fitness○ body fat reduction○ cardiovascular endurance○ stretching<ul style="list-style-type: none">▪ range of movements▪ flexibility○ strength○ power, activity or sports specific○ muscle endurance○ muscle hypertrophy
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ develop and deliver a program specific to the client needs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Familiarity with common fitness terminology • Required skills <ul style="list-style-type: none"> ○ Experience in the appropriate fitness activity to be programmed, including the ability to perform the programmed exercise correctly with the available equipment and experience in following a long term exercise program
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness programs • Human resources — assessment of this competency will require resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>

Consistency in performance	<ul style="list-style-type: none">• Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT005B	APPLY BASIC EXERCISE SCIENCE TO EXERCISE INSTRUCTION
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to provide the basic applied exercise science required for fitness instructors.

ELEMENT	PERFORMANCE CRITERIA
1 Use anatomical terminology and descriptions of the musculoskeletal structure of the body when instructing clients	<ul style="list-style-type: none"> 1.1 Apply the components of fitness and the function of the body systems to common fitness activities 1.2 Use anatomical terminology and describe and demonstrate movements of the body to clients 1.3 Relate the location and function of the major bones of the upper and lower extremities and axial skeleton to movement when instructing clients 1.4 Relate the structure and function of the major joints of the body to exercise to movement when instructing clients 1.5 Relate the gross structure of skeletal muscle and its relationship to movement to movements when instructing clients 1.6 Relate major muscles and their prime moving movements at major joints in the body to movement when instructing clients. 1.7 Relate the neural control of skeletal muscle contraction to movement when instructing clients 1.8 Relate basic types of neural feedback involved in the coordination of movement to movement when instructing clients 1.9 Measure and relate the relationship between muscle size and strength to movement when instructing clients 1.10 Explain the basic structural adaptations to musculoskeletal tissue that occur as a result of fitness training to clients
2 Relate the functioning of the cardio-respiratory system to exercise instruction	<ul style="list-style-type: none"> 2.1 Identify and explain the structure and function of the various parts of the cardio-respiratory system, related to exercise to clients 2.2 Relate the process of transport and exchange of oxygen and carbon dioxide during exercise to fitness outcomes when instructing clients 2.3 Measure client heart rates and blood pressure responses during submaximal aerobic activity and used to set training loads to target specific client energy system involvement 2.4 Use ratings of perceived exertion during submaximal aerobic activity, muscle endurance activities, lactate endurance and maximal strength activities to measure and adjust the work intensity of clients 2.5 Compare the oxygen demands for various fitness activities 2.6 Explain the physiological adaptations of the cardio-respiratory system as a result of fitness training to clients 2.7 Recognise and use symptoms and effects of specific muscular fatigue and blood lactate accumulation during muscle endurance activities to adjust exercise intensity
3 Apply a knowledge of the body's energy systems to exercise instruction	<ul style="list-style-type: none"> 3.1 Explain the effect of exercise intensity on the energy substrate to clients during fitness instruction 3.2 Apply the limiting factors of the body's energy systems to the setting of exercise intensities when instructing fitness activities

<p>4 Use a knowledge of the lever systems of the human body and resistance equipment to set safe and effective exercise intensities</p>	<p>4.1 Use the common terms used to qualify the basic <i>principles of biomechanics</i> when instructing fitness activities</p> <p>4.2 Identify and explain the basic <i>lever systems</i> in both anatomical and mechanical lever systems to clients</p> <p>4.3 Use the <i>lever systems</i> in the human body and their role in movement and stability to provide safe and effective exercises for clients</p> <p>4.4 Take into account the use of levers and cams in <i>resistance</i> equipment to alter the force required by muscles and affect joint stability when developing programs and instructing fitness activities</p> <p>4.5 Take into account the effect of changes in lever length on muscle force output in both anatomical and mechanical lever when instructing fitness activities</p>
<p>5 Demonstrate and apply an understanding of the factors that motivate people to commence and stay with a long term fitness program</p>	<p>5.1 Recognise and use the factors that encourage people to adhere to exercise programs when instructing clients</p> <p>5.2 Recognise and apply common reasons for discontinuation of fitness programs when setting program guidelines</p> <p>5.3 Discuss habits, lifestyle, family situation, likes and dislikes which might be relevant to writing an appropriate exercise program with the client</p> <p>5.4 Use the physical and the psychological characteristics that apply to each <i>stage of fitness, stages of change</i> and the most appropriate form of motivation at each level when instructing clients</p> <p>5.5 Direct clients to understand and overcome their own barriers to the continuation of an exercise program</p> <p>5.6 Identify the steps involved in establishing a behavioural change that results in their long term adherence to an exercise program to the client and use when instructing clients</p> <p>5.7 Take into account people's idiosyncrasies and behavioural patterns and <i>industry standards</i> when instructing clients</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Anatomical terminology	<p>[all categories]</p> <ul style="list-style-type: none"> • flexion • extension • rotation • abduction • adduction • circumduction • inversion • eversion • pronation • supination • horizontal flexion • horizontal extension
Cardio-respiratory system	<p>[all categories]</p> <ul style="list-style-type: none"> • heart • lungs • arteries • capillaries • veins
Components of fitness	<p>[all categories]</p> <ul style="list-style-type: none"> • cardio-respiratory endurance • muscular endurance • strength • flexibility • body composition • speed • power • agility • balance • coordination • anaerobic endurance
Energy systems	<p>[all categories]</p> <ul style="list-style-type: none"> • alactic <ul style="list-style-type: none"> ○ adenosine triphosphate ○ phosphocreatine • lactic • aerobic <ul style="list-style-type: none"> ○ aerobic glycolysis

	<ul style="list-style-type: none"> ○ fat oxidation
Industry standards	<p>[all categories]</p> <ul style="list-style-type: none"> • professional associations • government legislation
Joints	<p>[all categories]</p> <ul style="list-style-type: none"> • joint functions <ul style="list-style-type: none"> ○ weight bearing ○ movement • joint types <ul style="list-style-type: none"> ○ ball and socket ○ hinge ○ vertebral • synovial joints <ul style="list-style-type: none"> ○ ligaments ○ articular cartilage ○ capsule ○ synovial membrane ○ synovial fluid ○ bone
Lever systems	<p>[all categories]</p> <ul style="list-style-type: none"> • 1st class <ul style="list-style-type: none"> ○ force arm ○ resistance arm ○ axis of rotation • 2nd class <ul style="list-style-type: none"> ○ force arm ○ resistance arm ○ axis of rotation • 3rd class <ul style="list-style-type: none"> ○ force arm ○ resistance arm ○ axis of rotation
Major bones	<p>[all categories]</p> <ul style="list-style-type: none"> • skull • cervical vertebrae • thoracic vertebrae • lumbar vertebrae • sacrum • clavicle • scapula • humerus • radius • ulna • carpals • digits • pelvis • femur

	<ul style="list-style-type: none"> • patella • tibia • fibula • tarsals
Major muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • trapezius • sternocleidomastoid • latissimus dorsi • erector spinae • rectus abdominis • internal obliques • external obliques • quadratus lumborum • pectoralis major • rhomboids • deltoids • biceps brachii • triceps brachii • forearm flexors • forearm extensors • gluteals • quadriceps <ul style="list-style-type: none"> ○ vastus medialis ○ vastus lateralis ○ vastus intermedius ○ rectus femoris • hamstrings <ul style="list-style-type: none"> ○ semimembranous ○ semitendinous ○ bicep femoris • gastrocnemius • soleus • tibialis anterior
Major joints	<p>[all categories]</p> <ul style="list-style-type: none"> • elbow • shoulder • pectoral girdle • inter-vertebral • sacro-iliac • hip • knee • ankle

Neural feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • proprioception • reflex loops
Principles of biomechanics	<p>[all categories]</p> <ul style="list-style-type: none"> • mass • force • speed • acceleration • work • energy • power • strength • momentum • force arm • resistance arm • axis of rotation • cam • pulley
Resistance	<p>[all categories]</p> <ul style="list-style-type: none"> • pin loaded • hydraulic • air • water • free weights • electronic/magnetic • resisted/assisted
Stages of change	<p>[all categories]</p> <ul style="list-style-type: none"> • pre-contemplation • contemplation • preparation • action • maintenance
Stages of fitness	<p>[all categories]</p> <ul style="list-style-type: none"> • beginner • relatively fit • advanced fitness level • specific to the individual and the activity

Submaximal aerobic activity	[all categories] <ul style="list-style-type: none">• intensity• duration
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ apply a basic knowledge of musculoskeletal anatomy to exercise ○ apply a basic knowledge of neuromuscular anatomy to exercise ○ apply a basic knowledge of cardiovascular physiology to exercise
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Nil • Required skills <ul style="list-style-type: none"> ○ Nil
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ anatomy equipment with full sized human skeleton ○ functional joint models ○ muscle charts and maps ○ physiology equipment with heart rate monitors, ergometers, charts for ratings of perceived exertion ○ weights gym equipment suitable for muscle size and strength assessment ○ biomechanics equipment with models of levers ○ dynamometers and weights gym equipment • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	2	2	2	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT006B	USE AND MAINTAIN CORE FITNESS INDUSTRY EQUIPMENT
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to provide the fitness instructor with basic knowledge and skills to maintain equipment commonly used in the fitness industry, and operate it to manufacturer's specifications.

ELEMENT	PERFORMANCE CRITERIA
1 Conduct basic maintenance of equipment and facilities of a fitness centre	1.1 Carry out daily, weekly, monthly and annual preventative <i>maintenance</i> on <i>fitness equipment</i> 1.2 Complete <i>maintenance logs</i>
2 Assist clients in the safe operation of the major types of equipment used in a fitness centre	2.1 Apply the principles of action and safe method of operation of <i>fitness equipment</i> supplied by the manufacturer when instructing clients 2.2 Supervise the use of <i>fitness equipment</i> by clients to ensure safety

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Fitness equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • free weights <ul style="list-style-type: none"> ○ barbells ○ dumbbells ○ frames and upholstery ○ ancillary equipment, eg, belts, straps, boards ○ racks ○ benches ○ specialised floor surfaces and/or platforms • pin loaded systems <ul style="list-style-type: none"> ○ lever systems ○ variable resistance lever systems ○ pulley systems ○ cam systems <ul style="list-style-type: none"> ▪ rails ▪ weight stacks ▪ bearings ▪ pulleys and cables ▪ cable connectors ▪ accessories, eg, bars, straps ▪ frames and upholstery • hydraulic systems <ul style="list-style-type: none"> ○ hydraulic bleeding ○ bearings ○ pulleys and cables ○ cable connectors ○ accessories, eg, bars, straps ○ frames and upholstery • air braked systems <ul style="list-style-type: none"> ○ frames and upholstery ○ wheels/vanes ○ bearings/slides ○ cords ○ cables/chains ○ handles • electronic/cardiovascular systems <ul style="list-style-type: none"> ○ power cords ○ motors and moving parts ○ control panels ○ frames and upholstery • sound systems, including microphones • surfaces <ul style="list-style-type: none"> ○ mirrors ○ counter and desk tops ○ flooring, eg, carpet, rubber ○ mats • aqua equipment <ul style="list-style-type: none"> ○ flotation devices

	<ul style="list-style-type: none">○ resistance devices○ protective devices
Maintenance	[all categories] <ul style="list-style-type: none">• cleaning• lubrication• reflation• checking for damage• restocking or refilling
Maintenance logs	[all categories] not be limited to <ul style="list-style-type: none">• date• time• maintenance carried out• nature of the fault, if any• repairs carried out, if any• initials of staff undertaking maintenance check

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ clean to the standard required in the workplace ○ follow general maintenance procedures ○ report maintenance faults to the standard required in the workplace ○ perform basic equipment maintenance to standards required in the workplace ○ conform to relevant occupational health and safety standards
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Terminology related to fitness equipment • Required skills <ul style="list-style-type: none"> ○ Familiarity with the use of tools required for the basic maintenance of fitness industry equipment, such as spanners, sockets, pliers, screwdrivers, and allen keys.
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre environment ○ quality exercise gym equipment of a standard common in the fitness Industry ○ a real or simulated fitness centre environment ○ original relevant equipment operation and maintenance manuals ○ basic maintenance equipment such as upholstery cleaning kit, glass cleaning kit and toolbox, ie, socket set, screwdrivers, allen keys, spanners, pliers and lubrication set • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>

Consistency in performance	<ul style="list-style-type: none">• Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	1	1	2	3	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT007B	UNDERTAKE RELEVANT EXERCISE PLANNING AND PROGRAMMING
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to plan and program advanced exercise for fitness industry clients.

ELEMENT	PERFORMANCE CRITERIA
1 Use the principles and variables of programming that underlie exercise planning	1.1 Use the <i>principles of exercise</i> planning to develop <i>exercise plans</i> for <i>clients</i> 1.2 Use clear and structured forms when writing exercise plans and exercise programs 1.3 Consider total training volume when developing an exercise plan and relate training volume to other <i>program variables</i>
2 Use a structured approach to exercise planning	2.1 Conduct a client induction and screening before commencing to develop an <i>exercise plan</i> 2.2 Use the four <i>program phases</i> when developing session programs and relate to the clients specific needs 2.3 Describe the physiological and <i>psychological</i> benefits of the preparation and recovery phase to <i>clients</i> 2.4 Outline the various types of <i>conditioning</i> appropriate for their goals and fitness levels to <i>clients</i>
3 Write plan for specific fitness adaptations	3.1 Use the programming principles of planning for specific fitness <i>adaptations</i> when writing fitness plans 3.2 Explain the relationship between the type of <i>conditioning</i> desired and the type of preparation phase selected to <i>clients</i> 3.3 Demonstrate an awareness of the client's needs, objectives and exercise likes and dislikes when writing the plan/s 3.4 Select appropriate exercises to meet the client's needs when writing the plan/s 3.5 Design a plan format and structure that is appropriate to the client and the specific target adaptation 3.6 Describe the <i>physiological changes</i> and anatomical changes that occur with regular participation in the specific program to clients
4 Evaluate and modify existing exercise plans for fitness industry clients	4.1 Recognise the general conditions that suggest a client's plan should be <i>evaluated</i> 4.2 Describe the process by which clients are <i>evaluated</i> to the client 4.3 Recognise the signs and symptoms of overtraining and utilise strategies for its prevention 4.4 Analyse and incorporate client's exercise likes and dislikes into a modified <i>exercise plan</i> 4.5 Review client goals and incorporate changes to goals into the <i>exercise plan</i> 4.6 Assess <i>clients</i> for relevant fitness changes 4.7 Discuss changes to the long term plan with <i>clients</i> 4.8 Write revised programs and provide instruction to <i>clients</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Adaptations	<p>[all categories]</p> <ul style="list-style-type: none"> • aerobic endurance <ul style="list-style-type: none"> ○ aerobic energy system involvement ○ large muscle groups ○ involvement of aerobic responses such as <ul style="list-style-type: none"> ▪ substrate utilisation ▪ heart rate responses ▪ ventilation responses • cardiovascular endurance <ul style="list-style-type: none"> ○ muscle group involvement ○ energy system ○ involvement of cardiovascular responses such as <ul style="list-style-type: none"> ▪ blood pressure ▪ heart rate ▪ vascular shunting ▪ vasodilation • hypertrophy <ul style="list-style-type: none"> ○ low volume and heavy load stimuli for fast twitch fibres ○ high volume and low load stimuli for slow twitch fibres ○ muscle tension • local muscle endurance <ul style="list-style-type: none"> ○ number of sets ○ repetition maximum ○ recovery ○ exercises • neuromuscular coordination <ul style="list-style-type: none"> ○ sets and repetitions ○ exercise type ○ exercise technique ○ safety considerations ○ skill foundation • power <ul style="list-style-type: none"> ○ sets and repetitions ○ repetition maximum ○ recovery times ○ exercise techniques • strength <ul style="list-style-type: none"> ○ sets and repetitions ○ repetition maximum ○ recovery times ○ exercise techniques • stretching/flexibility <ul style="list-style-type: none"> ○ sets and repetitions ○ recovery times ○ exercise technique
Exercise plans	[all categories]

	<p>changes to</p> <ul style="list-style-type: none"> • movement <ul style="list-style-type: none"> ○ direction ○ range ○ lever length ○ complexity ○ speed • environment <ul style="list-style-type: none"> ○ stability of client ○ perceived risk ○ activity type • intensity <ul style="list-style-type: none"> ○ resistance ○ repetitions ○ muscle involvement • program type, such as <ul style="list-style-type: none"> ○ sets and reps ○ circuit ○ matrix ○ super sets ○ plyometrics ○ pre-fatigue ○ interval
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • various ages • screened • active or inactive
Conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • speed • power • strength • flexibility • cardiovascular endurance • hypertrophy • muscle endurance • weight loss

Exercise plan	<p>[all categories]</p> <p>the components include</p> <ul style="list-style-type: none"> • client details • current fitness • client goals • targeted adaptations • anticipated rate of client adaptation • periodisation of multiple target adaptations • number and nature of specific session programs • equipment requirements • facility requirements • review dates
Evaluated	<p>[all categories]</p> <ul style="list-style-type: none"> • original aims and objectives • client satisfaction • suitability and safety of facilities and equipment
Physiological changes	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular changes • thermoregulation • energy system and substrate utilisation • pulmonary changes • nervous system changes
Principles of exercise	<p>[all categories]</p> <ul style="list-style-type: none"> • client goals • client physical capacity • planning elements <ul style="list-style-type: none"> ○ training threshold ○ overload ○ specificity ○ reversibility ○ progression ○ periodisation ○ genetic potential ○ recovery rate ○ individualisation • motivational techniques • performance goals • predicted rate of adaptation

Program phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation phase <ul style="list-style-type: none"> ○ mobility ○ first preparation ○ pre-stretch ○ specific preparation • conditioning phase <ul style="list-style-type: none"> ○ apply the training stimulus • recovery phase <ul style="list-style-type: none"> ○ stretching ○ nutrition ○ massage ○ soft or gentle exercise • adaptation phase <ul style="list-style-type: none"> ○ rest ○ recovery ○ positive physiological and anatomical adaptations
Program variables	<p>[all categories]</p> <ul style="list-style-type: none"> • frequency • intensity • duration • type • progressive overload • specificity • individualisation • reversibility • recovery • periodisation
Psychological	<p>[all categories]</p> <ul style="list-style-type: none"> • mental imaging • focusing • level of self motivation • development of motivational tools

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ implement the principles and variables of training that underlie exercise planning ○ interrelate the components of an exercise plan for specific adaptations ○ write exercise plans for a variety of training conditions ○ modify existing exercise plans for clients
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Activity aims and client goal setting ○ Principles of fitness planning ○ Exercise science, including anatomy, physiology, biomechanics and nutritional principles, as applied to fitness activities ○ Fitness and exercise equipment terminology • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills to enhance interaction with clients ○ Verbal, written and listening communication skills for understanding a client's specific exercise requirements

	<ul style="list-style-type: none"> ○ Technical expertise and experience in the specific fitness activity being planned for the client
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	3	2	3	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT008B	UTILISE A BROAD KNOWLEDGE OF EXERCISE SCIENCE IN EXERCISE PLANNING, PROGRAMMING AND INSTRUCTION
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills required to utilise a broad knowledge of exercise science principles in fitness training.

ELEMENT	PERFORMANCE CRITERIA
1 Apply a knowledge of musculoskeletal anatomy to exercise planning, programming, and instruction	1.1 Apply a knowledge of skeletal anatomy to exercise planning, programming and instruction 1.2 Apply a knowledge of the integrated monitoring and control of skeletal muscle contraction by the nervous system to exercise planning, programming and instruction 1.3 Apply a knowledge of the structure, range of motion and function of muscles, muscle groups and directional terms to exercise planning, programming and instruction
2 Apply related concepts and principles of mechanics to exercise	2.1 Analyse and apply the forces acting on the body during exercise and basic mechanical concepts to exercise 2.2 Apply concepts and principles of mechanics to exercise
3 Apply related concepts of physiology to exercise	3.1 Apply a knowledge of the structure and function of the cardio vascular system to exercise 3.2 Apply a knowledge of the structure, processes and function of body energy systems involved in the storage, transport, and utilisation of energy substrates, oxygen and metabolic products to exercise 3.3 Apply a knowledge of the physiological responses of the human body to a single bout of physical activity to exercise 3.4 Apply a knowledge of the physiological adaptations and weight bearing of the human body to regular exercise to exercise planning, programming and instruction 3.5 Apply a knowledge of the physiological responses to physical activity in various environmental conditions to exercise planning, programming and instruction
4 Use functional appraisals to monitor physiological adaptations to exercise	4.1 Select valid and reliable functional appraisals 4.2 Use fitness equipment appropriate to the exercise activity for the appraisal 4.3 Measure responses to the appraisal using a variety of measurement methods

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Basic mechanical concepts	<p>[all categories]</p> <ul style="list-style-type: none"> • types of levers • mechanical advantage
Cardiovascular system	<p>[all categories]</p> <ul style="list-style-type: none"> • the major physical characteristics of blood and the functions of its major components • the structure and function of the heart and its major components • the structural and functional characteristics of the conduction systems of the heart • the major events of the cardiac cycle • the structure and function of the various types of blood vessels • the major arteries and veins of the circulatory system • the control of blood flow to skeletal muscle
Concepts and principles of mechanics	<p>[all categories]</p> <ul style="list-style-type: none"> • mechanical concepts modelling human movement <ul style="list-style-type: none"> ○ gravity ○ centre of mass ○ inertia ○ force and momentum ○ force production by the body • mechanical concepts related to common exercise equipment <ul style="list-style-type: none"> ○ resistance/resistance arm ○ force/force arm ○ axis of rotation ○ variable resistance
Directional terms	<p>[all categories]</p> <ul style="list-style-type: none"> • flexion • extension • dorsiflexion • plantar flexion • abduction • adduction • circumduction • rotation • supination • pronation • inversion • eversion • protraction

	<ul style="list-style-type: none"> • retraction • elevation • depression
Energy systems	<p>[all categories]</p> <ul style="list-style-type: none"> • duration and intensity of exercise effect energy contribution from the main energy systems utilised during different forms of exercise <ul style="list-style-type: none"> ○ adenosine triphosphate ○ phosphocreatine ○ anaerobic glycolytic • exercise programs that utilise of fatty acid metabolism • energy system adaptations • effect of energy intake affects the breakdown of energy substrates • body systems involved in production of energy
Environmental conditions	<p>[all categories]</p> <ul style="list-style-type: none"> • adaptations of the body to hot and cold environmental conditions • physiological and biomechanical differences of exercising in the heat compared to normal adaptive conditions • physiological and biomechanical differences of exercising in the cold compared to normal adaptive conditions • acute and chronic effects of exercising in water • the mechanism whereby the body regulates internal temperature in responses to environmental changes and exercise • dehydration and the importance of water intake/re-hydration during exercise • physiological demands placed on the body from smoking • need for a comprehensive preparation phase to avoid heat or cold stress <ul style="list-style-type: none"> ○ mobility ○ general preparation ○ pre stretch ○ specific preparation
Fitness equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • rowers • steppers • steps • treadmills • stationary cycles • VO2 max shuttle run test recordings • heart rate monitors • ratings of perceived exertion • 'norm' charts

Forces	<p>[all categories]</p> <ul style="list-style-type: none"> • resistive • motive • friction • centre of gravity • centre of force, equipment and muscles
Functional appraisals	<p>[all categories]</p> <ul style="list-style-type: none"> • anthropometry • aerobic responses • cardiovascular responses • strength • endurance • flexibility
Measurement methods	<p>[all categories]</p> <ul style="list-style-type: none"> • heart rate response • pulse response • blood pressure response • respiration rate response • skin colour response • perceived exertion • exercise form • work output
Metabolic products	<p>[all categories]</p> <ul style="list-style-type: none"> • lactate • carbon dioxide • water
Muscle groups	<p>[all categories]</p> <ul style="list-style-type: none"> • prime mover • fixators • assistors
Physiological responses	<p>[all categories]</p> <ul style="list-style-type: none"> • the acute responses to the onset of exercise of the <ul style="list-style-type: none"> ○ cardiovascular system <ul style="list-style-type: none"> ▪ heart rate response ▪ blood volume ▪ blood pressure ▪ stroke volume ▪ cardiac output ○ respiratory system <ul style="list-style-type: none"> ▪ respiratory rate ○ immune system ○ nervous system

	<ul style="list-style-type: none"> ○ musculoskeletal system ○ endocrine system ● the regulation of blood flow during exercise ● the shifts in the distribution of blood to various areas of the body during exercise
Physiological adaptations	<p>[all categories]</p> <ul style="list-style-type: none"> ● distinguish between central and peripheral fitness adaptations ● explain the central and peripheral adaptations of the body to anaerobic training and aerobic training
Processes	<p>[all categories]</p> <ul style="list-style-type: none"> ● glycolysis ● gluconeogenesis ● lipolysis ● use of protein as fuel
Range of motion	<p>[all categories]</p> <ul style="list-style-type: none"> ● sit and reach ● goniometers ● electronic
Skeletal anatomy	<p>[all categories]</p> <ul style="list-style-type: none"> ● bones <ul style="list-style-type: none"> ○ structure and mechanics of bone ○ the biomechanical properties of bone ○ the responses of bone to weight bearing activities ○ bone formation, growth, and remodelling ○ the influence of diet on bone homeostasis ○ the influence of age on bone homeostasis ○ major bones and major landmarks of the skeleton ○ bone markings <ul style="list-style-type: none"> ▪ tuberosity ▪ crest ▪ trochanter ▪ line ▪ tubercle ▪ epicondyle ▪ spine ▪ head ▪ facet ▪ condyle ▪ ramus ▪ meatus ▪ sinus ▪ fossa ▪ groove ▪ fissure ▪ foramen ○ directional terms used to define positions of bones and landmarks ○ structural regionalisation of the vertebral column and the implications for movement

	<ul style="list-style-type: none"> ○ normal and abnormal spinal curvatures and the implications of these conditions for physical activity • joints <ul style="list-style-type: none"> ○ joints related to exercise <ul style="list-style-type: none"> ▪ intervertebral ▪ sternoclavicular ▪ sternocostal ▪ acromioclavicular ▪ glenohumeral ▪ elbow ▪ radioulnar ▪ radiocarpal ▪ metacarpophalangeal ▪ pubic symphysis ▪ coxal ▪ tibiofibular ▪ femoropatellar ▪ tibiofibular ▪ ankle ▪ metatarsophalangeal ○ structure and function of joints <ul style="list-style-type: none"> ▪ fibrous, cartilaginous and synovial joints ○ anatomical structure of joints
Skeletal muscle contraction	<p>[all categories]</p> <ul style="list-style-type: none"> • the main features of nerves and the nervous system related to exercise <ul style="list-style-type: none"> ○ nervous system classification and structure <ul style="list-style-type: none"> ▪ central/peripheral ▪ afferent/efferent ▪ voluntary/involuntary ○ structure of a motor neuron ○ generation and conduction a motor impulse ○ reflex arcs • the neural innervation of muscles for movement and proprioception • the types of muscle contraction, and the relationship between muscle force and external load for each • the factors influencing muscle contraction <ul style="list-style-type: none"> ○ length — tension relationship ○ motor unit recruitment ○ muscle fibre types ○ mechanical advantage of joint position ○ force — velocity relationships ○ size principle ○ reciprocal inhibition, ie, agonist/antagonist relationship

Structure and function of muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • the transfer of metabolites between blood and muscles • the general relationship between nerves and skeletal muscle • the major postural muscles <ul style="list-style-type: none"> ○ pectoralis minor ○ serratus anterior ○ intercostals ○ brachialis ○ pronator teres ○ brachioradialis ○ flexor carpi radialis ○ palmaris longus ○ extensor carpi radialis longus ○ flexor carpi ulnaris ○ extensor carpi ulnaris ○ extensor digitorum ○ external oblique ○ rhomboid major ○ rhomboid minor ○ levator scapulae ○ teres minor ○ supraspinatus ○ infraspinatus ○ internal oblique ○ gluteus maximum ○ gluteus medius ○ gluteus minimus ○ transverse abdominis ○ iliotibial tract ○ adductor magnus ○ biceps femoris ○ semitendinosus ○ semimembranosus ○ iliopsoas ○ tensor fasciae latae ○ sartorius ○ adductor longus ○ gracilis • the purpose of connective tissues <ul style="list-style-type: none"> ○ ligaments <ul style="list-style-type: none"> ▪ elbow <ul style="list-style-type: none"> ▪ radial collateral ligament ▪ ulnar collateral ligament ▪ knee <ul style="list-style-type: none"> ▪ fibular, ie, lateral, collateral ligament ▪ patella ligament ▪ anterior cruciate ligament ▪ tibial, ie, medial, collateral ligament ▪ posterior cruciate ligament ▪ shoulder <ul style="list-style-type: none"> ▪ acromio clavicular ligament ▪ ankle • tendon <ul style="list-style-type: none"> ○ achilles tendon ○ patella tendon
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Weight bearing	[all categories] <ul style="list-style-type: none">• own body weight• added resistance<ul style="list-style-type: none">○ pin loaded○ hydraulic○ free weight○ air braked○ water environment
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ monitor the physiological responses of the body to exercise ○ explain the adaptations the body makes to exercise ○ conduct aerobic function assessments ○ monitor the temperature regulation of the body during exercise
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT009B Undertake postural appraisal of low risk clients • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic exercise physiology ○ Basic anatomy ○ Basic biomechanics • Required skills <ul style="list-style-type: none"> ○ Ability to accurately measure a client's blood pressure ○ Ability to accurately monitor a client's heart rate

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	2	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT009B	UNDERTAKE POSTURAL APPRAISAL OF LOW RISK CLIENTS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to undertake basic postural appraisals to evaluate client's posture, functional range of movement and muscle strength and weakness in preparation for the development of an exercise program.

ELEMENT	PERFORMANCE CRITERIA
1 Prepare clients for postural appraisal	1.1 Undertake exercise screening of clients using recognised screening tool and refer to an appropriate medical or allied health professional , if required 1.2 Explain the aims of postural appraisal and the procedures of the tests to the client 1.3 Discuss the importance of identifying postural variances and explain to clients, the relationship between posture and injury prevention 1.4 Inform clients of the legal and ethical limitations of the fitness trainer and the importance of networking and referral to appropriate medical and allied health professionals 1.5 Put clients at ease and display client empathy during the induction process 1.6 Select relevant postural screening tool and screening tests appropriate to the client and prepare equipment required
2 Assess low risk client's range of movement at relevant joints	2.1 Evaluate the client's mobility at relevant joints by conducting industry standard functional range of movement tests 2.2 Perform tests according to test protocols and using appropriate equipment 2.3 Identify joint restrictions and refer clients to an appropriate health professional if any significant or abnormal restrictions are observed 2.4 Record results using a standardised method and explain results to clients 2.5 Apply the identified range of movement , joint restrictions or right/left differences, to posture during exercise and movement
3 Analyse low risk client's static posture	3.1 Perform a static postural appraisal of clients using an industry standard posture analysis tool and record information systematically 3.2 Compare the client's posture to the ideal postural alignment in order to identify common postural variances 3.3 Analyse the symmetrical development of muscles to identify any muscular deficits 3.4 Identify and systematically record joints, muscles and connective tissues that may require strengthening and/or stretching in consultation with allied health professional or medical practitioner 3.5 Record results using a standardised method and explain the results to clients 3.6 Refer clients with postural variances or concerns to an appropriate health care professional
4 Observe client's dynamic posture whilst performing fitness exercises and fitness activities	4.1 Observe the client's dynamic posture whilst performing simple locomotive movements for muscle strength, symmetrical development, symmetrical range, coordination of movement 4.2 Observe the client's dynamic posture performing several common fitness exercises for muscular deficits , symmetrical development, symmetrical range, coordination of movement 4.3 Analyse movements to determine joint movement , muscle action and role of muscle contraction 4.4 Use a system of recording information obtained from the observation of

	<p>exercises</p> <p>4.5 Analyse the basic movements and correct poor technique likely to cause postural variances and explain the potential for injury to clients</p> <p>4.6 Refer clients with dynamic postural variances or concerns to an appropriate health care professional</p>
5 Deliver suitable exercises for clients with postural concerns with allied health professionals	<p>5.1 Knowledge of joint movement and muscle action is applied to determine appropriate exercise prescription to correct muscle strength or muscle endurance deficits, joint restrictions or asymmetry</p> <p>5.2 Determine muscles and/or joints that need to be stretched relevant to the postural variances</p> <p>5.3 Determine muscles that need to be strengthened relevant to the postural variances</p> <p>5.4 Provide information about the strengthening and stretching exercises relevant to the postural concern after consultation with a suitably qualified allied health professional</p>
6 Provide information to clients relating to posture	<p>6.1 Provide information about the common causes of poor posture to clients and explain suitable strategies to prevent injury caused by poor posture</p> <p>6.2 Provide behavioural strategies to address poor posture</p> <p>6.3 Discuss the role of exercise, including self-observation of exercise technique in the correction of inappropriate practices</p> <p>6.4 Warn clients of exercises or activities that are contraindicated or may further exacerbate any postural variance</p>
7 Work as part of an allied health team	<p>7.1 Recommend to clients that they consult with a medical or allied health professional when injury or illness is identified</p> <p>7.2 Use appropriate documentation and terminology when communicating with health professionals</p> <p>7.3 Identify contraindications to exercise and make suitable referral</p> <p>7.4 Feedback received from medical or allied health professional is discussed with the client</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aims of postural appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • identify abnormality • determine degree of deviation • determine origin of deviation • determine effect on proposed or current exercise plan and goals • identify contraindications • identify postural risk factors associated with exercise • prevent injury
Causes of poor posture	<p>[all categories]</p> <ul style="list-style-type: none"> • congenital abnormalities of the musculoskeletal system • poor muscle strength • muscle imbalance • lack of mobility • damage to bony structures • damage to connective tissue including ligaments, cartilage • biomechanics • changes to line of gravity caused by pregnancy, inappropriate footwear, behaviours, work practices, sport/leisure activities
Common fitness exercises	<p>[all categories]</p> <ul style="list-style-type: none"> • lat pull down • chest press • seated row • abdominal crunch • squat • dead lift • leg press • lunge • walking • stretching
Common postural variances	<p>[all categories]</p> <ul style="list-style-type: none"> • forward head position • kyphosis • rounded shoulders • winging of scapula • scoliosis • increased lordosis • decreased lordosis • excessive posterior pelvic tilt

	<ul style="list-style-type: none"> • excessive anterior pelvic tilt • genu varum • genu valgum • increased pronation of foot/ankle complex • increased supination of foot/ankle complex • hyperextension of knees • lateral tilt of pelvis • lateral tilt of head
Exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • questionnaire • interview • clearance letter from an allied health professional or medical professional, eg, exercise physiologist
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • quantitative information on performance related to <ul style="list-style-type: none"> ○ range of movement ○ strength ○ endurance • quantitative information on skill • qualitative information on attitude and motivation
Fitness activities	<p>[all categories]</p> <ul style="list-style-type: none"> • group classes • individual exercise sessions
Ideal postural alignment	<p>[all categories]</p> <ul style="list-style-type: none"> • normal spinal curves • straight line running through <ul style="list-style-type: none"> ○ ear lobe ○ anterior shoulder joint ○ vertebral bodies of L 1–5 ○ posterior hip joint ○ anterior knee joint ○ anterior ankle joint
Joints	<p>[all categories]</p> <ul style="list-style-type: none"> • intervertebral segments • glenohumeral • elbow • lumbo–sacral • hip • patello–femoral • knee • ankle

Joint movement	<p>[all categories]</p> <ul style="list-style-type: none"> • flexion • extension • dorsiflexion • plantar flexion • horizontal flexion • horizontal extension • abduction • adduction • circumduction • rotation • supination • pronation • inversion • eversion • protraction • retraction • elevation • depression
Medical or allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • erector spinae • rectus abdominis • internal obliques • external obliques • multifidus • latissimus dorsi • quadratus lumborum • iliopsoas • rhomboid major • rhomboid minor • pectoralis major • serratus anterior • levator scapulae • teres major • teres minor • supraspinatus

	<ul style="list-style-type: none"> • infraspinatus • gluteus maximus • gluteus medius • gluteus minimus • iliotibial tract • tensor fascia latae • piriformis • rectus femoris • vastus lateralis • vastus medialis • vastus intermedius • sartorius • biceps femoris • semitendinosus • semimembranosus • gastrocnemius • soleus • tibialis anterior • adductor magnus • adductor longus • gracilis • sartorius
Muscular deficits	<p>[all categories]</p> <ul style="list-style-type: none"> • diminished muscle strength • limited flexibility • diminished muscle endurance
Postural appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • static/dynamic • views <ul style="list-style-type: none"> ○ anterior ○ posterior ○ lateral • equipment <ul style="list-style-type: none"> ○ tape measure ○ goniometer ○ flexometer • positions <ul style="list-style-type: none"> ○ standing posture ○ sitting posture ○ supine posture

Postural screening tool	<p>[at least]</p> <ul style="list-style-type: none"> • visual observation • plumb line • grid <p>includes</p> <ul style="list-style-type: none"> • photographic technology • video analysis
Postural variances	<p>[all categories]</p> <ul style="list-style-type: none"> • structural • functional
Range of movement	<p>[all categories]</p> <ul style="list-style-type: none"> • functional range • active range/passive range • joint specific/muscle specific • joint and muscle specific tests • equipment <ul style="list-style-type: none"> ○ flexometer ○ goniometer ○ plurimeter
Role of muscle	<p>[all categories]</p> <ul style="list-style-type: none"> • agonist • antagonist • fixators • assistors
Static postural appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • anterior • posterior • lateral

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ screen a client for postural alignment ○ assess a clients joint range of movement ○ observe a clients static posture to identify major postural abnormalities ○ observe a client's dynamic posture whilst performing fitness activities and provide feedback about technique ○ work as part of a team under the supervision of allied health professional and medical professionals
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, planning and instruction • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition

Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Extensive knowledge of skeletal anatomy and physiology ○ Biomechanics, especially movement terminology and execution ○ An industry standard screening process that identifies moderate risk clients ○ Fitness assessment protocols ○ The safe operation of fitness equipment including fitness testing equipment • Required skills <ul style="list-style-type: none"> ○ Good oral and written communication skills to obtain information from the client and to provide appropriate advice ○ Ability to gather and interpret information gathered in order to identify their exercise concerns and relate these to both their lifestyle and exercise program ○ Effective interpersonal skills to develop rapport with clients and health professionals ○ Ability to efficiently and effectively instruct clients using exercise equipment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a fitness assessment room ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ○ appropriate documentation and resources normally used in the workplace including a industry standard screening tool and form or chart to record information about the client's posture ○ postural analysis equipment such as a postural grid, plumb line, goniometer, tape measure ○ a range of fitness clients with differing needs and goals • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required

	<p>knowledge and skills and consideration of required attitudes</p> <ul style="list-style-type: none">• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	3	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Collect information from the clients relating to posture, conduct posture screening tests • Communicating ideas and information — Provide information about posture and convey results of screening tests performed • Planning and organising activities — Conduct several postural screening activities in a logical and practical sequence • Working with teams and others — Network with medical and allied health professionals to evaluate posture and interact with a variety of clients with different needs and goals • Using mathematical ideas and techniques — Apply knowledge of measurement in terms of degrees and angles to evaluate range of motion, use information gathered to calculate results and follow recognised protocols • Solving problems — Observe posture, compare to ideal postural alignment to identify abnormalities • Using technology — Use and instruct the safe operation of fitness equipment and posture testing equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT010B	UTILISE A BROAD RANGE OF FITNESS EQUIPMENT
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to use, maintain and demonstrate a broad range of fitness equipment.

ELEMENT	PERFORMANCE CRITERIA
1 Plan an arrangement of equipment within a fitness facility	1.1 Develop floor plan for the arrangement of equipment within a fitness facility, taking into account the type of programs delivered in the facility, occupational health and safety requirements and manufactures specifications 1.2 Comply with manufacturer's, legislated and Australian Standards for the use of electrical equipment
2 Evaluate and select equipment for a fitness facility	2.1 Outline the procedures to select and purchase new fitness equipment for a recreational facility 2.2 Select fitness equipment to meet facility and program needs
3 Develop and conduct general maintenance procedures for a fitness facility	3.1 Generate a list of facility equipment and the relevant service 3.2 Develop a basic maintenance and cleaning roster for the facility 3.3 Develop maintenance records that would be kept over a 12 month period 3.4 Outline the procedures for the identification and repair of a faulty piece of fitness equipment
4 Demonstrate and instruct the use of cardio-vascular equipment	4.1 Develop innovative cardiovascular fitness plans and exercise programs to meet a client's specific needs 4.2 Demonstrate the functions on the display board of cardiovascular equipment are demonstrated to clients 4.3 Utilise a variety of different program functions for specific client needs 4.4 Adjust the cardiovascular equipment to suit the needs of clients 4.5 Instruct the client on the use of cardiovascular equipment
5 Demonstrate and instruct the use of free weight equipment	5.1 Develop innovative free weight fitness plans and exercise programs to meet a client's specific needs 5.2 Use a knowledge of the basic mechanics of action of free weight equipment to modify exercises for specific fitness outcomes or for safety 5.3 Demonstrate a variety of exercises using free weight equipment 5.4 Analyse the training age of the client with respect to the exercises taught and adjust the technical difficulty of the exercises accordingly 5.5 Instruct the client on the use of free weight equipment
6 Demonstrate and instruct the use of innovative exercise equipment	6.1 Develop innovative plans and exercise programs are developed using non-traditional equipment to meet a client's specific needs 6.2 Use innovative exercise equipment with reference to manufacturer's guidelines 6.3 Use a knowledge of the basic mechanics of action of innovative exercise equipment to modify exercises for specific fitness outcomes or for safety 6.4 Instruct exercises using innovative exercise equipment to clients

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Australian Standards	[all categories] <ul style="list-style-type: none"> • number of machines on a single circuit • special requirements for use of electrical appliances near water • installation of equipment to manufacture's standards
Cardiovascular equipment	[all categories] <ul style="list-style-type: none"> • bikes • treadmills • elliptical trainers • steppers • rowing machines
Facility and program needs	[all categories] <ul style="list-style-type: none"> • aesthetics • space • efficiency • adjustability • durability • appropriateness for clients • integrity of moving and non-moving parts • servicing arrangements • ease of maintenance • movement specificity • safety
Fitness equipment	[all categories] <ul style="list-style-type: none"> • pin loaded equipment • cardiovascular equipment • free weight equipment • hydraulic equipment • electronically braked equipment • air braked equipment • pool based equipment • sound and microphone systems

Floor plan	<p>[all categories]</p> <ul style="list-style-type: none"> • size of equipment • work space required • maintenance of fire exists • access to water • walkways/traffic areas • suitability of facilities for the type of clientele and services provided
Free weights	<p>[all categories]</p> <ul style="list-style-type: none"> • bars • dumbbells • collars • barbells • benches
Innovative	<p>[all categories]</p> <p>changes to</p> <ul style="list-style-type: none"> • movement <ul style="list-style-type: none"> ○ direction ○ range ○ lever length ○ complexity ○ speed • environment <ul style="list-style-type: none"> ○ stability of client ○ perceived risk ○ activity type • intensity <ul style="list-style-type: none"> ○ resistance ○ repetitions ○ muscle involvement • program type, such as <ul style="list-style-type: none"> ○ sets and reps ○ circuit ○ matrix ○ super sets ○ plyometrics ○ pre-fatigue ○ interval

Innovative exercise equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise balls <ul style="list-style-type: none"> ○ medicine balls ○ swiss balls • bars <ul style="list-style-type: none"> ○ body bars • steps • bands <ul style="list-style-type: none"> ○ dyna bands ○ speed assisted bands ○ speed resisted bands • specific muscle targets <ul style="list-style-type: none"> ○ abdominal assisters ○ rotator cuff ○ plyometric training systems
Knowledge	<p>[all categories]</p> <ul style="list-style-type: none"> • principles of action • major maintenance focus • anatomical and physiological consequences of the equipment usage modification • work as part of a team when specialist attention is required
Program functions	<p>[all categories]</p> <ul style="list-style-type: none"> • the different functions that can be programmed into electronic exercise equipment
Training age	<p>[all categories]</p> <ul style="list-style-type: none"> • the time in months/years that a client has been training with free-weights
Variety of exercises	<p>[all categories]</p> <ul style="list-style-type: none"> • compound • isolation • body part/muscle specific • equipment specific

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ demonstrate the use of cardiovascular equipment ○ demonstrate the use of free-weights equipment ○ demonstrate the use of innovative exercise equipment ○ maintain fitness facility equipment
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Fitness equipment terminology • Required skills <ul style="list-style-type: none"> ○ Basic fitness equipment maintenance ○ Basic fitness equipment usage when instructing clients in fitness programs ○ Fitness related instructional skills of programs designed to improve or maintain specific fitness parameters of clients ○ Skills in relating to clients in a fitness industry environment, in order to determine client goals and motivate them to participate in

	a long term fitness program
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	2	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT011B	PROVIDE EXERCISE FOR FITNESS INDUSTRY CLIENTS WITH SPECIAL REQUIREMENTS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills required to provide exercise for clients with common medical, injury or health conditions, after referral from and under the supervision of medical and allied health professionals and as part of a team of allied health and medical professionals.

ELEMENT	PERFORMANCE CRITERIA
1 Screen clients for health, medical, or injury conditions	1.1 Screen <i>clients</i> 1.2 Recommend a referral to a medical practitioner or allied health professional to all <i>clients</i> who disclose health, medical or injury conditions 1.3 Identify health, medical or injury conditions and work as part of a team under the supervision of <i>allied health professionals</i> and <i>medical professionals</i>
2 Apply exercise considerations and guidelines to clients with identified special requirements	2.1 Describe the exercises and types of exercise which are recommended for <i>clients</i> with identified <i>special requirements</i> exercising in the fitness industry to maintain and develop health and functional capacity to clients 2.2 Deliver an exercise plan and/or program/s designed by a suitably qualified allied health or medical professional for <i>clients</i> with identified <i>special requirements</i> to <i>clients</i> 2.3 Instruct <i>clients</i> with identified <i>special requirements</i> under the supervision of suitably qualified allied health professional or <i>medical professionals</i> 2.4 Apply aerobic and resistance training guidelines to <i>clients</i> with identified <i>special requirements</i> in line with recommendations and guidelines from medical and <i>allied health professionals</i> 2.5 Provide advice on guidelines appropriate to exercise in the fitness industry to <i>clients</i> with identified <i>special requirements</i> in consultation with suitably qualified <i>allied health professionals</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Client	<p>[all categories]</p> <ul style="list-style-type: none"> • adult or children • able or disabled • experienced or inexperienced • clearance for specific exercise from a medical practitioner • individuals with common medical conditions <ul style="list-style-type: none"> ○ cardiac concerns ○ peripheral vascular concerns ○ blood pressure concerns ○ asthmatic ○ obese ○ diabetic ○ pregnancy ○ arthritic ○ osteoporotic ○ specific disability ○ anaemic ○ bulimic ○ anorexic
Considerations	<p>[all categories]</p> <ul style="list-style-type: none"> • physiological <ul style="list-style-type: none"> ○ heart rate ○ arrhythmia ○ blood pressure ○ respiratory changes ○ oedema • biomechanical <ul style="list-style-type: none"> ○ centre of mass

	<ul style="list-style-type: none"> ○ centre of gravity ○ joint laxity ○ postural hypotension ● nutritional <ul style="list-style-type: none"> ○ energy requirements ○ hydration ○ nutrient needs ○ consequences of inadequate diet ● psychological <ul style="list-style-type: none"> ○ reaction to performance decrements ○ weight gain ○ changing attitudes of others ● pathological guidelines provided by an allied health professional or medical professional
Medical professionals	[all categories] <ul style="list-style-type: none"> ● general practice doctors ● medical specialists
Special requirements	[all categories] <ul style="list-style-type: none"> ● rehabilitation of musculoskeletal injuries ● pre–natal consideration for the mother and foetus <ul style="list-style-type: none"> ○ temperature <ul style="list-style-type: none"> ▪ cognital malformation ○ blood flow ○ oxygen delivery ○ glucose availability ○ exercise hormone levels ○ foetal distress ○ in uterine growth retardation ○ physical constrictions ● post–natal considerations for the mother ● medical <ul style="list-style-type: none"> ○ cardiac risk ○ obesity ○ asthma ○ diabetes ○ arthritis ○ specific disability ○ osteoporosis ○ anaemia ○ eating disorders ● disability <ul style="list-style-type: none"> ○ sensory ○ physical ○ intellectual ○ psychiatric

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ provide exercise for the range of clients with special requirements
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Exercise planning and programming on clients with no identified special considerations ○ Applied anatomy and biomechanics on clients with no identified special considerations • Required skills <ul style="list-style-type: none"> ○ Client skills in dealing with low risk individuals and groups in a fitness industry environment, in order to determine their exercise requirements and deliver fitness programs ○ Use and application of traditional and innovative exercise equipment for low risk individuals and groups in a fitness industry environment when instructing fitness programs
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment

	<ul style="list-style-type: none"> ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT012B	UTILISE AN UNDERSTANDING OF MOTIVATIONAL PSYCHOLOGY WITH FITNESS CLIENTS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to analyse client behaviours and recommend strategies for exercise adherence.

ELEMENT	PERFORMANCE CRITERIA
1 Implement motivational theory in fitness activities	1.1 Define and apply arousal theories for clients as individuals and groups in fitness situations to the modification of client behaviour 1.2 Outline the importance and role of motivation techniques such as goal setting as applied to adherence to exercise to clients
2 Utilise motivational psychology	2.1 Observe and interview other instructors working with clients to identify the communicating styles used by different instructors and how each instructor's communicating style affects different clients 2.2 Use motivational skills to help clients identify barriers to adherence and set effective exercise goals when instructing clients 2.3 Identify and use aspects of client exercise behaviour as they apply to motivational practice in a fitness context to develop motivational strategies for clients 2.4 Observe various external and environmental influences and the information is used to develop motivational strategies for clients
3 Demonstrate effective non verbal communication	3.1 Use non verbal communication techniques when instructing and dealing with clients 3.2 Analyse personal non verbal communication skills in the context of a client's response 3.3 Define and use personal attitudes and values to positively influence clients exercise adherence and behaviour
4 Describe and demonstrate barriers to communication	4.1 Analyse instructor client interactions for barriers to communication 4.2 Define and amend/eliminate barriers to communication with clients
5 Utilise arousal techniques to motivate clients	5.1 Identify arousal levels and use arousal control techniques to improve the performance of clients during exercise sessions

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Arousal control techniques	[all categories] <ul style="list-style-type: none"> • anxiety management • progressive relaxation • stress management
Arousal theories	[all categories] <ul style="list-style-type: none"> • drive theory • inverted 'u' • zone of optimal function
Barriers to communication	[all categories] <ul style="list-style-type: none"> • preoccupation • emotional block • hostility • charisma • past experience • hidden agenda • inarticulateness • stereotyping • physical environment • mind-wandering • defensiveness
Client	[all categories] <ul style="list-style-type: none"> • experienced or inexperienced • adults • active or inactive • screened
Communicating styles	[all categories] <ul style="list-style-type: none"> • telling a client • advising a client • manipulating a client • counselling a client

Dimensions of behaviour	<p>[all categories]</p> <ul style="list-style-type: none"> • environment/situation, eg, the sun comes out • thought, eg, it is sunny • feeling, eg, discomfort • intention, eg, to be shielded from the bright sun • action, eg, put on a hat
External and environmental influences	<p>[all categories]</p> <ul style="list-style-type: none"> • indoor <ul style="list-style-type: none"> ○ room set up ○ colours ○ furnishings ○ grooming ○ fittings ○ clothing ○ order • outdoor <ul style="list-style-type: none"> ○ weather ○ location ○ presence of onlookers
Fitness activities	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise to music class • circuit class • stretching class • specific equipment classes, eg, cycling classes
Fitness situations	<p>[all categories]</p> <ul style="list-style-type: none"> • instructing a client • guiding a tour of the facilities to a prospective member • serving a client at reception • screening a client • discussing health issues with clients • recommending a consultation with a medical practitioner
Non verbal communication	<p>[all categories]</p> <ul style="list-style-type: none"> • voice <ul style="list-style-type: none"> ○ inflection ○ emphasis ○ fluency ○ tone ○ tempo ○ resonance • body language <ul style="list-style-type: none"> ○ movement ○ facial expression ○ eye contact ○ gestures ○ posture

	<ul style="list-style-type: none">○ sign language○ touching● body sounds
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ explain and utilise appropriate motivational theory in fitness activities when instructing clients ○ demonstrate effective use of non verbal aspects of communication when instructing clients ○ analyse the physical environment of a fitness facility and how that impacts on client behaviour, then adopt appropriate motivational techniques that meet the needs of the client ○ recognise emerging barriers to communication when dealing with clients, and adopt appropriate strategies for breaking down these barriers to effective client communication
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT013B Provide information and exercise related to nutrition and body composition

Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Motivational stages • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills to enhance interaction with clients ○ Verbal, written and listening communication skills to understand specific client fitness requirements and relate them to developing and delivering fitness programs
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	1	3	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT013B	PROVIDE INFORMATION AND EXERCISE RELATED TO NUTRITION AND BODY COMPOSITION
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to provide basic information about healthy eating and design exercise plans and programs to manage the body compositions in clients.

ELEMENT	PERFORMANCE CRITERIA
1 Explain the general principles of nutrition and health to clients	1.1 Explain the general guidelines of food and nutrition to clients 1.2 Explain the relationship between nutrition and health to clients
2 Estimate the body composition of clients	2.1 Screen clients 2.2 Recommend a visit to a medical professional or allied health professional to the client if they report any health, nutritional or dietary disorder, or medical or injury concerns 2.3 Estimate the body composition of clients using current industry body composition appraisals 2.4 Consider the physiology of the management of body composition 2.5 Compare body composition estimates to anthropometric standards
3 Develop and deliver an exercise plan and program designed to improve the body composition of low risk clients	3.1 Results of the measures are explained to clients and incorporated into client's exercise plans 3.2 Describe nutritional requirements of the exercise plan to clients 3.3 Explain hydration needs when exercising to clients 3.4 Explain the exercise plan to clients and instruct specific programs and exercises
4 Provide information about appropriate dietary modifications to reduce the level of body composition of low risk clients	4.1 Collect information about the client's current dietary intake and nutritional habits using appropriate methods 4.2 Determine appropriate dietary modifications 4.3 Consider and address lifestyle factors and cultural factors relevant to the client 4.4 Communicate proposed changes to the clients and clearly explain the reasons for the changes 4.5 Set realistic and appropriate dietary changes to meet client goals 4.6 Recognise limitation of a fitness trainer providing nutritional information provided complies with industry standards 4.7 Refer the client to medical professional for nutritional or dietary disorder, manage nutritional requirements by suitably credentialed allied health professional

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional or medical practitioner	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Anthropometric standards	<p>[all categories]</p> <ul style="list-style-type: none"> • fat shapes • somatotypes • skin fold norms • girth norms and indices • body composition norms • body mass norms and indices
Body composition appraisals	<p>[all categories]</p> <ul style="list-style-type: none"> • girths and girth indices • skin folds and skin fold indices • bioelectrical impedance analysis • height/weight indices • body mass indices
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • adult • active or inactive • no major dietary or nutritional concerns

Cultural factors	<p>[all categories]</p> <ul style="list-style-type: none"> • religious restrictions • dietary choices such as vegetarian, vegan
Dietary modifications	<p>[all categories]</p> <ul style="list-style-type: none"> • increase consumption of some foods or food groups • decrease consumption of some foods or food groups • exclusion of some foods or types of foods • modification of foods • modification of food preparation • replacement of foods
Estimated	<p>[all categories]</p> <ul style="list-style-type: none"> • reliability • validity • accuracy of measurements • accessibility/ease of use • relevance to client • precision
General guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> • food groups <ul style="list-style-type: none"> ○ fats, oils and sweets ○ fruit and vegetables ○ breads and cereals ○ dairy ○ meat, poultry, fish, dry beans, eggs, and nuts • dietary guidelines <ul style="list-style-type: none"> ○ recommendations on the daily intake of nutrients • essential nutrients <ul style="list-style-type: none"> ○ carbohydrates ○ minerals ○ vitamins ○ lipids ○ protein ○ water • food labelling <ul style="list-style-type: none"> ○ preservatives ○ additives ○ ingredient order ○ ingredients • food preparation <ul style="list-style-type: none"> ○ bake ○ grill ○ stew ○ boil ○ steam ○ fry ○ microwave ○ freeze

Management of body composition	<p>[all categories]</p> <ul style="list-style-type: none"> • relationship between energy intake and energy expenditure • metabolic rate <ul style="list-style-type: none"> ○ basal metabolic rate ○ influence of activity on metabolic rate ○ muscle and lean body mass • thermogenesis <ul style="list-style-type: none"> ○ thermic effect of food ○ thermic effect of exercise ○ adaptive thermogenesis • relationship between weight management, body proportions and body fat • fat reduction activity strategies <ul style="list-style-type: none"> ○ planned ○ incidental • energy cost of physical activity • behaviour modification • muscle mass changes and body composition/weight • body composition changes • fat distribution • gender differences • myths and fallacies <ul style="list-style-type: none"> ○ spot reduction ○ food combining ○ rapid weight loss promises ○ diets recommend by non nutritional experts ○ non exercise based recommendations ○ effortless and miraculous claims
Lifestyle factors	<p>[all categories]</p> <ul style="list-style-type: none"> • time availability • occupation • training schedule — time, duration, frequency • food likes/dislikes • financial constraints
Medical professional	<p>[all categories]</p> <ul style="list-style-type: none"> • general practice doctors • medical specialists
Methods	<p>[all categories]</p> <ul style="list-style-type: none"> • food record • dietary recall • questionnaires • interview

Nutrition	[all categories] <ul style="list-style-type: none">• nutrient recommendations• nutrient deficiency• nutrient excess• unbalanced diet• balanced diet• body shape classifications• body image issues• myths and fallacies
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm the ability integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ provide current dietary and nutritional advice ○ demonstrate various body composition measurements ○ deliver exercise programs to clients that are directly related to improving body composition
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Exercise science • Required skills <ul style="list-style-type: none"> ○ Effective verbal, written, and listening communication skills for determining the fitness requirements of clients, and applying them to fitness programs ○ Skills related to the instruction of clients in fitness programs in a fitness industry environment ○ Expertise and experience in the use of fitness activity equipment, and instructing clients on that equipment ○ Experience in assisting a fitness trainer working with clients to

	provide exercise programs designed to improve body composition
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ appropriate facilities and equipment for the context of delivery such as an equipped assessment room ○ clients able to give information regarding their lifestyle • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	1	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT014A	PROVIDE ADVICE TO CLIENTS ON THE APPLICATION OF BASIC ANATOMY AND PHYSIOLOGY TO FITNESS PROGRAMS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and competence required to educate clients on the application of basic anatomy and physiology of the major systems of the human body and to understand the functional significance of these structures in relation to movement and exercise.

ELEMENT	PERFORMANCE CRITERIA
1 Apply a knowledge of the <i>systems</i> of the human body to movement and exercise	<p>1.1 Explain to <i>clients</i> the structure and function of cells, and the organisation of tissues forming the major <i>systems of the human body</i> and their relationship to movement and exercise</p> <p>1.2 Apply the basic structure and functions of the body systems to <i>common fitness activities</i></p> <p>1.3 Apply an understanding of the interrelationship between the various systems of the human body when providing information to <i>clients</i> about fitness programs</p>
2 Apply an understanding of the structure and function of the musculoskeletal system when providing information about fitness programs	<p>2.1 Describe the structure, growth and development of bone tissue and factors affecting growth to <i>clients</i></p> <p>2.2 Relate the type and the structure of joints to joint mobility, joint integrity and risk of injury when planning fitness programs and providing information to <i>clients</i></p> <p>2.3 Identify and describe the <i>movements</i> allowed at the major joints of the body when providing information about fitness programs</p> <p>2.4 Identify the <i>major bones, bony landmarks, major joints</i> and <i>major muscles</i> when providing information about fitness testing and fitness programs</p> <p>2.5 Use knowledge of the structure of skeletal muscle and the process of muscle contraction to plan and develop fitness programs</p> <p>2.6 Apply knowledge of <i>major muscles</i> and their actions, and the role of the muscle during contraction, to select suitable exercises when planning fitness programs</p> <p>2.7 Analyse <i>common exercises</i> to identify to clients, the joint action occurring, the muscle responsible and the type of contraction</p> <p>2.8 Discuss the interplay between muscle innervation and muscle contraction</p> <p>2.9 Relate the oxidative capacity of different muscle fibres to different fitness activities</p> <p>2.10 Describe <i>ideal postural alignment</i> and <i>common pathological postures</i> to fitness <i>clients</i></p> <p>2.11 Use knowledge of the structure and function of the <i>musculoskeletal system</i> when providing information to clients</p>
3 Relate the structure and function of the cardiovascular system and respiratory system to fitness activities	<p>3.1 Explain the structure and function of the <i>cardiovascular system</i> and the <i>respiratory system</i> when providing information to <i>clients</i></p> <p>3.2 Describe the process of gaseous transport and gaseous exchange occurring during fitness activities to <i>clients</i></p> <p>3.3 Explain the role of the cardio-respiratory system in the carrying, delivery and extraction of oxygen for muscle contraction and relate to exercise intensity</p> <p>3.4 Investigate the oxygen demands of various fitness activities to identify the relationship between exercise intensity and the circulatory and ventilation responses</p> <p>3.5 Relate the differences in individual <i>respiratory volumes</i> and <i>basic</i></p>

	<i>circulatory responses</i> , and the regulation of these physiological responses to the client's fitness levels
4 Provide information about the structure and function of the digestive system	<p>4.1 Use knowledge of the structure and function of the <i>digestive system</i> when providing information to <i>clients</i></p> <p>4.2 Describe to <i>clients</i> the process of digestion and absorption, including the production and action of <i>enzymes</i> during the breakdown of foodstuffs for energy</p> <p>4.3 Explain the process of <i>energy metabolism</i> in relation to muscle contraction</p>
5 Apply knowledge of the structure and function of the nervous system to fitness activities	<p>5.1 Describe the basic structure of the <i>nervous system</i> and its role in the control of movement and exercise to <i>clients</i></p> <p>5.2 Apply the process of excitation and conduction of nerve impulses during muscle contraction, when providing information about fitness activities</p> <p>5.3 Explain the role of the <i>sensory receptors</i> during movement, in stretching and flexibility to <i>clients</i></p> <p>5.4 Explain to <i>clients</i> the relationship between the composition of motor units and motor unit innervation to the strength of muscle contraction, during fitness activities</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Basic circulatory responses	[all categories] <ul style="list-style-type: none"> • heart rate • blood pressure • cardiac output • stroke volume • vasodilation • vasoconstriction
Bony landmarks	[all categories] <ul style="list-style-type: none"> • mastoid process • spinous process of the vertebrae • spine of the scapula • inferior angle of the scapula • acromion process • coracoid process • xiphoid process • notch of the manubrium • head of the radius • anterior superior iliac spine • iliac crest • greater trochanter • medial epicondyle • lateral epicondyle • superior border of the patella • lateral malleolus • medial malleolus • calcaneous
Cardiovascular system	[all categories] <ul style="list-style-type: none"> • structure <ul style="list-style-type: none"> ○ heart ○ arteries ○ arterioles ○ veins ○ venules ○ capillaries • blood <ul style="list-style-type: none"> ○ cells ○ plasma ○ platelets • heart <ul style="list-style-type: none"> ○ structure ○ cardiac cycle

	<ul style="list-style-type: none"> ○ heart contraction ○ cardiac output ○ stroke volume ○ heart rate ○ pulse rate ● circulation <ul style="list-style-type: none"> ○ pulmonary ○ systemic ● blood pressure <ul style="list-style-type: none"> ○ systolic ○ diastolic ○ pulse pressure ○ normal readings ○ abnormal readings ● capillary function <ul style="list-style-type: none"> ○ gaseous exchange ● cardiovascular changes in response to exercise and training
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> ● male or females ● adults ● no medical conditions, injury or medication ● varying fitness levels ● varying ages ● varying experience in fitness activities
Common exercises	<p>[at least 6 categories]</p> <ul style="list-style-type: none"> ● push up ● sit up ● chest press ● overhead press ● chin up ● lat pull down ● chest press ● seated row ● abdominal crunch ● squat ● leg press ● lunge
Common fitness activities	<p>[all categories]</p> <ul style="list-style-type: none"> ● group fitness classes ● individual exercise sessions
Common pathological postures	<p>[all categories]</p> <ul style="list-style-type: none"> ● forward head position ● kyphosis ● rounded shoulders ● increased lordosis ● decreased lordosis ● scoliosis

	<ul style="list-style-type: none"> • posterior pelvic tilt • anterior pelvic tilt • genu varum • genu valgum • increased pronation
Digestive system	<p>[all categories]</p> <ul style="list-style-type: none"> • structure <ul style="list-style-type: none"> ○ oesophagus ○ stomach ○ small intestine ○ large intestine ○ rectum ○ anus • digestion <ul style="list-style-type: none"> ○ mechanical actions ○ chemical action ○ enzymes ○ energy metabolism • absorption <ul style="list-style-type: none"> ○ small intestine ○ large intestine
Energy metabolism	<p>[all categories]</p> <ul style="list-style-type: none"> • energy substrates <ul style="list-style-type: none"> ○ carbohydrate ○ fats ○ protein • energy systems <ul style="list-style-type: none"> ○ adenosine triphosphate ○ phosphocreatine ○ lactic ○ aerobic glycolysis ○ aerobic fat oxidation • energy system adaptations
Enzymes	<p>[all categories]</p> <ul style="list-style-type: none"> • amylase • lipase • peptidase
Ideal postural alignment	<p>[all categories]</p> <ul style="list-style-type: none"> • normal spinal curves • plumb line though <ul style="list-style-type: none"> ○ ear lobe ○ anterior shoulder ○ lumbar spine ○ posterior hip ○ anterior knee ○ anterior ankle

Major bones	<p>[all categories]</p> <ul style="list-style-type: none"> • skull • cervical vertebrae • thoracic vertebrae • lumbar vertebrae • sacrum • coccyx • clavicle • scapula • humerus • radius • ulna • carpals • metacarpals • phalanges • pelvis • femur • patella • tibia • fibula • tarsals • metatarsals • phalanges
Major joints	<p>[all categories]</p> <ul style="list-style-type: none"> • inter-vertebral • glenohumeral • elbow • wrist • sacro-iliac • hip • knee • ankle
Major muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • trapezius • sternocleidomastoid • latissimus dorsi • serratus anterior • erector spinae • rectus abdominis • oblique abdominii • transverse abdominis • quadratus lumborum • pectoralis major • pectoralis minor • rhomboids • deltoidius • biceps brachii • triceps brachii • forearm flexors • forearm extensors

	<ul style="list-style-type: none"> • gluteals <ul style="list-style-type: none"> ○ maximus ○ medius ○ minimus • quadriceps <ul style="list-style-type: none"> ○ vastus medialis ○ vastus lateralis ○ rectus femoris • hamstrings <ul style="list-style-type: none"> ○ biceps femoris ○ semitendinosus ○ semimembranosus • gastrocnemius • soleus • tibialis anterior
Movements	<p>[all categories]</p> <ul style="list-style-type: none"> • flexion • extension • dorsiflexion • plantar flexion • horizontal flexion • horizontal extension • abduction • adduction • circumduction • rotation • supination • pronation • inversion • eversion
Musculoskeletal system	<p>[all categories]</p> <ul style="list-style-type: none"> • functions • types of bones <ul style="list-style-type: none"> ○ long ○ short ○ flat ○ irregular • growth and development of long bones • structure of long bones • classification of joints <ul style="list-style-type: none"> ○ fibrous ○ cartilagenous ○ synovial • structure of a synovial joint <ul style="list-style-type: none"> ○ bones ○ articular or hyaline cartilage ○ joint capsule ○ joint cavity ○ ligaments ○ synovial membrane ○ synovial fluid ○ bursae ○ meniscus

- connective tissue
 - fascia
 - tendons
 - ligaments
- muscular system
- function of muscle tissue
- properties of muscle tissue
 - excitability
 - contractility
 - extensibility
 - elasticity
- types of muscles
 - smooth
 - cardiac
 - skeletal
- structure of skeletal muscle tissue
 - muscle belly
 - tendon
 - fascicle
 - muscle fibre
 - myofibril
 - microscopic anatomy
 - sarcomere
 - filaments
 - actin
 - myosin
 - tropomyosin
 - troponin
 - sarcolemma
 - sarcoplasm
 - sarcoplasmic reticulum
 - T-tubules
 - Z lines
 - A band
 - I band
- muscle contraction
 - sliding filament theory
 - length-tension relationship
- attachments
 - origin
 - insertion
- role of muscle contraction
 - agonist
 - antagonist
 - fixator
 - synergist
- skeletal muscle fibre types
 - slow twitch — oxidative
 - fast twitch — oxidative-glycolytic
 - fast twitch — glycolytic
 - distribution and recruitment of different fibre types
- physiological adaptations due to training
 - hypertrophy
 - increased strength
 - increased extensibility
- muscle actions of major muscles

Nervous system	[all categories] <ul style="list-style-type: none">• somatic nervous system• autonomic nervous system• divisions• central nervous system<ul style="list-style-type: none">○ brain○ spinal cord• peripheral nervous system<ul style="list-style-type: none">○ nerves○ sensory organs• structure of nerve cell<ul style="list-style-type: none">○ axon○ dendrites○ cell body○ nucleus○ synapse○ neuromuscular junction○ motor end plates• neurons<ul style="list-style-type: none">○ afferent/efferent○ motor/sensory• motor unit<ul style="list-style-type: none">○ components○ size○ recruitment• neuromuscular junction• reflexes• sensory receptors• proprioception• nerve impulse conduction<ul style="list-style-type: none">○ membrane potential○ action potential○ threshold stimulation○ summation○ neurotransmitters○ neuromuscular transmission○ synaptic transmission• nerve impulse inhibition• sensory organs• neural changes in response to training
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Respiratory system	<p>[all categories]</p> <ul style="list-style-type: none"> • structure <ul style="list-style-type: none"> ○ mouth ○ pharynx ○ larynx ○ trachea ○ bronchi ○ bronchioles ○ alveoli • respiration <ul style="list-style-type: none"> ○ ventilation ○ respiratory volumes and capacities ○ regulation of respiration ○ mechanics of respiration ○ internal respiration ○ external respiration • gaseous exchange • gaseous transport • pulmonary changes in response to exercise and training
Respiratory volumes	<p>[all categories]</p> <ul style="list-style-type: none"> • tidal volume • residual volume • total lung capacity • vital capacity • inspiratory reserve volume • expiratory reserve volume • respiratory minute volume
Sensory receptors	<p>[all categories]</p> <ul style="list-style-type: none"> • golgi tendon organ • muscle spindles • proprioceptors
Systems of the human body	<p>[all categories]</p> <ul style="list-style-type: none"> • musculoskeletal system <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ types ▪ structure ▪ function ○ joints <ul style="list-style-type: none"> ▪ types ▪ structure of a synovial joint ▪ function ▪ ligaments ○ muscles <ul style="list-style-type: none"> ▪ structure ▪ function ▪ connective tissue <ul style="list-style-type: none"> ▪ fascia ▪ tendons

	<ul style="list-style-type: none">▪ types▪ attachments▪ roles• nervous system<ul style="list-style-type: none">○ structure○ function• cardiovascular system<ul style="list-style-type: none">○ structure○ function• respiratory system<ul style="list-style-type: none">○ structure○ function• digestive system<ul style="list-style-type: none">○ structure○ function• urinary system<ul style="list-style-type: none">○ structure○ function• lymphatic system<ul style="list-style-type: none">○ structure• integumentary<ul style="list-style-type: none">○ structure○ function
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ apply knowledge of the musculoskeletal system to exercise and fitness program instruction ○ apply knowledge of the cardio–respiratory system to exercise and fitness program instruction ○ apply knowledge of the digestive system to exercise instruction ○ apply knowledge of the nervous system to exercise instruction ○ educate client on the principles of the musculoskeletal system as it relates to an exercise program ○ educate client on the principles of the cardio–respiratory system as it relates to an exercise program ○ educate client on the principles of the digestive system as it relates to an exercise program ○ educate client on the principles of the nervous system as it relates to an exercise program
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Nil • Required skills <ul style="list-style-type: none"> ○ Nil
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ anatomy equipment with full sized human skeleton ○ functional joint models ○ anatomy charts and maps ○ physiology equipment such as heart rate monitors, ergometers ○ charts for ratings of perceived exertion and training heart rate zones • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for</i>

	<i>Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a "period of time" and/or in a "number of locations", any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	1	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Apply knowledge of the different body system to apply information about fitness activities • Communicating ideas and information — Use information gathered to provide advice to clients about fitness activities • Planning and organising activities — Use information to provide advice, organise activities to monitor physiological responses to exercise • Working with teams and others — Provide advice to fitness clients • Using mathematical ideas and techniques — Use basic numeracy skills to evaluate physiological responses and explain processes • Solving problems — Range of knowledge applied to a range of fitness activities • Using technology — Use of different physiology equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT015A	PROVIDE NUTRITION ADVICE TO CLIENTS IN ACCORDANCE WITH RECOMMENDED GUIDELINES
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills required to provide basic nutritional information and advice to fitness industry clients, who have no dietary or nutritional concerns.

ELEMENT	PERFORMANCE CRITERIA
1 Explain the relationship between nutrition, health and fitness to clients	1.1 Discuss with clients , the adverse effect of poor nutrition on health and identify common chronic diseases 1.2 Briefly explain the general features of balanced nutrition to clients 1.3 Convey the concept of a well balanced diet and regular exercise to promote good health when providing advice to clients 1.4 Explain the interaction between nutrition and physical activity and obtain information about current nutritional intake and physical activity levels of clients
2 Provide basic advice to clients about the fundamental principles of healthy eating	2.1 Describe the general features of balanced nutrition to clients and provide basic dietary recommendations to improve overall health 2.2 Apply knowledge of the general principles of nutrition to provide basic advice to clients about dietary intake 2.3 Explain the additional nutritional requirements for exercising individuals 2.4 Educate clients about the fundamental principles of healthy eating and provide information about possible modifications to the diet to suit this approach 2.5 Utilise commercial diet and exercise analysis software appropriate to an instructor in the fitness industry to provide relevant information to the clients about exercise and nutrition 2.6 Discuss the advantages and disadvantages on current dietary trends appearing in the topical popular press with clients 2.7 Observe the industry standards for giving nutritional information to clients and refer clients with nutritional or dietary concerns to suitably qualified allied health professionals and medical professionals
3 Provide nutritional information to clients regarding body composition management	3.1 Evaluate information collected in the fitness appraisal of clients about current body composition using relevant body composition measures 3.2 Provide basic information about the relationship between diet and the management of body composition to clients 3.3 Describe briefly the role of the body's energy systems in the storage and utilisation of energy substrates for energy production 3.4 Refer clients requiring more extensive dietary information to suitably qualified allied health professionals
4 Support fitness clients with body image issues	4.1 Implement strategies to promote body satisfaction when providing advice about exercise, fitness testing and nutrition 4.2 Provide information about diet and nutrition that fosters a positive attitude towards food and eating 4.3 Recognise indicators of poor body image and discuss body satisfaction with clients , providing referral to an appropriate health professional, if required

5 Refer clients to allied health professionals or medical professional for further information or consultation	<p>5.1 Recognise and acknowledge the current legal and ethical limitations of a fitness instructor in providing nutritional information</p> <p>5.2 Identify <i>gastrointestinal disorders</i> or other <i>medical conditions</i>, disclosed by the <i>clients</i> during a screening process, which may affect nutritional intake, and refer <i>clients</i> to a suitably qualified medical professional</p> <p>5.3 Identify <i>nutritional or dietary concerns</i> and refer <i>clients</i> to contact suitably qualified <i>allied health professionals</i> and <i>medical professionals</i> in accordance with organisational policies and procedures maintaining confidentiality of <i>clients</i></p>
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional or medical practitioner	[all categories] the following allied health professionals may be suitably credentialled <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Body composition measures	[all categories] <ul style="list-style-type: none"> • 'ideal weight' — height/weight charts • body mass index • girths • girth ratios such as waist/hip ratio, waist/height ratio • skin folds
Chronic diseases	[all categories] <ul style="list-style-type: none"> • coronary heart disease • hypertension • diabetes • gallstones • bowel cancer • obesity • stroke
Clients	[all categories] <ul style="list-style-type: none"> • experienced or inexperienced • adult • no medical condition affecting nutrition • no major dietary or nutritional concerns

Dietary recommendations	<p>[two categories]</p> <ul style="list-style-type: none"> • government organisations, eg, National Health and Medical Research Council, State Departments of Health • health organisations, eg, Heart Foundation of Australia • nutrition peak bodies, eg, Nutrition Australia, Nutrition Society of Australia • dietician peak bodies, eg, Dietitians Association of Australia
Dietary trends	<p>[all categories]</p> <ul style="list-style-type: none"> • 'fad' diets • 'popular' diets • nutritional supplementation • nutritional ergogenic aids
Energy substrates	<p>[all categories]</p> <ul style="list-style-type: none"> • lipids • carbohydrate • protein
Energy systems	<p>[all categories]</p> <ul style="list-style-type: none"> • alactic • lactic • aerobic
Fundamental principles of healthy eating	<p>[all categories]</p> <ul style="list-style-type: none"> • balanced diet • low in saturated fat and cholesterol • moderate intake of refined sugars • moderate intake of alcohol • meal size • meal frequency • spread of kilojoules over day • relationship between energy intake and energy expenditure • recommended intake of nutrients • relative proportion of nutrient intake • variety
Gastrointestinal disorders	<p>[all categories]</p> <ul style="list-style-type: none"> • gastrointestinal reflux • ulcers • inflammatory bowel disease • irritable bowel syndrome • coeliac disease • lactose intolerance

General features of balanced nutrition	<p>[all categories]</p> <ul style="list-style-type: none"> • energy balance • recommended daily intake of nutrients • fuel for exercise • fuel for minimising post-exercise fatigue and maximising recovery • hydration levels
General principles of nutrition	<p>[all categories]</p> <ul style="list-style-type: none"> • food groups <ul style="list-style-type: none"> ○ fats, oils, sweets ○ dairy ○ meat, poultry, fish, eggs, nuts, legumes ○ fruit and vegetables ○ breads and cereals • dietary guidelines • essential nutrients <ul style="list-style-type: none"> ○ carbohydrates <ul style="list-style-type: none"> ▪ role of carbohydrates ▪ recommended daily intake ▪ simple sugars ▪ complex <ul style="list-style-type: none"> ▪ fibre ▪ resistant starch ▪ glycemic index ○ lipids <ul style="list-style-type: none"> ▪ role of triglycerides ▪ recommended daily intake ▪ essential fatty acids ▪ classifications <ul style="list-style-type: none"> ▪ saturated fatty acids ▪ monounsaturated fatty acids ▪ polyunsaturated fatty acids ▪ cholesterol <ul style="list-style-type: none"> ▪ high density lipoproteins ▪ low density lipoproteins ○ protein <ul style="list-style-type: none"> ▪ role of protein ▪ recommended daily intake ▪ essential amino acids ▪ non-essential amino acids ▪ sources ▪ plant proteins ○ minerals <ul style="list-style-type: none"> ▪ types ○ vitamins <ul style="list-style-type: none"> ▪ water soluble ▪ fat soluble ▪ vitamin-mineral interactions ○ fluid and electrolytes • intake of nutrients <ul style="list-style-type: none"> ○ recommended quantities ○ effect of nutrient excess ○ effect of nutrient deficiency • healthy dietary pyramid • balanced diet

	<ul style="list-style-type: none"> • food labelling <ul style="list-style-type: none"> ○ legislative requirements ○ ingredient list ○ ingredient order ○ interpretation of label ○ preservatives ○ additives • food preparation <ul style="list-style-type: none"> ○ methods of cooking ○ effect on nutrient value of food ○ modification of recipes ○ safe food handling and hygiene practices • myths and fallacies • nutritional supplementation
Industry standards	<p>[all categories]</p> <ul style="list-style-type: none"> • professional associations • government legislation • fitness industry regulations
Management of body composition	<p>[all categories]</p> <ul style="list-style-type: none"> • metabolism • balance between energy intake and energy expenditure • energy expenditure <ul style="list-style-type: none"> ○ resting metabolic rate ○ thermogenesis ○ thermic effect of food ○ thermic effect of exercise ○ adaptive thermogenesis • energy intake <ul style="list-style-type: none"> ○ kilojoule value of nutrients • body fat changes and body composition • changes to body composition <ul style="list-style-type: none"> ○ fat loss ○ muscle gain
Medical conditions	<p>[all categories]</p> <ul style="list-style-type: none"> • diabetes • gallstones • cancer • gout
Medical professional	<p>[all categories]</p> <ul style="list-style-type: none"> • general practitioners • medical specialists
Nutritional or dietary concerns	<p>[all categories]</p> <ul style="list-style-type: none"> • anorexia • bulimia

	<ul style="list-style-type: none">• obesity• nutritional deficiencies including iron, calcium• dehydration
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of the general nutritional principles • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ provide accurate and current information about nutrition and healthy eating in accordance with recommended guidelines ○ provide advice about dietary recommendations to assist the management of body composition ○ support clients to adopt a positive attitude towards body image ○ recognise the limitations of the roles of a fitness instructor according to industry standards and refer client on
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic knowledge of the anatomy and physiology of the digestive system ○ The body's energy systems and energy production ○ Basic fitness appraisals including body composition measures • Required skills <ul style="list-style-type: none"> ○ Effective oral and written communication skills to collect and provide information about the clients needs ○ Interpersonal skills to develop a rapport with clients to ensure advice provided about body image is received effectively ○ Basic computer operation
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ an appropriate fitness facility with a room suitable to provide advice to clients in a confidential manner ○ relevant legislation and food laws ○ a range of fitness clients with varied nutritional needs ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for

	assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment and real/actual fitness clients should be used. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	1	2	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Obtain information about the clients nutritional needs • Communicating ideas and information — Relay information about nutritional requirements to clients • Planning and organising activities — Provide limited information according to recommended guidelines • Working with teams and others — Interact with clients and work as part of a network of medical and allied health professionals • Using mathematical ideas and techniques — Calculate body composition measures, apply concept of energy balance • Solving problems — Apply knowledge to provide information to meet the clients nutritional needs • Using technology — Used to obtain information about nutrition, client's body composition and to access nutritional software <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT016A	APPLY INFORMATION FROM POSTURAL APPRAISALS TO FITNESS PROGRAMS FOR MODERATE RISK CLIENTS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to undertake more extensive postural appraisals of moderate risk clients in order to plan and deliver corrective exercise programs for clients under the guidance of allied health professionals.

ELEMENT	PERFORMANCE CRITERIA
1 Undertake client induction and screening for clients	1.1 Conduct an industry standard screening process on clients prior to undertaking postural evaluation 1.2 Refer clients disclosing a medical condition or injury to an appropriate medical or allied health professional 1.3 Explain clearly the aims of postural appraisal , its benefits and the procedures for testing 1.4 Inform clients of the causes of poor posture and the limitations of fitness specialist in diagnosing and providing rehabilitation for postural abnormalities, and the role of networking with medical or allied health professional
2 Conduct postural appraisals tests to evaluate the clients mobility, stability, muscle strength and endurance	2.1 Observe the client's static posture using a valid and reliable postural screening method to identify common postural variances and observe the degree of deviation 2.2 Conduct standardised tests to evaluate joint mobility and observe joint specific functional range of movement of the major joints to identify restrictions and right/left differences in range 2.3 Conduct standardised postural appraisal tests to evaluate neuromuscular control , muscle strength and muscular endurance in order to identify muscular deficits , muscle asymmetry, diminished neuromuscular control or poor functional ability 2.4 Apply knowledge of the functional anatomy of the joints and the location of relevant bony landmarks when conducting postural appraisals 2.5 Use a standardised method of recording the results of tests accurately and systematically using a process that allows for subsequent reevaluation 2.6 Refer all clients with injury and postural variances or concerns to appropriate medical or allied health professional before recommending any corrective exercises 2.7 Consult with an appropriate medical or allied health professional to discuss results of the postural evaluation to determine an appropriate exercise management plan 2.8 Implement valid postural appraisal methods according to recognised test protocols and industry standards
3 Observe and evaluate a client's dynamic posture through observation of gait	3.1 Observe the client's dynamic posture whilst performing suitable locomotive movements and record information about movement coordination, balance and neuromuscular control 3.2 Apply an understanding of the biomechanics of movement to the gait observation to obtain relevant information about the client's dynamic posture 3.3 Relate the effect of common postural variances to the client's gait 3.4 Conduct functional tests to evaluate neuromuscular control , range of movement , movement control, muscular deficits and proprioception 3.5 Use a standardised method of recording information obtained to allow for further reevaluation

	3.6 Understand the aim of gait observation by the fitness specialist is not to be diagnostic or prescriptive, but to identify potential causes of injury
4 Plan and design exercise programs for moderate risk clients with postural concerns, under the guidance of allied health professionals.	<p>4.1 Discuss the information obtained through observation of the client's static and dynamic posture with a medical or allied health professional to obtain feedback in order to plan and design an exercise program to reduce the progression of postural variances and to minimise the risk of injury during fitness activities</p> <p>4.2 Identify the relevant joints, muscles and connective tissues associated with any identified postural concern and apply an understanding of the predictable muscle and connective tissue changes resulting from the variance</p> <p>4.3 Apply knowledge of joint movement and muscle action to identify the muscles and/or major joints requiring stretching and the muscles requiring strengthening to manage muscular deficits, joint restrictions, diminished neuromuscular control and/or muscle development asymmetry</p> <p>4.4 Plan and design a corrective exercise plan and program for the moderate risk client, under the guidance of a medical or allied health professional</p> <p>4.5 Avoid exercises that may exacerbate the condition or are contraindicated</p> <p>4.6 Review the exercise plan and program by a medical or allied health professional prior to implementation</p> <p>4.7 Develop valid and reliable objective outcome measures to assess the effectiveness of the corrective exercise plan and program</p> <p>4.8 Monitor the progress and effectiveness of the program, and consult with other exercise professionals, allied health professionals and medical professionals as required, to meet the client needs</p> <p>4.10 Use appropriate communication channels and appropriate terminology when consulting with a medical or allied health professional</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aims of postural appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • identify postural abnormality • identify anatomical, compensatory and adaptive postural factors which may predispose a client to injury • determine effect on proposed or current exercise plan and goals • identify contraindications to exercise • identify postural risk factors associated with exercise • prevent injury
Biomechanics of movement	<p>[all categories]</p> <ul style="list-style-type: none"> • levers • loads • fulcrum • movement arms • muscle actions • centre of gravity • base of support • balance • stability • equilibrium
Bony landmarks	<p>[all categories]</p> <ul style="list-style-type: none"> • mastoid process • spinous process of the vertebrae • spine of the scapula • inferior angle of the scapula • acromion process • coracoid process • xiphoid process • lateral epicondyle of humerus • head of the radius • styloid process • olecranon process • umbilicus • anterior superior iliac spine • posterior superior iliac spine • iliac crest • ischial tuberosity • greater trochanter • lateral femoral condyle • medial epicondyle

	<ul style="list-style-type: none"> • lateral epicondyle • superior border of the patella • inferior border of the patella • lateral malleolus • medial malleolus • calcaneous
Causes of poor posture	<p>[all categories]</p> <ul style="list-style-type: none"> • congenital structural abnormalities of musculoskeletal system • muscle weakness or imbalance • lack of flexibility • damage to bony structures • damage to connective tissue including ligaments, cartilage • uncoordinated movement • changes to line of gravity due to pregnancy, weight gain, shoe design, work practices, leisure, sport, exercise behavioural attitudes, body awareness
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • adult • experienced or inexperienced • low risk or moderate risk • varying ages • varying goals • postural concerns
Common postural variances	<p>[all categories]</p> <ul style="list-style-type: none"> • forward head position • kyphosis • rounded shoulders • winging of scapula • scoliosis • increased lordosis • decreased lordosis • excessive posterior pelvic tilt • excessive anterior pelvic tilt • genu varum • genu valgum • increased pronation of foot/ankle complex • increased supination of the foot/ankle complex • hyperextension of knees • lateral tilt of pelvis • lateral tilt of head

Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • quantitative information on performance related to <ul style="list-style-type: none"> ○ range of movement ○ strength ○ endurance ○ stability • quantitative information on movement coordination and control • qualitative information on attitude and motivation
Functional anatomy of the joints	<p>[all categories]</p> <ul style="list-style-type: none"> • glenohumeral <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ humerus ▪ scapula ▪ clavicle ○ ligaments <ul style="list-style-type: none"> ▪ corocohumeral ▪ corococlavicular ▪ glenohumeral ▪ transverse humeral ○ related structures <ul style="list-style-type: none"> ▪ subscapular bursa ▪ subacromial bursa ▪ subdeltoid bursa ▪ subcorocoid bursa ○ muscles acting on the joint • elbow <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ humerus ▪ ulna ▪ radius ○ ligaments <ul style="list-style-type: none"> ▪ ulnar collateral ▪ radial collateral ○ related structures <ul style="list-style-type: none"> ▪ olecranon bursa ○ muscles acting on the joint • lumbo–sacral <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ 5th lumbar vertebrae ▪ 1st vertebrae of sacrum ○ ligaments ○ muscles acting on the joint • intervertebral <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ vertebral bodies ○ ligaments ○ muscles acting on the joint • hip (coxal) <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ femur ▪ hip ○ ligaments <ul style="list-style-type: none"> ▪ pubofemoral ▪ iliofemoral

	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ▪ ischiofemoral ▪ transverse ligament of acetabulum ▪ ligament of head of femur ○ muscles acting on the joint • knee (tibiofemoral/patellofemoral) <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ tibia ▪ femur ▪ patella ○ ligaments <ul style="list-style-type: none"> ▪ patella ▪ oblique popliteal ▪ arcuate popliteal ▪ tibial collateral ▪ fibular collateral ▪ posterior cruciate ▪ anterior cruciate ○ related structures <ul style="list-style-type: none"> ▪ tendons of the quadriceps femoris and fascia latae ▪ medial meniscus ▪ lateral meniscus ▪ prepatellar bursa ▪ intrapatellar bursa ▪ suprapatellar bursa ○ muscles acting on the joint • ankle (talocrucal) <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ talus ▪ tibia ▪ fibula ○ ligaments <ul style="list-style-type: none"> ▪ deltoid ▪ anterior talofibial ▪ posterior talofibial ▪ calcaneofibular ○ related structures <ul style="list-style-type: none"> ▪ achilles tendon ○ muscles acting on the joint
Gait observation	<p>[all categories]</p> <ul style="list-style-type: none"> • view <ul style="list-style-type: none"> ○ anterior ○ posterior ○ lateral • gait cycle <ul style="list-style-type: none"> ○ stance phase ○ swing phase ○ flight phase ○ double stance phase • evaluation <ul style="list-style-type: none"> ○ ankle/foot ○ tibia/knee ○ pelvis ○ trunk ○ head ○ arm • foot cycle <ul style="list-style-type: none"> ○ foot strike

	<ul style="list-style-type: none"> ○ mid-stance ○ toe off ● evaluation of <ul style="list-style-type: none"> ○ sequence of movement at each joint ○ sequence of muscle actions ○ efficiency of movement ● method <ul style="list-style-type: none"> ○ visual analysis ○ video analysis
Joint movement	<p>[all categories]</p> <ul style="list-style-type: none"> ● flexion ● extension ● dorsiflexion ● plantar flexion ● horizontal flexion ● horizontal extension ● abduction ● adduction ● circumduction ● rotation ● supination ● pronation ● inversion ● eversion ● protraction ● retraction ● elevation ● depression
Locomotive movements	<p>[all categories]</p> <ul style="list-style-type: none"> ● walking ● jogging ● running
Major joints	<p>[all categories]</p> <ul style="list-style-type: none"> ● intervertebral ● glenohumeral ● elbow ● radiocarpal ● sacroiliac ● hip (coxal) ● tibiofemoral ● patello-femoral ● ankle
Medical or allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> ● Physiotherapists

	<ul style="list-style-type: none"> • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Moderate risk client	<p>[all categories]</p> <ul style="list-style-type: none"> • not 'low risk' • chronic disease state • medical condition or injury • under prescribed medication • symptoms of cardio-pulmonary disease • moderate or high risk as identified by allied health professional or medical professional • aged and sedentary • musculoskeletal moderate risk includes <ul style="list-style-type: none"> ○ history of injury to back or neck or joints or muscles of arms and legs requiring assessment/treatment by a health professional but is now fully resolved ○ previous surgery to back or neck or joints or muscles of arms and legs ○ recurrent injury ○ injury to musculoskeletal system in the past 8 weeks even if it has resolved ○ recent low level of physical activity ○ hyper mobile
Muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • erector spinae • trapezius • rectus abdominis • internal obliques • external obliques • multifidus • quadratus lumborum • iliopsoas • latissimus dorsi • rhomboid major • rhomboid minor • pectoralis major • pectoralis minor • serratus anterior • levator scapulae • teres major • teres minor • subscapularis • supraspinatus • infraspinatus • gluteus maximus

	<ul style="list-style-type: none"> • gluteus medius • gluteus minimus • pelvic floor • iliotibial tract • tensor fascia latae • piriformis • rectus femoris • vastus lateralis • vastus medialis • vastus intermedius • sartorius • biceps femoris • semitendinosus • semimembranosus • gastrocnemius • soleus • tibialis anterior • adductor magnus • adductor longus • gracilis • sartorius
Muscular deficits	<p>[all categories]</p> <ul style="list-style-type: none"> • diminished muscle strength • limited flexibility • diminished muscular endurance
Neuro–muscular control	<p>[all categories]</p> <ul style="list-style-type: none"> • stabilisation mechanisms • passive stabilisers • dynamic stabilisers • areas <ul style="list-style-type: none"> ○ ankle ○ knee ○ pelvis/lumbar spine ○ shoulder girdle • major muscles responsible
Postural appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • visual observation • appraisals using appropriate equipment • joint mobility <ul style="list-style-type: none"> ○ joint specific range of movement ○ tests for specific joints ○ segmental mobility of vertebral sections ○ active range ○ passive range ○ functional range ○ hypo/hyper mobile joints ○ contra lateral ○ symptoms • neuromuscular control

	<ul style="list-style-type: none"> ○ tests for specific areas ○ control of movement ○ degree of control ● muscular strength <ul style="list-style-type: none"> ○ tests for specific muscles/muscle groups ○ functional strength ○ relative strength ● muscular endurance <ul style="list-style-type: none"> ○ tests for specific muscles/muscle groups ○ functional endurance ● functional tests <ul style="list-style-type: none"> ○ squat ○ single leg squat ○ single arm push up ● special tests ● postural screening equipment <ul style="list-style-type: none"> ○ plumb line ○ grid ○ photographic technology ○ video analysis ○ tape measure ○ goniometer ○ flexometer ○ plurimeter ○ pressure biofeedback unit
Postural variances	<p>[all categories]</p> <ul style="list-style-type: none"> ● structural ● functional
Posture	<p>[all categories]</p> <ul style="list-style-type: none"> ● static/dynamic ● standing/sitting/supine ● specific observations of standing posture <ul style="list-style-type: none"> ○ head and neck ○ thoracic spine ○ rib cage ○ shoulder position ○ scapula position ○ elbow position ○ lumbar spine ○ pelvis ○ abdominals ○ femur ○ knee ○ patella ○ foot position
Range of movement	<p>[all categories]</p> <ul style="list-style-type: none"> ● joint specific/muscle specific ● passive range ● active range ● functional range

	<ul style="list-style-type: none"> • joint and muscle specific tests • equipment <ul style="list-style-type: none"> ○ flexometer ○ goniometer ○ electronic
Screening	<p>[all categories]</p> <ul style="list-style-type: none"> • questionnaire • interview • clearance letter from an allied health professional or medical professional • medical history • previous and current injury • prescribed medication • congenital postural abnormality • identify situations whereby clients are referred to an medical professional for medical evaluation
Static posture screen	<p>[all categories]</p> <ul style="list-style-type: none"> • anterior • posterior • lateral

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ conduct postural screening tests ○ evaluate joint range of motion, static posture and dynamic posture ○ plan and design exercise programs for clients with postural abnormality and instability under the supervision of allied health professionals
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk client ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Biomechanics of movement ○ An industry standard screening process that identifies moderate risk clients ○ Postural screening tests and test protocols ○ Postural abnormalities ○ The safe operation of a broad range of fitness equipment ○ Exercise programming principles ○ The referral process • Required skills <ul style="list-style-type: none"> ○ Ability to identify the bony landmarks use as identification points when conducting postural screening tests ○ Ability to measure client range of movement at major joints ○ Oral and written communication skills to communicate effectively with medical and allied health professionals ○ Ability to gather and interpret information gathered in order to plan and design effective exercise programs for moderate risk clients ○ Effective interpersonal skills to develop rapport with clients and health professionals to facilitate the referral process ○ Ability to efficiently and effectively instruct clients using exercise equipment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to

	<ul style="list-style-type: none"> ○ a fitness centre with the appropriate facilities and equipment for the context of delivery including <ul style="list-style-type: none"> ▪ a fitness assessment ▪ a weights gym ▪ exercise to music room ▪ pool ▪ community fitness environment ○ appropriate documentation and resources normally used in the workplace including a industry standard screening tool and form or chart to record information about the client's posture ○ postural analysis equipment such as a postural grid, plumb line, goniometer, tape measure, flexometer, plurometer ○ video equipment for kinematic analysis ○ treadmill ○ a range of fitness clients with differing needs and goals • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	3	3	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Collect results from tests conducted, interpret information to plan and design corrective programs • Communicating ideas and information — Consult with allied health professionals to obtain feedback about exercise prescription, relay information to clients • Planning and organising activities — Conduct a series of postural screening tests according to test protocols • Working with teams and others — Work as part of a network of medical and allied health professionals • Using mathematical ideas and techniques — Apply mathematical concepts to the observation of joint angles, movement coordination, asymmetrical development and coordination, degrees of deviation • Solving problems — Apply problem solving skills to identify abnormalities, evaluate information provided and apply range of knowledge to determine corrective exercises • Using technology — Conduct assessment techniques using specific equipment according to specifications and tests protocols <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT017A	PROVIDE NUTRITION INFORMATION TO CLIENTS WITH SPECIFIC REQUIREMENTS IN ACCORDANCE WITH RECOMMENDED GUIDELINES
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with the skills, knowledge and attitudes to provide nutritional information to clients with specific nutritional requirements, under the guidance and supervision of medical and allied health professionals.

ELEMENT	PERFORMANCE CRITERIA
1 Collect information about the client's current medical and nutritional status	1.1 Confirm participants have completed pre-exercise screening and client induction in accordance with organisational policies and procedures 1.2 Collect information from the client about their current nutritional practices and health status 1.3 Identify a personal, economic, social, cultural and behavioural factors affecting dietary intake and nutritional needs 1.4 Discuss possible barriers to the implementation of healthy eating practices 1.5 Identify and evaluate medications and nutritional supplements being taken by the client that may affect nutritional status 1.6 Clarify the client's expectations of the nutritional advice 1.7 Explain to clients the legal and ethical limitations of fitness specialist providing specific nutritional information to clients with specific nutritional requirements 1.8 Describe the role and process of industry standards and networking and referral with medical and allied health professionals
2 Recognise clients with specific nutritional requirements	2.1 Understand chronic disease states and medical conditions affected by nutrition 2.2 Understand gastrointestinal disorders affecting health 2.3 Understand lifecycle stages to recognise clients with specific metabolic needs 2.4 Discuss nutrient intake excess and deficiencies and investigate possible reasons for the imbalance 2.5 Recognise signs and symptoms of eating disorders and obesity and refer clients to an appropriate health care professional 2.6 Refer clients with medical conditions , and dietary or nutritional disorders to a medical professional or suitably qualified allied health professional, if required
3 Determine the clients specific nutritional requirements	3.1 Apply knowledge of the general principles of nutrition to evaluate the client's current nutritional status 3.2 Determine the specific dietary recommendations for athletes 3.3 Apply knowledge of the pathology of relevant medical conditions and disease states to determine nutritional recommendations for the client 3.4 Relate the structure and function of the digestive system to diet and nutrition when determining nutritional requirements 3.5 Determine the specific metabolic needs of athletes, adolescents, and pregnant or lactating females 3.6 Contact appropriate medical and allied health professionals to obtain specific information about the client's specific nutritional requirements 3.7 Determine the client's nutrition during infancy, childhood and adolescence , if required 3.8 Determine the client's nutrition during pregnancy and lactation , if

	required
4 Provide nutritional information to clients with specific nutritional requirements, under the guidance of medical and allied health professionals	<p>4.1 Describe the fundamental features of balanced nutrition and provide basic dietary recommendations for the improvement of general health to clients</p> <p>4.2 Deliver information about the specific nutritional requirements relative to the client's situation after consultation with appropriate suitably qualified medical and allied health professionals</p> <p>4.3 Convey advice regarding dietary modifications to prevent further disease, as required</p> <p>4.4 Explain the differences between the nutritional requirements of clients with specific nutritional needs and those of a low risk individual to the client</p> <p>4.5 Emphasise the importance of the fitness specialist only providing limited nutritional recommendations when discussing recommendations</p> <p>4.6 Advise the client of the location of other sources of information regarding nutrition for special needs, as required</p> <p>4.7 Identify the psychological effects of nutritional disorders and take it into consideration when providing advice</p> <p>4.8 Encourage the client to also undertake regular exercise to promote good health</p>
5 Develop and utilise a network of medical and allied health professionals to assist clients to implement a healthy eating plan	<p>5.1 Contact suitably qualified medical and allied health professionals to establish a consultative process to meet client's needs</p> <p>5.2 Locate a range of health care professionals and relevant organisations or associations, which can provide nutritional information and advice to clients with specific nutritional requirements</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Client induction	[all categories] <ul style="list-style-type: none"> • interview • questionnaire • information about the client's health, personal history, lifestyle habits
Clients	[all categories] <ul style="list-style-type: none"> • adult • specific nutritional requirements
Clients with specific nutritional requirements	[all categories] <ul style="list-style-type: none"> • clients with specific metabolic needs <ul style="list-style-type: none"> ○ life cycle stages ○ pregnancy and lactation ○ infancy, childhood and adolescence ○ athlete • clients with gastrointestinal disorders <ul style="list-style-type: none"> ○ gastro-oesophageal reflux ○ irritable bowel syndrome ○ gluten intolerance ○ lactose intolerance • clients suffering from chronic disease related to nutrition <ul style="list-style-type: none"> ○ coronary heart disease ○ hypertension ○ diabetes ○ cancer • clients with medical conditions affected by nutrition <ul style="list-style-type: none"> ○ hypercholesterolemia ○ hyperlipidemia ○ osteoporosis ○ anaemia • clients with nutritional imbalances <ul style="list-style-type: none"> ○ nutrient deficiencies <ul style="list-style-type: none"> ○ iron deficiency ○ calcium deficiency ○ vegetarians

Dietary recommendations for athletes	<p>[all categories]</p> <ul style="list-style-type: none"> • energy balance • recommended daily intake of nutrients <ul style="list-style-type: none"> ○ fuel for exercise ○ training diet ○ carbohydrate loading ○ pre–event meal planning ○ carbohydrates and fluids during competition • fuel for minimising post–exercise fatigue and maximising recovery • hydration levels
Digestive system	<p>[all categories]</p> <ul style="list-style-type: none"> • anatomy of the digestive tract • digestion <ul style="list-style-type: none"> ○ breakdown of food ○ motor functions ○ secretion of enzymes ○ secretion of juices • role of enzymes <ul style="list-style-type: none"> ○ types ○ site of secretion ○ function • absorption <ul style="list-style-type: none"> ○ carbohydrate ○ lipids ○ protein ○ water and electrolytes ○ vitamins • regulation of digestion and absorption • chemical composition of foods • carbohydrates <ul style="list-style-type: none"> ○ simple ○ complex <ul style="list-style-type: none"> ▪ fibre ▪ starch ○ digestion and absorption of carbohydrates ○ carbohydrate metabolism ○ blood glucose homeostasis ○ glycaemic index ○ recommended intake • lipids <ul style="list-style-type: none"> ○ fatty acids ○ essential fatty acids ○ types of lipids <ul style="list-style-type: none"> ▪ saturated fats ▪ monounsaturated fats ▪ polyunsaturated fats ○ lipid digestion ○ lipid absorption ○ lipid transport ○ cholesterol ○ lipid metabolism ○ recommended intake • protein

	<ul style="list-style-type: none"> ○ essential amino acids ○ non-essential amino acids ○ digestion of protein ○ absorption of protein ○ protein synthesis ○ protein metabolism ○ recommended intake ○ amino acid supplementation ● metabolism of foodstuffs <ul style="list-style-type: none"> ○ fat metabolism ○ carbohydrate metabolism ○ protein metabolism ○ regulation of metabolism ○ choice of metabolic pathway ○ chemical reactions in metabolic pathways
Eating disorders	<p>[all categories]</p> <ul style="list-style-type: none"> ● anorexia nervosa ● bulimia nervosa
Factors affecting dietary intake	<p>[all categories]</p> <ul style="list-style-type: none"> ● personal <ul style="list-style-type: none"> ○ genetics ○ race ○ age ○ hormonal status ○ sex ○ illness ○ disability ● behavioural <ul style="list-style-type: none"> ○ habits ○ emotions ○ cognition ● cultural factors <ul style="list-style-type: none"> ○ religious restrictions ○ dietary choices such as vegetarianism ● lifestyle factors <ul style="list-style-type: none"> ○ time availability ○ occupation ○ training schedules ○ food likes and dislikes ○ budget and financial constraints
Gastrointestinal disorders	<p>[all categories]</p> <ul style="list-style-type: none"> ● gastro-oesophageal reflux ● ulcers ● inflammatory bowel disease ● irritable bowel syndrome ● coeliac disease ● lactose intolerance

General principles of nutrition	<p>[all categories]</p> <ul style="list-style-type: none"> • food groups <ul style="list-style-type: none"> ○ fats, oils, sweets ○ dairy ○ meat, poultry, fish, eggs, nuts, legumes ○ fruit and vegetables ○ breads and cereals • dietary guidelines • essential nutrients <ul style="list-style-type: none"> ○ carbohydrates ○ lipids ○ protein ○ minerals ○ vitamins ○ fluid and electrolytes • recommended intake of nutrients • healthy dietary pyramid • balanced diet • food labelling <ul style="list-style-type: none"> ○ legislative requirements ○ ingredient list ○ ingredient order ○ interpretation ○ preservatives ○ additives • food preparation <ul style="list-style-type: none"> ○ methods of cooking ○ effect on nutrient value of food ○ adapting recipes ○ food modification ○ food hygiene • myths and fallacies <ul style="list-style-type: none"> ○ spot reduction ○ combining foods ○ quick fix remedies ○ 'fad' diets • supplementation
Industry standards	<p>[all categories]</p> <ul style="list-style-type: none"> • professional associations • government legislation • fitness industry regulations
Medical and allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians

	<ul style="list-style-type: none"> • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Medical conditions related to nutrition	<p>[all categories]</p> <ul style="list-style-type: none"> • coronary heart disease • hypertension • hypercholesterolemia • hyperlipidemia • stroke • diabetes • cancer • osteoporosis • anaemia
Nutrient intake excess and deficiencies	<p>[all categories]</p> <ul style="list-style-type: none"> • conditions • symptoms • causes • prevalence • dietary changes required
Nutrition and chronic disease	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular disease <ul style="list-style-type: none"> ○ risk factors ○ dietary recommendations for reducing risk and improving symptoms • cancer <ul style="list-style-type: none"> ○ dietary factors contributing to cancer ○ dietary recommendations for reducing risk • diabetes mellitus <ul style="list-style-type: none"> ○ types ○ complications ○ dietary recommendations for type 1 diabetes ○ dietary recommendations for type 2 diabetes
Nutrition during infancy, childhood and adolescence	<p>[all categories]</p> <ul style="list-style-type: none"> • infancy <ul style="list-style-type: none"> ○ energy requirements ○ nutrient requirements • childhood <ul style="list-style-type: none"> ○ energy requirements ○ nutrient requirements ○ malnutrition ○ deficiencies ○ adverse reactions to foods ○ childhood obesity • adolescence <ul style="list-style-type: none"> ○ energy requirements

	<ul style="list-style-type: none"> ○ nutrient requirements ○ health habits
Nutrition during pregnancy and lactation	<p>[all categories]</p> <ul style="list-style-type: none"> • pregnancy <ul style="list-style-type: none"> ○ critical periods of development ○ maternal weight gain during pregnancy ○ effects of pregnancy on digestion ○ energy requirements during pregnancy ○ nutrient requirements during pregnancy ○ supplementation ○ common nutrition related concerns ○ malnutrition and foetal development ○ incompatible consumption of foods or fluids • lactation <ul style="list-style-type: none"> ○ energy needs ○ nutrient needs ○ incompatible consumption of foods or fluids ○ maternal health
Obesity	<p>[all categories]</p> <ul style="list-style-type: none"> • diagnosis • changes to cellular structure • eating plans • behaviour modification • psychological factors
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability
Signs and symptoms of eating disorders	<p>[all categories]</p>

	<p>possible signs include</p> <ul style="list-style-type: none"> • significant degree of weight loss • intense fear of gaining weight • distorted body image • stress, anxiety or mood swings • amenorrhea in females • pre-occupation with food, kilojoules and body mass • wearing baggy or layered clothing • relentless or excessive exercise • avoidance of food related social activities
<p>Sources of information</p>	<p>[all categories]</p> <ul style="list-style-type: none"> • health professionals • associations and organisations • government agencies • books • journals • internet
<p>Specific nutritional recommendations</p>	<p>[all categories]</p> <p>suggestions for discussion of food recommendations</p> <ul style="list-style-type: none"> • exclusion of specific foods or food groups • inclusion of specific foods or food groups • substitution of food types or nutrient density • reduction of food quantity • adjustment of energy intake • adjustment of intake of specific nutrients • timing of meal • composition of meals • food preparation methods • modification of foods

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ Develop an understanding of the nutritional and dietary needs of clients with specific conditions and diseases ○ provide advice to clients with specific nutritional requirements under the guidance of medical and allied health professionals ○ work within the legal and ethical limitations of a fitness specialist in providing information about nutrition to fitness clients
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ The structure and function of the digestive system ○ The pathology of chronic disease and medical conditions affected by nutrition ○ The basic biochemistry of food composition ○ The nutritional value of food components of in the diet ○ Common methods of obtaining nutritional information about a client ○ Nutritional principles ○ Industry standards with regard to the legal and ethical limitations of fitness specialist working in the fitness industry • Required skills <ul style="list-style-type: none"> ○ Effective oral and written communication skills, and listening skills in order to collect and provide information about nutrition ○ Interpersonal skills to be able to build rapport with a range of clients and health professionals ○ Ability to interpret information provided to ensure information provided is correct and relevant ○ Problem solving skills ○ Decision making skills in order to decide on information ○ Research skills in order to access and obtain information

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment suitable to discretely obtain and provide confidential information such as a fitness assessment room ○ appropriate facilities and equipment ○ appropriate documentation and resources normally used in the workplace including a industry standard screening document ○ fitness clients with specific nutritional needs • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes. • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	2	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Collect information about health and medical condition related to dietary needs, analyse information to determine relevance, and identify nutritional requirements • Communicating ideas and information — Determine dietary recommendations and provide information about dietary modifications and strategies • Planning and organising activities — Use information collected to prepare recommendations and strategies • Working with teams and others — Consult and work under the guidance and supervision of a range of health professionals, provide information to clients with differing needs • Using mathematical ideas and techniques — Apply basic concepts to energy balance • Solving problems — Provide appropriate recommendations for the specific condition to meet the nutritional requirements for that condition, devise strategies that suit the needs of the individual and caters for the individual factors affecting dietary intake • Using technology — Research information about nutrition for special conditions, access nutritional software <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFIT018A	APPLY ANATOMY AND PHYSIOLOGY TO FITNESS PROGRAMS FOR MODERATE RISK CLIENTS
FIT	Fitness

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge of the anatomy and physiology of the major systems of the human body and application to the planning and delivery of fitness programs for moderate risk clients. It also deals with the physiological processes maintaining homeostasis of each body system, and examines how these processes are undermined by disease and disorders.

ELEMENT	PERFORMANCE CRITERIA
1 Apply extensive knowledge of musculoskeletal anatomy and physiology to the prescription of exercise for moderate risk clients	<p>1.1 Identify major bones, joints and their related connective tissue structures, and the major muscles acting on these joints when planning and designing of exercise programs for clients</p> <p>1.2 Identify and describe to clients the functional anatomy of the major joints when planning and delivering rehabilitation exercise programs with musculoskeletal injuries</p> <p>1.3 Apply knowledge of the structure and function of the musculoskeletal system and basic biomechanics to posture, functional stability and locomotion when planning exercise programs for moderate risk clients</p> <p>1.4 Apply an understanding of the fundamental structural and functional differences affecting the mobility and stability of the pectoral girdle, pelvic girdle and vertebral column when undertaking screening and programming for clients with postural concerns</p> <p>1.5 Apply the structural adaptations of musculoskeletal tissue in response to exercise, mechanical stress and disease to exercise programming for moderate risk clients</p> <p>1.6 Explain to clients the process of bone remodelling and muscle tissue repair in response to injury when dealing with musculoskeletal injuries</p> <p>1.7 Describe the effects of ageing and inactivity on musculoskeletal tissue and apply to exercise planning and programming to clients</p> <p>1.8 Apply the effect of individual structural differences on exercise performance to the planning and delivery of exercise programs for moderate risk clients</p> <p>1.9 Establish timeframes and goals for appropriate exercise program adjustment in collaboration with allied health professionals and medical professionals</p>
2 Apply extensive knowledge of the anatomy and physiology of the cardiovascular system and respiratory system to the planning and delivering exercise programs for moderate risk clients	<p>2.1 Apply reasonable knowledge of the structure and function of the cardiovascular system and respiratory system when negotiating exercise programs for clients</p> <p>2.2 Apply knowledge of the structural and physiological changes consistent with the pathology of disease states or conditions affecting the cardiovascular system and respiratory system when planning programs for moderate risk clients</p> <p>2.3 Apply an in-depth understanding of the coronary risk factors when screening and testing clients</p> <p>2.4 Explain to moderate risk clients the process and justification of common clinical tests used to evaluate functional capacity to clients with medical conditions</p> <p>2.5 Apply an understanding of the normal and abnormal values for physiological responses of the cardiovascular system and respiratory system when planning exercise programs for clients with medical conditions or disorders</p> <p>2.6 Explain the meaning of electrocardiography to moderate risk clients and it's diagnostic importance, when considering exercise prescription</p> <p>2.7 Apply an understanding of the interrelationship between the phases, timing</p>

	<p>and heart sounds of the cardiac cycle; the ventilation pressure changes; and circulatory and respiratory volume changes occurring in response to exercise</p> <p>2.8 Apply knowledge of the structure of the heart, coronary circulation and cardiac conduction including abnormalities to moderate risk clients wishing to commence an exercise program</p> <p>2.9 Apply an understanding of the composition of blood, blood cell abnormalities and the process of blood clotting to injuries and medical conditions</p> <p>2.10 Apply the pathology of disease states and conditions to the function of the cardiovascular system and respiratory system when applying programming principles for moderate risk clients</p>
<p>3 Relate the structure and function of the lymphatic system to exercise and exercise related injuries</p>	<p>3.1 Describe the general components of the lymphatic system and their functions; and the close interplay with the cardiovascular system to moderate risk clients when providing information about exercise and exercise related injuries</p> <p>3.2 Explain to moderate risk clients the role of the lymphatic system in injury response and the healing process with regard to the prevention and management of exercise related injuries</p> <p>3.3 Explain the role of the lymphatic system in fluid retention and the effect of exercise on lymph flow to clients</p> <p>3.4 Describe the lymphatic system's role in infection control and immunity to clients</p>
<p>4 Apply knowledge of the structure and function of the nervous system to exercise and fitness activities</p>	<p>4.1 Use knowledge of the structure and function of the nervous system when planning and delivering exercise for moderate risk clients</p> <p>4.2 Explain the role of the nervous system in the control of muscle contraction, nerve impulse conduction to produce movement, coordination of muscle action, proprioception and balance when planning and delivering exercise programs for moderate risk clients</p> <p>4.3 Apply knowledge of the role the nervous system plays in posture to the planning of exercise programs for clients with postural concerns</p> <p>4.4 Apply an understanding of effects of the neurological impairment resulting from injury or disability when planning exercise programs for moderate risk clients</p> <p>4.5 Explain the role of pain, types of pain and it's function in relation to injury and injury prevention when dealing with fitness clients</p>
<p>5 Apply extensive knowledge of the anatomy and physiology of the endocrine system to the planning of exercise programs for moderate risk clients</p>	<p>5.1 Apply knowledge of the structure and function of the endocrine system to the planning and delivery of exercise for relevant medical conditions or injuries</p> <p>5.2 Apply knowledge of the effects of hormones on metabolism and energy production when providing information to clients regarding exercise, nutrition and body composition management</p> <p>5.3 Apply the effects of hormonal action on the regulation of basic physiological responses to exercise when planning fitness programs for moderate risk clients</p> <p>5.4 Explain the interrelationship between the nervous system and the endocrine system to control body systems to moderate risk clients</p> <p>5.5 Explain the effects some of the medical conditions and disorders on homeostasis of the endocrine system</p>

6 Apply knowledge of the structure and function of the digestive system when providing advice about nutrition and body composition to moderate risk clients	6.1 Explain clearly the structure and function of the <i>digestive system</i> when providing advice relating to nutrition, metabolism and body composition management to clients 6.2 Use an understanding of the process of digestion and absorption of food in relation to energy production when providing information to clients
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professionals and medical professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialed</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Cardiovascular system	<p>[all categories]</p> <ul style="list-style-type: none"> • blood <ul style="list-style-type: none"> ○ physical components of blood <ul style="list-style-type: none"> ▪ plasma ▪ blood cells ○ formation of blood cells ○ homeostasis ○ blood clotting ○ disorders of the blood <ul style="list-style-type: none"> ▪ anaemia ▪ haemophilia ▪ leukaemia • heart structure <ul style="list-style-type: none"> ○ heart muscle <ul style="list-style-type: none"> ▪ layers <ul style="list-style-type: none"> ▪ endocardium ▪ myocardium ▪ epicardium ▪ membranes ▪ chambers <ul style="list-style-type: none"> ▪ atria ▪ ventricles ▪ septum ▪ valves <ul style="list-style-type: none"> ▪ atrioventricular valves ▪ semilunar valves ▪ sinoatrial node ▪ atrioventricular node ▪ atrioventricular bundle ○ vessels entering and leaving the heart ○ coronary vessels

	<ul style="list-style-type: none"> • heart function <ul style="list-style-type: none"> ○ cardiac conduction ○ conduction abnormalities ○ cardiac cycle <ul style="list-style-type: none"> ▪ phases ▪ timing ▪ heart sounds ○ cardiac output ○ regulation of heart rate ○ regulation of stroke volume ○ effects of exercise in the heart • disorders of the heart <ul style="list-style-type: none"> ○ heart murmurs ○ coronary artery disease ○ myocardial infarction ○ congenital heart defects ○ valvular defects • blood vessels <ul style="list-style-type: none"> ○ anatomy of blood vessels ○ principle arteries of the head and neck, upper extremities, thorax and abdomen, pelvis, lower extremity ○ principle veins of the head and neck, upper extremities, thorax and abdomen, pelvis, lower extremity • circulation <ul style="list-style-type: none"> ○ systemic ○ portal circulation ○ pulmonary ○ coronary • haemodynamics <ul style="list-style-type: none"> ○ velocity of blood flow ○ volume of blood flow ○ blood pressure ○ resistance ○ venous return ○ elasticity of vessels • blood pressure <ul style="list-style-type: none"> ○ regulation of blood pressure <ul style="list-style-type: none"> ▪ maintenance of arterial pressure ▪ peripheral resistance ▪ neural control and regulation ▪ hormonal regulation ▪ local regulation • ageing and the cardiovascular system • cardiovascular effects of abnormal stresses <ul style="list-style-type: none"> ○ shock ○ hypertension ○ cardiac failure • cardiovascular adaptations and adjustments <ul style="list-style-type: none"> ○ foetal circulation ○ pregnancy ○ gravity ○ exercise • lymphatic circulation • cerebral circulation
Clinical tests	[all categories]

	<p>be aware of</p> <ul style="list-style-type: none"> • cardiovascular tests that include <ul style="list-style-type: none"> ○ heart rate ○ blood pressure ○ blood chemistry profile ○ physician monitored graded exercise test ○ angiogram ○ echocardiogram • pulmonary tests that include <ul style="list-style-type: none"> ○ chest X-ray ○ pulmonary function test ○ blood gas analysis
Digestive system	<p>[all categories]</p> <ul style="list-style-type: none"> • structure <ul style="list-style-type: none"> ○ mouth ○ oesophagus ○ stomach ○ small intestine ○ large intestine ○ rectum ○ anus ○ sphincters • glands <ul style="list-style-type: none"> ○ salivary glands ○ pancreas ○ liver ○ gall bladder • blood supply • innervation • role in energy production • digestion <ul style="list-style-type: none"> ○ breakdown ○ motor functions <ul style="list-style-type: none"> ▪ mastication ▪ peristalsis ▪ segmentation ▪ deglutition ▪ gastric motility ▪ intestinal motility ○ secretion of enzymes ○ secretion of juices • enzymes <ul style="list-style-type: none"> ○ secretion ○ function • absorption <ul style="list-style-type: none"> ○ carbohydrate ○ lipids ○ protein ○ water and electrolytes ○ vitamins • chemical composition of foods • metabolism of foodstuffs <ul style="list-style-type: none"> ○ oxidation of food ○ by-products ○ storage

	<ul style="list-style-type: none"> ○ regulation of metabolism ● choice of metabolic pathway ● carbohydrate metabolism ● fat metabolism ● protein metabolism
Endocrine system	<p>[all categories]</p> <ul style="list-style-type: none"> ● role and function of the endocrine system ● endocrine glands <ul style="list-style-type: none"> ○ pituitary ○ adrenal ○ thyroid ○ parathyroid ○ pancreas ○ gonads ○ thymus ● hormones <ul style="list-style-type: none"> ○ types ○ hormone transport in the blood ○ hormone action ○ control of hormone action ○ control of hormone secretion ○ abnormal secretion ● role of endocrine system in stress and disease ● effects of ageing on the endocrine system ● disorders or homeostatic imbalances <ul style="list-style-type: none"> ○ diabetes
Functional anatomy of the major joints	<p>[all categories]</p> <ul style="list-style-type: none"> ● glenohumeral <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ humerus ▪ scapula ▪ clavicle ○ ligaments <ul style="list-style-type: none"> ▪ coracohumeral ▪ coroclavicular ▪ glenohumeral ▪ transverse humeral ○ related structures <ul style="list-style-type: none"> ▪ subscapular bursa ▪ subacromial bursa ▪ subdeltoid bursa ▪ subcorocoid bursa ○ muscles acting on the joint ● elbow <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ humerus ▪ ulna ▪ radius ○ ligaments <ul style="list-style-type: none"> ▪ ulnar collateral ▪ radial collateral ○ related structures <ul style="list-style-type: none"> ▪ olecranon bursa

- muscles acting on the joint
- lumbo–sacral
 - bones
 - 5th lumbar vertebrae
 - 1st vertebrae of sacrum
 - ligaments
 - muscles acting on the joint
- intervertebral
 - bones
 - vertebral bodies
 - ligaments
 - muscles acting on the joint
- hip (coxal)
 - bones
 - femur
 - hip
 - ligaments
 - pubofemoral
 - iliofemoral
 - ischiofemoral
 - transverse ligament of acetabulum
 - ligament of head of femur
 - muscles acting on the joint
- knee (tibiofemoral/patellofemoral)
 - bones
 - tibia
 - femur
 - patella
 - ligaments
 - patella
 - oblique popliteal
 - arcuate popliteal
 - tibial collateral
 - fibular collateral
 - posterior cruciate
 - anterior cruciate
 - related structures
 - tendons of the quadriceps femoris and fascia latae
 - medial meniscus
 - lateral meniscus
 - prepatellar bursa
 - intrapatellar bursa
 - suprapatellar bursa
 - muscles acting on the joint
- ankle (talocrucal)
 - bones
 - talus
 - tibia
 - fibula
 - ligaments
 - deltoid
 - anterior talofibial
 - posterior talofibial
 - calcaneofibular
 - related structures
 - achilles tendon
 - muscles acting on the joint

Hormones	<p>[all categories]</p> <ul style="list-style-type: none"> • human growth hormone • anti-diuretic hormone (vasopressin) • thyroid hormone • calcitonin • aldosterone • insulin
Lymphatic system	<p>[all categories]</p> <ul style="list-style-type: none"> • lymph <ul style="list-style-type: none"> ○ tissue fluid ○ plasma ○ lymphocytes • structure <ul style="list-style-type: none"> ○ lymphatic vessels ○ lymph nodes ○ lymph organs <ul style="list-style-type: none"> ▪ spleen ▪ thymus ▪ tonsils ▪ lacteals • function of the lymphatic system • lymph flow • lymphatic drainage • non-specific resistance to disease <ul style="list-style-type: none"> ○ immune responses ○ phagocytosis ○ inflammation • immunity • effects of ageing on the immune system • disorders <ul style="list-style-type: none"> ○ acquired immunodeficiency syndrome ○ allergic reactions ○ infectious mononucleosis
Major bones	<p>[all categories]</p> <ul style="list-style-type: none"> • skull • cervical vertebrae • thoracic vertebrae • lumbar vertebrae • sacrum • coccyx • clavicle • scapula • humerus • radius • ulna • carpals • metacarpals • phalanges • pelvis • femur • patella

	<ul style="list-style-type: none"> • tibia • fibula • tarsals • metatarsals • phalanges
Major muscles	<p>[all categories]</p> <ul style="list-style-type: none"> • sternocleidomastoid • splenius <ul style="list-style-type: none"> ○ capitus ○ cervicus • erector spinae <ul style="list-style-type: none"> ○ iliocostalis <ul style="list-style-type: none"> ▪ lumborum ▪ thoracis ▪ cervicis ○ longissimus <ul style="list-style-type: none"> ▪ capitus ▪ thoracis ▪ cervicis ○ spinalis <ul style="list-style-type: none"> ▪ capitus ▪ thoracis ▪ cervicis • semispinalis <ul style="list-style-type: none"> ○ thoracis ○ cervicus ○ capitust • multifidus • interspinalis • intertransversarii • quadratus lumborum • iliopsoas • abdominals <ul style="list-style-type: none"> ○ rectus abdominis ○ transverse abdominis ○ internal oblique ○ external oblique • trapezius • levator scapulae • rhomboid <ul style="list-style-type: none"> ○ major ○ minor • serratus anterior • pectoralis <ul style="list-style-type: none"> ○ major ○ minor • latissimus dorsi • teres <ul style="list-style-type: none"> ○ major ○ minor • subscapularis • supraspinatus • infraspinatus • deltoid • coracobrachialis

	<ul style="list-style-type: none"> • biceps brachii • triceps brachii • brachialis • brachioradialis • pronator teres • supinator • forearm flexors • forearm extensors • quadriceps <ul style="list-style-type: none"> ○ rectus femoris ○ vastus lateralis ○ vastus intermedius ○ vastus medialis • hamstrings <ul style="list-style-type: none"> ○ biceps femoris ○ semitendinosus ○ semimembranosus • gastrocnemius • soleus • tibialis posterior • tibialis anterior • peroneus
Medical conditions or disorders	<p>[all categories]</p> <p>appreciate the range of</p> <ul style="list-style-type: none"> • conditions affecting the cardiovascular system <ul style="list-style-type: none"> ○ anaemia ○ myocardial infarction ○ arrhythmia ○ congestive heart failure ○ arteriosclerosis ○ ventricular brachycardia ○ peripheral vascular disease ○ post–surgery cardiac care ○ hypertension ○ cerebrovascular disease • conditions affecting the respiratory system <ul style="list-style-type: none"> ○ chronic obstructive pulmonary disorder ○ emphysema ○ asthma ○ bronchitis ○ tuberculosis ○ pneumonia ○ pulmonary oedema • conditions affecting the musculoskeletal system <ul style="list-style-type: none"> ○ osteoarthritis ○ rheumatoid arthritis ○ osteoporosis • conditions affecting the digestive system <ul style="list-style-type: none"> ○ peptic ulcers ○ diverticulitis ○ eating disorders ○ hepatitis ○ bowel cancer • conditions affecting the endocrine system <ul style="list-style-type: none"> ○ diabetes

	<ul style="list-style-type: none"> • conditions affecting the nervous system <ul style="list-style-type: none"> ○ retinopathy ○ peripheral neuropathy ○ quadriplegia ○ paraplegia ○ cerebral palsy ○ muscular dystrophy ○ Parkinson's disease • conditions affecting the lymphatic system <ul style="list-style-type: none"> ○ oedema ○ lymphoma ○ glandular fever ○ chronic fatigue syndrome ○ acquired immunodeficiency syndrome
Moderate risk clients	<p>[all categories]</p> <ul style="list-style-type: none"> • not 'low risk' • chronic disease state • medical condition or injury • under prescribed medication • symptoms of cardio-pulmonary disease • moderate or high risk as identified through allied health professional or medical professional • aged and sedentary
Musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • injuries <ul style="list-style-type: none"> ○ sprain ○ strain ○ dislocation ○ ligament rupture ○ meniscus tear ○ bursitis ○ tendonitis

Musculoskeletal system	<p>[all categories]</p> <ul style="list-style-type: none"> • skeletal system <ul style="list-style-type: none"> ○ structure of bone ○ histology of bone tissue <ul style="list-style-type: none"> ▪ compact bone ▪ spongy bone ○ blood and nerve supply of bone ○ bone formation <ul style="list-style-type: none"> ▪ endochondral ossification ▪ intramembraneous ossification ○ bone growth ○ bone remodelling <ul style="list-style-type: none"> ▪ processes involved ▪ sequence of events ○ fracture and repair of bones ○ bones role on homeostasis ○ effects of exercise on bone tissue ○ effects of ageing on bone tissue ○ disorders and homeostatic imbalances of the skeletal system <ul style="list-style-type: none"> ▪ osteoporosis ▪ osteomalacia ○ vertebral column <ul style="list-style-type: none"> ▪ structure of vertebrae ▪ intervertebral discs ▪ regions of the vertebral column ▪ normal curves of the vertebral column ○ identification of the major bones of the <ul style="list-style-type: none"> ▪ skull ▪ vertebral column ▪ thorax ▪ pectoral girdle ▪ upper limb ▪ pelvic girdle ▪ lower limb ○ comparison of stability and mobility of the pectoral and pelvic girdles ○ arches of the foot ○ clinical applications <ul style="list-style-type: none"> ▪ patello–femoral stress syndrome ▪ fractures ▪ flat feet/high arches • articulations <ul style="list-style-type: none"> ○ identification of major joints ○ structure of major joints ○ factors affecting the range of motion at joints ○ connective tissues associated with joints <ul style="list-style-type: none"> ▪ bursae ▪ ligaments ▪ meniscus ○ effects of ageing on joints ○ disorders and homeostatic imbalances of joints <ul style="list-style-type: none"> ▪ osteoarthritis ▪ rheumatoid arthritis ○ clinical applications <ul style="list-style-type: none"> ▪ sprain ▪ strain ▪ torn cartilage
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	<ul style="list-style-type: none"> ▪ bursitis • muscular system <ul style="list-style-type: none"> ○ types of muscle tissue, functions and special properties of <ul style="list-style-type: none"> ▪ skeletal muscle ▪ smooth muscle ▪ cardiac muscle ○ skeletal muscle tissue ○ structure of skeletal muscle tissue ○ connective tissue properties ○ nerve and blood supply ○ regeneration of muscle tissue ○ effects of ageing on skeletal muscle tissue ○ disorders and homeostatic imbalances <ul style="list-style-type: none"> ▪ muscular dystrophy ▪ abnormal muscle contractions ▪ running injuries ▪ compartment syndrome ○ clinical applications <ul style="list-style-type: none"> ▪ atrophy ▪ hypertrophy ▪ exercise induced muscle damage ▪ muscle strains ▪ shin splints ▪ plantar fasciitis ○ identification of major muscles of the body ○ attachments of major muscles of the body ○ muscle action of major muscles of the body
Nervous system	<p>[all categories]</p> <ul style="list-style-type: none"> • divisions <ul style="list-style-type: none"> ○ central nervous system ○ peripheral nervous system <ul style="list-style-type: none"> ▪ somatic nervous system ▪ autonomic nervous system • central nervous system <ul style="list-style-type: none"> ○ brain ○ spinal cord • peripheral nervous system <ul style="list-style-type: none"> ○ cranial nerves ○ spinal nerves ○ peripheral nerves ○ plexus • neurons <ul style="list-style-type: none"> ○ afferent ○ efferent ○ motor ○ sensory • histology of nerve tissue <ul style="list-style-type: none"> ○ neuron <ul style="list-style-type: none"> ▪ axon ▪ dendrites ▪ nucleus ▪ cell body ▪ node of ranvier ▪ neurilemma ▪ myelin sheath ▪ scwann cell ○ neuroglia

	<ul style="list-style-type: none"> • brain <ul style="list-style-type: none"> ○ structure ○ brain stem ○ cerebral hemispheres ○ ventricles ○ cranial nerves ○ meninges ○ cerebrospinal fluid ○ blood supply ○ sensory areas and pathways ○ motor areas and pathways • nerve impulses <ul style="list-style-type: none"> ○ resting membrane potentials ○ graded potentials ○ action potentials ○ refractory period ○ subthreshold stimulation ○ all or none law ○ summation <ul style="list-style-type: none"> ▪ spatial ▪ temporal • neuromuscular transmission <ul style="list-style-type: none"> ○ neuromuscular junction ○ transmission • synaptic transmission <ul style="list-style-type: none"> ○ synapse ○ excitation at synapse ○ inhibition at synapse • spinal reflexes <ul style="list-style-type: none"> ○ reflex arc ○ receptors ○ reflex action ○ types of reflexes • spinal cord <ul style="list-style-type: none"> ○ structure ○ spinal nerves • peripheral nerves <ul style="list-style-type: none"> ○ cervical plexus ○ brachial plexus ○ lumbosacral plexus • regeneration and repair of nervous tissue • effects of ageing on the nervous system • disorders of the nervous system <ul style="list-style-type: none"> ○ multiple sclerosis ○ epilepsy ○ nerve injuries ○ cerebrovascular accident • sensory receptors <ul style="list-style-type: none"> ○ interoceptors ○ exteroceptors ○ proprioceptors • sensory organs <ul style="list-style-type: none"> ○ eye <ul style="list-style-type: none"> ▪ structure ▪ accessory organs ○ vision <ul style="list-style-type: none"> ▪ formation of image ▪ visual acuity ▪ visual fields
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	<ul style="list-style-type: none"> ▪ visual pathways ▪ visual defects ○ ear <ul style="list-style-type: none"> ▪ structure ○ hearing <ul style="list-style-type: none"> ▪ conduction of sound ▪ auditory pathway ▪ hearing defects ▪ equilibrium
Physiological responses	<p>[all categories]</p> <ul style="list-style-type: none"> • heart rate • arterial pressure • pulmonary function
Posture	<p>[all categories]</p> <ul style="list-style-type: none"> • types <ul style="list-style-type: none"> ○ static ○ dynamic • positions <ul style="list-style-type: none"> ○ standing ○ sitting ○ supine • ideal posture <ul style="list-style-type: none"> ○ vertebral alignment ○ normal spinal curves • common postural deviations
Respiratory system	<p>[all categories]</p> <ul style="list-style-type: none"> • structure <ul style="list-style-type: none"> ○ mouth ○ pharynx ○ larynx ○ trachea ○ bronchi ○ bronchioles ○ lungs ○ alveoli • pulmonary ventilation <ul style="list-style-type: none"> ○ mechanics of breathing ○ pressure changes during ventilation ○ regulation of ventilation • lung volumes and capacities <ul style="list-style-type: none"> ○ total lung capacity ○ residual volume ○ vital capacity ○ tidal volume ○ inspiratory reserve volume ○ expiratory reserve volume ○ respiratory minute volume • gaseous exchange <ul style="list-style-type: none"> ○ internal respiration ○ external respiration • regulation of respiratory

	<ul style="list-style-type: none">○ control of respiration● effects of exercise on the respiratory system● effects of ageing on the respiratory system● common respiratory conditions<ul style="list-style-type: none">○ asthma○ chronic obstructive pulmonary disorder<ul style="list-style-type: none">▪ emphysema▪ bronchitis○ tuberculosis○ pneumonia○ pulmonary oedema○ cystic fibrosis
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to apply <ul style="list-style-type: none"> ○ extensive knowledge of the musculoskeletal system to exercise planning and programming for moderate risk clients ○ extensive knowledge of the cardiovascular system and respiratory system to exercise planning and programming for moderate risk clients ○ knowledge of the lymphatic system to exercise and exercise related injury ○ knowledge of the nervous system to movement and movement control for moderate risk clients ○ knowledge of the endocrine system to exercise ○ knowledge of the digestive system to exercise and nutrition
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic anatomy and physiology ○ Basic biomechanics, especially movement terminology and execution ○ An industry standard screening process that identifies moderate risk clients ○ Advanced exercise programming principles ○ A broad range of fitness activities ○ A broad range of fitness equipment, its use and operation ○ Posture and basic postural screening techniques ○ Postural abnormalities ○ Medical conditions and injuries requiring referral to a medical or allied health professionals ○ The referral process • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills to interact effectively with clients and health professionals ○ Verbal and written communication skills to understand and relate

	<p>information obtained to fitness programs and activities</p> <ul style="list-style-type: none"> ○ Adequate literacy and numeracy skills to make simple calculations ○ Research skills to source information as required
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ anatomy equipment with full sized human skeleton ○ functional joint models ○ anatomy charts and maps ○ posture charts ○ physiology equipment such as sphygmomanometers, stethoscope, heart rate monitors, ○ basic fitness equipment including bicycle ergometers, treadmill ○ charts for ratings of perceived exertion and training heart rate zones • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	2	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Collect and interpret information gained from client history and functional tests to apply to fitness activities and programs • Communicating ideas and information — Relate information about anatomy and physiology concepts to fitness clients • Planning and organising activities — Plan exercise programs to meet client needs • Working with teams and others – Seek information from appropriate professionals as required • Using mathematical ideas and techniques — Apply basic numeracy skills to calculate equations • Solving problems — Use critical thinking to apply anatomy and physiology concepts to real life exercise situations, apply pathology of medical conditions or injuries • Using technology — Use physiology equipment to monitor physiological responses to exercise, use a computer as required <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

FITNESS SPECIALIST

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SRFFSP001A	PROVIDE BODY COMPOSITION MANAGEMENT PROGRAMMING FOR MODERATE RISK CLIENTS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and attitudes required to provide body composition management programming for clients who present with no more than moderate risk of untoward event or exacerbation of impairment during exercise.

ELEMENT	PERFORMANCE CRITERIA
1 Educate the client on the relationship between exercise, nutrition and body composition management	1.1 Identify to <i>client</i> appropriate and non–appropriate methods of managing body composition 1.2 Explain to the <i>client</i> the negative health effects of poor management of body composition 1.3 Discuss the physiological mechanisms of decreasing adipose tissue in a method that is understandable to the <i>client</i> 1.4 Explain the importance of sound nutritional practices for body composition management to the <i>client</i> 1.5 Explain the effect of exercise on management of body composition
2 Conduct goals and needs analysis that is appropriate for body composition management	2.1 Welcome the <i>client</i> and create a non–threatening environment 2.2 Discuss with the <i>client</i> their history of participation in exercise 2.3 Explain the importance of goal setting and give examples of appropriate and non appropriate methods 2.4 In conjunction with the <i>client</i> and using sound goal setting strategies set appropriate short and long term goals 2.5 Discuss with the <i>client</i> the possible obstacles to exercise and outline methods to increase the chances of exercise adherence
3 Plan a program to effectively manage body composition in clients	3.1 Explain to the <i>client</i> the importance of an industry standard pre–exercise screening and conduct screening procedure 3.2 Explain the different methods of body composition assessment and why or why not these are appropriate 3.3 Estimate if necessary body composition through non–threatening and non–invasive methods 3.4 Plan in conjunction with the <i>client</i> the exercise session with long term exercise adherence a priority 3.5 Ensure that the program is consistent with the client's goals
4 Deliver a program to effectively manage body composition in clients	4.1 Explain to the <i>client</i> relevant occupational health and safety issues 4.2 Demonstrate effective communication skills at all times and encourage clients to seek clarification of any information if they do not understand 4.3 Demonstrate and deliver exercises that have been programmed ensuring correct technique is performed and using a variety of instructional techniques 4.4 Modify the program if the <i>client</i> is having difficulty with the exercises prescribed or if the intensity is too high or low 4.5 Use strategies to encourage the <i>client</i> and to ensure they are in an environment that is positive for long term exercise adherence

5 Monitor and reassess client progress and modify if necessary	5.1 Meet with the client and use effective communication techniques to discuss progress 5.2 If requested assess body composition using the method used at baseline 5.3 Use motivational techniques to encourage life long exercise adherence 5.4 Modify and reevaluate program if necessary to ensure positive adaptations are continued and that the client is given choices of activities
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Body composition assessment	<p>[all categories]</p> <ul style="list-style-type: none"> • girths • body mass index • skin folds • anthropometry
Client	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • active or inactive • various ages • medical concerns cleared by a medical practitioner or allied health professional • ensure the client feels comfortable in the environment
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • listening skills • empathy • body language • negotiation skills
Exercise adherence	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport • rewards for attendance and participation • statement of intent • perceived choice • goal setting
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport <ul style="list-style-type: none"> ○ level of instruction compares with level of client knowledge ○ empathy ○ creating a safe environment • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clarity of instruction • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms

	<ul style="list-style-type: none"> ○ personality ● demonstration strategies ● motivational strategies ● avoidance against competing with the client ● positives and negatives of different instructional techniques ● positive feedback ● flexibility in instructional technique
Modify and reevaluate	<p>[all categories]</p> <ul style="list-style-type: none"> ● review clients needs and goals ● assess program outcomes ● positive and constructive feedback ● review client's condition ● modify program <ul style="list-style-type: none"> ○ sets ○ reps ○ exercises ○ intensity ○ time ● review clients participation frequency
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> ● initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance ● initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication ● forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance ● information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability
Program	<p>[all categories]</p> <ul style="list-style-type: none"> ● enjoyable ● safe ● achievable ● exercise selection ● sequence of exercises ● variety ● general training principles ● matches client's goals and needs ● logical progression

Negative health effects	[all categories] <ul style="list-style-type: none">• eating disorders<ul style="list-style-type: none">○ bulimia○ anorexia• obesity• diabetes• hypertension• cardiovascular disease• cancer• joint degeneration
Non appropriate methods	[all categories] <ul style="list-style-type: none">• 'fad' diets• starvation• obsessive exercise• unsafe and unfounded exercise practices

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan and deliver an effective body composition management program to clients ○ medically screen the client in need of body composition management ○ assess the body composition of the client ○ motivate the client in need of body composition management ○ communicate effectively with the client in need of body composition management ○ discuss with the client effective nutritional practices
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Exercise programming ○ Exercise adherence ○ Effective nutritional practices • Required skills <ul style="list-style-type: none"> ○ Advanced verbal, written and listening skills for the age and values of the client in need of body composition management so that the best possible results may be determined ○ Advanced interpersonal skills to enhance the interaction with the client and to help with exercise adherence ○ Advanced programming and instructional skills so that the specific needs of the client in need of body composition management are met

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a client in need of body composition management • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Monitoring and adjusting techniques for client • Communicating ideas and information — Educating client on techniques and expected outcomes • Planning and organising activities — Planning and implementing a program • Working with teams and others — Liaising with other to implement the program • Using mathematical ideas and techniques — Assessing composition and milestones • Solving problems — Analysing program and adjusting where necessary • Using technology — Demonstrating program equipment and documenting program plans <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP002A	PROVIDE INFORMATION ABOUT INJURY PREVENTION AND MANAGEMENT TO FITNESS CLIENTS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with the skills, knowledge and attitudes to provide information to fitness clients about exercise related injuries, their prevention and management under the guidance of allied health professionals.

ELEMENT	PERFORMANCE CRITERIA
1 Apply a knowledge of musculoskeletal injuries to fitness activities	<ul style="list-style-type: none"> 1.1 Describe the different types of injuries and their common causes to fitness clients 1.2 Describe the biomechanical principles of injury and biomechanics in relation to fitness activities 1.3 Explain the pathology of injury and injury response and the phases of healing and repair to fitness clients 1.4 Apply the influence of the healing process on exercise prescription and discuss with clients 1.5 Describe the process of assessment of injuries, and the management of injury with fitness clients 1.6 Apply knowledge of the structure and function of the musculoskeletal system and connective tissue when recognising injuries and providing injury prevention 1.7 Investigate the common causes of musculoskeletal injuries in relation to fitness activities
2 Identify common exercise related musculoskeletal injuries resulting from fitness activities, and the associated management methods	<ul style="list-style-type: none"> 2.1 Identify and describe common exercise related injuries, the causes and contributing factors to clients 2.2 Explain the theory and best practice for the management of injury to clients 2.3 Investigate and discuss the role of exercise and fitness in the prevention, management and rehabilitation of common exercise related injuries 2.4 Explain to clients the roles, responsibilities and limitations of fitness specialists in providing advice and exercise to fitness clients with injury considerations 2.5 Consult with allied health professionals about the appropriate management of common exercise related injuries
3 Develop and apply injury prevention strategies applicable to fitness activities	<ul style="list-style-type: none"> 3.1 Identify the personal and internal factors predisposing an individual to exercise related injuries 3.2 Investigate the extrinsic factors predisposing an individual to exercise related injuries 3.3 Apply knowledge of the potential sources of injury and associated risk to fitness activities and the fitness environment 3.4 Analyse various exercises, exercise technique and fitness activities to formulate injury prevention strategies 3.5 Develop injury prevention strategies and explain to fitness clients, as required 3.6 Communicate recommendations about injury prevention strategies to appropriate stakeholders involved in the fitness industry 3.7 Provide information to staff, clients and other relevant persons about injury prevention using appropriate methods of communication

<p>4 Assist with the management of common exercise related musculoskeletal injuries under the guidance of allied health professionals</p>	<p>4.1 Arrange for injuries to be assessed by an appropriate health care professional to determine the type and extent of injury</p> <p>4.2 Determine strategies for the management and rehabilitation progress process of common exercise related musculoskeletal injuries in conjunction with an allied health professional</p> <p>4.3 Evaluate the role of exercise in the management and rehabilitation of musculoskeletal injuries, under the guidance of an allied health professional</p> <p>4.4 Plan and conduct an exercise program to prevent a loss of general fitness and skill under the supervision of suitably qualified allied health professionals, and according to industry standards</p> <p>4.5 Monitor the progress of management, progress of treatment and encourage reassessment of the injury by an allied health professional, when required</p>
<p>5 Develop a network of medical and allied health professionals</p>	<p>5.1 Apply an understanding of the defined roles and responsibilities of the fitness specialist and their ethical and legal limitations to work within the limitations of their qualification and refer clients with injury to allied health professionals when appropriate</p> <p>5.2 Use a network of medical and allied health professionals to establish a consultative process to provide injury management</p> <p>5.3 Use appropriate documentation and terminology to communicate information to medical and allied health professionals when referring fitness clients</p> <p>5.4 Maintain client confidentiality at all times</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Assessment of injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • STOP <ul style="list-style-type: none"> ○ stop ○ talk ○ observe ○ prevent further injury • TOTAPS <ul style="list-style-type: none"> ○ talk ○ observe ○ touch ○ active movement ○ passive movement ○ skill test
Biomechanical principles of injury	<p>[all categories]</p> <ul style="list-style-type: none"> • biomechanical properties of connective tissue • biomechanical structure of joints
Biomechanics	<p>[all categories]</p> <ul style="list-style-type: none"> • levers • loads • fulcrum • movement arms • muscle actions • centre of gravity

	<ul style="list-style-type: none"> • base of support
Causes of common musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • congenital • traumatic • degenerative • infection • postural • biomechanical factors
Client confidentiality	<p>[all categories]</p> <ul style="list-style-type: none"> • information regarding the client's medical status and personal details should not be passed on to other individuals without permission, other than through the referral process
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • child or adult • young or aged • male or female • experienced or inexperienced • without other medical conditions • injured but cleared for exercise by an allied health professional
Common exercise related injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • lower leg injury <ul style="list-style-type: none"> ○ shin splints ○ plantar fasciitis ○ ankle sprain ○ achilles tendon strain or rupture ○ stress fractures ○ compartment syndrome • shoulder injury <ul style="list-style-type: none"> ○ rotator cuff injury ○ shoulder impingement syndrome • trunk injury <ul style="list-style-type: none"> ○ low back pain ○ internal bleeding <ul style="list-style-type: none"> ▪ shock ▪ damage to kidney's ▪ spleen ▪ winding • knee injury <ul style="list-style-type: none"> ○ medial ligament sprain ○ collateral ligament sprain ○ anterior/posterior cruciate ligament sprain ○ meniscus tear or damage ○ patello–femoral injury ○ chondromalacia
Connective tissue	<p>[all categories]</p>

	<ul style="list-style-type: none"> • fascia • tendon • ligaments
Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • stretching <ul style="list-style-type: none"> ○ proprioceptive neuromuscular facilitation ○ static ○ passive • resistance training • aerobic fitness training
Healing process	<p>[all categories]</p> <ul style="list-style-type: none"> • healing response • factors affecting healing • role of pain
Industry standards	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local government regulations and guidelines • relevant organisations, associations or industry bodies code of conduct or code of ethics, policies and guidelines such as Sports Medicine Australia, Australian Physiotherapy Association
Injury prevention strategies	<p>[all categories]</p> <ul style="list-style-type: none"> • taping and bracing • pre-exercise warm-up and stretching • neural stretching • protective equipment such as shoes • recovery strategies • adequate physical preparation/fitness • risk assessment of activity, equipment and environment • guidelines for frequency and duration of participation • correction of technique/skills • adequate rehabilitation following any injury • appropriate management of previous injury
Injury response	<p>[all categories]</p> <ul style="list-style-type: none"> • inflammation phase • repair phase • maturation phase

Management of injury	<p>[all categories]</p> <ul style="list-style-type: none"> • STOP • TOTAPS • RICER <ul style="list-style-type: none"> ○ rest ○ ice ○ compression ○ elevation ○ referral • avoidance of harm <ul style="list-style-type: none"> ○ heat ○ alcohol ○ running ○ massage
Monitor the progress of management	<p>[all categories]</p> <ul style="list-style-type: none"> • question and discuss with client before, during and after treatment session • observation of functional movement before, during and after treatment session
Musculoskeletal system	<p>[all categories]</p> <ul style="list-style-type: none"> • structure and function of <ul style="list-style-type: none"> ○ bones ○ ligaments ○ joints ○ tendons ○ muscles ○ cardiovascular supply ○ innervation • tissue type and repair • knee joint <ul style="list-style-type: none"> ○ ligaments ○ cartilage ○ bones ○ tendons • shoulder joint <ul style="list-style-type: none"> ○ bones ○ joints ○ tendons • ankle/foot <ul style="list-style-type: none"> ○ bones ○ ligaments ○ tendons ○ muscles • major muscles and their actions <ul style="list-style-type: none"> ○ quadriceps ○ hamstrings ○ gastrocnemius ○ soleus ○ tensor fascia latae ○ iliotibial band ○ tibialis anterior

	<ul style="list-style-type: none"> ○ peronealis ○ gluteals ○ abdominals ○ erector spinae ○ supraspinatus ○ infraspinatus ○ teres major ○ teres minor
Musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • injuries to bone <ul style="list-style-type: none"> ○ fractures ○ stress fractures ○ periosteal contusion • injuries to joints and associated structures <ul style="list-style-type: none"> ○ dislocation ○ subluxation ○ cartilage damage ○ bursitis • injuries to ligaments <ul style="list-style-type: none"> ○ sprain ○ ligament rupture • injuries to muscle <ul style="list-style-type: none"> ○ strain/tear (grades i–iii) ○ haematoma ○ compartment syndrome ○ tendonitis
Pathology of injury	<p>[all categories]</p> <ul style="list-style-type: none"> • initial tissue damage • capillary bleeding • clot formation • tissue swelling • secondary tissue damage • removal of blood clot and tissue swelling
Progress of treatment	<p>[all categories]</p> <ul style="list-style-type: none"> • improvement • deterioration • effectiveness of treatment
Reassessment of the injury	<p>[all categories]</p> <ul style="list-style-type: none"> • functional restoration • inflammation • tissue damage

Rehabilitation of musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • aims to return the individual to previous physical state • occurs after initial management of the injury • incorporates strategies to prevent further injuries • based on SAID regime <ul style="list-style-type: none"> ○ specific adaptations to imposed demands
Rehabilitation program progress	<p>[all categories]</p> <ul style="list-style-type: none"> • intact muscles and joints • pain free muscles and joints • joint flexibility • muscle strength • muscle endurance • speed • power • integrated and coordinated movement • agility
Role of the fitness specialist	<p>[all categories]</p> <ul style="list-style-type: none"> • help the client maintain general fitness by providing fitness activities that utilise uninjured body parts without the presence of pain • implement treatment and rehabilitation programs designed by allied health professionals in accordance with industry standards • help maintain the client's general fitness and skill level patterns by designing fitness programs that utilise uninjured body parts without pain
Stakeholders	<p>[all categories]</p> <ul style="list-style-type: none"> • client • fitness professionals • fitness centre owners • coaches • parents/guardians • other health professionals • other appropriate personnel
Treatment	<p>[all categories]</p> <ul style="list-style-type: none"> • first aid • rice • thermotherapy/cryotherapy • mobilisation and exercise • conservative movement

Types of injuries	[all categories] <ul style="list-style-type: none">• primary/secondary• direct/indirect• acute/overuse• bony/soft tissue/neural• musculoskeletal
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of the types of musculoskeletal injuries resulting from fitness activities, their causes and the appropriate management method • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular confirm the ability to <ul style="list-style-type: none"> ○ apply sufficient knowledge of the injury and healing process to provide information about the prevention and general management of musculoskeletal injuries ○ apply knowledge and appropriate techniques to assist health care professionals to implement supplementary fitness programs to support the rehabilitation process ○ develop and implement strategies to ensure the prevention of further injuries
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFSP006A Plan and deliver exercise strategies for musculoskeletal rehabilitation
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Human anatomy and physiology ○ Tissue repair ○ Human kinesiology ○ The basic principles of biomechanics as applied to movement and exercise ○ Basic first aid management ○ Current practices and procedures in emergency care ○ Fundamental pharmacology ○ The principles of exercise prescription including principles of training and FITT principle ○ The industry standards of client induction, screening and referral process ○ Relevant occupational health and safety standards • Required skills <ul style="list-style-type: none"> ○ Effective oral and written communication skills to interact with

	<p>clients and health professionals</p> <ul style="list-style-type: none"> ○ Ability to work effectively as part of a team ○ Appropriate reporting procedures for injuries and referral of clients ○ Good interpersonal skills to develop rapport with both clients and professionals ○ Ability to interpret relevant information and apply to management strategy
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a fitness centre with appropriate equipment and facilities ○ fitness clients with injury or simulated incident reports ○ appropriate documentation and resources normally used in the workplace ○ access to relevant first aid equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in first aid at an intermediate level or above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness procedure or activity should be conducted with genuine fitness clients, however to meet the range statement simulated injury incidents that closely replicate the work environment may be used. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	3	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Identify and evaluate information provided about injury • Communicating ideas and information — Provide information to clients and instruct clients using effective demonstration after communication with health professionals • Planning and organising activities — Develop and implement injury prevention strategies to prevent further injuries • Working with teams and others — Assist health care professionals with the management of injuries • Using mathematical ideas and techniques — Extract relevant information from reports • Solving problems — Apply knowledge to evaluate suitable strategies • Using technology — Utilise appropriate equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP003A	PLAN AND DELIVER EXERCISE TO PROMOTE PHYSICAL AND PSYCHOLOGICAL WELL-BEING IN LOW TO MODERATE RISK CLIENTS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Training Package and provides the fitness specialist with the skills, knowledge and competencies to plan and deliver exercise programs for low and moderate risk individuals. This unit focuses on the role of exercise as part of a healthy lifestyle and prevention of major diseases in adults. The unit outlines appropriate exercise levels within the context of public health recommendations on physical activity.

Note: Those who, by an allied health professional, are defined as moderate risk demonstrate two or more risk factors but no signs or symptoms of disease (primarily cardiovascular disease). This unit does not cover delivery of exercise to clients at high risk of or with signs or symptoms of disease, or with known disease.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of the role of physical activity in a healthy lifestyle and in preventing major causes of disease and disability among adults	1.1 Identify major causes of disease and disability among adults, and explain to the client <i>the role of physical activity in health and disease prevention</i> 1.2 Identify and explain to the client the mechanisms by which exercise may lower risk of <i>lifestyle disease or disability</i> 1.3 Identify cardiovascular disease risk classifications according to <i>relevant guidelines</i> 1.4 Identify major cardiovascular disease risk factors and the recommended clinical values for each, and explain to the client to what extent each is affected by exercise 1.5 Demonstrate an understanding of the knowledge and skills required to work with clients with different disease risks
2 Explain and apply current recommendations regarding the type and amount of physical activity to promote health and prevent disease	2.1 <i>Identify and apply current recommendations regarding physical activity for disease prevention in adults</i> 2.2 Identify and explain to the client the appropriate <i>exercise variables</i> recommended for good health and disease prevention 2.3 Identify and explain to the client recommended <i>exercise variables</i> associated with beneficial change in risk factors for disease 2.4 Explain to the client the different roles of <i>cardiovascular conditioning</i> and <i>muscular conditioning</i> in enhancing general health and for preventing specific diseases or conditions
3 Apply basic principles of exercise prescription to instructing and leading exercise programs for individuals and groups	3.1 Identify and use effectively methods to determine client interests, needs and preferences for exercise 3.2 Explain the <i>design of an exercise session</i> , including each component indicating the purposes of each for the low and moderate risk client 3.3 Explain the reasons underlying exercise prescriptions for low and moderate risk clients with various fitness levels, needs and interests 3.4 Explain <i>possible alterations in exercise prescription</i> and how <i>exercise variables</i> relate to desired outcomes in low and moderate risk clients 3.5 <i>Demonstrate exercise leadership for moderate risk clients</i> , and an ability to instruct and lead all aspects of exercise programs for moderate risk individual and groups clients 3.6 <i>Demonstrate techniques to monitor client responses</i> and adjust exercise intensity as specified in the exercise prescription 3.7 Demonstrate an ability to instruct and explain a safe and effective stretching program

<p>4 Evaluate an exercise program according to client progress</p>	<p>4.1 Identify and effectively use indicators of a low and moderate risk client's response, progress and adaptation to an exercise program</p> <p>4.2 Demonstrate an ability to instruct the low and moderate risk client in methods to self-monitor his/her response to exercise</p> <p>4.3 Identify and use methods to adjust exercise intensity as permitted in the exercise prescription to accommodate transient events such as client injury, illness or return from absence</p> <p>4.4 Modify the program if the client is having difficulty with the exercises prescribed or if the intensity is too high or low</p> <p>4.5 Demonstrate professional behaviour in relationship with client and health professionals</p>
<p>5 Demonstrate an ability to incorporate various exercise modes in exercise instruction and leadership</p>	<p>5.1 Demonstrate an ability to instruct the low and moderate risk client in the use of various exercise machines, if requested assess body composition using the baseline method</p> <p>5.2 Demonstrate an ability to select appropriate exercise modes for low and moderate risk clients with various needs, interests and preferences</p> <p>5.3 Identify and apply contraindications to a client using particular exercise modes or machines if so indicated by the exercise prescription, or client history</p> <p>5.4 Instruct the low and moderate risk client on the reasons for selection or avoidance of specific exercise modes or equipment</p> <p>5.5 Apply factors motivating adults to be physically active and influencing exercise adherence</p>
<p>6 Ensure safety of low and moderate risk clients in exercise settings</p>	<p>6.1 Demonstrate safe exercise methods to ensure client safety with low and moderate risk clients</p> <p>6.2 Identify and explain appropriate client apparel and footwear for various types of exercise</p> <p>6.3 Identify potential risks to clients and apply risk assessment procedures for exercise settings in which low and moderate risk clients are likely to exercise</p> <p>6.4 Identify and recognise signs and symptoms of client injury or untoward event that may occur during exercise in the low and moderate risk client</p> <p>6.5 Demonstrate appropriate emergency procedures in response to client injury or untoward event during exercise</p> <p>6.6 Identify and demonstrate procedures for ensuring proper care and maintenance of exercise equipment and setting</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Apply factors motivating adults to be physically active and influencing exercise adherence	[all categories] <ul style="list-style-type: none"> • low and moderate risk client need and preference for <ul style="list-style-type: none"> ○ moderate activity ○ social interaction ○ non-competitive setting ○ non-judgmental interactions and instruction ○ activity specifically addressing health concerns and risks • barriers to participation <ul style="list-style-type: none"> ○ perceived versus actual ○ initial low fitness level ○ time ○ access ○ health risks and concerns ○ peer and family support ○ possibly overweight
Cardiovascular conditioning	[all categories] <ul style="list-style-type: none"> • choice of exercises <ul style="list-style-type: none"> ○ within context of prescription and client preferences ○ moderate intensity within context of risk factors ○ mix of weight and non-weight bearing (especially for women) • integration with resistance training <ul style="list-style-type: none"> ○ circuit training ○ exercise machines • gradual progression
Design of an exercise session	[all categories] <ul style="list-style-type: none"> • importance of warm-up and cool-down in context of risk • incorporation of stretching • role of different aspects of conditioning in health context <ul style="list-style-type: none"> ○ muscular ○ cardiorespiratory ○ balance of different aspects ○ health justification for each in context of risk factors • time efficiency for busy adult
Ensure client safety	[all categories] <ul style="list-style-type: none"> • individual and groups • equipment set-up and maintenance • maintenance and set up of exercise setting, eg, gym floor, pool deck • appropriate apparel and footwear for low and moderate risk client • process of risk assessment in context of low and moderate risk clients • client instruction on safe practices <ul style="list-style-type: none"> ○ formal instruction during class or induction

	<ul style="list-style-type: none"> ○ informal and spontaneous supervision ○ effective and non-judgmental approaches to correct technique ○ written materials and displays ○ enforcement of site rules
Exercise leadership for low and moderate risk clients	<p>[all categories]</p> <ul style="list-style-type: none"> • individual and group instruction <ul style="list-style-type: none"> ○ small and large groups • formal and informal instruction <ul style="list-style-type: none"> ○ class instruction ○ supervision, eg, gym floor ○ induction new client with low and moderate risk
Exercise methods	<p>[all categories]</p> <ul style="list-style-type: none"> • warm up exercise • cool down exercise
Exercise variables	<p>[all categories]</p> <ul style="list-style-type: none"> • mode • intensity • frequency • duration
Identify and apply current recommendations regarding physical activity for disease prevention in adults	<p>[five categories]</p> <ul style="list-style-type: none"> • <i>American College of Sports Medicine 1998</i> • <i>Active Australia 1999</i> • <i>United States Surgeon General 1996</i> • definition and reasons for promotion of moderate physical activity • reasons for inclusion of muscular conditioning in some (ACSM, USSG) • examples of appropriate activities • levels of physical activity specifically for individuals at moderate risk
Lifestyle disease or disability	<p>[all categories]</p> <ul style="list-style-type: none"> • hypertension • type 2 diabetes • obesity • depression
Muscular conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • safe and effective techniques <ul style="list-style-type: none"> ○ breathing, timing lift and return to starting position ○ work — rest intervals ○ range of motion ○ posture ○ moderate intensity, avoidance of maximal lifts ○ choice of equipment, eg, machines versus free weights ○ choice of exercises ○ large muscle groups, over entire body ○ attention to specific deficiencies ○ sequencing

	<ul style="list-style-type: none"> • integration with cardio-respiratory conditioning <ul style="list-style-type: none"> ○ circuit training ○ exercise machines • gradual progression
Possible alterations in exercise prescription	<p>[all categories]</p> <ul style="list-style-type: none"> • mode • duration • intensity • frequency • interplay of all variables in the exercise prescription • optimum combinations for moderate risk adult • optimum combinations to alter specific risk factors
Potential risks to client	<p>[all categories]</p> <ul style="list-style-type: none"> • hyperthermia and dehydration • soft-tissue injury • muscle soreness • shortness of breath • irregular heart beat, chest pain • fainting, dizziness • heart attack or other cardiac event
Professional behaviour in relationship with client and allied health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • confidentiality of client health information <ul style="list-style-type: none"> ○ respect for client's health concerns • when to refer client who <ul style="list-style-type: none"> ○ shows signs or symptoms of disease during exercise ○ needs alterations to exercise prescription ○ seeks further health information, eg, dietary • correspondence and communication about client with allied health professionals <ul style="list-style-type: none"> ○ doctor ○ physiotherapist ○ exercise scientist ○ dietitians
Relevant guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> • international guidelines, eg, American College of Sports Medicine • national guidelines, eg, Sports Medicine Australia, Australian Medical Association, Fitness Australia

Techniques to monitor client responses	[all categories] <ul style="list-style-type: none">• rating of perceived exertion (RPE)• heart rate measures<ul style="list-style-type: none">○ simple target heart rate○ heart rate reserve method more appropriate for this clientele• ‘talk test’• direct observation<ul style="list-style-type: none">○ signs of shortness of breath○ muscle fatigue, soreness, deterioration of form○ dehydration
The role of physical activity in health and disease prevention	[all categories] <ul style="list-style-type: none">• major causes of disease and disability in Australian adults<ul style="list-style-type: none">○ effects of physical activity in prevention○ effects of physical activity in management of disease and disability• mechanisms by which physical activity alters disease risk• answer questions by clients about health benefits of physical activity

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ translate exercise prescription for low and moderate risk clients into the practical exercise setting ○ explain and discuss with a client all aspects of the exercise prescription and reasons for inclusion of specific components in the context of health risk and disease prevention ○ lead and instruct exercise for low and moderate risk individual and group clients ○ monitor safe exercise practices and make corrections when needed for the low and moderate risk client ○ maintain equipment and exercise setting safely and in good working order ○ apply risk assessment procedures in exercise settings serving low and moderate risk clients ○ recognise and act on evidence that a low and moderate risk client is not coping with exercise, is showing signs or symptoms of disease, or is experiencing an untoward event during exercise ○ demonstrate appropriate emergency procedures for a low and moderate risk client experiencing an untoward event during exercise ○ demonstrate appropriate attitude, manner, empathy and patience when working with low and moderate risk client
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Major causes of disease and disability in Australian adults ○ Major risk factors for cardiovascular disease ○ Risk stratification according to the ACSM definitions ○ First aid and emergency procedures ○ Modification of standard exercise prescription for low and moderate risk clients ○ Effects of physical activity on risk factors and risk of disease

	<ul style="list-style-type: none"> ○ Roles of cardio-respiratory and muscular conditioning in altering risk factors for disease ○ Current Australian and overseas recommendations for physical activity for health and disease prevention ○ Structure of an exercise session ○ Progression of adaptations to an exercise program in low and moderate risk clients ○ Factors influencing adherence to exercise in low and moderate risk clients ○ Signs and symptoms of untoward event that may occur during exercise in low and moderate risk clients ○ Role of stretching in physical activity program ● Required skills <ul style="list-style-type: none"> ○ Exercise leadership for individuals and groups ○ Exercise instruction over a wide variety of modes ○ Exercise equipment maintenance to ensure safety ○ Safe exercise procedures over a wide variety of modes ○ Monitoring of exerciser's response using variety of techniques ○ Structure of exercise session specific for low and moderate risk client ○ Educating client about health benefits of physical activity, especially with regards to management of risk factors
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ interaction with actual clients (under direct supervision) or simulated, eg, role playing, clients in appropriate exercise setting, such as a fitness centre with a variety of exercise modes and equipment available, eg, exercise machines, weight machines, exercise mats, adequate floor space. Should also include access to clients while walking as a form of physical activity ○ appropriate documentation and resources normally used in the workplace, such as client progress forms, correspondence with referring allied health professionals, and instructional materials, eg, brochures, displays ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● There is wide range of clients who could be classified as “moderate risk”. Due to issues such as safety requirements and deliver of appropriate techniques, this unit of competency must be assessed over a minimum of three (3), and preferably up to five (5), different occasions to include low and moderate risk clients, with different risk factors and exercise settings to ensure consistency of performance over the Range Statements and contexts applicable to the work environment

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of health, fitness and physical activity for clients. This is very different from demonstrating these competencies with clients who are young, healthy and fit• This unit of competency should be assessed through observation of processes and procedures demonstrated by dealing with real or simulated low and moderate risk clients, oral and written questioning on required knowledge and skills (particularly about the role of exercise in modulating risk factors and the exercise prescription for moderate risk clients), and manner and attitude when dealing directly with low and moderate risk clients• Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals, provided that the person authenticating the evidence has directly witnessed his/her interactions with clients and that this authentication addresses issues specifically relating to delivery of exercise for low and moderate risk clients
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and other information in referral into planning and delivering exercise session, instruction and education of client • Communicating ideas and information — Discuss with the client role of physical activity in health and disease prevention, explain different components of an exercise session and program, and explain how these address the client's specific health needs and risk factors • Planning and organising activities — Major responsibility for organising, leading and delivering exercise sessions in a safe and effective manner that clients find enjoyable • Working with teams and others — Liaise with allied health professionals (eg, exercise scientist or physiotherapist) providing exercise prescription about client responses and adaptations to exercise program • Using mathematical ideas and techniques — Use of some quantitative techniques such as monitoring heart rate and rating of perceived exertion • Solving problems — Monitor client response to exercise, and make adjustments appropriate to the client's needs within the context of the exercise prescription • Using technology — Use of exercise equipment, heart rate monitors (possibly), various exercise techniques <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP004A	PLAN AND DELIVER EXERCISE FOR MODERATE RISK CHILDREN AND YOUNG ADOLESCENTS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and attitudes necessary to plan and deliver exercise for moderate risk client groups of children and young adolescents, develop a consultative network, the application of fitness assessment protocols to a potential client group, identification and application of the need to refer, and review exercise programs for children and young adolescents in conjunction with an allied health professional.

ELEMENT	PERFORMANCE CRITERIA
1 Develop a consultative network of other fitness trainers, allied health professionals and medical advisers	1.1 Identify and develop a consultative network of appropriate fitness trainers, allied health professionals and medical advisers 1.2 Develop an understanding in negotiation with consultative network when referral to a member is required and the role of the various members in assessing the fitness/health status of children and young adolescents and in conducting exercise programs 1.3 Utilise a member from the consultative network when applicable demonstrating client empathy and clarity of information
2 Apply pre-screening and baseline assessment protocols and procedures to moderate risk children and young adolescents	2.1 Demonstrate the appropriate pre-screening required to determine the risk status of children and young adolescents prior to participation in an exercise program in accordance with organisation policies and procedures 2.2 Identify and refer children to a medical advisor or allied health professional based on pre-screening prior to commencement of exercise participation 2.3 Describe the referral process for children and young adolescents who have been referred to medical advisors or allied health professionals 2.4 Provide advice for children and their parents/guardian when referrals are required following appropriate pre-screening procedures 2.5 Plan and develop exercise classes based on results of pre-screening procedures 2.6 Demonstrate appropriate baseline assessment protocols for moderate risk children and young adolescents prior to participation in an exercise program in accordance with organisation policies and procedures
3 Develop a plan for an exercise class for moderate risk children and young adolescents	3.1 Identify prevailing pathologies of moderate risk children and young adolescents and establish client needs 3.2 Develop and document lesson plans for a variety of exercise programs for moderate risk children and young adolescents with different pathologies
4 Instruct an exercise class for moderate risk children and young adolescents	4.1 Outline the purpose of the exercise class to participants including the benefits of exercise for moderate children and young adolescents 4.2 Implement appropriate instructional skills for the client group 4.3 Demonstrate appropriate communication skills for the client group 4.4 Select appropriate equipment for safe use according to the prevailing pathologies of moderate risk children and young adolescents 4.5 Deliver exercise classes for moderate risk children and young adolescents suitable to the needs and goals of the client group 4.6 Demonstrate how modifications to the exercise can incorporate the different pathologies of moderate risk children and young adolescents 4.7 Demonstrate motivational techniques providing positive and effective

	feedback to the client group
5 Review a range of exercise programs for moderate risk children and young adolescents	5.1 Observe and critically evaluate a variety of exercise programs for moderate risk children and young adolescents with <i>different pathologies</i> 5.2 Produce a <i>written evaluation</i> assessing observations

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Consultative network	<p>[all categories]</p> <ul style="list-style-type: none"> • network includes <ul style="list-style-type: none"> ○ allied health professionals ○ Exercise Physiologist ○ dietitians ○ medical specialists and general practitioners ○ paediatricians ○ counsellors ○ other trainer fitness instructors
Different pathologies	<p>[all categories]</p> <ul style="list-style-type: none"> • musculoskeletal issues <ul style="list-style-type: none"> ○ Osgood–Schlatter’s/patello–femoral disease ○ Sever’s disease ○ Scoliosis/kyphosis ○ Shoulder instability ○ Scheuermann’s disease ○ Elbow/wrist injuries ○ Perthe’s disease • sensory impairment <ul style="list-style-type: none"> ○ Visual impairment ○ Hearing impairment • intellectual/learning disabilities <ul style="list-style-type: none"> ○ ADD/ADHD ○ Down’s syndrome ○ Autism • physical disabilities <ul style="list-style-type: none"> ○ Obesity ○ Asthma ○ Cerebral palsy ○ Muscular dystrophy ○ Spina bifida
Establish client needs	<p>[all categories]</p> <ul style="list-style-type: none"> • consultation with <ul style="list-style-type: none"> ○ parents/guardians/children ○ allied health professionals ○ medical practitioners ○ special considerations for children with special needs <ul style="list-style-type: none"> ▪ consideration of adaptations of children with special needs ▪ methods of instruction ▪ time delivery to achieve outcomes ▪ changes to environment/spaces

	<ul style="list-style-type: none"> ▪ adaptation of equipment ▪ modification to rules • constructing baseline assessment instruments for moderate risk children <ul style="list-style-type: none"> ○ cardiovascular assessment techniques: one-on-one and group assessment ○ flexibility assessment techniques: one-on-one and group assessment ○ fundamental motor skills assessment: one-on-one and group assessment ○ strength assessment techniques: one-on-one group assessment ○ safety considerations when conducting assessments ○ training area safety ○ safety when training children and young adolescents outdoors ○ duty of care ○ equipment and instruments commonly used for assessment ○ using assessment results and goal setting to prescribe programs • reporting results <ul style="list-style-type: none"> ○ preparation and report writing
Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise selection <ul style="list-style-type: none"> ○ appropriate for needs of children and adolescents ○ accommodates limitations of children and adolescents ○ purpose of the exercise explained to children and adolescents • required modifications <ul style="list-style-type: none"> ○ explained to clients (including age variations) ○ correct technique incorporated when instructing sequence of exercises ○ methods of instruction ○ time ○ environment/space ○ equipment ○ rules • general training principles • exercise intensity and duration • safe and appropriate use of equipment • program progression • music (if used) <ul style="list-style-type: none"> ○ appropriate selection ○ copyright issues ○ motivating • age variation <ul style="list-style-type: none"> ○ class structures for different ages ○ coordination and motor development ○ communication and instructional skill difficulties ○ behavioural change and social needs ○ exercise requirements for different ages • major factors associated with injury risk in moderate children and adolescents <ul style="list-style-type: none"> ○ biomechanics/exercise technique ○ physical/mental preparation ○ fatigue/recovery ○ intrinsic factors of activities ○ benefits of warm-up and cool-down for children • moderate child and young adolescent at risk of injury <ul style="list-style-type: none"> ○ poor biomechanics ○ inadequate skill

	<ul style="list-style-type: none"> ○ inadequate physical preparation ○ overtraining ○ unrealistic expectations from parents ○ fatigue/overuse ● cardiovascular exercise for age variation and different pathologies ● fundamental motor skill development for age and medical condition ● flexibility for different pathologies ● resistance exercise (including aqua-based exercise)
Instructional skills	<p>[all categories]</p> <ul style="list-style-type: none"> ● class structures <ul style="list-style-type: none"> ○ written class formats ○ sequence of exercises ○ importance of transitions between exercises or games ○ use of equipment ○ class structure variations ○ safety perimeters within the class structures ○ general training principles and progression ● psychological benefits <ul style="list-style-type: none"> ○ changing the negative perception to exercise in both children and their parents ○ exercise options available to families within the community ○ improving self-esteem and confidence through exercise ● enhancing recreational activities, and social network ● performance <ul style="list-style-type: none"> ○ group activities ○ fun through movement ○ creating atmosphere ○ the art of performance ○ use of themes ○ presenting and utilising instructor personality ○ appearance ● communication skills <ul style="list-style-type: none"> ○ group tasks ○ class control ○ class organisation ○ verbal and visual instructions ○ kids communication ○ safety and education ○ body language ○ technique correction ○ vocal and word quality ○ motivation techniques ○ strategies for communicating with clients that have special behavioural conditions ○ professional techniques when dealing with parents, teachers, clients and centre managers, etc
Lesson plans	<p>[all categories]</p> <ul style="list-style-type: none"> ● how client needs and goals will be identified ● how clients will be screened and assessed based on different pathologies ● an outline of the lesson components ● exercise selection <ul style="list-style-type: none"> ○ describe the purpose of the exercise ○ order/sequence of physical activities ○ duration/intensity of exercise

	<ul style="list-style-type: none"> ○ safety considerations ○ organisation structures ○ instructional skills ○ equipment selection ○ suggested progression within the physical activity ● special consideration to accommodate the different pathologies and age variations ● selection of appropriate music
Organisation policies and procedures	<p>[all categories]</p> <ul style="list-style-type: none"> ● ensuring occupational health and safety is addressed in accordance with legislative requirements and organisational policies and procedures ● ensuring privacy laws are adhered to ● ensuring all fitness professionals satisfy the legal requirements of working with children ● ensuring that the facility/space satisfies the legal requirements of working with children
Pre-screening	<p>[all categories]</p> <ul style="list-style-type: none"> ● developing pre-screen questionnaires for moderate risk children and young adolescents ● constructing pre-exercise questionnaires ● ethical standards involved in the assessment of children ● developing a referral system to medical practitioners and allied health professionals ● privacy issues associated with information gathered
Written evaluation	<p>[all categories]</p> <ul style="list-style-type: none"> ● description of the client group ● description lesson/class type ● evaluation of exercise pre-screen ● evaluation of lesson components ● evaluation of exercise/physical activity program ● an evaluation of the suitability of the exercises prescribed that accommodates different pathologies ● critical comment on the instructional techniques of the fitness trainer, especially with regard to appropriate and effective communication with the client group ● an evaluation of the description of any modifications made to exercises and/or equipment ● an evaluation of the success of motivational techniques employed ● appropriateness of music (where appropriate) ● addressing client feedback ● recommendations for possible areas of improvement

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ develop a consultative network consisting of other fitness trainers, allied health professionals and medical advisers ○ undertake appropriate screening assessment in accordance with organisational policies and procedures, excluding children from exercise participation where necessary and providing a referral ○ develop and document a plan for an exercise class for children or young adolescents ○ instruct an exercise class for children and young adolescents ○ review and evaluate exercise programs for children and young adolescents
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals ○ SRFCHA001A Plan and deliver exercise for children and young adolescents ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition ○ SRFFIT017A Provide nutrition information to clients with specific requirements in accordance with recommended guidelines ○ SRFFIT018A Apply anatomy and physiology to fitness programs for moderate risk clients • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Recommended dietary guidelines ○ The fitness industry ○ The allied health sector ○ Basic principles of biomechanics and exercise science ○ Muscle groups and their actions ○ Contraindications and precautions for exercises ○ Recommended dietary guidelines for children and young adolescents

	<ul style="list-style-type: none"> ○ Exercise programming for low risk children and young adolescents ● Required skills <ul style="list-style-type: none"> ○ Effective communication skills, both oral and written ○ Skill in conducting physical activity classes for low risk children and young adolescents <ul style="list-style-type: none"> ▪ Group teaching ▪ Fitness instructor skills ▪ Ability to monitor and assess the group ▪ Ability to monitor a group and assess an individual within the group who may be over-exerting
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	3	3	2	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — To develop a consultative network; pre-screening, monitoring and adjusting techniques during class delivery • Communicating ideas and information — To instruct class; explaining class objective to participants and directing participants through the class routine; communicating with medical practitioners and allied health professionals • Planning and organising activities — To plan an exercise class for moderate risk children and young adolescents; establishing parameters for class delivery and ensuring an appropriate/safe area equipment are available • Working with teams and others — Leading participants through the class; liaise with medical practitioners and allied health professionals • Using mathematical ideas and techniques — Determining appropriate class size • Solving problems — To recognise expertise beyond the Trainer's knowledge and refer client; implementing corrective techniques for participants and determining appropriate sub-level of exercise/movement for participants with different pathologies/conditions • Using technology — To develop and document baseline assessment reports, documenting class plans <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP005A	PLAN AND DELIVER EXERCISE FOR PEOPLE WITH A DISABILITY
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and attitudes required to plan and deliver exercise programs to clients with disabilities in conjunction with allied health professional.

ELEMENT	PERFORMANCE CRITERIA
1 Receive client presenting with disabilities	1.1 Recognise and act upon the legal and ethical limitations of the fitness specialist working with clients presenting with a disability 1.2 Use sound communication strategies to collect and record a complete exercise history and client condition 1.3 Receive exercise referral from allied health and medical professionals if applicable or undertake pre-exercise screening with client 1.4 Interpret referral and/or pre-exercise screening and seek clarification where necessary from allied health and medical professional 1.5 Identify and act upon methods to enhance knowledge about exercise for clients with disabilities 1.6 Use professional behaviour in relationship and communication with clients and allied health professionals
2 Explain and apply knowledge about the cause and consequences of specific musculoskeletal impairments and the role of exercise in management of these conditions	2.1 Identify and explain to client the benefits of physical activity 2.2 Identify and explain to the client exercise variables in the exercise prescription, in the context of management of applicable disabilities 2.3 Explain to the client with the different roles of cardiovascular and muscular conditioning, and the reasons for inclusion of each, as part of the exercise prescription
3 Apply basic exercise prescription principles to selecting, leading and instructing exercise for clients with disabilities	3.1 Undertake a fitness assessment where appropriate 3.2 Conduct a goals and needs analysis in collaboration with the client and the allied health and medical professional if appropriate 3.3 Establish timeframes and goals for appropriate exercise program adjustment in collaboration with allied health and medical professional 3.4 Implement an exercise program addressing the referral and/or goals and needs of client and using appropriate instructional techniques 3.5 Explain to client components of an exercise session indicating the purpose of each 3.6 Outline any potential barriers to exercise and discuss methods to enhance exercise adherence 3.7 Identify and explain the reasons behind recommended exercise variables to be altered in an exercise prescription to client 3.8 Demonstrate exercise leadership and design of exercise sessions for clients presenting with disabilities 3.9 Demonstrate an ability to instruct and explain safe and effective exercise program methods

<p>4 Ensure safety of clients with disabilities in a variety of exercise settings</p>	<p>4.1 Instruct clients on safe exercise methods, specific to their impairments, in a variety of settings and modes likely to be used by individuals presenting with disabilities including muscular conditioning and cardio-respiratory conditioning</p> <p>4.2 Demonstrate an ability to recognise and correct unsafe exercise procedures in clients presenting with disabilities</p> <p>4.3 Apply risk assessment procedures to ensure client safety and to monitor client responses to exercise in various settings likely to be used by clients presenting with disabilities</p> <p>4.4 Demonstrate appropriate emergency procedures in response to client injury or untoward event in a variety of exercise settings likely to be used by clients presenting with disabilities</p> <p>4.5 Identify and demonstrate procedures for ensuring proper care and maintenance of facilities and equipment specific to the needs of clients presenting with disabilities</p>
<p>5 Modify and reevaluate an exercise program for the client presenting with disabilities</p>	<p>5.1 Establish timeframes and goals for appropriate exercise program adjustment in collaboration with allied health and medical professional</p> <p>5.2 Review and modify the exercise program to ensure positive physiological and psychological adaptations are continued</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health and medical professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Cardio-respiratory conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of exercises and location <ul style="list-style-type: none"> ○ appropriate to disability and health needs ○ within context of exercise prescription ○ emphasis on functional capacity and activities of daily living, eg, mobility ○ gait, coordination, balance limitations ○ low initial fitness level, easily fatigued ○ inefficient movement ○ possible cognitive impairments • integration with muscular training <ul style="list-style-type: none"> ○ may first need to improve strength, balance and range of motion ○ use of exercise machines and circuit training • low initial fitness level and need for gradual progression
Communication strategies	<p>[all categories]</p> <ul style="list-style-type: none"> • listening skills • empathy • body language • negotiation skills
Components of an exercise session	<p>[all categories]</p> <ul style="list-style-type: none"> • importance of warm-up and cool-down in context of client's health needs • incorporation of stretching • role of different conditions methods in health context <ul style="list-style-type: none"> ○ muscular conditioning ○ cardio-respiratory conditioning ○ balance of different methods

	<ul style="list-style-type: none"> ○ health justification of each components • time efficiency
Disabilities	<p>[all categories]</p> <ul style="list-style-type: none"> • paraplegic • quadriplegic • blind • deaf • cerebral palsy • chromosomal abnormalities <ul style="list-style-type: none"> ○ down syndrome ○ turner syndrome • chronic pain • brain injury • amputee • intellectual disabilities • stroke • muscular dystrophy • joint replacement
Exercise adherence	<p>[all categories]</p> <ul style="list-style-type: none"> • rewards for attendance and participation • statement of intent • perceived choice • goal setting
Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise selection • sequence of exercises • enjoyable • variety • general training principles • matches client's goals and needs • logical progression
Exercise leadership and design of exercise sessions for clients presenting with disabilities	<p>[all categories]</p> <ul style="list-style-type: none"> • individual and group instruction • clear instructions and demonstrations • respect for client as individual • explain relevant occupational health and safety issues in accordance to organisational policies and procedures and the individual client • encourage client to seek clarification on any information needed • ensure the client is working at an appropriate intensity • formal and informal instruction and supervision • importance of warm-up and cool-down • adaptation of exercise setting, equipment and program • role of different outcomes of physical conditioning <ul style="list-style-type: none"> ○ fitness needs ○ health needs ○ functional capacity needs • integration of various modes appropriate to needs and disability, eg, importance of stretching

	<ul style="list-style-type: none"> • give positive feedback and encouragement
Exercise variables	<p>[all categories]</p> <ul style="list-style-type: none"> • duration • frequency • intensity • optimum combination for different types and severity of disability and desired outcomes
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport <ul style="list-style-type: none"> ○ level of instruction compares with level of client knowledge ○ empathy ○ creating a safe environment • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clarity of instruction • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality • demonstration strategies • motivational strategies • avoidance against competing with the client • positives and negatives of different instructional techniques • positive feedback • flexibility in instructional technique
Methods to enhance knowledge	<p>[all categories]</p> <ul style="list-style-type: none"> • research <ul style="list-style-type: none"> ○ medical journals ○ internet ○ books • mentoring • seminars • conferences
Muscular conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of apparatus and exercises <ul style="list-style-type: none"> ○ weight machines, dumbbells, elastic bands ○ appropriate to impairment ○ within context of exercise prescription ○ whole body, isolated muscles ○ posture, gait, coordination, balance ○ muscle tone, spasticity and stretching ○ emphasis on functional capacity and activities of daily living, eg, wheelchair transfer • safe and effective exercises <ul style="list-style-type: none"> ○ range of motion and limitation for certain movements ○ posture and body position control

	<ul style="list-style-type: none"> ○ spotting, strapping, direct supervision and assistance ○ moderate intensity, gradual progression ○ monitor for adverse reactions ● integration with cardio–respiratory training
Pre–exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> ● initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance ● initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication ● forms used <ul style="list-style-type: none"> ○ pre–activity screening questionnaire ○ informed consent ○ medical clearance ● information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability
Professional behaviour in relationship and communication with clients and allied health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> ● confidentiality of client health and personal information ● when to refer client who shows untoward response or requires alteration of exercise prescription ● correspondence and communication with allied health professionals about clients with disabilities
Review and modify the exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> ● review client’s needs and goals ● assess program outcomes ● positive and constructive feedback ● review client’s condition ● modify program <ul style="list-style-type: none"> ○ sets ○ reps ○ exercises ○ intensity ● time

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ translate exercise prescription for clients presenting with disabilities into the practical exercise setting ○ explain and discuss with the client all aspects of the exercise prescription and reasons for inclusion of specific components in the context of the client's disability ○ lead and instruct exercise for clients presenting with disabilities both individuals and groups ○ monitor safe exercise practices and make corrections when appropriate ○ maintain exercise equipment, exercise aids and the exercise setting to ensure client safety ○ recognise and act on evidence that a client with disabilities is not coping with exercise ○ demonstrate appropriate emergency procedures for a client with disabilities experiencing an untoward event during exercise ○ demonstrate appropriate manner, attitude, empathy and patience when working with clients with disabilities
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT016A Apply information from postural appraisals to fitness programs for moderate risk clients ○ SRFFIT018A Apply anatomy and physiology to fitness programs for moderate risk clients ○ SRFFSP003A Plan and deliver exercise to promote physical and psychological well-being in low to moderate risk clients • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Exercise programming ○ Exercise strategies for specific populations • Required skills <ul style="list-style-type: none"> ○ Advanced verbal, written and listening skills for the age and values of the client with a disability, so that an appropriate and effective exercise plan can be implemented ○ Advanced Interpersonal skills to enhance the interaction with the client and to help with exercise adherence ○ Advanced programming and instructional skills so that the specific needs of the client with a disability are met

	<ul style="list-style-type: none"> ○ First aid ○ Safe exercise procedures specifically for clients with a disability ○ Range of motion and stretching techniques (active, assisted) ○ Various methods to monitor client's responses to exercise ○ Structure of exercise session to meet needs of client with a disability ○ Education of client about role of exercise in enhancing a disability
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ interaction with clients with a disability under direct supervision of a supervisor who is experienced working with clients with a disability. This interaction should occur in appropriate exercise settings, such as fitness centre, community fitness program, or health care setting, eg, aged home, rehabilitation centre ○ Assessment should include work with a variety of exercise modes and equipment appropriate for use with clients with a disability, eg, exercise machines, weight machines, exercise mats. Material for strapping parts of the body if needed for resistance exercise must be readily available ○ appropriate documentation and resources normally used in the workplace, such as client progress forms, correspondence with referring allied health professionals, and instructional materials, eg, brochures, displays specifically for clients with a disability ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● There is a wide range of potential clients with a disability. Due to issues such as safety requirements and deliver of appropriate techniques, this unit of competency should include clients of different ages with different types of disabilities and be assessed over at least three (3) and preferably up to five (5) different occasions to ensure consistency of performance over the Range Statements and contexts reflecting the diverse range of disabilities that a fitness specialist might encounter in the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of health, functional capacity and physical activity for clients who have some type of physical and/or cognitive impairment due to a disability. This often requires adjustment of the standard exercise prescription and client approach to focus on functional capacity and health rather than physical fitness ● This unit of competency should be assessed through observation of processes and procedures demonstrated by dealing with real clients, oral and written questioning on required knowledge and skills (especially how each disability influences exercise capacity), and manner and attitude when working directly with clients with a disability ● Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals, provided that the person authenticating this evidence has directly

	witnessed his/her interactions with clients and is experienced working with clients with a disability, and that this authentication addresses issues specifically relating to delivery of exercise for clients with a disability
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and information about client's health and disability into planning and delivery of exercise session, instruction and discussion with client • Communicating ideas and information — Discuss with client the role of physical activity in managing disability, explain the different components of the exercise session and program • Planning and organising activities — Major responsibility for organising, leading and instructing exercise sessions in a safe and effective manner that addresses client's needs • Working with teams and others — Liaise with allied health professionals providing exercise prescription about client progress, responses and adaptations to exercise program • Using mathematical ideas and techniques — Use of some quantitative techniques such as monitoring heart rate and rating of perceived exertion • Solving problems — Monitor client's response to exercise and make adjustments appropriate to the client's needs, responses and disability within the context of the exercise prescription • Using technology — Use of exercise equipment, eg, free weights, weight machines, exercise machines, heart rate monitors (possibly), various exercise techniques <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP006A	PLAN AND DELIVER EXERCISE STRATEGIES FOR MUSCULOSKELETAL REHABILITATION
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge, skills and attitudes necessary to deliver exercise strategies that will enhance musculoskeletal rehabilitation in conjunction with an allied health professional.

ELEMENT	PERFORMANCE CRITERIA
1 Work within a network of allied health and medical professionals	1.1 Understand and act upon the legal and ethical limitations of the fitness specialist working with clients in need of musculoskeletal rehabilitation 1.2 Contact other fitness specialists, allied health professionals, case workers and medical specialists to establish a process of consultation that will best meet the client's needs 1.3 Identify and act upon methods to enhance knowledge 1.4 Demonstrate knowledge of potential barriers to the rehabilitation process
2 Plan an exercise program to enhance the musculoskeletal rehabilitation	2.1 Demonstrate effective communication skills and meet with the client and create a non-threatening environment 2.2 Conduct appropriate medical screen and follow correct procedure with a particular focus on the injury that requires rehabilitation 2.3 Collect information using sound communication strategies , about the client's condition and exercise history and discuss any concerns with an appropriate allied health professional or medical practitioner 2.4 Complete a fitness assessment of the client only if after consultation with the client and the network of allied health professionals has considered appropriate and safe 2.5 In collaboration with the client and the network of health professionals conduct an appropriate goals and needs analysis with respect to rehabilitation 2.6 Outline any potential barriers to exercise and discuss methods to enhance exercise adherence and the rehabilitation process 2.7 Design an exercise program that best meets the client's needs and is consistent with their lifestyle and injury status in conjunction with an allied health professional 2.8 Discuss with the client the effect the exercise program will have on the injury and ensure the client that all risk of further damage has been minimised
3 Instruct an appropriate exercise program to enhance musculoskeletal rehabilitation program	3.1 Explain to the client relevant occupational health and safety issues and any other safety issues specific to the individual client 3.2 Demonstrate and instruct prescribed exercises ensuring that the client uses correct technique, taking time to discuss potential risks to the rehabilitation process if poor technique is used 3.3 Encourage the client to seek clarification on any information if needed 3.4 Ensure that the client is working at an appropriate intensity and is comfortable 3.5 Modify and reevaluate the program if the client is having difficulty or the intensity is not appropriate 3.6 Use communication skills to give positive feedback and encouragement

4 Reassess and if needed modify the rehabilitation program in consultation with an allied health professional	<ul style="list-style-type: none">4.1 Meet and discuss progress with the <i>client</i> and the network of allied health professionals demonstrating in detail the rehabilitation process4.2 Positive and effective feedback is offered to the <i>client</i> and motivational strategies are used to enhance client participation4.3 If appropriate, conduct a reassessment of fitness parameters that were tested at baseline and give client information on progress specific to the injury being rehabilitated4.4 Modify the exercise program to ensure physiological and psychological adaptations are continued in conjunction with an allied health professional, if necessary4.5 Use appropriate strategies to enhance the <i>client</i> adhering to the exercise program
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professionals	[all categories] the following allied health professionals may be suitably credentialled <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Client	[all categories] <ul style="list-style-type: none"> • experienced or inexperienced • active or inactive • medical concerns cleared by a medical practitioner or allied health professional • ensure the client feels comfortable in the environment • psychological state • long term/short term • age • frail • pain level • anxiety levels
Communication strategies	[all categories] <ul style="list-style-type: none"> • listening skills • empathy • body language • negotiation skills
Exercise adherence	[all categories] <ul style="list-style-type: none"> • rewards for attendance and participation • statement of intent • perceived choice • goal setting

Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • enjoyable • safe • exercise selection • sequence of exercises • variety • rehabilitation training principles are followed • matches client's goals and needs • logical progression • discussed with network of allied health professionals
Instruct	<p>[all categories]</p> <ul style="list-style-type: none"> • clarity of instruction • level of instruction compares with level of client knowledge • empathy • positives and negatives of different instructional techniques • positive feedback • safe • flexibility in instructional approach • motivation
Medical screen	<p>[all categories]</p> <ul style="list-style-type: none"> • American College of Sports Medicine • Sports Medicine Australia procedures
Methods to enhance knowledge	<p>[all categories]</p> <ul style="list-style-type: none"> • research <ul style="list-style-type: none"> ○ medical journals ○ internet ○ books • mentoring • seminars • conferences
Modify and reevaluate	<p>[all categories]</p> <ul style="list-style-type: none"> • review client's needs and goals • assess program outcomes • positive and constructive feedback • review client's condition and motivation • rehabilitation time line • modify program <ul style="list-style-type: none"> ○ sets ○ reps ○ exercises ○ intensity ○ time

Musculoskeletal rehabilitation	[all categories] <ul style="list-style-type: none">• joints<ul style="list-style-type: none">○ arthritis○ joint rupture○ joint replacement○ joint reconstruction• overuse injuries<ul style="list-style-type: none">○ achilles tendonitis○ rotator cuff injury• sprains and strains<ul style="list-style-type: none">○ muscular strains○ tendon/ligament strains• spinal cord injury• back and spine<ul style="list-style-type: none">○ ruptured disk○ scoliosis○ spinal cord injury• fractures• automobile accidents
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan and deliver exercise strategies for musculoskeletal rehabilitation ○ assess the fitness levels of the client in need of musculoskeletal rehabilitation ○ motivate the client in need of musculoskeletal rehabilitation ○ communicate effectively with the client in need of musculoskeletal rehabilitation ○ communicate effectively with the network of allied health and medical professionals
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFSP005A Plan and deliver exercise for people with a disability ○ SRFFSP009A Plan and deliver exercise for moderate risk clients with musculoskeletal needs
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Exercise programming ○ Exercise strategies for special populations • Required skills <ul style="list-style-type: none"> ○ Advanced verbal, written and listening skills for the age and values of the client in need of musculoskeletal rehabilitation, so that an appropriate and effective exercise plan can be implemented ○ Advanced interpersonal skills to enhance the interaction with the client and to help with exercise adherence ○ Advanced programming and instructional skills so that the specific needs of the client in need of musculoskeletal rehabilitation

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a client in need of musculoskeletal rehabilitation • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP007A	PLAN AND DELIVER EXERCISE FOR MODERATE RISK CLIENTS WITH CARDIO-RESPIRATORY CONSIDERATIONS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and attitudes required to plan and deliver exercise programs to moderate risk clients with cardio-respiratory considerations who present with no more than moderate risk of untoward event or exacerbation of impairment during exercise in conjunction with an allied health professional.

ELEMENT	PERFORMANCE CRITERIA
1 Receive moderate risk client presenting with cardio-respiratory considerations	<ul style="list-style-type: none"> 1.1 Recognise and act upon the legal and ethical limitations of the fitness specialist working with moderate risk clients presenting with cardio-respiratory considerations 1.2 Use sound communication strategies to collect and record a complete exercise history and client condition including developing an awareness of client usage of cardio-respiratory medications 1.3 Receive exercise referral from allied health professional if applicable or undertake pre-exercise screening with client 1.4 Interpret referral and/or pre-exercise screening and seek clarification where necessary from allied health and medical professional 1.5 Identify and act upon methods to enhance knowledge 1.6 Demonstrate professional behaviour in relationship and communication with clients and allied health professionals
2 Explain and apply knowledge about the cause and consequences of specific cardio-respiratory considerations and the role of exercise in management of these conditions	<ul style="list-style-type: none"> 2.1 Explain to the client the physiology of cardio-respiratory considerations in simple and easy to understand terms 2.2 Educate the client on the risk factors associated with cardio-respiratory considerations 2.3 Identify and explain the causes and consequences of specific cardio-respiratory considerations in the context of their effect on exercise capacity to client 2.4 Identify and explain to the client the role of physical activity in managing cardio-respiratory considerations and enhancing health in clients with cardio-respiratory considerations 2.5 Identify and explain to the client exercise variables in the exercise prescription, in the context of management of specific cardio-respiratory considerations 2.6 Explain to the client with cardio-respiratory considerations the different roles of cardio-respiratory conditioning and muscular conditioning, and the reasons for inclusion of each, as part of the exercise prescription
3 Apply basic exercise prescription principles to selecting, leading and instructing exercise for clients with cardio-respiratory considerations	<ul style="list-style-type: none"> 3.1 Undertake a fitness assessment where appropriate 3.2 Conduct a goals and needs analysis in collaboration with the client and the allied health and medical professional if appropriate 3.3 Establish timeframes and goals for appropriate exercise program adjustment in collaboration with allied health and medical professional 3.4 Implement an exercise program addressing the referral and/or goals and needs of the client and use appropriate instructional techniques 3.5 Explain components of an exercise session indicating the purpose of each for clients with cardio-respiratory considerations 3.6 Outline any potential barriers to exercise and discuss methods to enhance exercise adherence 3.7 Identify and explain the reasons behind recommended exercise variables to be altered in an exercise prescription for clients with cardio-respiratory considerations

	<p>3.8 Demonstrate <i>exercise leadership and design of exercise sessions for clients with cardio-respiratory considerations</i></p> <p>3.9 Demonstrate an ability to instruct and explain safe and effective <i>exercise program</i> methods and recognise <i>symptoms requiring interjection</i></p>
<p>4 Ensure safety of clients with cardio-respiratory considerations in a variety of exercise settings</p>	<p>4.1 Instruct clients on safe exercise methods, specific to their condition, in a variety of settings and modes likely to be used by individuals with cardio-respiratory considerations including <i>muscular conditioning</i> and <i>cardio-respiratory conditioning</i></p> <p>4.2 Demonstrate an ability to recognise and correct unsafe exercise procedures in clients with various cardio-respiratory considerations</p> <p>4.3 Apply risk assessment procedures to ensure client safety and to monitor client responses to exercise in various settings likely to be used by clients with <i>cardio-respiratory considerations</i></p> <p>4.4 Demonstrate appropriate emergency procedures in response to client injury or untoward event in a variety of exercise settings likely to be used by clients with <i>cardio-respiratory considerations</i></p> <p>4.5 Identify and demonstrate procedures for ensuring proper care and maintenance of facilities and equipment specific to the needs of clients with <i>cardio-respiratory considerations</i></p>
<p>5 Modify and reevaluate an exercise program for the moderate risk client with cardio-respiratory needs</p>	<p>5.1 Establish timeframes and goals for appropriate <i>exercise program</i> adjustment in collaboration with <i>allied health and medical professional</i></p> <p>5.2 <i>Review and modify the exercise program</i> to ensure positive physiological and psychological adaptations are continued</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health and medical professional	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Cardio-respiratory conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of exercises and location <ul style="list-style-type: none"> ○ appropriate to impairment and health needs ○ within context of exercise prescription ○ emphasis on functional capacity and activities of daily living, eg, mobility ○ gait, coordination, balance limitations ○ low initial fitness level, easily fatigued ○ inefficient movement ○ possible cognitive impairments • integration with muscular training <ul style="list-style-type: none"> ○ may first need to improve strength, balance and range of motion ○ use of exercise machines and circuit training • low initial fitness level and need for gradual progression
Cardio-respiratory considerations	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular disease <ul style="list-style-type: none"> ○ hypertension ○ stroke ○ peripheral vascular disease ○ coronary heart disease ○ chronic heart failure ○ angina pectoris ○ arteriosclerosis ○ embolism • thrombosis • respiratory disease <ul style="list-style-type: none"> ○ asthma ○ bronchitis

	<ul style="list-style-type: none"> ○ pneumonia ○ pleurisy ○ obstructive sleep apnoea ○ chronic obstructive pulmonary disease ○ deep vein thrombosis ○ emphysema ● lung cancer
Communication strategies	<p>[all categories]</p> <ul style="list-style-type: none"> ● listening skills ● empathy ● body language ● negotiation skills
Components of an exercise session	<p>[all categories]</p> <ul style="list-style-type: none"> ● importance of warm-up and cool-down in context of client's health needs ● incorporation of stretching ● role of different conditions methods in health context <ul style="list-style-type: none"> ○ muscular conditioning ○ cardio-respiratory conditioning ○ balance of different methods ○ health justification of each components ● time efficiency
Exercise adherence	<p>[all categories]</p> <ul style="list-style-type: none"> ● rewards for attendance and participation ● statement of intent ● perceived choice ● goal setting
Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> ● exercise selection ● sequence of exercises ● enjoyable ● variety ● general training principles ● matches clients goals and needs ● logical progression
Exercise leadership and design of exercise sessions for clients with cardio-respiratory considerations	<p>[all categories]</p> <ul style="list-style-type: none"> ● individual and group instruction ● clear instructions and demonstrations ● respect for client as individual ● explaining relevant occupational health and safety issues in accordance to organisational policies and procedures and the individual client ● encourage client to seek clarification on any information needed ● ensure the client is working at an appropriate intensity ● formal and informal instruction and supervision ● importance of warm-up and cool-down ● adaptation of exercise setting, equipment and program ● role of different outcomes of physical conditioning

	<ul style="list-style-type: none"> ○ fitness needs ○ health needs ○ functional capacity needs ● integration of various modes appropriate to needs and impairment, eg, importance of stretching ● give positive feedback and encouragement
Exercise variables	<p>[all categories]</p> <ul style="list-style-type: none"> ● duration ● frequency ● intensity ● optimum combination for different types and severity of impairment and desired outcomes
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> ● establishing a rapport <ul style="list-style-type: none"> ○ level of instruction compares with level of client knowledge ○ empathy ○ creating a safe environment ● instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clarity of instruction ● verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity ● non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality ● demonstration strategies ● motivational strategies ● avoidance against competing with the client ● positives and negatives of different instructional techniques ● positive feedback ● flexibility in instructional technique
Medications	<p>[all categories]</p> <ul style="list-style-type: none"> ● blockers ● calcium channel blockers ● diuretics ● angiotensin converting enzyme inhibitors (ace inhibitors) ● vasodilators ● bronchodilators ● lipid lowering drugs

Methods to enhance knowledge	<p>[all categories]</p> <ul style="list-style-type: none"> • research <ul style="list-style-type: none"> ○ medical journals ○ internet ○ books • mentoring • seminars • conferences
Muscular conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of apparatus and exercises <ul style="list-style-type: none"> ○ weight machines, dumbbells, elastic bands ○ appropriate to cardio-respiratory consideration ○ within context of exercise prescription ○ whole body, isolated muscles ○ posture, gait, coordination, balance ○ muscle tone, spasticity and stretching ○ emphasis on functional capacity and activities of daily living, eg, wheelchair transfer • safe and effective exercises <ul style="list-style-type: none"> ○ range of motion and limitation for certain movements ○ posture and body position control ○ spotting, strapping, direct supervision and assistance ○ moderate intensity, gradual progression ○ monitor for adverse reactions • integration with cardio-respiratory training
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability

Professional behaviour in relationship and communication with clients and allied health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • confidentiality of client health and personal information • when to refer client who shows untoward response or requires alteration of exercise prescription • correspondence and communication with allied health professionals about clients with cardio-respiratory considerations
Review and modify the exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • review clients needs and goals • assess program outcomes • positive and constructive feedback • review client's condition • modify program <ul style="list-style-type: none"> ○ sets ○ reps ○ exercises ○ intensity • time
Risk factors	<p>[all categories]</p> <ul style="list-style-type: none"> • family history, eg, myocardial infarction, coronary revascularization, sudden death before 55 years of age in father or other male first-degree relative or before 65 years of age in mother or other female first degree relative • cigarette smoker • hypertension, ie, systolic blood pressure of ≥ 140 mm hg or diastolic ≥ 90 mm hg confirmed by measurement on at least two separate occasions, or taking any antihypertensive medication • Hypercholesterolaemia, ie. total serum cholesterol of >200 mg/dl [5.2 mmol/l] or high density lipoprotein cholesterol of <35 mg/dl [0.9 mmol/l], or on lipid-lowering medication • impaired fasting glucose, ie fasting blood glucose of ≥ 110mg/dl confirmed by measurements on at least 2 separate occasions • obesity, ie, body mass index of ≥ 30kg/m² or waist girth of >100 cm • sedentary lifestyle, ie persons not participating in a regular exercise program or accumulating 30 minutes or more of moderate physical activity most days of the week • heart conditions • accepted recommended levels by recognised authorities, eg, Diabetes Australia, Cardiac Rehabilitation Association
Symptoms requiring interjection	<p>[all categories]</p> <ul style="list-style-type: none"> • pain, discomfort (or other anginal equivalent) in the chest, neck, jaw, arms or other areas that may be due to ischemia • shortness of breath at rest or with wild mild exertion • dizziness or syncope • orthopnea or paroxysmal nocturnal dyspnea • palpitations or tachycardia • intermittent claudication • unusual fatigue or shortness of breath with usual activities • illness or sickness • complaint

	<ul style="list-style-type: none">• weakness• acute inflammations, eg, signs and symptoms of bursitis and tendonitis• infections, eg, fever, temperature, redness• fractures• recent muscle injury, eg, hamstring tear• haematoma, ie, bruising or the potential bruising• torn ligaments, ie, joint instability• acute and/or sudden joint swelling• neck soreness/strain that result in symptoms of neurological origin in the arms and/or restriction of spinal movement• pain on movement of any body part• inability to bear weight through a limb
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ translate exercise prescription for clients with cardio-respiratory considerations into the practical exercise setting ○ explain and discuss with the client all aspects of the exercise prescription and reasons for inclusion of specific components in the context of the client's consideration ○ lead and instruct exercise for clients with cardio-respiratory considerations, both individuals and groups ○ monitor safe exercise practices and make corrections when appropriate ○ maintain exercise equipment, exercise aids and the exercise setting to ensure client safety ○ recognise and act on evidence that a client with cardio-respiratory considerations is not coping with exercise ○ demonstrate appropriate emergency procedures for a client with cardio-respiratory consideration experiencing an untoward event during exercise ○ demonstrate appropriate manner, attitude, empathy and patience when working with clients with cardio-respiratory considerations
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT016A Apply information from postural appraisals to fitness programs for moderate risk clients ○ SRFFIT018A Apply anatomy and physiology to fitness programs for moderate risk clients ○ SRFFSP003A Plan and deliver exercise to promote physical and psychological well-being in low to moderate risk clients • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFSP006A Plan and deliver exercise strategies for musculoskeletal rehabilitation
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Exercise programming ○ Exercise strategies for specific populations • Required skills <ul style="list-style-type: none"> ○ Advanced verbal, written and listening skills for the age and values of the 'moderate risk' client with cardio respiratory needs, so that an appropriate and effective exercise plan can be implemented ○ Advanced Interpersonal skills to enhance the interaction with the client and to help with exercise adherence

	<ul style="list-style-type: none"> ○ Advanced programming and instructional skills so that the specific needs of the 'moderate risk' client with cardio-respiratory considerations are met
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ 'moderate risk' clients with cardio-respiratory considerations • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • There is a wide range of potential clients with cardio-respiratory considerations. Thus, assessment should include clients of different ages with different types and severity of cardio-respiratory considerations. Due to issues such as safety requirements and deliver of appropriate techniques, this unit of competency must be assessed over a minimum of three (3), and preferably up to five (5), different occasions to include a range of clients with different risk factors and exercise settings to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of health, functional capacity and physical activity for clients who have some type of physical and/or cognitive impairment due to a cardio-respiratory condition. This often requires adjustment of the standard exercise prescription and client approach to focus on functional capacity and health rather than physical fitness • This unit of competency should be assessed through observation of processes and procedures demonstrated by dealing with real clients, oral and written questioning on required knowledge and skills (especially how each cardio-respiratory consideration influences exercise capacity), and the manner and attitude when working directly with clients with cardio-respiratory considerations • Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals, provided that the person authenticating this evidence has directly witnessed his/her interactions with clients and is experienced working with clients with cardio-respiratory considerations, and that this authentication addresses issues specifically relating to delivery of exercise for clients with cardio-respiratory considerations

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and information about client's health and cardio-respiratory considerations into planning and delivery of exercise session, instruction and discussion with client • Communicating ideas and information — Discuss with client the role of physical activity in managing cardio-respiratory considerations, explain the different components of the exercise session and program • Planning and organising activities — Major responsibility for organising, leading and instructing exercise sessions in a safe and effective manner that addresses client's needs • Working with teams and others — Liaise with allied health professionals providing exercise prescription about client progress, responses and adaptations to exercise program • Using mathematical ideas and techniques — Use of some quantitative techniques such as monitoring heart rate and rating of perceived exertion • Solving problems — Monitor client's response to exercise and make adjustments appropriate to the client's needs, responses and cardio-respiratory considerations within the context of the exercise prescription • Using technology — Use of exercise equipment, eg, free weights, weight machines, exercise machines, heart rate monitors (possibly), various exercise techniques <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP008A	PLAN AND DELIVER EXERCISE FOR CLIENTS WITH MODERATE RISK OF METABOLIC SYNDROME
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and competencies required to plan and deliver exercise programs for clients moderate risk of metabolic disease, primarily metabolic syndrome (impaired glucose tolerance, hypertension, obesity, dyslipidaemia) in conjunction with an allied health professional.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate an understanding of risk factors contributing to and health implications of metabolic syndrome	1.1 Identify and explain to fitness clients the different components of metabolic syndrome and their prevalence among adults 1.2 Explain to clients the mechanisms by which these components contribute to diseases such as cardiovascular disease 1.3 Identify recommended values for components of metabolic syndrome and explain to the client recommended ways to favourably alter these components
2 Explain and apply knowledge about the role of exercise in preventing or managing metabolic syndrome	2.1 Explain the <i>role of physical activity in preventing and treating metabolic syndrome</i> 2.2 Identify and explain to the client the mechanisms by which exercise may alter each component of metabolic syndrome 2.3 Identify and explain to the client the reasons behind recommended exercise variables to alter each component of metabolic syndrome
3 Apply basic principles of exercise prescription to selecting, leading and instructing exercise for clients with or moderate risk of metabolic syndrome	3.1 <i>Apply current physical activity recommendations for clients with metabolic syndrome</i> 3.2 Explain <i>components of an exercise session</i> indicating the role of each for the client with metabolic syndrome 3.3 Explain the reasons for recommended <i>exercise variables that can be altered in the exercise prescription</i> for clients with metabolic syndrome 3.4 <i>Demonstrate exercise leadership and an ability to design an exercise session for clients with metabolic syndrome</i> 3.5 Demonstrate an ability to instruct and explain a safe and effective stretching program suitable for clients with metabolic syndrome
4 Evaluate an exercise program according to client progress	4.1 Identify and use <i>techniques to monitor client responses</i> to exercise specific to the client with metabolic syndrome 4.2 Identify and use indicators of client progress and demonstrate professional behaviour in relationship with client and allied health professionals 4.3 Demonstrate and explain to the client with metabolic syndrome various methods to self-monitor exercise intensity 4.4 Demonstrate an ability to make minor adjustments in exercise intensity, mode or duration within the context of the exercise prescription for clients with or moderate risk of metabolic syndrome

<p>5 Demonstrate an ability to incorporate various modes of exercise as recommended for clients with or moderate risk of metabolic syndrome</p>	<p>5.1 Demonstrate an ability to select and instruct the appropriate exercise modes consistent with the exercise prescription, including <i>muscular conditioning</i> and <i>cardio-respiratory conditioning</i></p> <p>5.2 Identify contraindications to a client's use of a particular exercise mode or piece of equipment if so indicated by the client's exercise prescription, history or needs</p> <p>5.3 Instruct the client as to the reasons for selection or avoidance of particular exercise modes, intensity or duration</p> <p>5.4 <i>Apply factors motivating adults with health risks to be physically active</i> in designing the exercise session</p>
<p>6 Ensure safety of clients with or moderate risk of metabolic syndrome in exercise settings</p>	<p>6.1 Instruct clients on safe exercise methods</p> <p>6.2 Describe appropriate apparel and footwear for clients with metabolic syndrome</p> <p>6.3 Apply risk assessment procedures to <i>ensure client safety</i> in the exercise setting</p> <p>6.4 Identify <i>potential risks to clients</i> and be able to recognise signs and symptoms of client injury or untoward event that may occur during exercise in clients with moderate risk of metabolic syndrome</p> <p>6.5 Demonstrate appropriate emergency procedures in response to client injury or untoward event during exercise</p> <p>6.6 Identify and demonstrate procedures for ensuring proper maintenance and care of exercise equipment or setting</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Apply current physical activity recommendations for clients with metabolic syndrome	<p>[all categories]</p> <ul style="list-style-type: none"> • explain current recommendations, eg, American College of Sports Medicine, Active Australia, US Surgeon General, to client with metabolic syndrome • explain appropriate and optimum activity level to alter each component of metabolic syndrome • explain to what extent physical activity can alter components of metabolic syndrome
Apply factors motivating adults with health risks to be physically active	<p>[all categories]</p> <ul style="list-style-type: none"> • effective programs to include preference and need for <ul style="list-style-type: none"> ○ moderate activity ○ social interaction ○ non-competitive and non-judgmental setting ○ activities to address specific health concerns, eg, weight loss • barriers to adherence in clients with health risks <ul style="list-style-type: none"> ○ perceived vs actual barriers ○ initial low fitness level and probable overweight/obesity ○ time and access to facilities ○ self-consciousness in client ○ concerns for health ○ peer and family support
Cardio-respiratory conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of modes within context of client preferences and recommendations for client with metabolic syndrome • integration with muscular conditioning (resistance training) • emphasis on body weight loss and control • gradual progression and expected outcomes
Components of an exercise session	<p>[all categories]</p> <ul style="list-style-type: none"> • importance of warm-up and cool-down in context of client's health needs • incorporation of stretching • role of different conditions methods in health context <ul style="list-style-type: none"> ○ muscular conditioning ○ cardiorespiratory conditioning ○ balance of different methods ○ health justification of each components • time efficiency

Ensure client safety	<p>[all categories]</p> <ul style="list-style-type: none"> • individuals and groups • formal (ie, class) and informal (eg, individual, exercise sessions) • equipment set-up and maintenance, including circuits for clients with metabolic syndrome • appropriate apparel and footwear <ul style="list-style-type: none"> ○ education on importance of footwear and checking feet for cuts for client with impaired glucose tolerance • client instruction on safe practices <ul style="list-style-type: none"> ○ formal instruction during class, induction or personal training ○ informal instruction and correction ○ effective and non-judgmental approach ○ written materials and displays addressing specific needs of client with metabolic syndrome
Exercise leadership and an ability to design an exercise session for clients with metabolic syndrome	<p>[all categories]</p> <ul style="list-style-type: none"> • individual and group instruction • formal and informal instruction <ul style="list-style-type: none"> ○ class instruction ○ supervision in exercise settings, eg, gym floor ○ induction of new client ○ education of client • importance of warm-up and cool-down in context of client with metabolic syndrome • importance of stretching and inclusion of stretching in program • roles of different aspects of conditioning in context of altering components of metabolic syndrome <ul style="list-style-type: none"> ○ muscular conditioning ○ cardio-respiratory conditioning ○ balance of different aspects ○ health justification for inclusion of each • time efficient exercise sessions to address client needs
Exercise variables that can be altered in the exercise prescription	<p>[all categories]</p> <ul style="list-style-type: none"> • mode • intensity • duration • frequency • interplay of each variable in exercise prescription for client with metabolic syndrome • role of both cardio-respiratory and muscular conditioning in altering components of metabolic syndrome • optimum combination for client with metabolic syndrome, in context of altering each component
Muscular conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • role in altering components of metabolic syndrome • safe and effective technique <ul style="list-style-type: none"> ○ specific exercises to include and avoid ○ appropriate work — rest intervals, numbers of sets and repetitions ○ moderate intensity, avoidance of maximum lifts ○ posture

	<ul style="list-style-type: none"> ○ consideration of contraindications if hypertension or other health concerns ○ selection of equipment, eg, free weights vs weight machines ● gradual progression and expected outcomes
Potential risks to clients	<p>[all categories]</p> <ul style="list-style-type: none"> ● hyperthermia and dehydration ● soft-tissue injury ● muscle soreness ● shortness of breath ● irregular heart beat, chest pain ● fainting, dizziness ● heart attack or other cardiac event
Role of physical activity in preventing and treating metabolic syndrome	<p>[all categories]</p> <ul style="list-style-type: none"> ● definition of metabolic syndrome and components <ul style="list-style-type: none"> ○ hypertension, dyslipidaemia, obesity, glucose intolerance ○ role of abdominal obesity ○ synergistic effects of more than one component ○ effects of physical activity on each component ○ mechanisms by which physical activity modifies each component ● answer client's questions about benefits of exercise in controlling each component of metabolic syndrome
Techniques to monitor client responses	<p>[all categories]</p> <ul style="list-style-type: none"> ● rating of perceived exertion (RPE) ● heart rate measures ● 'talk test' ● direct observation ● attention to possible fluctuations in blood glucose levels and dehydration

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment of performance should be over a period of time covering all categories from the Range Statement applicable to the learner's work environment. In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ apply principles of exercise prescription into practical exercise delivery and instruction for the client with moderate risk of metabolic syndrome ○ explain and discuss with clients all aspects of the exercise prescription and reasons for inclusion of specific components in the context of metabolic syndrome ○ lead and instruct exercise for individual and group clients with moderate risk of metabolic syndrome ○ monitor safe and effective exercise practices ○ correct exercise technique when required ○ maintain exercise equipment and setting appropriate for clients with metabolic syndrome ○ apply risk assessment procedures in exercise settings serving clients with moderate risk of metabolic syndrome ○ recognise and act on evidence that a client is not coping with demands of a particular exercise, or is showing contraindications, or experiencing signs or symptoms of disease ○ demonstrate appropriate emergency procedures in the exercise setting ○ demonstrate appropriate attitudes, empathy and manner when working with clients with moderate risk of metabolic syndrome ○ incorporate methods to enhance exercise adherence and enjoyment for clients with moderate risk of metabolic syndrome
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals for allied health professionals ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT014A Provide advice on the application of basic anatomy and physiology to fitness programs ○ SRFFSP001A Provide body composition management programming for moderate risk clients ○ SRFFSP003A Plan and deliver exercise to promote physical and psychological well-being in low and moderate risk clients • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT017A Provide nutrition information to clients with specific requirements in accordance with recommended guidelines

Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Definition and health risks of metabolic syndrome ○ Causes and contributing factors to metabolic syndrome ○ Health risk of each component of metabolic syndrome ○ Recommended values for each component of metabolic syndrome ○ Modification of exercise prescription for clients with or moderate risk of metabolic syndrome ○ Effects of physical activity on each component of metabolic syndrome ○ Different roles of cardio–respiratory and muscular conditioning on each component of metabolic syndrome ○ Structure of an exercise session for clients with metabolic syndrome ○ Expected fitness levels and progress in clients with metabolic syndrome ○ Factors likely to affect exercise adherence in clients with metabolic syndrome ○ Contraindications, signs and symptoms of untoward events that may occur during exercise in clients with metabolic syndrome ○ Importance of hydration and footwear for the client with impaired glucose tolerance • Required skills <ul style="list-style-type: none"> ○ Exercise leadership for individuals and groups ○ Exercise instruction over a variety of modes recommended for clients with metabolic syndrome ○ Exercise equipment maintenance ○ Safe exercise procedures using a variety of exercise modes ○ Use of different methods to monitor exercise intensity and client response to exercise ○ Structure of the exercise session for the client with metabolic syndrome ○ Educating client about the health benefits of exercise in the context of prevention and treatment of metabolic syndrome
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ interaction with actual or simulated clients with or moderate risk of metabolic syndrome. Work with actual clients should be under direct supervision. Interaction should occur in an appropriate setting in which these clients are likely to exercise, eg, fitness centre, using a variety of exercise equipment and modes, as well as free–walking, eg, outdoor walking. Actual or simulated clients should be overweight and have at least one additional component of metabolic syndrome to be addressed in assessment ○ appropriate documentation and resources normally used in the workplace, such as client progress forms, correspondence with referring allied health professionals, and instructional materials, eg, brochures, displays • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for</i>

	<i>Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> There is wide range of clients with metabolic syndrome who would exhibit several interrelated risk factors, eg, overweight/obesity, high blood pressure. Due to issues such as safety requirements and delivery of appropriate techniques this unit of competency must be assessed over at least three (3) occasions, preferably up to five (5) different occasions to include a range of clients with different components of metabolic syndrome to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> This unit of competency must be assessed in the context of health, fitness and physical activity for clients with moderate risk of metabolic syndrome. These clients are very different from young, healthy and fit clients in a number of ways that are critical to delivery of exercise programs This unit of competency should be assessed through observation of processes and procedures demonstrated by working with real or simulated clients, oral and written questioning on required knowledge and skills (especially those relating to the role of physical activity in preventing and managing metabolic syndrome), and the manner and attitude when dealing directly with these clients Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals provided that the person authenticating this evidence has directly witnessed the interactions with client(s) and that this authentication addresses issues specifically relating to delivery of exercise for clients with or moderate risk of metabolic syndrome

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and other information about client into planning and delivering exercise session, instruction and education of client • Communicating ideas and information — Discuss with client role of physical activity in preventing and managing metabolic syndrome, explain role of activity in altering each component of metabolic syndrome, and how these are addressed in exercise session • Planning and organising activities — Major responsibility for organising, leading and delivering exercise session in safe and effective manner that client finds enjoyable and thus likely to continue • Working with teams and others — Liaise with allied health professionals providing the exercise prescription about the client's progress and responses to exercise • Using mathematical ideas and techniques — Use of some quantitative techniques such as heart rate monitoring, estimation of body fat levels, rating of perceived exertion • Solving problems — Monitor client responses to exercise and make appropriate adjustments to exercise considering client's needs and responses • Using technology — Use of exercise equipment, heart rate monitors (possibly), various exercise techniques, eg, Pilates, Swiss ball <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP009A	PLAN AND DELIVER EXERCISE FOR MODERATE RISK CLIENTS WITH MUSCULOSKELETAL NEEDS
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and attitudes required to plan and deliver exercise programs to clients with musculoskeletal needs who present with no more than moderate risk of untoward event or exacerbation of needs during exercise.

ELEMENT	PERFORMANCE CRITERIA
1 Receive moderate risk client presenting with musculoskeletal needs	1.1 Recognise and act within the legal and ethical limitations of the fitness specialist working with moderate risk clients presenting with <i>musculoskeletal needs</i> 1.2 Use sound <i>communication strategies</i> to collect and record as complete an exercise history and client condition as possible 1.3 Receive exercise referral from <i>allied health professional</i> if applicable or undertake <i>pre-exercise screening</i> with client 1.4 Interpret referral and/or <i>pre-exercise screening</i> and seek clarification where necessary from <i>allied health professional</i> 1.5 Identify and act upon <i>methods to enhance knowledge</i> 1.6 Use <i>professional behaviour in relationship and communication with clients and allied health professionals</i>
2 Explain and apply knowledge about the cause and consequences of specific musculoskeletal needs and the role of exercise in management of these conditions	2.1 Identify and explain to the client the causes and consequences of specific <i>musculoskeletal needs</i> in the context of their effect on exercise capacity 2.2 Identify and explain to the client the role of physical activity in managing <i>musculoskeletal needs</i> and enhancing health in clients with <i>musculoskeletal needs</i> 2.3 Identify and explain to the client exercise variables in the exercise prescription, in the context of management of specific <i>musculoskeletal needs</i> 2.4 Explain to the client with <i>musculoskeletal needs</i> the different roles of cardiovascular and muscular conditioning, and the reasons for inclusion of each, as part of the exercise prescription
3 Apply basic exercise prescription principles to exercise for clients with musculoskeletal needs in conjunction with allied health professionals	3.1 Undertake a fitness assessment where appropriate 3.2 Conduct a goals and needs analysis in collaboration with the client and the <i>allied health professional</i> if appropriate 3.3 Establish timeframes and goals for appropriate <i>exercise program</i> adjustment in collaboration with allied health and medical professionals 3.4 Implement an <i>exercise program</i> addressing the referral and/or goals and needs of client and using appropriate <i>instructional techniques</i> 3.5 Explain <i>components of an exercise session</i> indicating the purpose of each for clients with <i>musculoskeletal needs</i> 3.6 Outline any potential barriers to exercise and discuss methods to enhance <i>exercise adherence</i> 3.7 Identify and explain the reasons behind recommended <i>exercise variables</i> to be altered in an exercise prescription for clients with <i>musculoskeletal needs</i> 3.8 Demonstrate <i>exercise leadership and design of exercise sessions for clients with musculoskeletal needs</i> 3.9 Demonstrate an ability to instruct and explain safe and effective <i>exercise program</i> methods

<p>4 Ensure safety of clients with musculoskeletal needs in a variety of exercise settings</p>	<p>4.1 Instruct clients on safe exercise methods, specific to their needs, in a variety of settings and modes likely to be used by individuals with <i>musculoskeletal needs</i> including <i>muscular conditioning</i> and <i>cardio-respiratory conditioning</i></p> <p>4.2 Demonstrate an ability to recognise and correct unsafe exercise procedures in clients with various <i>musculoskeletal needs</i></p> <p>4.3 Apply risk assessment procedures to ensure client safety and to monitor client responses to exercise in various settings likely to be used by clients with <i>musculoskeletal needs</i></p> <p>4.4 Demonstrate appropriate emergency procedures in response to client injury or untoward event in a variety of exercise settings likely to be used by clients with <i>musculoskeletal needs</i></p> <p>4.5 Identify and demonstrate procedures for ensuring proper care and maintenance of facilities and equipment specific to the needs of clients with <i>musculoskeletal needs</i></p> <p>4.6 Identify and use indicators of client progress and demonstrate <i>professional behaviour in relationship to, and communication with, clients and allied health professionals</i></p>
<p>5 Modify and reevaluate an exercise program for the moderate risk client with musculoskeletal needs in consultation with allied health professionals</p>	<p>5.1 Establish timeframes and goals for appropriate exercise program adjustment in collaboration with <i>allied health professional</i></p> <p>5.2 <i>Review and modify the exercise program</i> to ensure positive physiological and psychological adaptations are continued in consultation with an allied health professional</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Allied health professional	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Cardio-respiratory conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of exercises and location <ul style="list-style-type: none"> ○ appropriate to impairment and health needs ○ within context of exercise prescription ○ emphasis on functional capacity and activities of daily living, eg, mobility ○ gait, coordination, balance limitations ○ low initial fitness level, easily fatigued ○ inefficient movement ○ possible cognitive impairments • integration with muscular training <ul style="list-style-type: none"> ○ may first need to improve strength, balance and range of motion ○ use of exercise machines and circuit training • low initial fitness level and need for gradual progression
Communication strategies	<p>[all categories]</p> <ul style="list-style-type: none"> • listening skills • empathy • body language • negotiation skills
Components of an exercise session	<p>[all categories]</p> <ul style="list-style-type: none"> • importance of warm-up and cool-down in context of client's health needs • incorporation of stretching • role of different conditions methods in health context <ul style="list-style-type: none"> ○ muscular conditioning ○ cardiorespiratory conditioning ○ balance of different methods

	<ul style="list-style-type: none"> ○ health justification of each components • time efficiency
Exercise adherence	<p>[all categories]</p> <ul style="list-style-type: none"> • rewards for attendance and participation • statement of intent • perceived choice • goal setting
Exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise selection • sequence of exercises • enjoyable • variety • general training principles • matches clients goals and needs • logical progression
Exercise leadership and design of exercise sessions for clients with musculoskeletal needs	<p>[all categories]</p> <ul style="list-style-type: none"> • individual and group instruction • clear instructions and demonstrations • respect for client as individual • explaining relevant occupational health and safety issues in accordance with organisational policies and procedures and the individual client • encourage client to seek clarification on any information needed • ensure the client is working at an appropriate intensity • formal and informal instruction and supervision • importance of warm-up and cool-down • adaptation of exercise setting, equipment and program • role of different outcomes of physical conditioning <ul style="list-style-type: none"> ○ fitness needs ○ health needs ○ functional capacity needs • integration of various modes appropriate to needs and impairment, eg, importance of stretching • give positive feedback and encouragement
Exercise variables	<p>[all categories]</p> <ul style="list-style-type: none"> • duration • frequency • intensity • optimum combination for different types and severity of musculoskeletal needs and desired outcomes
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing a rapport <ul style="list-style-type: none"> ○ level of instruction compares with level of client knowledge ○ empathy ○ creating a safe environment • instructional position <ul style="list-style-type: none"> ○ body language

	<ul style="list-style-type: none"> ○ eye contact ○ clarity of instruction ● verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity ● non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality ● demonstration strategies ● motivational strategies ● avoidance against competing with the client ● positives and negatives of different instructional techniques ● positive feedback ● flexibility in instructional technique
Methods to enhance knowledge	<p>[all categories]</p> <ul style="list-style-type: none"> ● research <ul style="list-style-type: none"> ○ medical journals ○ internet ○ books ● mentoring ● seminars ● conferences
Muscular conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> ● choice of apparatus and exercises <ul style="list-style-type: none"> ○ weight machines, dumbbells, elastic bands ○ appropriate to musculoskeletal needs ○ within context of exercise prescription ○ whole body, isolated muscles ○ posture, gait, coordination, balance ○ muscle tone, spasticity and stretching ○ emphasis on functional capacity and activities of daily living, eg, wheelchair transfer ● safe and effective exercises <ul style="list-style-type: none"> ○ range of motion and limitation for certain movements ○ posture and body position control ○ spotting, strapping, direct supervision and assistance ○ moderate intensity, gradual progression ○ monitor for adverse reactions ● integration with cardio-respiratory training
Musculoskeletal needs	<p>[all categories]</p> <ul style="list-style-type: none"> ● joints <ul style="list-style-type: none"> ○ arthritis ○ joint rupture ○ joint replacement ● osteoporosis ● overuse injuries <ul style="list-style-type: none"> ○ achilles tendonitis ○ rotator cuff injury ● sprains and strains ● neuromuscular disorders <ul style="list-style-type: none"> ○ muscular dystrophies

	<ul style="list-style-type: none"> • back and spine <ul style="list-style-type: none"> ○ ruptured disk ○ scoliosis ○ spinal cord injury • fractures
Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability
Professional behaviour in relationship to, and communication with, clients and allied health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • confidentiality of client health and personal information • when to refer client who shows untoward response or requires alteration of exercise prescription • correspondence and communication with allied health professionals about clients with musculoskeletal needs
Review and modify the exercise program	<p>[all categories]</p> <ul style="list-style-type: none"> • review clients needs and goals • assess program outcomes • positive and constructive feedback • review client's condition • modify program <ul style="list-style-type: none"> ○ sets ○ reps ○ exercises ○ intensity • time

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ translate exercise prescription for clients with musculoskeletal needs into the practical exercise setting ○ explain and discuss with the client all aspects of the exercise prescription and reasons for inclusion of specific components in the context of the client's needs ○ lead and instruct exercise for clients with musculoskeletal needs, both individuals and groups ○ monitor safe exercise practices and make corrections when appropriate ○ maintain exercise equipment, exercise aids and the exercise setting to ensure client safety ○ recognise and act on evidence that a client with musculoskeletal need is not coping with exercise ○ demonstrate appropriate emergency procedures for a client with musculoskeletal needs experiencing an untoward event during exercise ○ demonstrate appropriate manner, attitude, empathy and patience when working with clients with musculoskeletal needs
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT016A Apply information from postural appraisals to fitness programs for moderate risk clients ○ SRFFIT018A Apply anatomy and physiology to fitness programs for moderate risk clients ○ SRFFSP003A Plan and deliver exercise to promote physical and psychological well-being in low and moderate risk clients • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFSP006A Plan and deliver exercise strategies for musculoskeletal rehabilitation
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Exercise programming • Required skills <ul style="list-style-type: none"> ○ Advanced verbal, written and listening skills for the age and values of the 'moderate risk' client with musculoskeletal needs, so that an appropriate and effective exercise plan can be implemented ○ Advanced interpersonal skills to enhance the interaction with the client and to help with exercise adherence ○ Advanced programming and instructional skills so that the specific

	<p>needs of the 'moderate risk' client with musculoskeletal needs are met</p> <ul style="list-style-type: none"> ○ First aid ○ Safe exercise procedures specifically for clients with musculoskeletal needs ○ Range of motion and stretching techniques, eg, active, assisted ○ Various methods to monitor client's responses to exercise ○ Structure of exercise session to meet needs of client with musculoskeletal needs ○ Education of client about role of exercise in enhancing musculoskeletal needs
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ interaction with moderate risk clients with musculoskeletal needs under direct supervision of a supervisor who is experienced working with clients with musculoskeletal needs. This interaction should occur in appropriate exercise settings, such as a fitness centre, community fitness program, or health care setting, eg, aged home, rehabilitation centre. Assessment should include work with a variety of exercise modes and equipment appropriate for use with clients with musculoskeletal needs, eg, exercise machines, weight machines, exercise mats. Material for strapping parts of the body if needed for resistance exercise must be readily available ○ appropriate documentation and resources normally used in the workplace, such as client progress forms, correspondence with referring health professionals, and instructional materials (eg, brochures, displays) specifically for clients with musculoskeletal needs ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● There is a wide range of potential clients with musculoskeletal needs. Thus, assessment should include clients of different ages with different types and severity of needs. Due to issues such as safety requirements and deliver of appropriate techniques, this unit of competency must be assessed over a minimum of three (3), and preferably up to five (5), different occasions to include a range of clients with different risk factors and exercise settings to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of health, functional capacity and physical activity for clients who have some type of physical and/or cognitive impairment due to a musculoskeletal condition. This often requires adjustment of the standard exercise prescription and client approach to focus on functional capacity and health rather than physical fitness ● This unit of competency should be assessed through observation of processes and procedures demonstrated by the student dealing with real clients, oral and written questioning on required knowledge and skills (especially how each musculoskeletal needs influences exercise capacity),

	<p>and the manner and attitude when working directly with clients with musculoskeletal needs</p> <ul style="list-style-type: none">• Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals, provided that the person authenticating this evidence has directly witnessed his/her interactions with clients and is experienced working with clients with musculoskeletal needs, and that this authentication addresses issues specifically relating to delivery of exercise for clients with musculoskeletal needs
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and information about client's health and impairment into planning and delivery of exercise session, instruction and discussion with client • Communicating ideas and information — Discuss with client the role of physical activity in managing needs, explain the different components of the exercise session and program • Planning and organising activities — Major responsibility for organising, leading and instructing exercise sessions in a safe and effective manner that addresses client's needs • Working with teams and others — Liaise with allied health professionals providing exercise prescription about client progress, responses and adaptations to exercise program • Using mathematical ideas and techniques — Use of some quantitative techniques such as monitoring heart rate and rating of perceived exertion • Solving problems — Monitor client's response to exercise and make adjustments appropriate to the client's needs, responses and needs within the context of the exercise prescription • Using technology — Use of exercise equipment, eg, free weights, weight machines, exercise machines, heart rate monitors (possibly), various exercise techniques <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFFSP010A	PLAN AND DELIVER EXERCISE FOR LOW TO MODERATE RISK CLIENTS WITH NEUROLOGICAL IMPAIRMENT
FSP	Fitness Specialist

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and provides the fitness specialist with skills, knowledge and competencies required to plan and deliver exercise programs to clients with neurological impairments who present with no more than moderate risk of untoward event or exacerbation of impairment during exercise. Clients likely to be encountered in the exercise setting might include those with cerebral palsy (CP), stroke or other form of acquired brain injury (ABI), multiple sclerosis (MS), muscular dystrophy (MD), Parkinson’s Disease (PD) and spinal cord injury (SCI). This unit deals with exercise instruction and delivery only for clients who are deemed low to moderate risk and have been cleared to exercise by their medical practitioners.

ELEMENT	PERFORMANCE CRITERIA
1 Explain and apply knowledge about the cause and consequences of specific neurological impairments and the role of exercise in management of these conditions	1.1 Identify and explain to the client, the causes and consequences of specific neurological impairments in the context of their effect on exercise capacity 1.2 Identify and explain to the client the role of physical activity in managing neurological impairment and enhancing health in clients with neurological impairment 1.3 Identify and explain to the client exercise variables in the exercise prescription, in the context of management of specific neurological impairments 1.4 Explain to the client with neurological impairment the different roles of cardiovascular and muscular conditioning , and the reasons for inclusion of each as part of the exercise prescription
2 Apply basic exercise prescription principles to selecting, leading and instructing exercise for clients with neurological impairment	2.1 Understand and apply physical activity recommendations for clients with neurological impairment 2.2 Explain components of an exercise session indicating the purpose of each for clients with neurological impairment 2.3 Identify and explain the reasons behind recommended exercise variables to be altered in an exercise prescription for clients with neurological impairment 2.4 Demonstrate exercise leadership and design of exercise sessions for clients with neurological impairment 2.5 Demonstrate an ability to instruct and explain safe and effective stretching methods as recommended for clients with neurological impairments
3 Apply and extend knowledge about factors influencing exercise compliance to instruction and delivery of exercise for clients with neurological impairment	3.1 Identify barriers to exercise in clients with neurological impairment and apply this knowledge to instructional methods and the exercise setting 3.2 Identify and address factors affecting exercise adherence in clients with neurological impairment 3.3 Demonstrate an ability to incorporate special needs of clients with neurological impairment within an exercise setting used simultaneously by clients with other types of impairment or with no impairment
4 Evaluate an exercise program according to client progress	4.1 Identify and use methods to monitor client responses to exercise, progress and indicators of poor coping specific to individuals with various neurological impairments 4.2 Demonstrate professional behaviour in relationship and communication with clients and allied health professionals 4.3 Using a manner appropriate to clients with different types of neurological

	<p>impairment, demonstrate and explain methods by which he/she can self-monitor exercise intensity and the response to exercise</p> <p>4.4 Demonstrate an ability to perceive the need for, and to make, minor adjustments in exercise variables within the context of the exercise prescription for clients with specific neurological impairment</p>
<p>5 Ensure safety of clients with neurological impairment in a variety of exercise settings</p>	<p>5.1 Instruct clients on safe exercise methods, specific to their impairments, in a variety of settings and modes likely to be used by individuals with neurological impairment including muscular conditioning and cardio-respiratory conditioning</p> <p>5.2 Describe and explain appropriate apparel and equipment for exercise for clients with neurological impairment</p> <p>5.3 Demonstrate an ability to recognise and correct unsafe exercise procedures in clients with various neurological impairments</p> <p>5.4 Apply risk assessment procedures to ensure client safety and to monitor client responses to exercise in various settings likely to be used by clients with neurological impairment</p> <p>5.5 Demonstrate appropriate emergency procedures in response to client injury or untoward event in a variety of exercise settings likely to be used by clients with neurological impairment</p> <p>5.6 Identify and demonstrate procedures for ensuring proper care and maintenance of facilities and equipment specific to the needs of clients with neurological impairment</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Address factors affecting exercise adherence in clients with neurological impairment	[all categories] <ul style="list-style-type: none"> • barriers to participation and adherence <ul style="list-style-type: none"> ○ structural, eg, access ○ attitudinal, eg, other participants ○ programming ○ possibly initial low fitness level • preference and need to emphasise functional capacity and tasks of daily living • realistic, supportive and positive environment <ul style="list-style-type: none"> ○ non-judgmental ○ respect for individual client ○ appropriate level of instruction for age and cognitive ability, ie, do not always assume cognitive impairment ○ social interaction
Appropriate apparel and equipment	[all categories] <ul style="list-style-type: none"> • footwear • other aids including <ul style="list-style-type: none"> ○ strapping
Cardio-respiratory conditioning	[all categories] <ul style="list-style-type: none"> • choice of exercises and location <ul style="list-style-type: none"> ○ appropriate to impairment and health needs ○ within context of exercise prescription ○ emphasis on functional capacity and activities of daily living, eg, mobility ○ gait, coordination, balance limitations ○ low initial fitness level, easily fatigued ○ inefficient movement ○ possible cognitive impairments • integration with muscular training <ul style="list-style-type: none"> ○ may first need to improve strength, balance and range of motion ○ use of exercise machines and circuit training • low initial fitness level and need for gradual progression
Components of an exercise session	[all categories] <ul style="list-style-type: none"> • importance of warm-up and cool-down in context of client's health needs • incorporation of stretching • role of different conditions methods in health context <ul style="list-style-type: none"> ○ muscular conditioning ○ cardio-respiratory conditioning

	<ul style="list-style-type: none"> ○ balance of different methods ○ health justification of each components ● time efficiency
<p>Ensure client safety and to monitor client responses to exercise</p>	<p>[all categories]</p> <ul style="list-style-type: none"> ● equipment modification, set-up, maintenance ● actions of able-bodied clients using facilities at same time ● appropriate apparel and footwear ● client instruction of safe practices <ul style="list-style-type: none"> ○ formal instruction ○ informal supervision ○ written materials and displays ○ spotting, strapping, supervision, assistance ● alterations to standard monitoring methods (eg, heart rate) may be needed for some impairments, eg, spinal cord injury ● direct observation of and communication with client ● potential risks to client <ul style="list-style-type: none"> ○ differ according to impairment and age ○ may be similar or different from able-bodied ○ dehydration, heat stress, hyperthermia ○ shortness of breath ○ irregular heart beat, chest pain ○ fainting, dizziness ○ sudden loss of balance, muscular strength or coordination, eg, need for spotting ○ autonomic hyperreflexia in spinal cord injury
<p>Exercise leadership and design of exercise sessions for clients with neurological impairment</p>	<p>[all categories]</p> <ul style="list-style-type: none"> ● individual and group instruction ● clear instructions and demonstrations, especially for those with cognitive impairment ● respect for client as individual ● formal and informal instruction and supervision ● possible need to educate able-bodied clients about impairments in other clients ● importance of warm-up and cool-down ● adaptation of exercise setting, equipment and program ● role of different outcomes of physical conditioning <ul style="list-style-type: none"> ○ fitness needs ○ health needs ○ functional capacity needs ● integration of various modes appropriate to needs and impairment, eg, importance of stretching

<p>Exercise variables to be altered in an exercise prescription for clients with neurological impairment</p>	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate modes for different types of impairment <ul style="list-style-type: none"> ○ emphasis on functional capacity related to tasks of daily living • duration • frequency • intensity • optimum combination for different types and severity of impairment and desired outcomes
<p>Muscular conditioning</p>	<p>[all categories]</p> <ul style="list-style-type: none"> • choice of apparatus and exercises <ul style="list-style-type: none"> ○ weight machines, dumbbells, elastic bands ○ appropriate to impairment ○ within context of exercise prescription ○ whole body, isolated muscles ○ posture, gait, coordination, balance ○ muscle tone, spasticity and stretching ○ emphasis on functional capacity and activities of daily living, eg, wheelchair transfer • safe and effective exercises <ul style="list-style-type: none"> ○ range of motion and limitation for certain movements ○ posture and body position control ○ spotting, strapping, direct supervision and assistance ○ moderate intensity, gradual progression ○ monitor for adverse reactions • integration with cardio-respiratory training
<p>Professional behaviour in relationship and communication with clients and allied health professionals</p>	<p>[all categories]</p> <ul style="list-style-type: none"> • confidentiality of client health and personal information • when to refer client who shows untoward response or requires alteration of exercise prescription • correspondence and communication with allied health professionals about clients with neurological impairment
<p>Role of physical activity in managing neurological impairment and enhancing health in clients with neurological impairment</p>	<p>[all categories]</p> <ul style="list-style-type: none"> • pathology, causes and impairments due to most common neurological impairments likely to be seen in exercise setting <ul style="list-style-type: none"> ○ Cerebral Palsy (CP) ○ Acquired Brain Injury (ABI) ○ Stroke ○ Parkinson’s Disease (PD) ○ Multiple Sclerosis (MS) ○ Spinal Cord Injury (SCI) • effects of exercise in enhancing functional capacity and managing impairment • health benefits of exercise in neurological impairment • answer client questions about effects of exercise

Understand and apply physical activity recommendations for clients with neurological impairment	[all categories] <ul style="list-style-type: none">• limitation to exercise capacity imposed by each type of impairment• modification of standard exercise prescription for each type of impairment• modification of exercise prescription according to grade of impairment, eg, SCI, CP, or stage of condition, eg, MS• examples of appropriate activities for each type of impairment and for each grade within particular impairments, eg, SCI, CP• cerebral palsy international sports and recreation association, eg CP-ISRA, classification of impairment• influence of cognitive impairment in some conditions, eg, CP, ABI
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ translate exercise prescription for clients with neurological impairment into the practical exercise setting ○ explain and discuss with the client all aspects of the exercise prescription and reasons for inclusion of specific components in the context of the client’s impairment ○ lead and instruct exercise for clients with neurological impairment, both individuals and groups ○ monitor safe exercise practices and make corrections when appropriate ○ maintain exercise equipment, exercise aids and the exercise setting to ensure client safety ○ apply risk assessment procedures in exercise settings serving clients with neurological impairment ○ recognise and act on evidence that a client with neurological impairment is not coping with exercise, is showing signs or symptoms requiring referral, or is experiencing an untoward event during exercise ○ demonstrate appropriate emergency procedures for a client with neurological impairment experiencing an untoward event during exercise ○ demonstrate appropriate manner, attitude, empathy and patience when working with clients with neurological impairment
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFAHN001A Make referrals and work collaboratively with allied health professionals where appropriate ○ SRFAHN002A Receive and respond to rehabilitation referrals from allied health professionals ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT016A Apply information from postural appraisals to fitness programs for moderate risk clients ○ SRFFIT018A Apply anatomy and physiology to fitness programs for moderate risk clients ○ SRFFSP003A Plan and deliver exercise to promote physical and psychological well-being in low and moderate risk clients ○ SRFFSP005A Deliver exercise for people with a disability • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFSP004A Plan and deliver exercise for moderate risk children and young adolescents ○ SRFFSP006A Plan and deliver exercise strategies for musculoskeletal rehabilitation ○ SRFFSP009A Plan and deliver exercise for moderate risk clients with musculoskeletal needs

<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Common neurological impairments likely to be encountered in the exercise setting, eg, cerebral palsy, multiple sclerosis, Parkinson’s disease, spinal cord injury, acquired brain injury, stroke ○ Causes and consequences of each disorder with regards to physical and cognitive impairments likely to affect exercise capacity ○ Benefits of physical activity for each type of impairment ○ Modification of standard exercise prescription for each type of impairment ○ Physiological responses to exercise associated with neurological impairment, and how these differ from responses in able-bodied ○ Structure of an exercise session for clients with neurological impairment ○ Expected fitness level and progress in clients with different types of neurological impairment ○ Barriers to exercise and strategies to address these in clients with neurological impairment ○ Signs and symptoms of untoward events that may occur during exercise in clients with various neurological impairments ○ Limitations to gait and movement, and role of stretching (active and assisted) in enhancing range of movement ○ Neurological impairments associated with cognitive impairment that may affect the client’s ability to communicate ○ Association of neurological impairment with major health risk factors, eg, cardiovascular disease, and role of exercise in managing these ○ Different roles of cardio-respiratory and muscular conditioning for different types of impairment • Required skills <ul style="list-style-type: none"> ○ Exercise leadership for individuals and groups of clients with neurological impairment ○ Exercise instruction using a wide range of modes including dumbbells; weight machines; Theraband; Swiss balls; water, floor and chair exercises; core stability ○ Exercise equipment set-up and maintenance ○ First aid ○ Safe exercise procedures specifically for clients with neurological impairment ○ Strapping and other stability techniques when needed for clients with neurological impairment ○ Gait, coordination and balance assessment and exercises ○ Range of motion and stretching techniques (active, assisted) ○ Various methods to monitor client’s responses to exercise, especially when these may differ from responses expected in able-bodied ○ Structure of exercise session to meet needs of client with neurological impairment ○ Education of client about role of exercise in enhancing functional capacity and addressing needs of client with neurological impairment
<p>Resource implications</p>	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ interaction with moderate risk clients with neurological impairment under direct supervision of a supervisor who is experienced working with clients with neurological impairment. This interaction should occur in appropriate exercise settings, such as a fitness centre, community fitness program, or health care setting, eg,

	<p>aged home, rehabilitation centre. Assessment should include work with a variety of exercise modes and equipment appropriate for use with clients with neurological impairment, eg, exercise machines, weight machines, exercise mats. Material for strapping parts of the body if needed for resistance exercise must be readily available</p> <ul style="list-style-type: none"> ○ appropriate documentation and resources normally used in the workplace, such as client progress forms, correspondence with referring health professionals, and instructional materials, eg, brochures, displays, specifically for clients with neurological impairment ● Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
<p>Consistency in performance</p>	<ul style="list-style-type: none"> ● There is a wide range of potential clients with neurological impairment. Thus, assessment should include clients of different ages with different types and severity of impairment. Due to issues such as safety requirements and deliver of appropriate techniques, this unit of competency should be assessed over at least three (3) and preferably up to five (5) different occasions to ensure consistency of performance over the Range Statements and contexts reflecting the diverse range of neurological impairments that a fitness specialist might encounter in the work environment
<p>Context for assessment</p>	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of health, functional capacity and physical activity for clients who have some type of physical and/or cognitive impairment due to a neurological condition. This often requires adjustment of the standard exercise prescription and client approach to focus on functional capacity and health rather than physical fitness ● This unit of competency should be assessed through observation of processes and procedures demonstrated by dealing with real clients, oral and written questioning on required knowledge and skills (especially how each neurological impairment influences exercise capacity), and the manner and attitude when working directly with clients with neurological impairment ● Where performance is not directly observed or is required to be demonstrated over time or in different locations, evidence may be authenticated by supervisors or clients or other qualified individuals, provided that the person authenticating this evidence has directly witnessed his/her interactions with clients and is experienced working with clients with neurological impairment, and that this authentication addresses issues specifically relating to delivery of exercise for clients with neurological impairment

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	2	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Incorporate exercise prescription and information about client's health and impairment into planning and delivery of exercise session, instruction and discussion with client • Communicating ideas and information — Discuss with client the role of physical activity in managing impairment, explain the different components of the exercise session and program, and explain reasons for inclusion of these in context of client's health needs and physical and/or cognitive impairment(s) • Planning and organising activities — Major responsibility for organising, leading and instructing exercise sessions in a safe and effective manner that addresses client's physical and/or cognitive impairment(s) and needs • Working with teams and others — Liaise with allied health professionals providing exercise prescription about client progress, responses and adaptations to exercise program • Using mathematical ideas and techniques — Use of some quantitative techniques such as monitoring heart rate and rating of perceived exertion • Solving problems — Monitor client's response to exercise and make adjustments appropriate to the client's needs, responses and impairment within the context of the exercise prescription • Using technology — Use of exercise equipment (eg, free weights, weight machines, exercise machines), heart rate monitors (possibly), various exercise techniques, eg, Pilates, Theraband, Swiss ball, use of strapping when appropriate <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

GROUP EXERCISE

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SRFGEX002A Customise instructional skills to include specific group fitness activities current in the fitness industry	10

SRFGEX001A	PLAN AND INSTRUCT A GROUP EXERCISE CLASS
GEX	Group fitness activities

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to provide the instructor with the skills to plan and instruct a basic group fitness class of a type common in the fitness industry.

ELEMENT	PERFORMANCE CRITERIA
1 Prepare an exercise to music tape	1.1 Select and consider <i>music</i> and <i>use of music</i> , and <i>analyse</i> a tape or Compact Disc 1.2 Recognise and follow copyright responsibilities
2 Plan a group exercise fitness class	2.1 Define the client group's fitness outcomes and class type 2.2 Allocate the <i>concepts</i> and <i>phases</i> of the class within the plan 2.3 Allocate types of exercises in each of the <i>phases</i> of a class in the plan using the predicted physiological response as the basis for choice of type and intensity 2.4 Use an effective and varied exercise repertoire 2.5 Outline <i>potentially harmful practices</i> and the reasons why they need to be avoided in the plan 2.6 Draw on a broad <i>exercise repertoire</i> 2.7 Apply current industry standard injury and safety guidelines to the planning 2.8 Plan the workload of each section during a class and the training components 2.9 Manipulate the various training components in the plan to provide a beginner, intermediate or advanced level of work-out 2.10 Plan music if used
3 Instruct a group exercise to music class	3.1 Use appropriate <i>dress and presentation</i> 3.2 Deliver <i>pre-class instructions</i> 3.3 Instruct <i>exercise to music</i> to a group of clients 3.4 Use appropriate <i>instructional principles</i> in the class 3.5 Implement and monitor methods to ensure <i>correct technique</i> for <i>safety</i> , efficiency and aesthetics 3.6 Adjust and correct <i>common technical errors</i> and demonstrate the <i>correct technique</i> 3.7 Accommodate those in the class with poor coordination and assist <i>less skilled performers</i> 3.8 Instruct easy activities to follow, yet physically challenging 3.9 <i>Monitor and adjust exercise intensity</i> as required 3.10 <i>Review</i> own and participant's performance
4 Motivate clients	4.1 Establish the physical, psychological and social reasons why the clients are participating in the classes 4.2 Apply appropriate motivational techniques 4.3 Provide constructive and positive <i>feedback</i> to clients

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Analyse	<p>[all categories]</p> <ul style="list-style-type: none"> • duration of the tape • genre of the music • for each track <ul style="list-style-type: none"> ○ beats per minute ○ rhythm ○ tempo ○ phasing
Class types	<p>[all categories]</p> <ul style="list-style-type: none"> • terminology reflects <ul style="list-style-type: none"> ○ program type <ul style="list-style-type: none"> ▪ beginners ▪ hi/low ▪ step ▪ low impact ▪ high impact ▪ new body ▪ circuit ▪ choreographed/freestyle ▪ routine format • physiological adaptation <ul style="list-style-type: none"> ○ body fat utilisation ○ muscle conditioning ○ flexibility ○ relaxation • equipment used <ul style="list-style-type: none"> ○ stationary cycle ○ free weights
Common technical errors	<p>[all categories]</p> <ul style="list-style-type: none"> • lower back hyper–extended • knees over feet • stretching rounded back • arms too high or low • shoulders rounded

Concepts	<p>[all categories]</p> <ul style="list-style-type: none"> • fast/slow • add on • intensity levels • formations • lines, ie, on pool floor • groups • arm/leg combinations
Correct technique	<p>[all categories]</p> <ul style="list-style-type: none"> • large well-defined movements • working within limits • visualisation
Dress and presentation	<p>[all categories]</p> <ul style="list-style-type: none"> • dress <ul style="list-style-type: none"> ○ neat and tidy ○ clean ○ appropriate to the activity ○ to any workplace requirements • presentation <ul style="list-style-type: none"> ○ professional ○ confident and positive without being overbearing
Exercise repertoire	<p>[all categories]</p> <ul style="list-style-type: none"> • name • key instructional points • component of the class where the exercise is suitable • contraindications and modifications • variations to provide differing intensities • level of participant skill required • potential for combinations
Exercise to music	<p>[all categories]</p> <p>a generic term used to describe fitness industry exercise classes characterised by</p> <ul style="list-style-type: none"> • group format • use of music • led by an instructor
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise purpose • exercise technique • appropriate exercise intensity • methods of monitoring intensity • safety • muscle involvement

	<ul style="list-style-type: none"> • improvements in fitness and exercise technique
Instructional principles	<p>[all categories]</p> <ul style="list-style-type: none"> • establishing rapport • teaching positioning • class organisation • class formation • visual and verbal cueing with variety • visual previewing • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity ○ pitch ○ modulation • body language • mirror imaging • pre-cueing • rehearsal • combinations • mannerisms • personality • monitoring and encouraging class response • avoidance of competing against the class
Less skilled performers	<p>[all categories]</p> <ul style="list-style-type: none"> • poor techniques • limited flexibility • poor coordination • self-consciousness • low level of fitness
Monitor and adjust exercise intensity	<p>[all categories]</p> <ul style="list-style-type: none"> • heart rate response • perceived rate of exertion • form and fatigue • motivation and enthusiasm suitable to the class format
Music	<p>[all categories]</p> <ul style="list-style-type: none"> • motivational music • themes • phrased music • unphrased music • singing • cultural music <p>selection needs to consider</p> <ul style="list-style-type: none"> • copyright and legal procedures • major licensing and royalty collection bodies in Australia <ul style="list-style-type: none"> ○ Australasian Mechanical Copyright Owners Society

	<ul style="list-style-type: none"> ○ Australasian Performing Rights Association ○ Australian Record Industry Association ○ Phonographic Performance Company Of Australia <p>quality depends on</p> <ul style="list-style-type: none"> • type of tape used • taping equipment and techniques • care of tapes and equipment • volume
Phases	<p>[all categories]</p> <ul style="list-style-type: none"> • preparation phase • conditioning phase • recovery phase • adaptation phase
Potentially harmful practices	<p>[all categories]</p> <ul style="list-style-type: none"> • ballistic movements • spinal hyperextension • deep knee bends • pounding on the spot • straight leg situps • exercising while sick • exercising in extremes of temperature • multiple repetitions • lever length • addition of equipment
Pre-class instructions	<p>[all categories]</p> <ul style="list-style-type: none"> • welcome • personal introduction • outline the class level • appropriate and safe footwear and clothing • pain/discomfort • rests • correct exercise techniques • exercise sessions per week • correct breathing

Review	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional techniques • choreographic techniques • class format • appropriate intensity • client education • client motivation • client exercise technique • client satisfaction
Safety	<p>[all categories]</p> <ul style="list-style-type: none"> • pre-class <ul style="list-style-type: none"> ○ screening ○ talking to participants ○ explanation of exercises ○ preparation for class ○ late arrivals ○ appropriately graded classes ○ choice of exercises • appropriate intensity and complexity • overcrowding • ventilation • hygiene • climate control • floor surfaces • room structure • stage position • participant's clothing and footwear
Use of music	<p>[all categories]</p> <ul style="list-style-type: none"> • motivational value of music • types of music • themes • phrases • voice • culture • copyright act and legal procedures • Australia Performing Rights Association • tape quality • taping equipment and techniques • care of tapes and equipment • volume • adjusting levels • music mapping • phases of the tape

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ plan and deliver an effective exercise to music workout appropriate to the client group
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Familiarity with the elements of exercise to music classes that determine the class level and type • Required skills <ul style="list-style-type: none"> ○ Experience in moving in a controlled and efficient manner while participating in a variety of exercise to music classes
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ an exercise to music exercise room with audio equipment ○ suitable flooring ○ full length mirrors ○ common aerobic group class equipment such as steps, bands, light dumbbells, video camera, video recorder and television set • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) class types to ensure consistency of performance over the Range Statements and context applicable to the work environment

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFGEX002A	CUSTOMISE INSTRUCTIONAL SKILLS TO INCLUDE SPECIFIC GROUP FITNESS ACTIVITIES CURRENT IN THE FITNESS INDUSTRY
GEX	Group fitness activities

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to allow the group or exercise to music instructor to develop a broader range of skills in group fitness activities current and relevant to group instruction in the general fitness industry or in their specific workplace. These would usually involve specific class formats for specific clients groups, equipment, or environment.

ELEMENT	PERFORMANCE CRITERIA
1 Plan a specific format group fitness activity	1.1 Define the fitness outcome of the exercise to music class for a particular client group, use of equipment, music considerations or environment 1.2 Allocate the concepts and phases of the class in the plan 1.3 Allocate types of exercises in each of the phases of a class using the predicted physiological response as the basis for choice of type and intensity 1.4 Outline potentially harmful practices and the reasons why they need to be avoided in the plan 1.5 Utilise an effective exercise repertoire in the plan 1.6 Apply current industry standard injury and safety guidelines and instructional techniques to the planning 1.7 Plan the workload of each track during an activity and training components for the activity 1.8 Manipulate the various training components in the plan to provide a beginner, intermediate or advanced level of workout
2 Instruct a specific format group fitness activity	2.1 Use appropriate dress and presentation 2.2 Deliver pre-class instructions 2.3 Instruct an exercise to music class to a group of clients 2.4 Appropriate instructional principles are used in the class 2.5 Implement and monitor methods to ensure correct technique for safety , efficiency and aesthetics 2.6 Adjust and correct common technical errors and demonstrate the correct technique 2.7 Accommodate those in the class with poor coordination and assist less skilled clients 2.8 Instruct easy to follow activities, yet physically challenging 2.9 Monitor and adjust exercise intensity as required 2.10 Use approachable techniques to clients and elicit performance feedback from class participants 2.11 Review own and participant's performance
3 Utilise equipment	3.1 Prepare, utilise and maintain equipment specific to the group fitness activity format 3.2 Follow safety guidelines outlined by the equipment manufacturer and program developer

4 Motivate clients	4.1 Establish the physical, psychological and social reasons why the clients are participating in the classes 4.2 Apply appropriate motivational techniques 4.3 Provide constructive and positive feedback to clients
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Common technical errors	[all categories] <ul style="list-style-type: none"> • lower back hyper–extended • lack of abdominal bracing • 'locking out' of joints due to poor range of movement control • knees over feet • stretching rounded back • arms too high or low • shoulders rounded
Concepts	[all categories] <ul style="list-style-type: none"> • fast/slow • add on • intensity levels • formations • lines, ie, on pool floor • groups • arm/leg combinations
Correct technique	[all categories] <ul style="list-style-type: none"> • awareness and application of sound postural positioning • large well–defined movements • working within limits • visualisation
Dress and presentation	[all categories] <ul style="list-style-type: none"> • dress <ul style="list-style-type: none"> ○ neat and tidy ○ clean ○ appropriate to the activity ○ to any workplace requirements • presentation <ul style="list-style-type: none"> ○ professional ○ confident and positive

Exercise repertoire	<p>[all categories]</p> <ul style="list-style-type: none"> • name • key instructional points • component of the class where the exercise is suitable • contraindications and modifications • variations to provide differing intensities • level of participant skill required • potential for combinations
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise purpose • exercise technique • appropriate exercise intensity • methods of monitoring intensity • safety • muscle involvement • improvements in fitness and exercise technique
Group fitness activity types	<p>[all categories]</p> <ul style="list-style-type: none"> • beginners • hi/low • step • low impact • high impact • new body • muscle conditioning/multi repetition • circuit • spinning • relaxation • combination • equipment based • choreographed
Instructional principles	<p>[all categories]</p> <ul style="list-style-type: none"> • mirror imaging • pre-cueing • visual and verbal cueing • visual previewing • class organisation • rehearsal • combinations
Instructional technique	<p>[all categories]</p> <ul style="list-style-type: none"> • teaching positioning • group fitness activity organisation • group fitness activity formation • verbal communication <ul style="list-style-type: none"> ○ encouragement

	<ul style="list-style-type: none"> ○ voice clarity ○ pitch ● body language ● mirror imaging ● mannerisms ● personality ● establishing rapport ● monitoring the response of clients to the group fitness activity ● avoidance of competing against the clients ● approachability ● patience with clients who have difficulty picking up a routine or movement pattern
Less skilled clients	<p>[all categories]</p> <ul style="list-style-type: none"> ● poor techniques ● limited flexibility ● poor coordination ● self-consciousness ● low level of fitness
Monitor and adjust exercise intensity	<p>[all categories]</p> <ul style="list-style-type: none"> ● heart rate response ● perceived rate of exertion ● form and fatigue ● motivation and enthusiasm
Phases	<p>[all categories]</p> <ul style="list-style-type: none"> ● preparation phase ● conditioning phase ● recovery phase ● adaptation phase
Potentially harmful practices	<p>[all categories]</p> <ul style="list-style-type: none"> ● ballistic movements ● loaded arm abduction/external rotation beyond 90 degrees ● poorly controlled extension of joints ● spinal hyperextension ● deep knee bends ● pounding on the spot ● straight leg situps ● exercising while sick ● exercising in extremes of temperature ● multiple repetitions ● lever length ● addition of equipment
Pre-group fitness activity instructions	<p>[all categories]</p> <ul style="list-style-type: none"> ● welcome ● personal introduction

	<ul style="list-style-type: none"> • outline the group fitness activity level • appropriate and safe footwear and clothing • pain/discomfort • rests • correct exercise techniques • exercise sessions per week • correct breathing
Review	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional techniques • choreographic techniques • group fitness activity format • appropriate intensity • client education • client motivation • client exercise technique • client satisfaction
Safety	<p>[all categories]</p> <ul style="list-style-type: none"> • pre group fitness activity <ul style="list-style-type: none"> ○ screening ○ talking to participants ○ explanation of exercises ○ preparation for group fitness activity ○ late arrivals ○ appropriately graded group fitness activity ○ choice of exercises • appropriate intensity and complexity • awareness of the relationship between music speed and safety • overcrowding • ventilation • hygiene • climate control • floor surfaces • room structure • stage position • participant's clothing and footwear
Music considerations	<p>[all categories]</p> <ul style="list-style-type: none"> • motivational value of music • types of music • themes • phrases • voice • culture • copyright act and legal procedures • Australian Performing Rights Association • tape quality • taping equipment and techniques • care of tapes and equipment • volume • adjusting levels

	<ul style="list-style-type: none">• music mapping• phases of the tape
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ explain the specifics of the customised group fitness activity format to clients ○ explain the specific conditioning benefits of the customised group fitness activity format to clients ○ follow the particular safety guidelines of the specific customised group fitness activity
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFGEX001A Plan and instruct a group exercise class • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic biomechanics, anatomy and physiology related to the group class format • Required skills <ul style="list-style-type: none"> ○ Experience in instructing basic group classes to a wide range of clients in a commercial or community fitness environments designed to improve or maintain fitness ○ Use music in group classes for client motivation ○ Development of class plans, including mapping of suitable music, which provide a structure for improving or maintaining the fitness of clients
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ exercise to music exercise room with audio equipment ○ suitable flooring ○ full length mirrors ○ common aerobic group class equipment such as steps, bands, light dumbbells, video camera, video recorder and television set • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>

Consistency in performance	<ul style="list-style-type: none">• Due to issues such as safety requirements and delivery of appropriate techniques this unit of competency must be assessed over a minimum of three (3) different class types to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit of competence should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
1	3	2	2	1	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

INDIVIDUAL FITNESS INSTRUCTION

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SRFGYM001B	INSTRUCT FITNESS ACTIVITY SKILLS TO A CLIENT USING FITNESS EQUIPMENT
GYM	Individual fitness instruction

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills required by a fitness instructor to instruct and supervise individual clients in fitness using basic fitness industry equipment.

ELEMENT	PERFORMANCE CRITERIA
1 Identify standard fitness exercises to meet a range of fitness outcomes when planning fitness activities and programs	1.1 Identify the <i>fitness goals</i> of a client 1.2 Determine the training history of a client 1.3 Select <i>standard fitness exercises</i> to meet identified fitness goals 1.4 Identify joint movement performed during <i>standard fitness exercises</i> to determine suitability of the exercise 1.5 Identify the main muscles targeted by <i>standard fitness exercises</i> to select suitable exercises 1.6 Use appropriate <i>fitness equipment</i> to perform <i>standard fitness exercises</i>
2 Demonstrate the correct technique of executing standard fitness exercises to fitness clients	2.1 Explain the purpose of <i>standard fitness exercises</i> to a client 2.2 Explain the <i>safety considerations</i> of standard fitness exercises to a client 2.3 Demonstrate correct performance of <i>standard fitness exercises</i> to a client 2.4 Ensure <i>Occupational Health & Safety</i> requirements are adhered to when demonstrating <i>standard fitness exercises</i> to a client
3 Instruct clients to perform standard fitness exercises including the correct use of fitness equipment	3.1 Describe the critical performance cues for correct execution of each <i>standard fitness exercise</i> to a client 3.2 Select suitable resistance for standard fitness exercises when instructing a client 3.3 Demonstrate appropriate verbal and nonverbal communication when instructing a client 3.4 Implement appropriate spotting techniques during the execution of <i>standard fitness exercises</i> 3.5 Demonstrate a friendly, courteous and professional manner when instructing a client
4 Monitor clients while performing fitness activities and provide appropriate feedback	4.1 Identify situations requiring additional communication with clients regarding their exercise technique 4.2 Use appropriate communication strategies to convey information to clients 4.3 Provide effective <i>feedback</i> to clients to improve their exercise technique 4.4 Provide information to alter client practice to meet standard <i>safety considerations</i> 4.5 Suggest <i>modifications or variations</i> of exercises to meet a client's <i>fitness goals</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • quantitative information on performance related to <ul style="list-style-type: none"> ○ range of movement ○ speed of movement ○ body alignment and posture ○ breathing technique ○ form • quantitative information on skill • qualitative information on attitude and motivation
Fitness equipment	<p>may include</p> <ul style="list-style-type: none"> • cardiovascular equipment such as <ul style="list-style-type: none"> ○ stepper ○ rowing machine ○ stationary bicycle ○ treadmill ○ skipping rope ○ cross trainer ○ step board • free weight equipment such as <ul style="list-style-type: none"> ○ decline bench ○ incline bench ○ flat benches ○ shoulder press rack ○ preacher bench ○ squat rack ○ incline abdominal board ○ barbells ○ dumbbells ○ collars and plates • machines such as <ul style="list-style-type: none"> ○ bench press ○ pec deck ○ seated row ○ lat pull-down ○ shoulder press ○ high pulley cable machines ○ low pulley cable machines ○ leg press ○ leg extension ○ leg curl ○ calf raise ○ total hip ○ smith machine • circuit equipment such as <ul style="list-style-type: none"> ○ hydraulic machines

	<ul style="list-style-type: none"> ▪ bench press ▪ pec deck ▪ row ▪ pull-down ▪ shoulder press ▪ leg press ▪ leg extension ▪ leg curl ▪ AD/AB machine ▪ ergometers • miscellaneous equipment such as <ul style="list-style-type: none"> ○ racks ○ range of bars for machines ○ step board ○ boxing mitts and gloves ○ resistive bands and tubes ○ exercise balls ○ heart rate response charts ○ perceived rate of exertion charts ○ heart rate monitoring equipment such as <ul style="list-style-type: none"> ▪ polar heart rate monitors • aquatic equipment such as <ul style="list-style-type: none"> ○ kickboards ○ float belts/vests ○ neck supports ○ flippers ○ balls, rings, sticks ○ flotation barbells ○ paddles ○ webbed gloves ○ noodles/woggles/cookies/wafers/kick rollers ○ stretch cords
Fitness goals	<p>[all categories]</p> <ul style="list-style-type: none"> • aerobic fitness • strength • muscle endurance • explosive power • bodyfat reduction • flexibility • hypertrophy • increased bone density • toning
Exercise modifications	<p>[all categories]</p> <ul style="list-style-type: none"> • form / exercise technique • range of motion • lever length • load • speed of movement
Exercise variations	<p>[all categories]</p> <ul style="list-style-type: none"> • grip

	<ul style="list-style-type: none"> ○ narrow ○ wide ○ common • angle <ul style="list-style-type: none"> ○ incline ○ decline
Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate footwear and clothing • equipment in safe working order • pre-exercise screening of clients • adequate supervision • support • encourage hydration • adequate ventilation provided • adequate spacing between equipment
Safety Considerations	<p>[all categories]</p> <ul style="list-style-type: none"> • collars • safe lifting practices • equipment safety features • emergency stop buttons • signs and symptoms of discomfort • appropriate biomechanical alignment • movement speed • start and finish position • breathing technique • return of equipment for safe storage
Standard fitness exercises	<p>[all categories]</p> <ul style="list-style-type: none"> • may be performed using: <ul style="list-style-type: none"> ○ bodyweight ○ free weights ○ machines ○ elastic resistance or other means of resistance or support ○ other miscellaneous equipment such as aquatic equipment • may include: <ul style="list-style-type: none"> ○ resistance training exercises ○ freestanding exercises ○ stretching exercises • exercises targeting sections of the body <ul style="list-style-type: none"> ○ upper body <ul style="list-style-type: none"> ▪ bench press ▪ push-up ▪ pec deck ▪ flyes ▪ dips ▪ shoulder press ▪ push-up ▪ bent over row ▪ seated row ▪ chin-up ▪ lat pulldown

	<ul style="list-style-type: none">▪ upright row▪ lateral raise▪ shrugs▪ biceps curls▪ preacher curls▪ tricep pushdown▪ tricep overhead press▪ tricep kickback○ trunk<ul style="list-style-type: none">▪ abdominal crunches▪ isometric holds▪ back extensions○ lower body<ul style="list-style-type: none">▪ lunge▪ squat▪ calf raise▪ hip extension▪ leg curl▪ leg extension▪ leg press• flexibility<ul style="list-style-type: none">○ joint specific / muscle specific○ including<ul style="list-style-type: none">▪ calf<ul style="list-style-type: none">• soleus• gastrocnemius▪ hamstrings▪ quadriceps▪ hip flexors▪ ITB▪ gluteals▪ upper back▪ chest▪ shoulders▪ triceps▪ neck
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ select suitable fitness exercises to meet specified fitness requirements ○ demonstrate and instruct standard fitness exercises using appropriate fitness equipment ○ monitor client exercise technique and provide feedback about exercise performance
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Understanding of basic anatomy and physiology ○ Familiarity with standard fitness equipment ○ Familiarity with the range of exercise programs written for clients in fitness centres ○ Application of assessment results to exercise programs • Required skills <ul style="list-style-type: none"> ○ Experience in moving in a controlled and efficient manner while exercising with a range of common resistance training equipment in order to be familiar with a range of exercises that can be demonstrated safely and effectively to clients
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre environment ○ registered supervisors ○ quality exercise gym equipment of a standard common in the fitness industry ○ pin loaded equipment ○ free weights equipment

	<ul style="list-style-type: none"> ○ hydraulic equipment ○ electronic equipment and ancillary equipment ○ aquatic based resistance training equipment • Human resources — assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	3	1	2	3
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFGYM002B	CUSTOMISE GYM INSTRUCTIONAL SKILLS TO INCLUDE SPECIFIC AREAS OF EXPERTISE CURRENT IN THE FITNESS INDUSTRY
GYM	Individual fitness instruction

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills required by a gym instructor to plan and deliver a broad range of training programs customised for clients with specific fitness requirements.

ELEMENT	PERFORMANCE CRITERIA
1 Write training programs to achieve specific fitness goals for a range of clients	1.1 Identify the current fitness profile, training history, exercise preferences, exercise contraindications and specific fitness goals of a client. 1.2 Relate the training requirements of a client to their long-term fitness plan . 1.3 Integrate a client's resistance training program with their flexibility and cardio-respiratory programs . 1.4 Manipulate exercise variables and program variables according to principles of training to create a training program customised to meet a client's specific fitness goals . 1.5 Identify the joint movements and muscles that the client needs to strengthen or target. 1.6 Perform an exercise analysis on a range of specific resistance exercises current in the fitness industry to determine exercise suitability. 1.7 Make specific exercise selections from a wide range of resistance exercises current in the fitness industry utilising the most suitable resistance equipment , based on client requirements. 1.8 Apply exercise variables to customise resistance exercises according to client requirements. 1.9 Use a standardised method of recording training programs according to current fitness industry convention.
2 Deliver fitness programs to a range of clients with varied fitness goals	2.1 Explain to a client the relationship between the structure of their fitness program and their specific fitness goals . 2.2 Explain to a client the relationship between the choice of exercises and their specific fitness goals . 2.3 Explain misconceptions that are commonly held about resistance training programs and other exercise programs. 2.4 Request feedback from a client to demonstrate adequate comprehension of program and any foreseeable difficulties with the program
3 Instruct resistance exercises to a range of clients with varied fitness goals	3.1 Explain the purpose of a specific resistance exercise and how it meets the specific fitness goals of the client 3.2 Use an effective instructional technique to teach a client the correct technique for performing specific resistance exercises current in the fitness industry 3.3 Describe the physiological adaptations that are anticipated in response to a specific resistance training program or resistance exercise 3.4 Identify safety considerations for specific resistance exercises and equipment

4 Supervise training sessions	4.1 Observe client training sessions to ensure exercises are performed effectively and safely. 4.2 Correct poor or unsafe exercise technique in clients. 4.3 Apply spotting techniques for clients performing resistance exercises to ensure safety and to enhance performance 4.4 Supervise equipment usage to minimise conflict and maximise access for all clients 4.5 Ensure compliance with OH&S requirements 4.6 Maintain a friendly, courteous and professional manner with clients
5 Monitor the progress of clients, and modify their programs as required to give continued improvements in fitness	5.1 Identify when a review of a client's fitness program and/or overall fitness plan is necessary according to re-evaluation criteria 5.2 Recognise the signs and symptoms of overtraining 5.3 Reassess a client's fitness levels to determine the effectiveness their current fitness program 5.4 Re-establish the specific fitness goals of a client 5.5 Modify a client's fitness program according to results of fitness reassessments and their changing requirements 5.6 Apply modifications to relevant exercise variables and program variables to meet the client's needs
6 Motivate clients	6.1 Establish the physical, psychological and social reasons for the client's participation in a fitness program 6.2 Apply appropriate motivational techniques to clients 6.3 Provide positive and constructive feedback to clients

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Client	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • various ages • screened • active or inactive
Exercise analysis	<p>[all categories]</p> <ul style="list-style-type: none"> • identification of joints where movement is occurring • classification of the exercise as being isolation or compound • use of correct movement terminology • identification of working muscles and the joints on which they act • identification of joint/s and bodyparts that require stability • identification of the muscle/s responsible stabilising the joint/s and bodyparts • assessment of the degree of difficulty in performing the exercise by considering factors such as required levels of co-ordination, core or joint stability and proprioceptive awareness • assessment of how well the exercise meets the functional requirements of the client for activities of daily living and other specific training goals
Exercise variables	<p>[all categories]</p> <ul style="list-style-type: none"> • modifications to technique and/or equipment including: <ul style="list-style-type: none"> ○ types/shapes of handles and straps ○ bench angles ○ grip positions ○ hand placement ○ foot placement ○ base of support <ul style="list-style-type: none"> ▪ sitting on an exercise ball ▪ placing hands on wobble board ○ range of motion ○ speed of movement ○ source of resistance
Outcomes	<p>[all categories]</p> <ul style="list-style-type: none"> • specific client groups, such as <ul style="list-style-type: none"> ○ sports teams ○ older adults ○ children ○ those with disabilities • specific types of equipment, such as <ul style="list-style-type: none"> ○ sports specific conditioning

	<ul style="list-style-type: none"> ○ circuit specific ● specific environments, such as <ul style="list-style-type: none"> ○ community settings ○ circuit rooms ○ heavy weights ○ water
Fitness plan	<p>[all categories]</p> <ul style="list-style-type: none"> ● outlines overall fitness requirements of a client in relation to long term goals ● involves concepts of periodisation and training phases ● outlines the short term goals that must be met in order to reach long term goals ● outlines specific fitness programs to meet the short term goals of each phase of the plan ● accounts for time and commitment to training sessions in accordance with lifestyle factors and preferences
Instructional technique	<p>[all categories]</p> <ul style="list-style-type: none"> ● state the purpose of an exercise and relate it to a client's specific fitness goals ● inform the client of the safety considerations for that exercise and the equipment used ● demonstrate the correct technique for performing an exercise ● observe the client's performance of the exercise ● provide the client with feedback on their performance ● use spotting techniques when necessary ● use appropriate communication techniques and styles
Misconceptions	<p>[all categories]</p> <ul style="list-style-type: none"> ● hypertrophy outcomes ● masculine women ● slowness ● reduced flexibility ● spot reduction of bodyfat
Occupational health and safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> ● cleanliness of exercise environment ● replacement of equipment to racks ● maintenance of equipment ● broken equipment clearly marked ● safe lifting techniques ● suitable clothing and footwear ● adequate ventilation ● encouragement of hydration of clients ● adequate supervision ● adequate space between equipment
Overtraining	<p>[all categories]</p>

	<ul style="list-style-type: none"> • signs and symptoms <ul style="list-style-type: none"> ○ fatigue ○ elevated resting heart rate ○ loss of motivation to exercise ○ loss of exercise form ○ plateau or decrease in performance ○ development of over-use injuries
Principles of training	<p>[all categories]</p> <ul style="list-style-type: none"> • training thresholds • progressive overload • specificity • individuality • reversibility • recovery
Program variables	<p>[all categories]</p> <ul style="list-style-type: none"> • general <ul style="list-style-type: none"> ○ training frequency ○ training session duration ○ exercise order • resistance training <ul style="list-style-type: none"> ○ repetitions ○ sets ○ resistance ○ intensity ○ overload techniques <ul style="list-style-type: none"> ▪ forced reps ▪ negative reps ▪ drop sets ▪ pre-exhaust ▪ partial reps ▪ supersets • cardio-respiratory training <ul style="list-style-type: none"> ○ continuous (long slow duration) ○ interval ○ fartlek • flexibility training <ul style="list-style-type: none"> ○ duration ○ type of stretch <ul style="list-style-type: none"> ▪ static ▪ dynamic ▪ PNF
Re-evaluation criteria	<p>[all categories]</p> <ul style="list-style-type: none"> • signs and symptoms of overtraining • loss of motivation • lifestyle factors • illness or injury • plateau in performance • time elapsed since last evaluation • client satisfaction

	<ul style="list-style-type: none"> • change in fitness goals
Resistance exercises	<p>[all categories]</p> <ul style="list-style-type: none"> • may be performed using: <ul style="list-style-type: none"> ○ bodyweight ○ free weights ○ machines ○ elastic resistance or other means of resistance ○ other miscellaneous equipment • bench press/chest press • flyes • cable crossover • shoulder press • lateral raise • front arm raise • shrug • upright row • shoulder internal/external rotation (rotator cuff) • biceps curl • preacher curl • hammer curl • overhead triceps press • lying triceps extensions/press • triceps kickback • bent over row • bent over one-arm row • supported row • t-bar row • pullover • wrist curl • bent over lateral raises/reverse flye • squat • lunge • deadlift – bent leg • deadlift – stiff leg • calf raise • hip abduction • hip adduction • leg curl • leg extension • leg press • hack squat • hip extension (glut-ham raise) • back extension • abdominal crunch • oblique abdominal crunch • reverse abdominal crunch • abdominal isometric hold • basic core stability and proprioceptive exercises • push-up • pull-up/chin-up • dip
Resistance exercise equipment	<p>[all categories]</p>

	<ul style="list-style-type: none"> • machines: <ul style="list-style-type: none"> ○ bench press ○ pec deck ○ seated row ○ lat pull-down ○ shoulder press ○ leg press ○ leg extension ○ leg curl ○ calf raise ○ total hip ○ smith machine ○ squat rack ○ assisted dip/pull-up ○ glute-ham-back extension ○ cable machines with low/high pulleys • free weights: <ul style="list-style-type: none"> ○ dumbbells ○ barbells ○ plates ○ collars • benches & racks: <ul style="list-style-type: none"> ○ flat bench ○ incline bench ○ decline bench ○ squat rack ○ shoulder press rack ○ decline abdominal bench ○ preacher bench • miscellaneous equipment: <ul style="list-style-type: none"> ○ exercise balls ○ rubber tubing ○ various bars and leg straps for machines ○ proprioception/stability training devices • lifting straps, lifting belts and other aids or safety devices
Safety considerations	<p>[all categories]</p> <ul style="list-style-type: none"> • use of collars • loading of spine and other joints • levers • biomechanics • speed • momentum • degree of difficulty • breathing technique • range of movement • correct use of equipment • signs and symptoms of discomfort • safety features of machines and racks
Training Programs	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance <ul style="list-style-type: none"> ○ specification of: <ul style="list-style-type: none"> ▪ exercises ▪ equipment

	<ul style="list-style-type: none">▪ repetitions▪ sets▪ resistance▪ intensity▪ frequency▪ variations• cardiorespiratory<ul style="list-style-type: none">○ specification of:<ul style="list-style-type: none">▪ exercises▪ equipment▪ intensity▪ duration▪ frequency▪ heart rate training zones• flexibility<ul style="list-style-type: none">○ specification of:<ul style="list-style-type: none">▪ target muscles▪ range of motion▪ duration▪ type of stretch<ul style="list-style-type: none">• static• dynamic• PNF
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to: <ul style="list-style-type: none"> ○ Determine the specific fitness requirements of clients. ○ Instruct specific resistance training programs to clients. ○ Modify program and exercise variables to meet the specific fitness requirements of clients. ○ Supervise fitness training sessions
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Understanding of the application of assessment results to exercise programs • Required skills <ul style="list-style-type: none"> ○ Basic experience in writing a range of exercise programs for improving or maintaining the fitness of clients. ○ Experience in moving in a controlled and efficient manner while undertaking complex and/or compound exercises using specialised gym equipment to enable exercises to be demonstrated to clients safely and effectively ○ Basic experience in effective fitness instruction of a range of fitness clients with the aim of increasing or maintaining specific aspects of fitness ○ An understanding of the needs of individuals and groups undertaking advanced or complex exercise programs to enable safe and appropriate exercise instruction to be delivered
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the

	<p>workplace</p> <ul style="list-style-type: none"> ○ a fitness centre environment ○ registered supervisors ○ cardiovascular equipment ○ fitness testing equipment ○ free weight equipment ○ pin loaded equipment ○ circuit equipment ○ other miscellaneous exercise equipment ○ mirrors ○ first aid kit ○ samples of quality programming cards relevant to the specific program format <ul style="list-style-type: none"> ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	3	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

MASSAGE THERAPY

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HLTCOM5A	ADMINISTER A PRACTICE
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to provide administration for a clinical health practice according to the size and scale of the business.

ELEMENT	PERFORMANCE CRITERIA
1 Establish and maintain administrative systems	1.1 Routine tasks are identified and performed 1.2 Policies and procedures are followed 1.3 Resources are used appropriately 1.4 Administrative systems are established
2 Conduct financial administration	2.1 Financial procedures of the business are administered 2.2 Systems for financial documentation are maintained 2.3 Information for financial reports is recorded
3 Follow practice management strategies	3.1 Operational strategies are followed 3.2 Marketing strategies are followed 3.3 Meetings are attended when necessary 3.4 Stock levels and supplies are monitored 3.5 Statutory and regulatory requirements are complied with
4 Administer personnel management strategies	4.1 Human resource strategies are followed 4.2 Payroll and employee records are administered if necessary 4.3 Diversity guidelines are followed

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Routine tasks	may include <ul style="list-style-type: none"> • maintaining information systems • providing practice communications • performing financial activities • maintaining stock and resources
Policies and procedures	may include <ul style="list-style-type: none"> • treatment protocols • human resources policies • communication procedures • emergency procedures • stock control procedures • financial procedures • documentation procedures • security procedures • policy and procedure guidelines developed and/or provided by industry associations
Resources	may include <ul style="list-style-type: none"> • physical environment • practice/medical equipment • administrative equipment and materials • communications equipment • marketing materials
Financial documentation	may include <ul style="list-style-type: none"> • banking documentation • credit transactions • creditors and debtors systems • costing procedures • draft financial forecasts/budgets • stock records • petty cash • asset registers • payroll records
Financial reports	may include <ul style="list-style-type: none"> • cash flow forecasts • budget reports

	<ul style="list-style-type: none"> • reconciliations • taxation documentation • profit and loss statements • detailed ledger accounts
Operational strategies	<p>may include</p> <ul style="list-style-type: none"> • management and administrative systems and procedures • office systems • marketing approaches • staffing procedures • daily operation procedures • environmental strategies
Marketing strategies	<p>may include</p> <ul style="list-style-type: none"> • promotional and public relations activities • development of marketing/promotional materials • publicity and media relations • advertising • pricing strategies
Stock	<p>may include</p> <ul style="list-style-type: none"> • materials and equipment required to prepare and dispense medicines • materials and equipment used in the treatment of clients/patients • medicinal preparations provided to clients/patients • stationery and administrative supplies • information materials provided to clients/patients • other promotional materials
Statutory and regulatory requirements	<p>may include local, state and national legislation and regulations affecting business operations such as</p> <ul style="list-style-type: none"> • business registration • planning and other permissions • fire, occupational and environmental legislation • taxation, copyright and trademark regulations • codes of practice standards • anti-competition/monopoly and consumer-based legislation • Anti-discrimination Act • Equal Employment Opportunities Act • Therapeutic Goods Act
Human resource strategies	<p>may include</p> <ul style="list-style-type: none"> • recruitment, policies and procedures • training and assessment • performance management strategies • personnel documentation • workplace communications • planning and facilitation of meetings • implementation of statutory requirements

	<ul style="list-style-type: none"> • workplace health and safety • time and stress management • support networks
Employee records	<p>may include</p> <ul style="list-style-type: none"> • job/position descriptions • employee records (including tax file number, remuneration, leave and training records, records of disciplinary action, time and wages sheets) • records of taxation and superannuation payments made • occupational health and safety records • relevant awards and/or industrial agreements
Manage diversity involves	<p>Valuing and utilising the different skills, backgrounds and capabilities of self and staff and developing strategies to encourage and enable their effective integration into the business. Diversity may include for example</p> <ul style="list-style-type: none"> • gender • culture • language • network of contact • work preference • competencies • education • work history
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of providing administration for a clinical health practice according to the size and scale of the business • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ demonstrate knowledge of clinic practices and procedures ○ establish and maintain administrative systems ○ accurately record financial transactions ○ maintain payroll records ○ securely manage monies ○ demonstrate knowledge of stock control methods and procedures ○ follow clinic practice guidelines ○ give and receive communication messages
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ At Certificate IV level <ul style="list-style-type: none"> ▪ SRSMAS001A Apply appropriate pre-event and post-event techniques ▪ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ▪ HLTIN1A Comply with infection control policies and procedures ▪ HLTREM1A Work within a massage framework ▪ HLTREM6A Provide the massage treatment ▪ HLTREM7A Plan the massage treatment ▪ HLTREM8A Apply massage assessment framework ▪ HLTREM9A Perform massage health assessment ○ At Diploma level <ul style="list-style-type: none"> ▪ HLTIN1A Comply with infection control policies and procedures ▪ HLTREM1A Work within a massage framework ▪ HLTREM2A Provide the remedial massage treatment ▪ HLTREM3A Plan the remedial massage treatment strategy ▪ HLTREM4A Apply remedial massage assessment framework ▪ HLTREM5A Perform remedial massage health assessment ▪ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ▪ SRSMAS004A Apply temperature therapy ▪ SRSMAS005A Apply myofascial tension techniques ▪ SRSMAS006A Apply appropriate stretching techniques ▪ SRSMAS007A Apply trigger point techniques ▪ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ▪ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in

	<p>conjunction with the following unit(s)</p> <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> ● Required knowledge <ul style="list-style-type: none"> ○ Knowledge of forms and administrative systems ○ Knowledge of services available and charges ○ Knowledge of planning and control systems (sales, advertising and promotion, distribution and logistics) ○ Knowledge of financial recording systems ○ Knowledge of legal rights and responsibilities ○ Knowledge of record keeping duties ○ Knowledge of operational factors relating to the business (provision of professional services, products) ○ Knowledge of business systems ● Required skills <ul style="list-style-type: none"> ○ Time management skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic ○ relevant documentation ○ relevant paper-based/video assessment instruments ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ skilled assessors ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may contain both theoretical and practical components and cover a range of aspects of practice management ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any

	<p>evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons</p> <ul style="list-style-type: none">• Methods of assessment may include<ul style="list-style-type: none">○ practical demonstration○ explanations of technique○ oral questioning and discussion
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTCOM6A	MAKE REFERRALS TO OTHER HEALTH CARE PROFESSIONALS WHEN APPROPRIATE
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to arrange referrals to other health care professionals when required.

ELEMENT	PERFORMANCE CRITERIA
1 Formulate a referral plan for client/patient requiring further treatment	1.1 Need for referral to <i>other health care professionals</i> /services is determined 1.2 Need for referral is communicated to the client/patient 1.3 Financial aspects of complementary health care are considered
2 Interact with other health care professionals	2.1 A range of complementary health care professionals and services is identified 2.2 Complementary health care professionals and support services are consulted to determine the most appropriate source for referral 2.3 Relate effectively and knowledgeably with other health care professionals
3 Arrange a referral to an appropriate source for clients/patients with specific needs	3.1 The health care professional and/or service to whom clients are to be referred are contacted 3.2 Transfer of copies of client/patient records to the appropriate referral source is arranged 3.3 The client/patient is included in referral communications and provided with written referrals 3.4 The appropriate health professional/service is briefed on reason for referral 3.5 Queries regarding the referral are answered 3.6 Assistance is provided to other health care professionals/services as required 3.7 Referrals are recorded in case notes

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Need for referral	may include <ul style="list-style-type: none"> • patient with a counselling need beyond the practitioner's own level of skill • client/patient in need of ongoing support or counselling • client/patient with a personality disorder • disclosure, by a minor, of abuse • suicidal or homicidal client/patient • referral to a General Practitioner for initial or follow up pathology • referral to General Practitioner/health services because of a/or suspicion of notifiable disease • practitioner establishes a supervisory, social or sexual relationship with client/patient • practitioner identifies with client/patient transference or counter-transference
Other health care professionals/services	may include but are not limited to <ul style="list-style-type: none"> • professional counsellors or psychologists • social or health workers • mental health units or hospitals • doctors • psychiatrists • law officers • dieticians • physiotherapists/chiropractors • complementary health therapists
Complementary health care practitioners	may include <ul style="list-style-type: none"> • more experienced homoeopaths with or without a speciality • naturopaths • herbalists • acupuncturists • massage therapists • osteopaths • chiropractors
Support services	may include <ul style="list-style-type: none"> • local child care centre • local welfare centre • local church groups • local other than Christian groups • life line • domestic violence telephone service

	<ul style="list-style-type: none"> • others
Referral	<p>may be by</p> <ul style="list-style-type: none"> • written communication • verbal communication
Client records	<p>may include</p> <ul style="list-style-type: none"> • a copy of the whole care record • a synopsis of the case record • homoeopathic specific information via eg, Standard Case Record/ing form/s, symptom descriptor forms, treatment evaluation and progress sheets
Briefing	<p>may include</p> <ul style="list-style-type: none"> • verbal communication eg, telephone or face to face • electronic communications eg email • conventional written letter
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of arranging referrals to other health care professionals when required • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ communicate effectively ○ demonstrate appreciation of the relative merits of the treatment options available in regard to cost, benefit and efficiency of such procedures ○ demonstrate knowledge of the profession's special characteristics, historical mileposts, aspirations and strengths ○ demonstrate knowledge of health care professionals/services locally, nationally, and internationally and of their relationship to other professions and organisations ○ consult colleagues for special expertise ○ write referrals, certificates and correspondence ○ formulate referral plans and arrange referrals
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the role of other health professionals and support services ○ Knowledge of the paradigms, including fee environments, within which other professions function ○ Knowledge of and ability to apply referral procedures ○ Knowledge of what constitutes a medical emergency or referral • Required skills <ul style="list-style-type: none"> ○ Ability to write third party and medico legal reports, certificates and correspondence
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ contact directories • Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the

<i>Standards for Registered Training Organisations</i>	
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit can be assessed both on and off the job. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons • Methods of assessment may include <ul style="list-style-type: none"> ○ simulations ○ oral questioning and discussion ○ case studies and scenarios ○ conventional letters or electronic communication

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTCOM8A	USE SPECIFIC/MEDICAL TERMINOLOGY IN ORDER TO COMMUNICATE WITH CLIENT/PATIENTS, FELLOW WORKERS AND HEALTH CARE PROFESSIONALS
MAS	Massage therapy

DESCRIPTION: This unit covers the skills required to understand and respond to instructions, carry out routine tasks and communicate with a range of internal/external clients in a health care practice, using appropriate practice-specific/medical terminology.

ELEMENT	PERFORMANCE CRITERIA
1 Respond appropriately to instruction which contain practice-specific/medical terminology	1.1 Written and oral instructions using practice-specific/medical terminology are received, understood and documented 1.2 Checklists are used where appropriate 1.3 Abbreviations for practice-specific/medical terms and associated processes are understood 1.4 Clinic guidelines are understood and adhered to 1.5 Clarification is sought when necessary
2 Carry out routine tasks	2.1 Practice-specific/medical terminology is used correctly in the completion of routine tasks 2.2 Assistance is sought from designated person/s as required
3 Use appropriate practice-specific/medical terminology in oral and written communication with client/patients, fellow workers and health care professionals	3.1 Appropriate practice-specific/medical terminology is used as directed in oral communication with client/patients, fellow workers and health care professionals 3.2 Appropriate practice-specific/medical terminology is used as directed in written communication with client/patients, fellow workers and health care professionals 3.3 Written communication is presented to a designated person for verification if required 3.4 Practice-specific/medical terminology is spelt and pronounced correctly 3.5 Advice is sought from designated person with regard to practice-specific/medical terms and accompanying processes

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Practice-specific/medical terminology	may include standard terms and abbreviations relating to <ul style="list-style-type: none"> • practice-specific language and nomenclature • case taking • prescriptions • labelling • medical conditions and disease processes • medical investigations and procedures • medical equipment and instruments • departments/sections in a hospital • other health care specialties • health insurance • work cover • referrals
Written and oral instructions	may include <ul style="list-style-type: none"> • notices • prescriptions • instructions for post-treatment care • client/patient notes • routine reports • test results • referrals • occupational health and safety signs and instructions • diary entries • telephone calls • oral instructions
Routine tasks	may include <ul style="list-style-type: none"> • entering client/patient details into computer system • filing client/patient notes • maintaining client/patient information • receiving and making telephone calls • word processing • processing correspondence • maintaining information to assist client/patients and practitioner • ordering stock, eg, stationery and medical supplies • recording information • preparing reports • answering client/patient enquiries • producing a range of documents, as required

Oral communication	<p>may include</p> <ul style="list-style-type: none"> • verbal instructions • confirming appointments • answering routine telephone enquiries • communicating with a range of health care professionals on client/patient related matters
Written communication	<p>may include</p> <ul style="list-style-type: none"> • memoranda • letters • minutes • forms • correspondence to a range of health care professionals on client/patient related matters • client/patient history questionnaires • client/patient records • appointment diaries, cards • telephone messages • client/patient histories • case reports
Clinic guidelines	<p>may include</p> <ul style="list-style-type: none"> • telephone protocol • correspondence format • office practice format • occupational health and safety • emergency procedures • security, confidentiality and privacy procedures • recording information • cleanliness and hygiene • accessing and updating files • information specific to the practice • comply with local, state and federal legislation • instructions
Clarification	<p>may be sought from</p> <ul style="list-style-type: none"> • medical dictionary • drug and prescription information sources/databases • practice specific texts • clinic guidelines • relevant handbook • designated person/s

The sport and recreation industry	<ul style="list-style-type: none">• covers industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to understand and respond to instructions, carry out routine tasks and communicate with a range of internal/external clients in a health care practice, using appropriate practice-specific/medical terminology • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ use and understand abbreviations for practice-specific/medical terms and associated processes ○ correctly spell and pronounce practice-specific/medical terminology ○ communicate in a professional manner using appropriate communication strategies ○ maintain confidentiality, security and privacy of information ○ carry out activities and actions within local, state and federal legislation ○ follow instructions ○ demonstrate that activities are well organised, executed in a timely fashion and any documents prepared or obtained are filed appropriately ○ self-check all written communication for spelling errors, grammatical mistakes and missing words and present to designated person for approval if required
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of clinic guidelines ○ Knowledge of practice-specific/medical terminology ○ Knowledge of relevant local/state/federal legislation ○ Knowledge of own and others' responsibilities ○ Knowledge of appropriate forms and recording requirements ○ Knowledge of appropriate external agencies ○ Knowledge of appropriate information sources • Required skills <ul style="list-style-type: none"> ○ Literacy skills - follow procedures, policies, signs and instructions, use correct spelling, grammar and punctuation ○ Ability to follow routine oral and written sequenced instructions ○ Language skills - relay information, use appropriate and correct practice-specific/medical terminology, use correct pronunciation and sentence structures, question to clarify terms and context ○ Interpersonal skills - interact with clients/patients and others in a appropriate manner

	<ul style="list-style-type: none"> ○ Research skills - increase own knowledge of practice-specific/medical terminology
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ relevant paper based/video assessment instruments ○ appropriate assessment environment ○ appropriate legislation and regulations relevant to codes of conduct ○ clinic guidelines and reference materials such as a medical dictionary, procedural manuals and checklists ○ appropriate technology such as computers with relevant software, tape recorder ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ skilled assessors ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit is most appropriately assessed in a classroom environment. Assessment may contain theoretical emphasis and examples covering a range of clinical situations ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons ● Assessment may include a combination of <ul style="list-style-type: none"> ○ short tests and essays ○ oral questioning and discussion

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTIN1A	COMPLY WITH INFECTION CONTROL POLICIES AND PROCEDURES
MAS	Massage therapy

DESCRIPTION: This unit describes the skills and knowledge required of workers to understand and comply with infection control guidelines. Policies and procedures may be organisational, industry-based and/or legislated. The unit applies to a wide range of workers in health industry settings reflecting the importance of controlling infection risks and self-protection.

ELEMENT	PERFORMANCE CRITERIA
1 Collect, handle, store and manage clinical and other waste in accordance with organisational guidelines and waste management plans	1.1 Appropriate personal protective equipment is worn and/or used, according to safety guidelines and procedures when handling waste 1.2 Waste is segregated, contained, stored and transported according to organisational policy and procedures 1.3 Waste is disposed of safely according to established organisational and legislative requirements
2 Clean and disinfect equipment and surfaces	2.1 Appropriate cleaning products, disinfectants and equipment are selected, prepared and used to clean and disinfect equipment and surfaces in accordance with infection control guidelines and scheduled cleaning routines 2.2 Standard precautions are practised, including the use of personal protective clothing and equipment 2.3 Organisational infection control policy and procedures are followed 2.4 Equipment is correctly stored in accordance with organisational procedures
3 Maintain hygiene	3.1 Standard and additional infection control procedures are used when required 3.2 Cleanliness of work clothes is maintained 3.3 Personal hygiene is maintained 3.4 Open-skin areas on self are covered with an occlusive dressing 3.5 Hand washing procedures are correctly followed according to the organisation's infection control policy and procedures 3.6 Appropriate protective clothing is checked prior to use, and worn correctly according to the organisation's infection control policy and procedures 3.7 Where appropriate one way work flows from clean to dirty zones is adhered to 3.8 Immunisation is undertaken in accordance with organisational policy
4 Identify and responds to infection risks	4.1 Awareness of common infection risks in own workplace is maintained 4.2 Infection risks are identified and appropriate response implemented within own role and responsibility to maintain a clean environment 4.3 Situations that pose an infection risk are responded to appropriately in accordance with organisational policy and procedures 4.4 Appropriate signs are placed as and where appropriate 4.5 Personal protective clothing is used in accordance with standard precautions 4.6 Risk control and risk containment procedures are followed for specific risks when required 4.7 Spillages are removed in accordance with organisational policy and procedure

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Wastes	<p>may include</p> <ul style="list-style-type: none"> • clinical and related wastes • cytotoxic waste • sharps • radioactive waste • general waste • food wastes • human or animal tissue • hazardous substances
Disposal requirements	<p>may be</p> <ul style="list-style-type: none"> • determined by government, including local government requirements • determined by organisational policy • landfill • flushing into sewerage system • incineration • licensed microwave disinfection
Waste	<p>may be transported or contained in</p> <ul style="list-style-type: none"> • lockable bins • special containers • trolley • bags • suitable vehicle
Cleaning equipment	<p>may include</p> <ul style="list-style-type: none"> • buckets • mops and brushes • mechanical cleaning equipment
Protective clothing	<p>may include</p> <ul style="list-style-type: none"> • eye and face protection • gloves • impermeable gowns • masks • hair protection or covering • overshoes or safety footwear • aprons

Infection risks	<p>may include</p> <ul style="list-style-type: none"> • sharps • waste • human waste and human tissue • body fluids • personal contact with infectious patients • stagnant water • stock including food which has passed 'used-by' dates • animals, insects and vermin • incorrect concentration of disinfectants and chemicals
Responses to infection risks	<p>may include</p> <ul style="list-style-type: none"> • incident reporting • cleaning • removal of waste or spillage • following standard and additional precautions • containment or elimination of the risk • using personal protective clothing and/or equipment • following specified organisational procedures • seeking advice from or reporting to an appropriate person
Infection control policy and practice resources	<p>may include</p> <ul style="list-style-type: none"> • organisation's infection control policy and procedure manual • standard and additional precautions • codes of practice • relevant Australian standards • national health and medical research council guidelines • local government ordinances • material safety data sheets for chemical use • food safety plan
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to understand and comply with infection control guidelines • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ comply with organisation's infection control policy as it relates to specific work roles ○ demonstrate safe waste handling and management procedures ○ demonstrate the application of personal hygiene and environmental practices
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ At Certificate IV level <ul style="list-style-type: none"> ▪ SRSMAS001A Apply appropriate pre-event and post-event techniques ▪ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ▪ HLTCOM5A Administer a practice ▪ HLTREM1A Work within a massage framework ▪ HLTREM6A Provide the massage treatment ▪ HLTREM7A Plan the massage treatment ▪ HLTREM8A Apply massage assessment framework ▪ HLTREM9A Perform massage health assessment ○ At Diploma level <ul style="list-style-type: none"> ▪ HLTCOM5A Administer a practice ▪ HLTREM1A Work within a massage framework ▪ HLTREM2A Provide the remedial massage treatment ▪ HLTREM3A Plan the remedial massage treatment strategy ▪ HLTREM4A Apply remedial massage assessment framework ▪ HLTREM5A Perform remedial massage health assessment ▪ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ▪ SRSMAS004A Apply temperature therapy ▪ SRSMAS005A Apply myofascial tension techniques ▪ SRSMAS006A Apply appropriate stretching techniques ▪ SRSMAS007A Apply trigger point techniques ▪ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ▪ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care

	professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Demonstrated knowledge of organisation's infection control policy as it relates to specific work role ○ Demonstrated knowledge of how infection is spread ○ Understanding of infection risks in a health environment, and specifically in own workplace ○ Organisation's waste management policy and procedures ○ Understanding applicable Occupational Health and Safety policy and practice in relation to infection risks, hygiene, waste management and cleaning ○ Awareness of relevant material safety data sheets • Required skills <ul style="list-style-type: none"> ○ Applying standard and additional precautions ○ Using technology to work safely and competently ○ Following correct hygiene procedures ○ Selecting and using equipment and disinfectants effectively ○ Following correct hand washing techniques ○ Correctly using personal protective clothing and equipment ○ Following procedures appropriate to the cleaning area and purpose ○ Minimising disruption to the work environment ○ Minimising infection risks and hazards for self and others ○ Communicating constructively to achieve planned outcomes in relation to infection risks, waste management and hygiene issues ○ Using appropriate chemicals for cleaning and disinfection
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ relevant policies and procedures manuals, and infection control policy and practice resource documents ○ waste management policies ○ incident reporting procedures ○ information on the common infection risks in the workplace and procedures for responding and controlling such infection risks ○ instructions for the use of personal and protective clothing and equipment ○ specific instructions for staff concerning hygiene practices ○ relevant procedures for use of cleaning chemicals and cleaning equipment ○ food safety plan • Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Competence in this unit must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to the work environment

Context for assessment	<ul style="list-style-type: none">• This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace• This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may be conducted on more than one occasion to cover a variety of circumstances• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Assessment may include a combination of<ul style="list-style-type: none">○ observation of work performance○ authenticated portfolio/Curriculum Vitae○ supporting statement of supervisor(s)○ authenticated evidence of relevant work experience and/or formal/informal learning○ case studies and scenarios as a basis for discussion of issues and strategies to achieve required infection control outcomes in specific work environments and communities○ interview and questioning○ observed completion of an appropriate workshop, orientation course or similar learning program
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM1A	WORK WITHIN A MASSAGE FRAMEWORK
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to work effectively within a massage framework.

ELEMENT	PERFORMANCE CRITERIA
1 Demonstrate commitment to the central philosophies of massage practice	1.1 Definition of massage and the massage system of treatment is provided 1.2 Historical development of massage is provided 1.3 Massage principles are identified and explained 1.4 Practitioner draws on massage philosophy to interpret health issues
2 Identify and describe the principles and practices of massage	2.1 Major methods of treatment used in massage are identified and described 2.2 Other complementary therapies used in massage are identified and described 2.3 Massage assessment techniques are identified and described
3 Develop knowledge of complementary therapies	3.1 Information on other complementary therapies is provided 3.2 Similarities and differences between physiotherapy, osteopathy, chiropractic therapy and massage therapy are explained 3.3 The characteristics between the allopathic and naturopathic approaches to treatment are described 3.4 Relationship between therapies is identified
4 Represent massage framework to the community	4.1 Practices and principles of massage can be explained in an easily understood way in a one-to-one group setting 4.2 Enquiries are clarified and appropriate information is provided 4.3 Requests for client/patient to bring relevant data to the consultation are made 4.4 Alternative sources of information/advice are discussed with the client/patient
5 Work with clinic and regulation guidelines	5.1 Clinic guidelines are accessed and followed 5.2 Legal and regulatory guidelines are accessed and followed 5.3 Relevant documentation is undertaken

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Massage principles	include <ul style="list-style-type: none"> • relevant code of ethics or code of conduct documents/policies, regulations and guidelines national, state/territory or local massage therapy organisations and/or associations • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation • individual responsibility to others regarding the proximity of the relationship and reasonable standard of care • delivering the highest possible professional care to all client/patients with consideration for the medical, ethical, social and religious needs of the client/patient • principles of client/patient confidentiality • respect of boundary issues such as <ul style="list-style-type: none"> ○ compliance with industry code of ethics and practice in relation to <ul style="list-style-type: none"> ▪ informed consent ▪ duty of care ▪ draping ▪ hygiene ▪ the scope of client/therapist relationships ▪ advertising ▪ maintenance of equipment ▪ social/cultural morals ▪ equal treatment of all clients/patients ▪ psycho-emotional well being of clients/patient ▪ referral of clients/patients who want treatment outside the scope of the available services ▪ dealing appropriately with difficult clients/patients
Major methods of treatment	include <ul style="list-style-type: none"> • petrissage • effleurage including cross over stroke, longitudinal stroking, gliding techniques • passive joint movement techniques • passive soft tissue movement • kneading • friction techniques • vibration • compressive techniques including digital Ischemic pressure • percussion techniques • temperature therapy

	<ul style="list-style-type: none"> • deep tissue massage techniques • myofascial release • manual lymphatic drainage • proprioceptive Neuromuscular Facilitation • trigger point release techniques • stretching techniques • mobilising techniques
Other techniques in which the practitioner is trained	<p>such as</p> <ul style="list-style-type: none"> • Shiatsu • Tuina • Acupressure/Traditional Chinese Medicine (TCM) • Reflexology • Polarity therapy • Reiki • Cranio sacral • Touch for health • Magnetic therapy • Chi nei tsang • Alexander technique • Trager approach • Restorative techniques (disability) • Sports therapies • Kinesiology • Hydrotherapy • Integration therapy • Transcutaneous Electrical Nerve Stimulation (TENS) • Aromatherapy
Other complementary therapies	<p>may include</p> <ul style="list-style-type: none"> • therapies in which the practitioner is trained or informed
Massage assessment techniques	<p>may include</p> <ul style="list-style-type: none"> • observation • discussion • temperature taking through tactile methods • pulse taking when required for massage techniques • palpation • percussion • range of motion tests • Orthopaedic tests • assessment of the neural system • observation of variations of posture • any other methods in which the practitioner has been trained to a competent standard • procedure which is conducted according to legislative and regulatory requirements
Information on other complementary therapies	<p>may include</p> <ul style="list-style-type: none"> • historical development

	<ul style="list-style-type: none"> • current availability • tools and techniques • interactions between different therapies • when therapies may be used • underpinning philosophy
Definition of allopathic and naturopathic approaches	<p>is</p> <ul style="list-style-type: none"> • Allopathic - the western medical model in which a disease or an abnormal condition is treated by creating an environment that is antagonistic to it, ie, a system that emphasises treatment of diseases • Naturopathic - a system of health care that emphasises health maintenance, disease prevention, patient education and patient responsibility
Relationship between therapies	<p>may include</p> <ul style="list-style-type: none"> • contra-indications to treatment • effects of one treatment over or with another • treatment according to stage of condition
Enquiries	<p>may require explanation of</p> <ul style="list-style-type: none"> • duration of treatment • expected treatment outcomes • possible approach to treatment • estimated cost of treatment • availability of health fund rebates • work cover eligibility • professional status of practitioner • availability of home visits • after hours service • provision for hospital visits
Appropriate information	<p>may include</p> <ul style="list-style-type: none"> • confirmation of appointment date and time • clinic location and directions • cost of initial consultation • payment options
Clinic guidelines	<p>may include</p> <ul style="list-style-type: none"> • procedures and guidelines • purpose of mission statement • code of ethics or practice • level of competency and degree of supervision • partnership/group decisions and agreed practice
Legal and regulatory guidelines	<p>may include</p> <ul style="list-style-type: none"> • Occupational Health and Safety guidelines • anti-discrimination legislation

	<ul style="list-style-type: none"> • Privacy Act • Infection control
Relevant documentation	<p>may include</p> <ul style="list-style-type: none"> • nature of enquiry • client/patient contact details • recording of incidents • appointment details
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of working effectively within a massage framework • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ work or model work which demonstrates an understanding of underpinning values and philosophies in the massage framework ○ demonstrate knowledge of the philosophies, principles and tools of massage practice ○ demonstrate knowledge of a range of alternative and complimentary therapies ○ correctly identify client/patient information needs ○ provide client/patient with required information ○ appropriately record details of client/patient enquiries according to clinic guidelines ○ explain relevant products and services ○ demonstrate communication skills in a one-to-one and group setting
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ At Certificate IV level <ul style="list-style-type: none"> ▪ SRSMAS001A Apply appropriate pre-event and post-event techniques ▪ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ▪ HLTCOM5A Administer a practice ▪ HLTIN1A Comply with infection control policies and procedures ▪ HLTREM6A Provide the massage treatment ▪ HLTREM7A Plan the massage treatment ▪ HLTREM8A Apply massage assessment framework ▪ HLTREM9A Perform massage health assessment ○ At Diploma level <ul style="list-style-type: none"> ▪ HLTCOM5A Administer a practice ▪ HLTIN1A Comply with infection control policies and procedures ▪ HLTREM2A Provide the remedial massage treatment ▪ HLTREM3A Plan the remedial massage treatment strategy ▪ HLTREM4A Apply remedial massage assessment framework ▪ HLTREM5A Perform remedial massage health assessment ▪ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ▪ SRSMAS004A Apply temperature therapy ▪ SRSMAS005A Apply myofascial tension techniques ▪ SRSMAS006A Apply appropriate stretching techniques ▪ SRSMAS007A Apply trigger point techniques

	<ul style="list-style-type: none"> ▪ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ▪ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of philosophical traditions of western and eastern body therapies ○ Knowledge of the history and development of massage ○ Knowledge of the effects of massage on the body surface ○ Knowledge of sociology of health and health care system ○ Knowledge of ethical issues in body therapies ○ Knowledge of Occupational Health and Safety requirements in the workplace ○ Knowledge of the rationalistic, analytical approach to an understanding of disease ○ Knowledge of the qualitative, quantitative, cultural and traditional lines of evidence used in massage • Required skills <ul style="list-style-type: none"> ○ Ability to communicate in group one-on-one settings
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ relevant texts or medical manuals ○ relevant paper based/video assessment instruments ○ appropriate assessment environment • Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ skilled assessors ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit can be assessed in the workplace, classroom or in a simulated workplace under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering

	<p>a range of clinical situations</p> <ul style="list-style-type: none">• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Methods of assessment may include<ul style="list-style-type: none">○ short tests and essays○ oral questioning and discussion
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM2A	PROVIDE THE REMEDIAL MASSAGE TREATMENT
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to administer client/patient remedial massage treatment according to the philosophy and practices of a remedial massage framework.

ELEMENT	PERFORMANCE CRITERIA
1 Manage treatment	1.1 Factors which may interfere with the effectiveness of the treatment are explained 1.2 Mode of administration and management of the treatment to the client/patient is explained 1.3 Client/patient is requested to monitor reactions and contact practitioner as required 1.4 Consent for treatment is ensured 1.5 Client/patient is draped to expose only the part of the body being worked on 1.6 Massage is provided according to the treatment plan 1.7 Reactions to treatment are recognised and promptly responded to if necessary 1.8 Time, location and content of future sessions are clearly explained to the client/patient 1.9 Recommendations are fully documented
2 Apply remedial massage techniques	2.1 Massage techniques are applied 2.2 Remedial massage techniques are applied to achieve specific therapeutic outcomes
3 Advise and resource the client/patient	3.1 The client/patient is educated in relevant and practical techniques for promotion and maintenance of optimum health 3.2 Client/patient queries are answered with clarity, using the appropriate language 3.3 Honesty and integrity are used when explaining treatment plans and recommendations to the client/patient 3.4 Appropriate interpersonal skills are used when explaining treatment plans and recommendations to the client/patient 3.5 Client/patient independence and responsibility in treatment are promoted wherever possible
4 Review treatment	4.1 Progress is evaluated with the client/patient 4.2 Effects of previous treatment are identified and recorded 4.3 Previous treatment plan is reviewed 4.4 Need for ongoing and/or additional treatment is evaluated 4.5 Changes to the plan are negotiated with the client/patient to ensure optimal outcomes

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors which interfere with the effectiveness of treatment	may include <ul style="list-style-type: none"> • other medical treatment being undertaken • client/patient's physical and psychological readiness and/or wellness • cultural factors • contra-indications to treatment such as <ul style="list-style-type: none"> ○ pain-local; sharp, dull, achy, deep, surface ○ infection or infectious diseases ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ oedema ○ mood alterations eg depression, anxiety ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature - hot/cold • post massage activity • age
Mode of administration	may include <ul style="list-style-type: none"> • exposure of sections of body • draping - rotating of exposure around the body • use of oils and treatments • requirements for feedback and interaction • massage technique • variations in application intensity • requirement for specified positioning of client/patient
Reactions	may include <ul style="list-style-type: none"> • pain and/or discomfort • feedback - verbal, tactile, visual • muscular spasms • allergy to oils or treatments used • temperature discomfort • joint sounds (spontaneous cavitation) • relaxation • emotional release
Responses to reactions	may include <ul style="list-style-type: none"> • adjusting treatment accordingly • seeking appropriate expertise or referral

	<ul style="list-style-type: none"> • discussing reaction with the client/patient • adhering to clinic guidelines for response to accidents and emergencies • using first aid procedures according to St Johns, Australian Red Cross or other appropriate first aid training • maintaining a senior first aid certificate which is renewed at least every three years • accessing local, emergency services
Consent for treatment	<p>refers to</p> <ul style="list-style-type: none"> • informed consent according to the local and national regulations and legal guidelines • in the case of a minor or a ward of the state that an appropriate adult be present during any examination
Massage techniques	<p>to be provided in a variety of positions, ie, standing, seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage; these include</p> <ul style="list-style-type: none"> • passive joint movement techniques <ul style="list-style-type: none"> ○ joints are moved through their range of movement, ie, to the point of mild tissue resistance • passive soft tissue movement <ul style="list-style-type: none"> ○ technique is applied with palmer surfaces of the hand, heel of hand and/or fingers ○ jostling <ul style="list-style-type: none"> ▪ shaking of the muscle from origin to insertion • gliding techniques <ul style="list-style-type: none"> ○ effleurage <ul style="list-style-type: none"> ▪ broad superficial strokes using the entire palm surface of the hands to cover large surface areas of the body ○ longitudinal stroking <ul style="list-style-type: none"> ▪ deep gliding movement is applied in the direction of the muscle fibres through focal pressure using any of the following; fingers, palm, heel of hands, forearm and/or knuckles ○ transverse gliding ○ cross over stroke <ul style="list-style-type: none"> ▪ pulling and pushing of the tissue using the hands in a criss-cross manner • kneading/petrissage <ul style="list-style-type: none"> ○ technique is applied with palm surface of the hand, heel of hand and/or fingers ○ soft tissue is mobilised with rhythmical circular rolling, squeezing or pulling movements • friction techniques <ul style="list-style-type: none"> ○ superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions ○ deep repetitive movements of short amplitude are applied usually with thumbs fingers and knuckles ○ friction techniques are believed to be beneficial in releasing adherent/scar tissue • compressive techniques <ul style="list-style-type: none"> ○ digital pressure ○ compression: successive and rapid pressure, ie a series of short duration compressions, is applied to soft tissue between two structures, ie, underlying bone structures and therapist's hand, or

	<ul style="list-style-type: none"> ○ hand to hand <ul style="list-style-type: none"> ○ percussion: cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands ● temperature therapy <ul style="list-style-type: none"> ○ conduction, eg, heat packs and immersion baths ○ radiation, eg, ray lamps ○ friction ○ topical applications ● deep tissue massage techniques ● myofascial release - techniques conducted on superficial and/or deep tissue to <ul style="list-style-type: none"> ○ lengthen tissue ○ reduce adhesions ○ increase range of movement ○ decrease compartment pressure ○ restore elasticity ● manual lymphatic drainage ● trigger point release techniques - apply digital ischemic pressure and/or apply stretching after treatment. It incorporates <ul style="list-style-type: none"> ○ ischemic pressure ○ dynamic stretching ○ ballistic stretching ○ proprioceptive neuromuscular facilitation stretching - contract-relax and hold-relax
Advise and resource the client/patient	<p>refers to</p> <ul style="list-style-type: none"> ● providing relevant literature or information materials ● referring client/patient to other information sources ● providing advice regarding self-care ● advising client/patient of suggested resources ● providing of details which help to fully inform patient/client of relevant information ● providing referrals to other health professionals ● availability of products required or suggested for treatment ● postural correction advice
Practical techniques that promote and maintain optimal health	<p>may include</p> <ul style="list-style-type: none"> ● postural improvement strategies eg ideal posture for activities ● discussion of causes of poor posture ● simple follow-up activities and/or strategies to work on between sessions ● activities and/or tasks to avoid ● self-massage techniques
The sport and recreation industry	<ul style="list-style-type: none"> ● covers industry sectors of community recreation, fitness, outdoor recreation and sport ● significant roles played by activity organisations, industry peak bodies, professional organisations ● large volunteer base ● high turnover of volunteers ● high levels of part time and casual employment ● irregular working hours ● relatively few professional positions ● workforce employed mostly in operational positions ● mainly small business or self-employed personnel

	<ul style="list-style-type: none">• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of administering client/patient remedial massage treatment according to the philosophy and practices of a remedial massage framework • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to implement treatment plans to achieve optimal health, rehabilitation, or to improve quality of life which involves <ul style="list-style-type: none"> ○ treatment of a range of conditions/diseases states ○ demonstration of the application of all of the techniques listed under the Range Statements <ul style="list-style-type: none"> ▪ Petrissage/kneading ▪ Effleurage including cross over stroke, longitudinal stroking, gliding techniques ▪ Passive joint movement techniques ▪ Passive soft tissue movement ▪ Friction techniques ▪ Vibration ▪ Compressive techniques including digital Ischemic pressure ▪ Percussion techniques ▪ Temperature therapy ▪ Deep tissue massage techniques ▪ Myofascial release ▪ Manual lymphatic drainage ▪ Proprioceptive Neuromuscular facilitation ▪ Trigger point release techniques ▪ Stretching techniques ▪ Mobilising techniques ○ treatment according to the individual, the condition and the presence of complicating factors. It must be the safest, most efficacious method that is also cost effective to the patient ○ a case requiring referral to another health care professional ○ preparation of the patient for treatment according to massage principles ○ provision of treatment ○ complete documentation of all recommendations and client/patient responses ○ review of treatment plan ○ all treatment of care delivered is consistent with legislative and regulatory requirements
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment

	<ul style="list-style-type: none"> ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes ● For the purpose of integrating assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> ● Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the history, philosophy and beliefs of massage therapy within a health framework ○ Knowledge of physiology and anatomy according to massage therapy ○ Knowledge of best practice massage therapy principles ○ Knowledge of the structure and function of anatomical systems appropriate to massage therapy and the scope of practice ○ Knowledge of the fundamental principles of biomechanics and functional anatomy ○ Knowledge of the organisation of the body ○ Knowledge of systems and regions of the body ○ Knowledge of the structures and function of the articular system ○ Classification of joints and types and ranges of motion ○ Knowledge of the structure and function of the nervous system ○ Knowledge of the regional anatomy ○ Knowledge of the structure and function of the lymphatic system ○ Knowledge of the structure and function of the respiratory system ○ Knowledge of the reproductive system ○ Knowledge of the endocrine system ○ Knowledge of the structure and function of the immune system ○ Knowledge of the structure and function of the cardiovascular system ○ Knowledge of pathology and symptomatology ○ Knowledge of indications and contra-indications for massage ○ Knowledge of advanced assessment procedures and options allowing complex regional assessments ○ Knowledge of situation and referral patterns of trigger points ○ Knowledge of processes of biological maturation ○ Knowledge of the role of massage in enhancing growth ○ Knowledge of chronic pain syndromes ○ Knowledge of the role of massage in alleviating depression and anxiety ○ Knowledge of the role of massage in enhancing attentiveness ○ Knowledge of the role of massage in immune disorders ○ Knowledge of the role of massage in auto-immune disorders ○ Knowledge of the processes of aging ○ Technical and practical knowledge of treatment ○ Knowledge of ethical, legal and regulatory implications of treatment ● Required skills <ul style="list-style-type: none"> ○ Ability to identify prominent bones/structure and phasic and postural muscles

	<ul style="list-style-type: none"> ○ Ability to palpate prominent bones/structures and phasic and postural muscles ○ Demonstrated ability to comprehend common medical terminology ○ Skills in applying advanced assessment techniques ○ Ability to identify bone landmarks, structures and individual muscles through palpation ○ Ability to gather and interpret information through the tactile senses ○ Ability to manage time throughout consultation and treatment ○ Ability to write referrals, appraisal letters for insurance companies and other documentation ○ Ability to use equipment and resources competently and safely ○ Ability to communicate effectively with client/patient/other health practitioners ○ Ability to transcribe assessment findings and treatment in a patient history using accepted medical terminology
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or medical manuals ○ relevant paper-based/video assessment instructions ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ demonstration model/client/patient ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Assessment must ensure <ul style="list-style-type: none"> ○ effective communication with clients ○ contribution to the control of infection ○ effective work within the health industry ○ compliance with Occupational Health and Safety regulations ○ knowledge of First Aid ● This unit is most appropriately assessed in the workplace or in a simulated workplace under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations and client groups ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes

	<ul style="list-style-type: none">• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Methods of assessment may include<ul style="list-style-type: none">○ practical demonstration○ simulations○ explanation of technique○ oral questioning and discussion○ case studies and scenarios
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM3A	PLAN THE REMEDIAL MASSAGE TREATMENT STRATEGY
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to prepare for remedial massage treatment of a client/patients and negotiate a treatment management plan with them.

ELEMENT	PERFORMANCE CRITERIA
1 Select the remedial massage principles to determine treatment strategy	1.1 Appropriate <i>remedial massage principles</i> of treatment are determined according to assessment of client/patient and within the skills of competence of the practitioner 1.2 <i>Contra-indications to treatment and possible complicating factors</i> are ascertained and treatment strategy used is modified according to massage principles 1.3 Treatment, information and advice provided by other health care professionals is taken into consideration in determining the strategy to be used in treatment 1.4 Treatment strategy appropriate to the client/patient's condition is selected and supported on the basis of established massage practice 1.5 Specific treatment options take into consideration possible client/patient compliance issues 1.6 An appropriate package of <i>massage techniques</i> is selected 1.7 <i>Client/patient constitution</i> is considered in selecting treatment
2 Discuss the treatment strategy with the client/patient	2.1 Sufficient time is allocated to conclude sessions at a pace appropriate to the client/patient 2.2 Treatment strategy is discussed according to the client/patient's needs 2.3 <i>Client/patient compliance</i> is negotiated 2.4 <i>Discrepancies</i> between the practitioner's and the client/patient's perception of the condition are clarified 2.5 Any perceived risks of the client/patient's condition and treatment are explained 2.6 <i>Responsibilities of practitioner and client/patient</i> within the treatment plan are discussed 2.7 Management of selected treatment in relation to any other current therapies is negotiated 2.8 <i>Treatment evaluation strategies</i> are discussed

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Remedial massage principles	refer to <ul style="list-style-type: none"> • principles and practice of the remedial massage therapy framework <ul style="list-style-type: none"> ○ relevant code of ethics or code of conduct documents/policies, regulations and guidelines state/territory or local massage therapy organisations and/or associations ○ relevant national, state/territory or local government regulations and guidelines ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risk in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Contraindications to treatment and possible complicating factors	may include <ul style="list-style-type: none"> • massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contra-indications of conditions • massage is contra-indicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • always refer for diagnosis when symptoms do not have a logical explanation; indications for referral include <ul style="list-style-type: none"> ○ pain - local, sharp, dull, achy, deep, surface ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ edema ○ mood alterations, eg depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature - hot or cold • endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ○ anterior triangle of the neck ○ posterior triangle of the neck ○ axillary area ○ medial epicondyle ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle ○ popliteal fossa

Massage techniques	<p>to be performed in a variety of positions, ie standing, seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage; this may include</p> <ul style="list-style-type: none"> • passive joint movement techniques <ul style="list-style-type: none"> ○ joints are moved through their range of movement, ie to the point of mild tissue resistance • passive soft tissue movement <ul style="list-style-type: none"> ○ technique is applied with palmer surfaces of the hand, heel of hand and/or fingers ○ jostling - shaking of the muscle from origin to insertion • gliding techniques <ul style="list-style-type: none"> ○ effleurage - broad superficial strokes using the entire palmer surface of the hands to cover large surface areas of the body are exhibited ○ longitudinal stroking - deep gliding movement is applied in the direction of the muscle fibres through focal pressure using fingers, palm, heel of hands, forearm and/or knuckles ○ transverse gliding ○ cross over stroke - pulling and pushing of the tissue using the hands in a criss-cross manner is exhibited • kneading <ul style="list-style-type: none"> ○ technique is applied with palm surface of the hand, heel of hand and/or fingers ○ soft tissue is mobilised with rhythmical circular rolling, squeezing or pulling movements • friction techniques <ul style="list-style-type: none"> ○ superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions ○ deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles ○ friction techniques are believed to be beneficial in releasing adherent/scar tissue • compressive techniques <ul style="list-style-type: none"> ○ digital pressure ○ compression - successive and rapid pressure; a series of short duration compressions, is applied to soft tissue between two structures, ie underlying bone structures and therapist's hand, or hand to hand ○ percussion - cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands • petrissage • temperature therapy <ul style="list-style-type: none"> ○ conduction, eg heat packs and immersion baths ○ radiation, eg ray lamps ○ friction ○ topical applications • deep tissue massage techniques • myofascial release • techniques conducted on superficial and/or deep tissues to <ul style="list-style-type: none"> ○ lengthen tissue ○ reduce adhesions ○ increase range of movement ○ decrease compartment pressure ○ restore elasticity • manual lymphatic drainage • trigger point release techniques <ul style="list-style-type: none"> ○ apply digital ischemic pressure and/or apply stretching after treatment; it incorporates Ischemic pressure and stretching
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	<ul style="list-style-type: none"> • stretching techniques <ul style="list-style-type: none"> ○ static stretching ○ dynamic stretching ○ ballistic stretching ○ proprioceptive neuromuscular facilitation stretching <ul style="list-style-type: none"> ▪ contract-relax ▪ hold-relax ▪ muscle energy technique
Client/patient constitution	<p>refers to</p> <ul style="list-style-type: none"> • tolerance of pain • muscle tone • fitness • mental attitude • age, fragility
Client/patient compliance	<p>refers to</p> <ul style="list-style-type: none"> • ability to follow instructions or suggestions • willingness/motivation to follow instructions or suggestion
Discrepancies	<p>may include</p> <ul style="list-style-type: none"> • client/patient is unaware of the immediate danger of their condition • client/patient is over anxious about their condition • client/patient is unaware of maintaining causes acting on their condition • practitioner is unaware of some implications of the client/patient's condition • practitioner and client/patient have different views of what the main problem is
Discussion may include	<ul style="list-style-type: none"> • face to face discussion • electronic communication • telephone discussion
Practitioner responsibilities	<p>may include</p> <ul style="list-style-type: none"> • isolating the sick person • provide advice on public health matters • commitment to the treatment plan • discussing relevant contra-indications or potential complications to treatment • review of the treatment plan
Client/patient responsibilities	<ul style="list-style-type: none"> • following instruction/advice during the post treatment • advising practitioner of any relevant contra-indications or potential complications to treatment • advising practitioner of compliance issues • commitment to the treatment plan
Treatment evaluation strategies	<p>may include</p>

	<ul style="list-style-type: none">• discussion and review of response to treatment• reviewing achievement of treatment goals• monitoring time frame for achieving treatment goals
The sport and recreation industry	<ul style="list-style-type: none">• covers industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to prepare for remedial massage treatment of a client/patients and negotiate a treatment management plan with them • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ identify treatment options and establish treatment regimes ○ prepare treatment plans ○ identify bone landmarks, structures and individual muscles through palpation ○ transcribe assessment findings and treatment in a patient history using accepted medical terminology ○ demonstrate knowledge of symptomology ○ demonstrate knowledge of community resources and support services ○ demonstrate communication and negotiation skills
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Awareness of critical information required for diagnosis and treatment according to massage therapy framework ○ Knowledge of the organisation of the body ○ Knowledge of the systems and regions of the body ○ Knowledge of the structure and function of the nervous system ○ Knowledge of regional anatomy

	<ul style="list-style-type: none"> ○ Knowledge of the structure and function of the lymphatic system ○ Knowledge of the structure and function of the respiratory system ○ Knowledge of the reproductive system ○ Knowledge of the endocrine system ○ Knowledge of the structure and function of the nervous system ○ Knowledge of the structure and function of the immune system ○ Knowledge of the structure and function of the cardiovascular system ○ Knowledge of pathology and symptomology ○ Knowledge of structure and function of anatomical systems ○ Knowledge of the principles of human movement and biomechanics ○ Technical and practical knowledge of treatment ○ Knowledge of indications for massage ○ Knowledge of possible reactions and contra-indications for massage ○ Knowledge of ethical and legal implications of enquiry and treatment ● Required skills <ul style="list-style-type: none"> ○ Ability to identify prominent bones/structures and major muscle groups through palpation ○ Ability to manage time throughout consultation and treatment ○ Demonstrated communication skills to gain and convey required information ○ Demonstrated ability to comprehend common medical terminology ○ Ability to transcribe assessment findings and treatment in a patient history using accepted medical terminology ○ Ability to identify and describe a treatment outcome using accepted medical terminology ○ Ability to use equipment and technology effectively and safely
Resource implication	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or medical manuals ○ anatomical models ○ relevant paper-based/video/electronic assessment instruments ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and

	<p>equipment likely to be encountered in a real workplace</p> <ul style="list-style-type: none">• Assessment must ensure<ul style="list-style-type: none">○ effective communication with clients○ the ability to apply assessment framework• This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Methods of assessment may include<ul style="list-style-type: none">○ practical demonstration○ simulations○ explanations for plan preparations○ oral questioning and discussion○ case studies and scenarios
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM4A	APPLY REMEDIAL MASSAGE ASSESSMENT FRAMEWORK
MAS	Massage therapy

DESCRIPTION: This unit covers the skills required to interpret information gathered in the health assessment and make and review an accurate assessment over the course of remedial massage treatment.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse and interpret information received	1.1 Results of the health assessment are correlated with case history 1.2 Signs and symptoms of condition in the client/patient are recognised and identified as prerequisites or contra-indication for treatment/care 1.3 Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience and theoretical principles applied by the practitioner 1.4 Information is gathered, recorded and organised in a way which can be interpreted readily by other professionals 1.5 Body patterns are analysed and differentiated by assessing signs and symptoms 1.6 Condition is identified according to stage and related implications (e.g. acute/chronic) by applying principles of assessment 1.7 Professional judgement is used to draw sound conclusions and prognosis from data collected 1.8 All assessment signs and symptoms are elicited in a thorough and objective manner to avoid premature conclusions on the treatment plan 1.9 The client/patient's progress is systematically monitored in order to confirm the clinical impression 1.10 History and clinical data is effectively combined to obtain a differential assessment, prognosis and treatment plan
2 Inform the client/patient	2.1 Discuss rationale of the treatment assessment plan/prognosis is discussed with the client/patient 2.2 Respond to client/patient enquiries using language the client/patient understands 2.3 Discuss referral and collaborative options with the client/patient if necessary

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Signs and symptoms of condition	may include <ul style="list-style-type: none"> • physical evidence • behavioural evidence • states of disorder • sensations • onset • durations • location • causation • direction of chief complaint • ameliorating and aggravating factors • symptom qualities (intensity, severity, nature of complaint) • non-verbal signs and symptoms • functional and pathological disturbances
Body patterns	may refer to <ul style="list-style-type: none"> • posture • range of movement • muscle strength • contra-lateral comparison
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to interpret information gathered in the health assessment and make and review an accurate assessment over the course of remedial massage treatment Knowledge of data analysis techniques • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ interpret investigate findings ○ Demonstrate differential diagnostic skills ○ prioritise presenting conditions ○ demonstrate knowledge of referral process ○ demonstrate the establishment of urgency for treatment required ○ conduct orthopaedic tests ○ identify treatment options and establish treatment regimes ○ prepare treatment plans ○ understand and discuss medical reports and other data relevant to the case ○ prescribe treatment according to the time-frame appropriate to the client/patient condition and the treatment selected ○ demonstrate knowledge of legal and ethical considerations in treating clients/patients with massage ○ demonstrate knowledge of lifestyle factors relevant to treatment of specific conditions and diseases ○ demonstrate consideration of the impact of client/patient vitality on selected treatment ○ demonstrate knowledge of possible obstacles and contra-indications to treatment ○ demonstrate knowledge of community resources and support services ○ demonstrate communication and negotiation skills ○ provide advice
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following units <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in

	<p>conjunction with the following unit(s)</p> <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> ● Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the indications, possible responses and contra-indications to treatments ○ Knowledge of advanced assessment procedures and options allowing complex regional assessments ○ Knowledge of orthopaedic tests ○ Knowledge of the clinical indications of treatment relevant to specific circumstances - first aid and injuries ○ Knowledge of the situation and referral patterns of trigger points ○ Knowledge of signs and symptoms of disease and disorder/dysfunction ○ Knowledge of common disease states and functional problems of each bodily system ○ Knowledge of the principles and practice of treating common conditions ○ Knowledge of the organisation of the body ○ Knowledge of the systems and regions of the body ○ Knowledge of skeletal musculature ○ Knowledge of biomechanics ○ Knowledge of the structure and function of the articular system - classification of joints and types and ranges of motion ○ Knowledge of human physiology ○ Knowledge of the structure and function of the nervous system ○ Knowledge of regional anatomy ○ Knowledge of the structure and function of the lymphatic system ○ Knowledge of the structure and function of the respiratory system ○ Knowledge of the reproductive system ○ Knowledge of the endocrine system ○ Knowledge of the structure and function of the nervous system ○ Knowledge of the structure and function of the immune system ○ Knowledge of the structure and function of the cardiovascular system ○ Knowledge of pathology and symptomatology ○ Knowledge of anatomy and physiology of the body systems ○ Knowledge of the processes of biological maturation ○ Knowledge of the role of massage in enhancing growth ○ Knowledge of pain and chronic pain syndromes ○ Knowledge of the process of aging ○ Knowledge of the role of massage in alleviating depression and anxiety ○ Knowledge of the role of massage in enhancing attentiveness ○ Knowledge of the role of massage in immune disorders ○ Knowledge of the role of massage in auto-immune disorders ○ Knowledge of supplementary measures in the management of the condition/system (dietary considerations, exercise) ○ Knowledge of medical reports and diagnostic procedures ○ Knowledge and understanding of methods of preparing treatment and management plans ○ Knowledge of the correct preparations required for specific treatment ○ Knowledge of disease process ○ Knowledge and understanding of types of further investigation available ○ Knowledge of the contribution of the different schools of thought

	<p>and historical theories of clinical practice</p> <ul style="list-style-type: none"> ○ Knowledge of the ethical and legal implications of the practice of massage <ul style="list-style-type: none"> ● Required skills <ul style="list-style-type: none"> ○ Skills in applying advanced assessment techniques ○ Ability to identify bone landmarks, structures and individual muscles through palpation ○ Ability to transcribe assessment findings and treatment in a patient history using accepted medical terminology ○ Ability to identify and describe a treatment outcome using accepted medical terminology ○ Ability to access and interpret up-to-date information ○ Ability to apply differential assessment ○ Ability to write referrals, appraisal letters for insurance companies and other documentation ○ Interpersonal and questioning skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or manuals ○ relevant paper-based assessment instruments ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● Assessment must ensure <ul style="list-style-type: none"> ○ ability to perform health assessment ○ ability to communicate effectively with clients ● This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or

	<p>other appropriate persons</p> <ul style="list-style-type: none">• Assessment methods may include<ul style="list-style-type: none">○ written assignment with practical demonstration○ diagnosis from assessment notes or simulated assessments○ oral questioning○ case studies and scenarios as a basis for discussions of diagnostic technique○ short answer tests
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM5A	PERFORM REMEDIAL MASSAGE HEALTH ASSESSMENT
MAS	Massage therapy

DESCRIPTION: This unit covers the skills required to observe the condition of the client/patient and gather information relevant to the case to enable correct assessment, planning and provision of a remedial massage.

ELEMENT	PERFORMANCE CRITERIA
1 Determine the scope of the assessment and the client/patient's needs	<p>1.1 The client/patient's purpose for consultation is established and the symptoms experienced are identified</p> <p>1.2 The client/patient's eligibility for service is determined using clinic/personal policies</p> <p>1.3 The services able to be provided and the limits of available services are clearly explained</p> <p>1.4 The client/patient's expectation of the service/clinic are explored and clarified</p> <p>1.5 Factors likely to have a negative impact on assessment are identified in consultation with the client/patient and strategies implemented to minimise the effects of these factors wherever possible</p> <p>1.6 Personal abilities, level of professional competence and parameters of role are defined to the client/patient determine practice and at all times</p> <p>1.7 Client/patient is referred to other health care professionals where the needs of the client/patient are identified as beyond the scope of the services able to be provided, or if in the opinion of the practitioner the needs of the client/patient are best met by doing so</p> <p>1.8 The legal rights of the client/patient are identified and promoted</p>
2 Obtain and record an accurate history of the client/patient	<p>2.1 Information required from the client/patient for the client/patient's history is sought in a respectful way with all enquiries asked in a purposeful, systematic and diplomatic manner</p> <p>2.2 Accurate, relevant and well organised information is collected and recorded in form which can be interpreted readily by other professionals</p> <p>2.3 Information is managed in a confidential and secure way</p>
3 Manage the health assessment	<p>3.1 Informed client/patient consent is obtained prior to conducting tests, in accordance with relevant legislation and regulations</p> <p>3.2 Adequate time is allowed during consultation to gather critical information</p> <p>3.3 Factors that may interfere with the information gathering process are identified and minimised</p> <p>3.4 Essential requirements for the maintenance clinical and practitioner hygiene are identified, established and routinely observed</p> <p>3.5 Potential sensitivities of the client/patient are anticipated, the practitioner's approach is adapted accordingly to take these into account and steps are taken to ensure the client/patient's dignity is maintained at all times</p> <p>3.6 Abnormal findings are pursued and investigated in a deliberate, logical and appropriate manner</p> <p>3.7 Reliability of data obtained is assessed and appropriate clinical correlation with the client/patient's complaint is established as soon as possible</p> <p>3.8 All information is accurately recorded in a systematic manner in accordance with clinic guidelines</p>
4 Prepare the client for assessment	<p>4.1 The client/patient's body is not unnecessarily exposed during assessment/treatment</p> <p>4.2 Client/patient boundaries are respected at all times</p>

	4.3 Client/patient feedback is sought on comfort levels
5 Make a comprehensive assessment of the client/patient	<p>5.1 Signs of condition are identified according to massage therapy framework</p> <p>5.2 Specific details of signs and symptoms of the presenting complaint/s are elicited</p> <p>5.3 Client/patient is assessed through palpation, observation and sensory information gathering techniques</p> <p>5.4 Physical assessment is conducted</p> <p>5.5 Other appropriate assessment techniques are used</p> <p>5.6 Questions are used to clarify results and gain further information in a manner relevant to the client/patient's needs and test results</p> <p>5.7 Contra-indications to treatment are identified</p> <p>5.8 Functional and special tests are conducted and differential assessment made</p> <p>5.9 Static and dynamic variables of posture are observed and analysed</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors likely to have a negative impact on assessment	may include <ul style="list-style-type: none"> • language difficulties • disabilities • emotional trauma • lack of privacy or focus due to additional parties being present • cultural or gender factors
Other health care professional	may include <ul style="list-style-type: none"> • Podiatrists • Osteopaths • Energy therapists • Physiotherapists • Chiropractors • Medical practitioners • Registered nurses • Social workers • Alternative health practitioners • Counsellors • Other allied health care professionals
Client history may include	<ul style="list-style-type: none"> • date of presentation • identifying personal details • source of referral (if applicable) • main presenting complaint or reason for massage • presenting symptom picture • general state of health <ul style="list-style-type: none"> ○ physical ○ emotional ○ allergies ○ dietary picture ○ sleep pattern ○ exercise ○ leisure activities • childhood and adult illness • accidents, injuries, operations • hospitalisations • occupational history and environment • other current medical/alternative health care treatment • medication, supplements and natural prescriptions - current and previous • previous occurrence of presenting complaint • social lifestyle including social drug usage • family history

Physical assessment	<p>will include attention to</p> <ul style="list-style-type: none"> • active movements • passive movements • resisted movements • functional movements • palpatory findings • swelling • instability • parasthesia • characteristics of pain
Established assessment procedures	<p>may include</p> <ul style="list-style-type: none"> • observation • discussion • temperature • pulse • palpation • percussion • range of motion tests • muscle strength tests • orthopaedic tests • observation of variations of posture • any other method in which the practitioner has been trained to a competent standard • procedure which is conducted according to legislative and regulatory requirements
Contra-indications to treatment	<p>may include</p> <ul style="list-style-type: none"> • massage therapists are not expected to diagnose any condition but must be able to recognise the indications and contra-indications of conditions • massage is contra-indicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • referral for diagnosis when symptoms do not have a logical explanation; indications for referral include <ul style="list-style-type: none"> ○ pain - local, sharp, dull, achy, deep, surface ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ oedema ○ mood alterations, eg depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature - hot or cold • Endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ○ anterior triangle of the neck ○ posterior triangle of the neck ○ axillary area ○ medial epicondyle

	<ul style="list-style-type: none"> ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle ○ popliteal fossa
<p>The sport and recreation industry</p>	<ul style="list-style-type: none"> ● covers industry sectors of community recreation, fitness, outdoor recreation and sport ● significant roles played by activity organisations, industry peak bodies, professional organisations ● large volunteer base ● high turnover of volunteers ● high levels of part time and casual employment ● irregular working hours ● relatively few professional positions ● workforce employed mostly in operational positions ● mainly small business or self-employed personnel ● slow to take up technology ● over 2/3 of the sport and recreation industry have no formal/recognised qualifications ● significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to observe the condition of the client/patient and gather information relevant to the case to enable correct assessment, planning and provision of a remedial massage • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ demonstrate knowledge of physical signs and symptoms of disease ○ demonstrate observation skills ○ observe and identify variations of posture ○ demonstrate record keeping skills ○ demonstrate communication skills ○ perform testing and assessment procedures ○ demonstrate knowledge of and ability to use terminology correct to epidemiology and massage practice ○ recognise and adjust to contra-indications for treatment ○ demonstrate knowledge of further testing procedures ○ read medical test results or documents ○ discuss and observe treatment protocols
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of advanced assessment procedures and options allowing complex regional assessments ○ Awareness of critical information required for diagnosis and

	<p>treatment according to massage therapy framework</p> <ul style="list-style-type: none"> ○ Knowledge of history, philosophy and belief of massage therapy within a health framework ○ Knowledge of best practice massage therapy principles ○ Understanding of physiology and anatomy according to massage therapy ○ Knowledge of structure and function of anatomical systems appropriate to massage therapy and the scope of practice ○ Understanding of the fundamental principles of biomechanics and functional anatomy ○ Knowledge of the structure and function of the articular system ie classification of joints and types and ranges of motion ○ Knowledge of the structure and function of the immune system ○ Knowledge of the situation and referral patterns of trigger points ○ Knowledge of the processes of biological maturation ○ Knowledge of pain and chronic pain syndromes ○ Knowledge of the processes of aging ○ Knowledge of symptomatology and pathology ○ Knowledge of disease causation, acute and chronic inflammatory processes, wound healing and haemorrhage processes ○ Knowledge of the pathological process of thrombosis and embolism ○ Knowledge of atheroma formation and oedema and their effects within the human body ○ Knowledge of normotensive and hypertensive characteristics ○ Knowledge of infectious and immunity process ○ Knowledge of neoplasms and pathological skin conditions ○ Knowledge of structure and function of cells, tissues, blood and organs ○ Knowledge of main paths of human respiratory and cardiovascular systems and their physiology ○ Knowledge of digestive, integumentary, nervous, urinary, endocrine and reproductive systems ○ Knowledge of structure and function of anatomical systems ○ Knowledge of structure and function of skeletal, muscular, cardiovascular and lymphatic systems ○ Knowledge of the effects of hormones on the body ○ Knowledge of bioenergetic concepts and the cardio-respiratory concepts in relation to exercise ○ Knowledge of environmental physiology and the effects of drugs on the individual ○ Knowledge of technical and practical knowledge of treatment ○ Knowledge of indications, possible reactions and contra-indications to treatment ○ Knowledge of temperature control, homeostasis, feedback mechanisms, neurological, psychological and psychogenic foundations and issues ○ Knowledge of ethical and legal implications of enquiry <ul style="list-style-type: none"> ● Required skills <ul style="list-style-type: none"> ○ Ability to gather and interpret information through the tactile senses ○ Skills in applying advanced assessment techniques ○ Ability to identify prominent bones/structure and phasic and postural muscles ○ Ability to palpate prominent bones/structure and phasic and postural muscles ○ Ability to manage time throughout consultation and treatment ○ Ability to write referrals, appraisal letters for insurance companies and other documentation ○ Ability to use equipment and resources competently and safely
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	<ul style="list-style-type: none"> ○ Ability to communicate effectively with client/patient/other health practitioners ○ Demonstrated ability to read medical reports ○ Demonstrated ability to comprehend common medical terminology ○ Ability to transcribe assessment findings and treatment in a patient history using accepted medical terminology
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant assessment instruments ○ appropriate assessment environment • Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ skilled assessors ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may be conducted on more than one occasion to cover a variety of circumstances • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons • Method of assessment may include <ul style="list-style-type: none"> ○ observation of performance ○ examples of assessment notes ○ simulated assessments ○ oral questioning on technique or assessment strategy ○ case studies and scenarios as a basis for discussion of issues and strategies to contribute to best practice in the work environment

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM6A	PROVIDE THE MASSAGE TREATMENT
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to administer client/patient basic massage treatment according to the philosophy and practices of a massage therapy framework.

ELEMENT	PERFORMANCE CRITERIA
1 Manage treatment	1.1 Factors which may interfere with the effectiveness of the treatment are explained 1.2 The mode of administration and management of the treatment of the client/patient is explained 1.3 Client/patient is required to monitor reactions and contact practitioner as required 1.4 Consent for treatment is ensured 1.5 Client/patient is draped to expose only the part of the body being worked on 1.6 Massage is provided according to the treatment plan 1.7 Reactions to treatment are recognised and promptly responded to if necessary 1.8 Time, location and content of future sessions are clearly explained to the client/patient 1.9 Recommendations are fully documented
2 Apply massage techniques	2.1 Massage techniques are applied
3 Advise and resource the client	3.1 Client/patient queries are answered with clarity, using the appropriate language 3.2 Honesty and integrity are used when explaining treatment plans and recommendations to the client/patient 3.3 Appropriate interpersonal skills are used when explaining treatment plans and recommendations to the client/patient 3.4 Client/patient independence and responsibility in treatment are promoted wherever possible
4 Review treatment	4.1 Progress is evaluated with the client/patient 4.2 Effects of previous treatment are identified and recorded 4.3 Previous treatment plan is reviewed 4.4 Need for ongoing and/or additional treatment is evaluated 4.5 Changes to the plan are negotiated with the client/patient to ensure optimal outcomes

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors which interfere with the effectiveness of treatment	may include <ul style="list-style-type: none"> • other medical treatment being undertaken • client/patient's physical and psychological readiness and/or wellness • cultural factors • contra-indications to treatment • post massage activity
Mode of administration	may include <ul style="list-style-type: none"> • exposure of sections of the body • rotating of exposure around the body • use of oils and treatments • requirement for feedback and interaction • massage technique • variations in application intensity • requirement of specified positioning of client/patient
Reactions	may include <ul style="list-style-type: none"> • pain and/or discomfort • feedback - verbal, tactile, visual • muscular spasms • allergy to oils or treatments used • temperature discomfort • joint sounds (spontaneous cavitation) • client/patient relaxation • emotional release
Responses to reactions	may include <ul style="list-style-type: none"> • adjusting treatment accordingly • seeking appropriate expertise • discussing reaction with the client/patient • adherence to clinic guidelines for response to accidents and emergencies • using first aid procedures according to St Johns, Australian Red Cross or other appropriate first aid training • maintaining a senior first aid certificate which is renewed at least every three years • assessing local emergency services
Consent for treatment	refers to <ul style="list-style-type: none"> • informed consent according to local and national regulations and legal

	guidelines
Massage technique	<p>includes</p> <ul style="list-style-type: none"> • massage techniques to be performed in a variety of positions, ie standing, seated, prone, supine and side recumbent lying, and though clothing as well as conventional table massage; this may include <ul style="list-style-type: none"> ○ passive joint movement techniques <ul style="list-style-type: none"> ▪ joints are moved through their range of movement, ie to the point of mild tissue resistance ○ passive joint tissue movement <ul style="list-style-type: none"> ▪ technique is applied with palmer surfaces of the hand, heel of hand and/or fingers ▪ jostling - shaking of the muscle from origin to insertion ○ gliding techniques <ul style="list-style-type: none"> ▪ effleurage - broad superficial strokes using the entire palmer surface of the hands to cover large surface areas of the body ▪ longitudinal stroking - deep gliding movement is applied in the direction of the muscle fibres through focal pressure using any of the following: fingers, palm, heel of hands, forearm and/or knuckles ▪ transverse gliding - cross over stroke: pulling and pushing the tissue using the hands in a criss-cross manner ○ kneading <ul style="list-style-type: none"> ▪ technique is applied with palm surface of the hand, heel and/or fingers ○ soft tissue is mobilised with rhythmical circular rolling, squeezing or pulling movements ○ friction techniques <ul style="list-style-type: none"> ▪ superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions ▪ deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles ○ friction techniques are believed to be beneficial in releasing adherent/scar tissue ○ compressive techniques <ul style="list-style-type: none"> ▪ digital pressure ▪ compression - successive and rapid pressure ie a series of short duration compressions, is applied to soft tissue between two structures, ie underlying bone structures and therapist's hand, or hand to hand ▪ Percussion - cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands ○ pestrissage ○ temperature therapy <ul style="list-style-type: none"> ▪ conduction, eg heat packs and immersion baths ▪ radiation eg ray lamps ▪ friction ▪ topical applications ○ stretching techniques
Advise and resource the client/patient	<p>refers to</p> <ul style="list-style-type: none"> • providing relevant literature or information materials • referring client/patient to other information sources • advising client/patient of suggested resources

	<ul style="list-style-type: none">• suggestion of referrals to other health professionals
The sport and recreation industry	<ul style="list-style-type: none">• covers industry sectors of community recreation, fitness, outdoor recreation and sport• significant roles played by activity organisations, industry peak bodies, professional organisations• large volunteer base• high turnover of volunteers• high levels of part time and casual employment• irregular working hours• relatively few professional positions• workforce employed mostly in operational positions• mainly small business or self-employed personnel• slow to take up technology• over 2/3 of the sport and recreation industry have no formal/recognised qualifications• significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to administer client/patient basic massage treatment according to the philosophy and practices of a massage therapy framework • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ demonstrate treatment incorporating the philosophies and beliefs of a massage framework ○ apply commonly used treatment techniques listed under the range of variables ○ demonstrate that treatment is provided according to the individual, the condition and the presence of complicating factors ○ suggest alternative health care professionals when case is outside practitioner's competence ○ demonstrate that the patient/client is prepared for treatment according to massage principles ○ demonstrate that treatment is provided and client/patient responses are documented ○ demonstrate that all treatment or care delivered is consistent with legislative and regulatory requirements
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following units(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS001A Apply appropriate pre-event and post-event techniques ○ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM7A Plan the massage treatment ○ HLTREM8A Apply massage assessment framework ○ HLTREM9A Perform massage health assessment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the organisation of the body ○ Knowledge of the systems and regions of the body ○ Knowledge of the skeletal musculature ○ Knowledge of functions of major muscle groups ○ Knowledge of the articular system, classification of joints and types and ranges of motion ○ Knowledge of fundamental human physiology

	<ul style="list-style-type: none"> ○ Knowledge of the organisation of the nervous system ○ Knowledge of reproduction as it relates to massage ○ Knowledge of pathology and symptomatology ○ Knowledge of indications and contra-indications for massage ○ Knowledge of basic assessment procedures and options ○ Knowledge of the ethical and legal implications of the practice of massage ○ Knowledge of environmental physiology and the effects of drugs on the individual ○ Knowledge of indications for massage ○ Knowledge of ethical and legal implications of enquiry and treatment ● Required skills <ul style="list-style-type: none"> ○ Skills in applying basic assessment techniques ○ Demonstrated ability to comprehend common medical terminology ○ Ability to identify prominent bones, structures and muscle groups through palpation ○ Ability to transcribe assessment findings and treatment in a patient history ○ Ability to manage time throughout consultation and treatment ○ Demonstrated communication skills to gain and convey required information
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or medical manuals ○ relevant paper-based/video assessment instructions ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ demonstration model/client/patient ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit is most appropriately assessed in the workplace or in a simulated workplace under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes

	<ul style="list-style-type: none">• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Methods of assessment may include<ul style="list-style-type: none">○ practical demonstration○ simulations○ explanations of technique○ oral questioning and discussion○ case studies and scenarios
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM7A	PLAN THE MASSAGE TREATMENT
MAS	Massage therapy

DESCRIPTION: This unit describes the skills required to prepare clients/patients for basic massage and negotiate treatment with them.

ELEMENT	PERFORMANCE CRITERIA
1 Select the therapeutic principles to determine treatment	1.1 Appropriate <i>therapeutic principles</i> of treatment are determined according to assessment of client/patient and within the skills of competence of the practitioner 1.2 <i>Contra-indications</i> to treatment and possible complicating factors are ascertained and treatment strategy used is modified according to massage principles 1.3 <i>Treatment</i> appropriate to the client/patient's condition is selected and supported on the basis of established massage practice
2 Discuss the treatment strategy with the client/patient	2.1 Sufficient time is allocated to conclude sessions at a pace appropriate to the client/patient 2.2 <i>Client/patient compliance</i> is negotiated 2.3 Any <i>perceived risks</i> of the client/patient's condition and treatment are explained 2.4 The <i>responsibilities of practitioner and client/patient</i> within the treatment plan are discussed

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Therapeutic principles	refers to <ul style="list-style-type: none"> • principles and practices of the remedial massage therapy framework <ul style="list-style-type: none"> ○ relevant code of ethics or conduct documents/policies, regulations and guidelines from state/territory or local massage therapy organisations and/or associations ○ relevant national, state/territory or local government regulations and guidelines ○ accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ current and past good practice demonstrated by self or peers in the same or similar situation
Contra-indications to treatment and possible complicating factors	may include <ul style="list-style-type: none"> • massage therapies are not expected to diagnose any conditions but must be able to recognise the indications and contra-indications of conditions • massage is contra-indicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • always refer to diagnosis when symptoms do not have a logical explanation • indications for referral include <ul style="list-style-type: none"> ○ pain - local, sharp, dull, achy, deep, surface ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ oedema ○ mood alterations, eg depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature - hot or cold • endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ○ anterior triangle of the neck ○ posterior triangle of the neck ○ axillary area ○ medical epicondyle ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle

	<ul style="list-style-type: none"> ○ popliteal fossa
Treatment	<p>refers to</p> <ul style="list-style-type: none"> • massage techniques to be performed in a variety of positions, ie standing, seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage; this may include <ul style="list-style-type: none"> ○ passive joint movement techniques <ul style="list-style-type: none"> ▪ joints are moved through their range of movement, ie to the point of mild tissue resistance ○ passive soft tissue movement <ul style="list-style-type: none"> ▪ technique is applied with palmer surfaces of the hand, heel of hand and/or fingers ▪ jostling - shaking of the muscle from origin to insertion ○ gliding techniques <ul style="list-style-type: none"> ▪ effleurage - broad superficial strokes using the entire palmer surface of the hands to cover large surface areas of the body ▪ longitudinal stroking - deep gliding movement is applied in the direction of muscle fibres through focal pressure using fingers, palm, heels of hands, forearm and/or knuckles ▪ transverse gliding ▪ cross over stroke - pulling and pushing of the tissue using the hands in a criss-cross manner ▪ kneading - technique is applied with palm surface of the hand, heel of hand and/or fingers; soft tissue is mobilised with rhythmical circular rolling, squeezing or pulling movements ○ friction techniques <ul style="list-style-type: none"> ▪ superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions ▪ deep repetitive movement of short amplitude are applied usually with thumbs, fingers and knuckles ▪ friction techniques are believed to be beneficial in releasing adherent/scar tissue ○ compressive techniques <ul style="list-style-type: none"> ▪ digital pressure ▪ compression - successive and rapid pressure, ie a short series of short duration compressions is applied to soft tissue between two structures, ie underlying bone structures and therapist's hand, or hand to hand ▪ percussion - cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands ○ pestrissage ○ temperature therapy <ul style="list-style-type: none"> ▪ conduction, eg heat packs and immersion baths ▪ radiation, eg ray lamps ▪ friction ▪ topical applications ○ stretching techniques

Client/patient compliance	refers to <ul style="list-style-type: none"> • ability to follow instructions or suggestions • willingness/motivation to follow instructions or suggestions
Perceived risks	may include <ul style="list-style-type: none"> • discussion • illustration using resources
Practitioner responsibilities	may include <ul style="list-style-type: none"> • appropriate hygienic or sexual behaviour • commitment to providing the agreed treatment • discussing relevant contra-indications or potential complications to treatment • reviewing of treatment
Client/patient responsibilities	may include <ul style="list-style-type: none"> • following instructions/advice during and post massage • advising practitioner of any relevant contra-indications or potential complications to treatment • advising practitioner of compliance issues • commitment to the treatment agreed upon
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of preparing clients/patients for basic massage and negotiate treatment with them • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ demonstrate knowledge of basic surface anatomy ○ identify contra-indications to massage ○ identify treatment options ○ demonstrate knowledge of possible obstacles to treatment ○ demonstrate communication and negotiation skills
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS001A Apply appropriate pre-event and post-event techniques ○ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM6A Provide the massage treatment ○ HLTREM8A Apply massage assessment framework ○ HLTREM9A Perform massage health assessment • For the purpose of integrated assessment, this may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the organisation of the body ○ Knowledge of the systems and regions of the body ○ Knowledge of skeletal musculature ○ Knowledge of functions of major muscle groups ○ Knowledge of the particular system, classification of joints and types and ranges of motion ○ Knowledge of fundamental human physiology ○ Knowledge of the organisation of the nervous system ○ Knowledge of reproduction as it relates to massage ○ Knowledge of pathology and symptomatology ○ Knowledge of indications and contra-indications for massage ○ Knowledge of basic assessment procedures and options ○ Knowledge of the ethical and legal implications of the practice of massage ○ Knowledge of environmental physiology and the effects of drugs on the individual ○ Knowledge of indications for massage

	<ul style="list-style-type: none"> ○ Knowledge of ethical and legal implications of enquiry and treatment ● Required skills <ul style="list-style-type: none"> ○ Skills in applying basic assessment techniques ○ Demonstrated ability to comprehend common medical terminology ○ Ability to identify prominent bones, structures and muscle groups through palpation ○ Ability to transcribe assessment findings and treatment in a patient history ○ Ability to manage time throughout consultation and treatment ○ Demonstrated communication skills to gain and convey required information
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or medical manuals ○ relevant paper-based/video assessment instruments ○ appropriate assessment environment ● Human resources - assessment of this competency will require That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons ● Methods of assessment may include <ul style="list-style-type: none"> ○ practical demonstration ○ simulations ○ explanations for plan preparations ○ oral questioning and discussions ○ case studies and scenarios

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM8A	APPLY MESSAGE ASSESSMENT FRAMEWORK
MAS	Massage therapy

DESCRIPTION: This unit covers the skills required to interpret information gathered in the health assessment and make and review accurate assessment for basic massage treatment.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse and interpret information received	1.1 Results of the health assessment are correlated with case history 1.2 Signs and symptoms of conditions in the client/patient are recognised and identified as prerequisites or contra-indications for treatment/care 1.3 Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience theoretical principles applied by the practitioner 1.4 Information is gathered, recorded and organised in a way which can be interpreted readily by other professionals 1.5 Body patterns are analysed and differentiated by assessing signs and symptoms
2 Inform the client/patient	2.1 Rationale for the treatment assessment is discussed with the client/patient 2.2 Practitioner is able to respond to client/patient enquiries using language the client/patient understands 2.3 Discuss referral and collaborative options with the client/patient if necessary

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Signs and symptoms of condition	may include <ul style="list-style-type: none"> • physical evidence • behavioural evidence • states of disorder • sensations • onset • duration • location • causation • direction of chief complaint • ameliorating and aggravating factors • symptom qualities (intensity, severity, nature of complaint) • non-verbal signs and symptoms • functional disturbances
Body patterns may refer to	<ul style="list-style-type: none"> • posture • range of movement • muscle strength • contra-lateral comparisons
The sport and recreation industry	<ul style="list-style-type: none"> • covers industry sectors of community recreation, fitness, outdoor recreation and sport • significant roles played by activity organisations, industry peak bodies, professional organisations • large volunteer base • high turnover of volunteers • high levels of part time and casual employment • irregular working hours • relatively few professional positions • workforce employed mostly in operational positions • mainly small business or self-employed personnel • slow to take up technology • over 2/3 of the sport and recreation industry have no formal/recognised qualifications • significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of interpreting information gathered in the health assessment and make and review accurate assessment for basic massage treatment • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ interpret investigative findings ○ prioritise presenting conditions ○ demonstrate knowledge of referral process ○ demonstrate the establishment of urgency for treatment required ○ identify treatment options and establish treatment regimes ○ prepare treatment plans ○ prescribe treatment according to the time-frame appropriate to the client/patient condition and the treatment selected ○ demonstrate knowledge of legal and ethical considerations in treating clients/patient with massage ○ demonstrate consideration of the impact of client/patient vitality on selected treatment ○ demonstrate knowledge of possible obstacles and contra-indications to treatment ○ demonstrate knowledge of community resources and support services ○ demonstrate communication and negotiation skills ○ provide advice
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS001A Apply appropriate pre-event and post-event techniques ○ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM6A Provide the massage treatment ○ HLTREM7A Plan the massage treatment ○ HLTREM9A Perform the massage health assessment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of relevant assessment options and procedures ○ Knowledge of signs and symptoms of disease and disorder/dysfunction

	<ul style="list-style-type: none"> ○ Knowledge of skeletal musculature ○ Knowledge of biomechanics ○ Knowledge of the structure and function of the articular system - classification of joints and types and ranges of motion ○ Knowledge of human physiology ○ Knowledge of the structure and function of the nervous system ○ Knowledge of regional anatomy ○ Knowledge of the structure and function of the lymphatic system ○ Knowledge of the structure and function of the respiratory system ○ Knowledge of the reproductive system ○ Knowledge of the endocrine system ○ Knowledge of the structure and function of the nervous system ○ Knowledge of the structure and function of the immune system ○ Knowledge of the structure and function of the cardiovascular system ○ Knowledge of pathology and symptomatology ○ Knowledge of anatomy and physiology of the body systems ○ Knowledge of the indications, possible responses and contra-indications to treatments ○ Knowledge and understanding of methods of preparing treatment and management plans ○ Knowledge of the correct preparations required specific treatment ○ Knowledge and understanding of types of further investigation available ○ Knowledge of the ethical and legal implications of the practice of massage ● Required skills <ul style="list-style-type: none"> ○ Ability to identify bone landmarks, structures and individual muscles through palpation ○ Ability to access and interpret up-to-date information ○ Interpersonal and questioning skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ an appropriately stocked and equipped clinic or simulated clinic environment ○ relevant texts or medical manuals ○ relevant paper-based assessment instructions ○ appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and

	<p>equipment likely to be encountered in a real workplace</p> <ul style="list-style-type: none">• This unit is most appropriately assessed in a workplace or in simulated workplace under the normal range of work conditions. Assessment may contain both theoretical and practical components and examples covering a range of clinical situations• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons• Methods of assessment may include<ul style="list-style-type: none">○ written assignment with practical demonstration○ diagnosis from assessment notes or simulated assessments○ oral questioning○ case studies and scenarios as a basis for discussion of diagnostic technique○ short answer tests
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

HLTREM9A	PERFORM MASSAGE HEALTH ASSESSMENT
MAS	Massage therapy

DESCRIPTION: This unit covers the skills required to observe the condition of the client/patient and gather information relevant to the case in order to provide a basic massage.

ELEMENT	PERFORMANCE CRITERIA
1 Determine the scope of the assessment and the client/patient's needs	1.1 Client/patient's purpose for consultation is established and the symptoms experienced are identified 1.2 Client/patient's eligibility for service is determined using clinic/personal policies 1.3 Services able to be provided and limits of available service and clearly explained 1.4 Client/patient's expectation of the service/clinic are explored and clarified 1.5 Personal abilities, level of professional competence and parameters of role are defined to the client/patient and determine practice at all times 1.6 Factors likely to have a negative impact on assessment are identified in consultation with the client/patient and strategies implemented to minimise the effects of these factors wherever possible 1.7 Client/patient is referred to other health care professionals where the needs of the client/patient are identified as beyond the scope of the service able to be provided, or if in the opinion of the practitioner the needs of the client/patient are best met by doing so 1.8 The legal rights of the client/patient are identified and promoted
2 Obtain and record an accurate history of the client/patient	2.1 Information required from the client/patient for the client/patient's history is sought in a respectful way with all enquiries asked in a purposeful, systematic and diplomatic manner 2.2 Accurate, relevant and well organised information is collected and recorded in a form which can be interpreted readily by other professionals 2.3 Information is managed in a confidential and secure way
3 Prepare the client for assessment	3.1 The client/patient's body is not unnecessarily exposed during assessment/treatment 3.2 Client/patient boundaries are respected at all times 3.3 Client/patient feedback is sought on comfort levels
4 Perform an assessment of the client	4.1 Informed client/patient consent is obtained prior to conducting assessment, in accordance with relevant legislation and regulations 4.2 Essential requirements for the maintenance of clinical and practitioner hygiene are identified, established and routinely observed 4.3 Potential sensitivities of the client/patient are anticipated, the practitioner's approach is adapted accordingly to take these into account and steps are taken to ensure the client/patient's dignity is maintained at all times 4.4 Client/patient is assessed through palpation, observation and sensory information gathering techniques 4.5 Contra-indications to treatment are identified

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Factors likely to have a negative impact on assessment	may include <ul style="list-style-type: none"> • language difficulties • disabilities • emotional trauma • lack of privacy of focus due to additional parties being present • cultural or gender factors
Other health care professional	may include <ul style="list-style-type: none"> • podiatrists • osteopaths • energy therapists • physiotherapists • chiropractors • medical practitioners • registered nurses • social workers • alternative health practitioners • counsellors • other allied health care professionals
Client history	may include <ul style="list-style-type: none"> • date of presentation • identifying personal details • source of referral (if applicable) • main presenting complaint or reason for massage • presenting symptom picture • general state of health <ul style="list-style-type: none"> ○ physical ○ emotional ○ allergies ○ dietary picture ○ sleep pattern ○ exercise ○ leisure activities • childhood and adult illness • accidents, injuries, operations • hospitalisations • occupational history and environment • other current medical/alternative health care treatment • previous occurrence of current complaint • medication, supplements and natural prescriptions - current and previous • social lifestyle including social drug usage

	<ul style="list-style-type: none"> family history
Potential sensitivities	<p>may include</p> <ul style="list-style-type: none"> gender ethnicity language religious beliefs cultural heritage sexuality ability presenting disease state and personal history
Established assessment procedures	<p>may include</p> <ul style="list-style-type: none"> observation discussion temperature pulse palpation percussion range of motion tests muscle strength tests observation of variations of posture any other method in which the practitioners has been trained to a competent standard procedure which is conducted according to legislative and regulatory requirements
Contra-indications to treatment	<p>may include</p> <ul style="list-style-type: none"> massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contra-indications of conditions massage is contra-indicated in all infectious diseases suggested by fever, nausea and lethargy until diagnosis is received and recommended by a medical practitioner always refer to diagnosis when symptoms do not have a logical explanation indications for referral include <ul style="list-style-type: none"> pain - local, sharp, dull, achy, deep, surface fatigue inflammation lumps and tissue changes rashes and changes in the skin oedema mood alterations, e.g. depression, anxiety infection changes in habits such as appetite elimination or sleep bleeding and bruising nausea, vomiting or diarrhoea temperature - hot or cold Endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> anterior triangle of the neck posterior triangle of the neck axillary area

	<ul style="list-style-type: none"> ○ medial epicondyle ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle ○ popliteal fossa
<p>The sport and recreation industry</p>	<ul style="list-style-type: none"> ● covers industry sectors of community recreation, fitness, outdoor recreation and sport ● significant roles played by activity organisations, industry peak bodies, professional organisations ● large volunteer base ● high turnover of volunteers ● high levels of part time and casual employment ● irregular working hours ● relatively few professional positions ● workforce employed mostly in operational positions ● mainly small business or self-employed personnel ● slow to take up technology ● over 2/3 of the sport and recreation industry have no formal/recognised qualifications ● significant reliance upon industry credentials and involvement in the activity itself

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to observe the condition of the client/patient and gather information relevant to the case in order to provide a basic massage • Assessment of performance should be over a period of time covering all categories from the Range Statements applicable to the learner's work environment • In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ demonstrate knowledge of the physical signs and symptoms of disease ○ demonstrate observation skills ○ observe and identify variations of posture ○ demonstrate record keeping skills ○ demonstrate communication skills ○ use terminology correct to discipline ○ recognise and adjust to contra-indications for treatment ○ discuss and observe treatment protocols
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS001A Apply appropriate pre-event and post-event techniques ○ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM6A Provide the massage treatment ○ HLTREM7A Plan the massage treatment ○ HLTREM8A Apply massage assessment framework • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of history, philosophy and beliefs of massage therapy within a health framework ○ Understanding of physiology and anatomy according to massage therapy ○ Knowledge of best practice massage therapy principles ○ Knowledge of structure and function of anatomical systems appropriate to massage therapy and the scope of practice ○ Understanding of the fundamental principles of biomechanics and functional anatomy ○ Knowledge of indications for massage ○ Knowledge of environmental physiology and the effects of drugs on the individual

	<ul style="list-style-type: none"> ○ Knowledge of technical and practical knowledge of treatment ○ Knowledge of indications, possible reactions and contra-indications to treatment ○ Knowledge of ethical and legal implications of enquiry ● Required skills <ul style="list-style-type: none"> ○ Skills in using appropriate assessment techniques ○ Ability to identify prominent bones/structure and phasic and postural muscles ○ Ability to gather and interpret information through the tactile senses ○ Ability to identify contra-indications for massage ○ Ability to manage time throughout consultation and treatment ○ Demonstrated communication skills to gain and convey required information
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ A fully stocked and equipped clinic or simulated clinic environment ○ Relevant assessment instructions ○ Appropriate assessment environment ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ▪ be competent in this unit ▪ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ▪ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● In order to achieve consistency in performance, evidence should be collected over a set period of time which is sufficient to include dealings with an appropriate range and variety of situations
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sport or recreation activity. For valid and reliable assessment the sport or recreation activity should closely replicate the work environment. The environment should be safe with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of work conditions. Assessment may be conducted on more than one occasion to cover a variety of circumstances ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons ● Method of assessment may include <ul style="list-style-type: none"> ○ observation of performance ○ examples of assessment notes ○ simulated assessments ○ oral questioning on technique or assessment strategy ○ case studies and scenarios as a basis for discussion of issues and

	strategies to contribute to best practice in the work environment
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <p>NOTE: The key competencies weren't identified in the originating Package</p> <ul style="list-style-type: none"> • Collecting, analysing and organising information - • Communicating ideas and information - • Planning and organising activities - • Working with teams and others - • Using mathematical ideas and techniques - • Solving problems - • Using technology - <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS001A	APPLY APPROPRIATE PRE-EVENT AND POST-EVENT TECHNIQUES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to enable the learner to apply a range of basic massage techniques to prepare an athlete/client for activity/competition and assist the athlete/client to recover from an activity/competition.

ELEMENT	PERFORMANCE CRITERIA
1 Define the scope of the application of pre-event and post-event techniques	1.1 Incorporate contraindications for the application of pre-event and/or post-event massage techniques into consultation with the athlete/client 1.2 Incorporate the role of the application of pre-event massage techniques into consultation with the athlete/client
2 Apply pre-event techniques	2.1 Recognise contraindications for the application of pre-event and/or post-event massage techniques and refer the athlete/client to other health professionals or the relevant contact in the organisations' medical support team 2.2 Select a range of pre-event massage techniques to suit the athlete/client and the activity/competition 2.3 Demonstrate a range of pre-event massage techniques to prepare athlete/client for activity/competition 2.4 Ensure application of pre-event massage techniques is adjusted in accord with arousal levels of the athlete/client 2.5 Apply ointments used for heat application to prepare the athlete/client for activity/competition
3 Apply post-event techniques	3.1 Assess signs and symptoms of injury from activity/competition and, where indicated, implement the RICER regime is implemented with referred/referral 3.2 Demonstrate a range of post-event massage techniques to aid recovery from activity/competition
4 Implement self-care	4.1 Demonstrate ergonomic use of body positioning and body weight to apply pre-event massage techniques and post-event massage techniques 4.2 Choose massage table height to eliminate back strain during the application of massage 4.3 Choose hand positions and techniques to eliminate upper limb strain during the application of massage 4.4 Demonstrate use of reinforced hands/thumb weight to apply pre-event massage techniques and post-event massage techniques 4.5 Adopt self-care protocols in accord with the industry standard massage therapy principles

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to improve their performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Contraindications for the application of pre-event and/or post-event techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • indications for massage, eg, musculoskeletal discomfort, circulation enhancement, relaxation and pain control • massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contraindications of conditions • massage is contraindicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • always refer for diagnosis when symptoms do not have a logical explanation. Indications for referral include <ul style="list-style-type: none"> ○ pain, eg, local, sharp, dull, achy, deep, surface ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ edema ○ mood alterations, eg, depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature, eg, hot or cold • endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ○ anterior triangle of the neck ○ posterior triangle of the neck ○ axillary area ○ medial epicondyle ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle

	<ul style="list-style-type: none"> ○ popliteal fossa
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Organisations medical support team	<p>[all categories]</p> <ul style="list-style-type: none"> • is relevant to professional club or organisation settings which have an established network for medical support that may include a range of people such as <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ massage therapists ○ rehabilitation therapists ○ exercise therapists
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths • other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ○ naturopaths/homeopath therapists ○ podiatrists ○ yoga/relaxation/tai chi instructors ○ dentists ○ exercise therapists ○ acupuncturists
Pre-event massage techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • to be performed in a variety of positions i.e. standing, seated, prone, supine and side recumbent lying and through clothing as well as conventional table massage • includes <ul style="list-style-type: none"> ○ longitudinal stroking ○ kneading ○ compression ○ jostling ○ broad handed techniques

	<ul style="list-style-type: none"> ○ pre-event heat application ○ ointments for heat application ○ use of stretching (indication and type)
Post-event massage techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • to be performed in a variety of positions, i.e., standing, seated, prone, supine and side-lying and through clothing as well as conventional table massage • includes <ul style="list-style-type: none"> ○ longitudinal stroking ○ kneading ○ compression ○ jostling ○ broad handed techniques ○ pre-event heat application ○ ointments for heat application ○ use of stretching (indication and type)
Post-event	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the hour immediately after activity/competition
Pre-event	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the hour prior to activity/competition
Pre-event massage is adjusted in accord with arousal levels	<p>[all categories]</p> <ul style="list-style-type: none"> • pre-event massage techniques are usually adjusted to assist psychological preparation for competition by <ul style="list-style-type: none"> ○ calming the nervous or anxious competitor ○ increasing excitement levels of the 'casual' competitor • may be conducted in conjunction with coach/es
Referred/referral	<p>[all categories]</p> <ul style="list-style-type: none"> • recommendation of a client to another health professional for care/treatment/assessment
RICER regime	<p>[all categories]</p> <ul style="list-style-type: none"> • Rest • Ice • Compression • Elevation • Referral

Signs and symptoms of injury	[all categories] <ul style="list-style-type: none">• pain• soreness
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge and ability to apply a range of basic techniques that will allow the learner to competently perform on location to apply pre-event and/or post-event massage techniques • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ describe and explain the benefits of pre and post event massage ○ clarify possible contraindications pre and post event massage ○ focus on body parts primarily involved in activity ○ suit the athlete/client, sport/activity and competition level ○ suit the preferred timing and duration for the athlete/client ○ adjusts to the athlete/client's arousal level ○ demonstrates implementation of self-care procedures ○ assess signs and symptoms of injury ○ apply a range of pre-event and/or post-event massage techniques to assist the client to prepare for and/or recover from the activity/competition
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS002A Operate in accord with accepted massage therapy workplace practices and ethics ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM6A Provide the massage treatment ○ HLTREM7A Plan the massage treatment ○ HLTREM8A Apply massage assessment framework ○ HLTREM9A Perform massage health assessment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Relevant surface anatomy ○ Relevant principles of sport psychology ○ Relevant principles of human movement and sport biomechanics ○ Relevant psycho-social indicators for proper assessment of contraindications to massage • Required skills <ul style="list-style-type: none"> ○ Communicate effectively with athletes and others ○ Adequate numeracy and literacy skills ○ Provide reports to paramedical personnel ○ Work with others in a team situation

	<ul style="list-style-type: none"> ○ Remain calm under pressure ○ Basic massage techniques
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> • be competent in this unit • be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area <ul style="list-style-type: none"> ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
1	1	1	1	-	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Identify government regulations and guidelines • Communicating ideas and information - Communicate effectively with athletes and others • Planning and organising activities - Plan pre- and post- event techniques • Working with teams and others - Work with athletes and other health professionals and support personnel • Using mathematical ideas and techniques - Not applicable • Solving problems - Respond to athlete's contraindications and symptoms • Using technology - Use ointments for heat applications <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS002A	OPERATE IN ACCORD WITH ACCEPTED MASSAGE THERAPY WORKPLACE PRACTICES AND ETHICS
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to enable the learner to undertake massage therapy activities in accord with all aspects of industry accepted practices and ethics.

ELEMENT	PERFORMANCE CRITERIA
1 Adhere to accepted safety and privacy practices	1.1 Conduct massage activities in accordance with accepted Occupational Health and Safety standards 1.2 Conduct massage activities in accordance with accepted duty of care 1.3 Comply with local, state, and national government legislation and/or requirements 1.4 Maintain a standard of professional practice that complies with accepted industry standard massage therapy principles 1.5 Observe principles of athlete/client confidentiality in a massage therapy setting
2 Provide basic information regarding treatment options	2.1 Provide athlete/client with basic information regarding a range of treatment options and obtain informed consent 2.2 Explain to the athlete/client the similarities and differences between physiotherapy, osteopathy, chiropractic therapy and massage therapy 2.3 Clarify with the athlete/client the generic roles of a physiotherapist, an osteopath, a chiropractor, massage therapist and oriental massage therapy 2.4 Clarify the basic role of other modalities 2.5 Describe and explain to the athlete/client the characteristics between the allopathic and naturopathic approaches to treatment 2.6 Explain to the athlete/client the medical approach to treatments of common musculoskeletal injuries in sport
3 Develop working relationships with other health professionals	3.1 Identify and pursue methods of advancing the massage industry through working in a collaborative manner with peers, other health professionals and feedback 3.2 Refer athlete/client to relevant other health professional/s if the therapist is not currently competent in a treatment option that may be beneficial to the athlete/client 3.3 Write a referral letter and give to the athlete/client to pass on to relevant other health professional/s 3.4 Establish a network of other health professionals for athlete/client referral and opinion 3.5 Establish a network of other relevant stakeholders
4 Identify continuing professional development options	4.1 Research and document further education/training that will enhance the learners professional practice 4.2 Describe professional development activities to enhance the skills and knowledge required of a massage therapist
5 Create a non-judgmental treatment environment	5.1 Demonstrate clear non-judgmental communication techniques 5.2 Define and make clear athlete/client /therapist protocols 5.3 Adhere to industry standard massage therapy principles , particularly in relation to anti-discrimination legislation and/or regulations

	5.4 Understand cultural diversity and adjust treatment protocols accordingly
6 Appreciate ethical issues	<p>6.1 Explain vulnerability of massage therapists and athlete/client/therapist boundary issues</p> <p>6.2 Explain and implement strategies for managing and minimizing boundary issues</p> <p>6.3 Limit collection of information to the presenting condition of the athlete/client and issues that may contribute to the effectiveness of the treatment plan</p> <p>6.4 Respect the athlete/client and treat according to industry standard massage therapy principles</p>
7 Handle and maintain equipment	<p>7.1 Set up and dismantle equipment in accord with manufacturer's guidelines and/or industry standard massage therapy principles</p> <p>7.2 Leave assembled equipment in safe surroundings, so that potentially hazardous situations for staff and athlete/client are avoided</p> <p>7.3 Maintain necessary access and egress in the case of an emergency</p> <p>7.4 Adopt specified lifting techniques and handle equipment in a way which avoids damage to equipment and injury to self, other staff and athlete/client</p> <p>7.5 Check equipment being set-up or dismantled for deterioration or damage</p> <p>7.6 Record damaged or worn equipment and report to the responsible person and/or remove, mark or store in a way which demonstrates clearly that it is withdrawn from service</p> <p>7.7 Carry out minor repairs to acceptable standards</p> <p>7.8 Refer major repairs to appropriate practitioners</p> <p>7.9 Prepare equipment before and after use, as well as for use by the next client</p> <p>7.10 Withdraw or dispose of equipment with expired life spans</p>
8 Store equipment	<p>8.1 Store equipment in the correct manner to ensure its future operation and serviceability</p> <p>8.2 Maintain storage areas in a clean and tidy condition</p> <p>8.3 Ensure security for storage facility is in accordance with operating procedures</p> <p>8.4 Store equipment in relation to accessibility and frequency of use</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Access and egress	<p>[all categories]</p> <ul style="list-style-type: none"> • fire doors • exits • through ways • corridors
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Boundary issues	<p>[all categories]</p> <ul style="list-style-type: none"> • comply with industry code of ethics and practice in relation to <ul style="list-style-type: none"> ○ informed consent ○ duty of care ○ draping ○ hygiene ○ the scope of client/therapist relationships ○ advertising ○ maintenance of equipment ○ social/cultural morals ○ demonstrate equal treatment of all athlete/clients ○ psycho-emotional well being of athlete/client ○ refer athlete/client who want treatment outside the scope of the available services ○ dealing with difficult athlete/client
Common musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • bones <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ fracture ▪ periosteal contusion ○ overuse <ul style="list-style-type: none"> ▪ stress fracture

	<ul style="list-style-type: none"> ▪ 'bone strain', 'stress reaction' ▪ osteitis/periostitis ▪ apophysitis • articular cartilage <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ osteochondral/chondral fractures ▪ minor osteochondral injury ○ overuse <ul style="list-style-type: none"> ▪ chondropathy, eg, softening, fibrillation, fissuring, chondromalacia • joint <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ dislocation ▪ subluxation ○ overuse <ul style="list-style-type: none"> ▪ synovitis. ▪ osteoarthritis • ligament <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ sprain/tear (grades I - III) ○ overuse <ul style="list-style-type: none"> ▪ inflammation • muscle <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ strain/tear (grades I - III) ▪ contusion ▪ cramp ▪ acute compartment syndrome ○ overuse <ul style="list-style-type: none"> ▪ chronic compartment syndrome ▪ delayed onset muscle soreness ▪ focal tissue thickening/fibrosis • tendon <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ tear (complete or partial) ○ overuse <ul style="list-style-type: none"> ▪ tendinitis ▪ paratendinitis/tenosynovitis ▪ tendinosis • bursa <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ traumatic bursitis ○ overuse <ul style="list-style-type: none"> ▪ bursitis • nerve <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ neuropraxia ▪ minor nerve injury/irritation ○ overuse <ul style="list-style-type: none"> ▪ entrapment ▪ increased neural tension • skin <ul style="list-style-type: none"> ○ acute <ul style="list-style-type: none"> ▪ laceration ▪ abrasion ▪ puncture wound ○ overuse <ul style="list-style-type: none"> ▪ blister
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Characteristics between the allopathic and naturopathic approaches	<p>[all categories]</p> <ul style="list-style-type: none"> • allopathic, eg, the western medical model in which a disease or an abnormal condition is treated by creating an environment that is antagonistic to it, i.e., a system that emphasizes treatment of disease • naturopathic, eg, a system of health care that emphasizes health maintenance, disease prevention, patient education and patient responsibility
Deterioration or damage	<p>[all categories]</p> <ul style="list-style-type: none"> • to be checked for and reported on refers to <ul style="list-style-type: none"> ○ damage to fabric ○ damage to components ○ missing parts ○ components requiring restocking or refilling ○ failure to operate correctly
Duty of care	<p>[all categories]</p> <ul style="list-style-type: none"> • the concept of duty of care refers to the obligation of an individual's responsibility to others and is dependent on the concepts of <ul style="list-style-type: none"> ○ proximity of the relationship ○ reasonable standard of care • it is the responsibility of all massage therapists to deliver the highest possible professional care to all athlete/client with consideration to the medical, ethical, social and religious needs of the athlete/client • professional care encompasses the receipt and response to a case, athlete/client assessment, and implementation of appropriate treatment
Equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • massage therapy table and equipment • tents or shade providing devices • screens • drapes • relevant oils and ointments • first aid kit • safety equipment • heat packs and heating equipment • ice and ice packs • recording equipment to take case history • drinking water for therapist/s and athlete/client/s
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual and/or ○ tactile • should be an information exchange between athlete/client and practitioner regarding treatment progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives

	<ul style="list-style-type: none"> ○ information pertinent to technical adjustments
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Information	<p>[all categories]</p> <ul style="list-style-type: none"> • is collected through <ul style="list-style-type: none"> ○ discussions regarding case history, i.e., previous and/or current injuries or illnesses ○ observations ○ palpations ○ functional assessments
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any genuine work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events. accommodation venues ○ in transit, i.e., on buses, planes
Non-judgmental communication	<p>[all categories]</p> <ul style="list-style-type: none"> • respect athlete/client's needs, confidentiality and privacy • use of language appropriate to athlete/client's level of understanding and relevant to their condition
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths • other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ○ naturopaths/homeopath therapists ○ podiatrists ○ yoga/relaxation/tai chi instructors ○ dentists ○ exercise therapists

	<ul style="list-style-type: none"> ○ acupuncturists
Other relevant stakeholders	<p>[all categories]</p> <ul style="list-style-type: none"> • coach/s • other health professionals • parents/guardians • other involved/appropriate personnel
Principles of athlete/client confidentiality	<p>[all categories]</p> <ul style="list-style-type: none"> • information regarding athlete/client status and/or well-being should not be passed on to other individuals without the permission of the athlete/client • can refer to <ul style="list-style-type: none"> ○ inappropriate questioning and assessment ○ physical privacy of athlete/client, eg, changing in private, draping • also refer to industry standard massage therapy principles
Referral	<p>[all categories]</p> <ul style="list-style-type: none"> • written request for assistance or contribution to treatment of a specific client by an appropriate health professional • recommendation of a athlete/client to another health professional for care/treatment

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm a willingness and commitment to undertake massage therapy activities in accord with all aspects of industry accepted practices and ethics • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ comply with the accepted ethics and practice ○ observe client confidentiality ○ comply with accepted Occupational Health and Safety standards ○ comply with local, state and federal government legislation ○ provide athlete/client with information regarding treatment options ○ clarify and define protocols between athlete/client and therapist
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAS001A Apply appropriate pre-event and post-event techniques ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM6A Provide the massage treatment ○ HLTREM7A Plan the massage treatment ○ HLTREM8A Apply massage assessment framework ○ HLTREM9A Perform massage health assessment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Massage therapy organisations' and/or associations' regulations and guidelines ○ Relevant national, state/territory or local government regulations and guidelines ○ Accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ○ Understanding of industry code(s) of ethics and practice pertaining to boundary issues • Required skills <ul style="list-style-type: none"> ○ Interpersonal and oral/written communication skills in relation to the complex negotiation of boundary issues, developing working relationships with other health professionals and the provision of basic information ○ Literacy skills in relation to the recording of information as part of a record - keeping system, developing working relationships with

	other health professionals and the provision of basic information
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	1	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Comply with code of ethics and practice • Communicating ideas and information - Demonstrate clear non-judgmental communication techniques • Planning and organising activities - Develop strategy to implement best practice and ethical issues • Working with teams and others - Establish network between other health professionals • Using mathematical ideas and techniques - Select appropriate evaluation methods • Solving problems - Respond appropriately to athletes musculoskeletal injuries • Using technology - Handle and maintain equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS003A	IMPLEMENT, MONITOR AND ADJUST A MASSAGE THERAPY TREATMENT PLAN
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to successfully utilise communication strategies and massage therapy knowledge and skills to conduct, monitor and adjust a massage therapy treatment plan.

ELEMENT	PERFORMANCE CRITERIA
1 Conduct, monitor and adjust a massage therapy treatment plan	1.1 Maintain effective communication with the <i>athlete/client</i> 1.2 Prepare the <i>athlete/client</i> for involvement in the overall <i>treatment plan</i> and/or each session 1.3 Make <i>athlete/client</i> aware of aims and objectives of the overall <i>treatment plan</i> and/or each treatment session 1.4 Select an appropriate <i>modality</i> and it's associated <i>techniques</i> and perform treatment 1.5 Use appropriate draping <i>techniques</i> in a <i>massage therapy setting</i> 1.6 The <i>treatment plan</i> is subject to <i>monitoring</i> and adjustment 1.7 Provide <i>feedback</i> regarding the progress of the <i>treatment plan</i> 1.8 Encourage the <i>athlete/client</i> to voice queries and/or fears and address these appropriately 1.9 Demonstrate stance, posture, movements and/or body language in accordance with accepted <i>industry standard massage therapy principles</i> 1.10 Allocate sufficient time to conclude sessions at a pace appropriate to the <i>athlete/client</i> and allow time for further discussion
2 Provide instruction to teach or develop self-management programs	2.1 Inform the <i>athlete/client</i> of their role and/or responsibility in maintaining a self-management program and/or routines 2.2 Provide assistance and instruction to enable the <i>athlete/client</i> to implement a self management program 2.3 Provide relevant <i>information</i> , explanations and demonstrations to assist the <i>athlete/client</i> well-being, to complete activities, stretches and the like as part of their self-management program 2.4 Give precise verbal instructions and place the instructional emphasis on practical involvement while refining <i>techniques</i> on an individualised basis 2.5 Observe the individual to see that exercises, activities and/or stretches are conducted in accord with accepted <i>industry standard massage therapy principles</i>
3 Prepare the athlete/client for future sessions	3.1 Discuss the time, location and content of future sessions with the <i>athlete/client</i> 3.2 Inform the <i>athlete/client</i> of suitable activities/exercises which could be undertaken to assist them prepare for future sessions
4 Evaluate efficacy of treatment plan	4.1 Obtain <i>feedback</i> from <i>athlete/client</i> regarding the capacity of the treatment to produce effects 4.2 Conduct <i>special tests</i> and <i>functional tests</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Athlete/client well-being	<p>[all categories]</p> <ul style="list-style-type: none"> • injury status • psychological status • emotional status, and/or • general self-esteem
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • can be <ul style="list-style-type: none"> ○ verbal ○ written ○ visual, and/or ○ tactile • should be an information exchange between athlete/client and practitioner regarding treatment progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments
Functional tests	<p>[all categories]</p> <ul style="list-style-type: none"> • assess range of movement in all body sections, i.e., arms, legs, torso and neck and head • identify functional deviations of lower limb and upper limb by observing at rest and during movement • identify muscle imbalances in limbs, vertebral column • identify abnormalities in range of motion of all joints and vertebral column • identify biomechanical problems so that, where necessary, the athlete/client can be referred to appropriate other health professionals • plot results on a diagram or chart

Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Information	<p>[all categories]</p> <ul style="list-style-type: none"> • discussions (including history) • observations • palpations • functional assessments • range of movement
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events ○ accommodation venues ○ in transit, i.e., on buses, planes
Modality	<p>[all categories]</p> <ul style="list-style-type: none"> • a combination of techniques
Monitoring	<p>[all categories]</p> <ul style="list-style-type: none"> • questioning and discussions before, during and after treatment sessions • observations before, during and after treatment sessions • palpations during treatment sessions • ongoing functional assessments as part of the formative evaluation of treatment plan
Special tests	<p>[all categories]</p> <ul style="list-style-type: none"> • to identify dysfunction in <ul style="list-style-type: none"> ○ muscle/s ○ soft tissue/s ○ joint/s ○ neural tests ○ vascular function, i.e., blood flow ○ fluid retention ○ mechanical dysfunctions
Technique	<p>[all categories]</p>

	<ul style="list-style-type: none">• a singular massage therapy application, eg, effleurage or digital ischemic pressure
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none">• a sequence of events incorporating the application of treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome• is designed to return the athlete/client to optimal function• usually of an agreed duration, dependent on the performance parameters• individualised to the athlete/client's requirements• should be developed in accord with the scope of the therapists current competencies• should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge and ability to successfully utilise communication strategies and massage therapy knowledge and skills to conduct, monitor and adjust a massage therapy treatment plan • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ monitor and adjust the plan in response to the athlete/client's progress ○ provide feedback in a manner that maintains morale and is appropriate to the individual's needs ○ provide instruction to teach or develop the athlete/client's ability to implement a self-management program ○ prepare the athlete/client for future sessions
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well - being of athlete/client ○ Relevant human movement and sport biomechanics ○ Common musculoskeletal injuries in sport • Required skills <ul style="list-style-type: none"> ○ Ability to design a treatment plan and describe it's progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation

	<ul style="list-style-type: none"> ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	2	1	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Gather information to develop self management program • Communicating ideas and information - Encourage client to voice queries and address them appropriately • Planning and organising activities - Prepare the client for future sessions • Working with teams and others - Develop network of health professionals • Using mathematical ideas and techniques - Conduct special and functional tests • Solving problems - Complete functional assessments as part of formative evaluation • Using technology - Use proper technical equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS004A	APPLY TEMPERATURE THERAPY
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to apply cold and heat to create a therapeutic effect.

ELEMENT	PERFORMANCE CRITERIA
1 Apply thermotherapy	1.1 Explain and discuss indications for thermotherapy with the <i>athlete/client</i> 1.2 Identify contraindications and precautions for thermotherapy through case history, observation and palpation in a <i>massage therapy setting</i> 1.3 Explain and discuss contraindications and precautions for thermotherapy with the <i>athlete/client</i> and, where necessary, refer <i>athlete/client</i> to appropriate <i>other health professionals</i> 1.4 Undertake tests for sensitivity 1.5 Explain possible adverse reactions to topical applications of thermotherapy and conduct relevant observation 1.6 Demonstrate application of fundamental forms of thermotherapy 1.7 Demonstrate correct angle and distance for indirect application of thermotherapy 1.8 Demonstrate appropriate duration for thermotherapy
2 Apply cryotherapy	2.1 Explain and discuss indications for cryotherapy with the client 2.2 Identify contraindications and precautions for cryotherapy through case history, observation and palpation 2.3 Explain and discuss contraindications and precautions for <i>cryotherapy</i> with the <i>athlete/client</i> and, where necessary, refer <i>athlete/client</i> to appropriate <i>other health professionals</i> 2.4 Undertake tests for sensitivity are carried out 2.5 Explain possible adverse reactions to topical applications of <i>cryotherapy</i> and conduct relevant observation 2.6 Demonstrate application of fundamental forms <i>cryotherapy</i> 2.7 Demonstrate correct duration for <i>cryotherapy</i> 2.8 Explain the <i>Huntington's response</i> and conduct relevant observation
3 Apply hot/cold therapy	3.1 Explain and discuss indications for <i>hot/cold therapy</i> with the <i>athlete/client</i> 3.2 Identify <i>contraindications and precautions for hot/cold therapy</i> through case history, observation and palpation 3.3 Explain and discuss contraindications and precautions for <i>hot/cold therapy</i> are with the athlete/client and, where necessary, <i>refer</i> client to appropriate <i>other health professionals</i> 3.4 Undertake tests for sensitivity are carried out 3.5 Explain and discuss application of fundamental forms of <i>hot/cold therapy</i> with the athlete/client 3.6 Demonstrate correct duration of <i>hot/cold therapy</i>
4 Instigate self-management	4.1 Introduce a self-management program incorporating relevant temperature therapy techniques in consultation with the <i>athlete/client</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Cryotherapy	<p>[all categories]</p> <ul style="list-style-type: none"> • application of fundamental forms of cryotherapy refers to <ul style="list-style-type: none"> ○ conduction, eg, cold packs, ice massage and immersion baths ○ convection, eg, cooling devices • possible adverse reactions to topical applications of cryotherapy refers to <ul style="list-style-type: none"> ○ skin irritations ○ neural irritations ○ muscle cramp • indications for cryotherapy refers to <ul style="list-style-type: none"> ○ acute injury ○ inflammation ○ contraindications and precautions for cryotherapy refers to • any contraindication for massage <ul style="list-style-type: none"> ○ in particular <ul style="list-style-type: none"> ▪ skin disorders ▪ open wounds ▪ correct duration for cryotherapy refers to <ul style="list-style-type: none"> ▪ adequate time to achieve cryotherapy goals without adverse reactions, eg, Huntington's response ▪ usually 10 minutes
Hot/cold therapy	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the alternate application of heat and cooling • application of fundamental forms of hot/cold therapy refers to <ul style="list-style-type: none"> ○ the use of ice/cold therapy and thermotherapy devices in alternative sequence • indications for hot/cold therapy refers to <ul style="list-style-type: none"> ○ muscle cramps ○ recovery from exercise ○ delayed onset muscle soreness

	<ul style="list-style-type: none"> • contraindications and precautions for hot/cold therapy refers to <ul style="list-style-type: none"> ○ any contraindication for massage ○ also refer to contraindications for cryotherapy and thermotherapy respectively • correct duration of hot/cold therapy refers to <ul style="list-style-type: none"> ○ adequate time to achieve cryotherapy goals without adverse reactions (see below) and thermotherapy goals without adverse reactions (see below)
Huntington's response	<p>[all categories]</p> <ul style="list-style-type: none"> • autonomic compensatory reaction of the body to cooling resulting in vasodilatation of the cooled blood vessels, i.e., part of the body is cooled for more than 20 minutes it automatically tries to establish homeostasis to warm the part again
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events ○ accommodation venues ○ in transit, i.e., on buses, planes
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Thermotherapy (or heat therapy)	<p>[all categories]</p> <ul style="list-style-type: none"> • application of fundamental forms thermotherapy refers to <ul style="list-style-type: none"> ○ conduction, eg, heat packs and immersion baths ○ radiation, eg, ray lamps ○ friction ○ topical applications • indications for thermotherapy refers to <ul style="list-style-type: none"> ○ myofascial hypertonicity, i.e., stiffness ○ fascial adherence • contraindications and precautions for thermotherapy refers to <ul style="list-style-type: none"> ○ any contraindication for massage

	<ul style="list-style-type: none">▪ pain, eg, local, sharp, dull, achy, deep, surface▪ fatigue▪ inflammation▪ lumps and tissue changes▪ rashes and changes in the skin▪ edema▪ mood alterations, eg, depression, anxiety▪ infection▪ changes in habits such as appetite elimination or sleep▪ bleeding and bruising▪ nausea, vomiting or diarrhoea▪ temperature, eg, hot or cold○ in particular<ul style="list-style-type: none">▪ skin disorders▪ open wounds▪ acute injury▪ acute inflammation▪ vascular disorders• correct angle and distance for indirect application of thermotherapy refers to<ul style="list-style-type: none">○ safe and effective placement of the heat lamp in accord with manufacturers instructions and directions○ heat source perpendicular to area to be treated○ minimum distance of 30 cm from area to be heated• appropriate duration for thermotherapy is described<ul style="list-style-type: none">○ adequate time to achieve heat therapy goals without adverse reactions○ usually 10-20 minutes○ in accord with manufacturers instructions and directions• possible adverse reactions to topical applications of thermotherapy refers to<ul style="list-style-type: none">○ burning○ skin irritations○ re-initiate internal bleeding
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and the knowledge and ability to assess and safely externally apply cold and heat to create a therapeutic effect, i.e., safely apply temperature therapy • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ describe and explain thermotherapy, cryotherapy and hot/cold therapy ○ identify contraindications and precautions for thermotherapy, cryotherapy and hot/cold therapy through case history, observation and palpation ○ design and negotiate a treatment plan that incorporates relevant temperature therapy techniques ○ apply thermotherapy, cryotherapy and hot/cold therapy techniques
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Physiology related to use of hot and cold temperature ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well-being of clients ○ Relevant human movement and sport biomechanics ○ Common musculoskeletal injuries in sport

	<ul style="list-style-type: none"> • Required skills <ul style="list-style-type: none"> ○ Ability to design a treatment plan and describe it's progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	1	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Develop manual to explain various key points for temperature therapy • Communicating ideas and information - Encourage client to voice queries • Planning and organising activities - Design and negotiate a plan incorporating temperature therapy • Working with teams and others - Develop rapport with other allied health professionals • Using mathematical ideas and techniques - Use correct angles and distance for thermography • Solving problems - Identify contraindications and perform adjustments • Using technology - Demonstrate proper selection and use of equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS005A	APPLY MYOFASCIAL TENSION TECHNIQUES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit describes the skills required to assess myofascial restriction and apply appropriate techniques to facilitate mobilisation of dysfunctional tissue.

ELEMENT	PERFORMANCE CRITERIA
1 Describe the principles of myofascial tension techniques	1.1 Describe and explain the basic function and structure of fascia to the <i>athlete/client</i> in a <i>massage therapy setting</i> 1.2 Describe and explain <i>contraindications and precautions for myofascial tension techniques</i> to the <i>athlete/client</i> 1.3 Explain the essential differences between <i>myofascial tension techniques</i> and other forms of soft tissue treatment <i>techniques</i>
2 Assess the need to apply myofascial tension techniques	2.1 Explain and demonstrate <i>elasticity assessment of superficial connective tissue</i> 2.2 Explain and demonstrate <i>range of motion assessment of the elasticity of connective tissue</i> 2.3 Conduct <i>palpatory assessment of connective tissue</i> and explain the implications of such to the <i>athlete/client</i> 2.4 Design and negotiate a <i>treatment plan</i> incorporating relevant <i>myofascial tension techniques</i> with the <i>athlete/client</i> and refer to <i>other health professionals</i> where necessary
3 Apply myofascial tension techniques	3.1 Describe and rationalise the differences between <i>superficial fascia</i> and <i>muscle fascia anatomy</i> 3.2 Describe, demonstrate and rationalise the differences in the treatment of <i>superficial fascia</i> and <i>muscle fascia anatomy</i> 3.3 Apply <i>techniques</i> in accordance with <i>industry standard massage therapy principles</i> 3.4 Apply <i>techniques</i> in a <i>sustained</i> manner
4 Implement self-care	4.1 Demonstrate ergonomic use of body positioning and body weight to perform <i>myofascial tension techniques</i> 4.2 Demonstrate use of reinforced hands, digits, thumb and the forearm to administer <i>myofascial tension techniques</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Contraindications and precautions for sustained myofascial tension techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • any contraindication for massage • in particular <ul style="list-style-type: none"> ○ any connective tissue disorder/s, eg, Marfan's syndrome ○ fragile skin or skin with stretch marks
Elasticity assessment of superficial connective tissue	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the following procedures <ul style="list-style-type: none"> ○ palpatory assessment of superficial fascia ○ visual assessment of superficial fascia
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events

	<ul style="list-style-type: none"> ○ accommodation venues ○ in transit, i.e., on buses, planes
Muscle fascial anatomy	<p>[all categories]</p> <ul style="list-style-type: none"> • epimysium • perimysium • endomysium • basal lamina
Myofascial tension techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • techniques conducted on superficial and/or deep tissues to <ul style="list-style-type: none"> ○ lengthen tissue ○ reduce adhesions ○ increase range of movement ○ decrease compartment pressure ○ restore elasticity • techniques may include <ul style="list-style-type: none"> ○ identification of target tissue ○ choose appropriate quantity and quality of treatment ○ describe using soft tissue treatment scale, eg, Granter/King scale ○ use of skin absorbing lotion not oil ○ contact target tissue in appropriate position of tissue tension or laxity ○ application of tensile force ○ tensile force may be increased by taking origin and attachment points of the relevant soft tissue away from each other ○ reassess to check efficacy of technique and/or application
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Palpatory assessment of connective tissue	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the ability to distinguish between mobile, healthy fascia and hypomobile fascia

Range of motion assessment of the elasticity of the connective tissue	<p>[all categories]</p> <ul style="list-style-type: none"> refers to the assessment of joint range of motion pre and post application of treatment to monitor effectiveness of technique
Superficial fascia	<p>[all categories]</p> <ul style="list-style-type: none"> subcutaneous connective tissue
Sustained	<p>[all categories]</p> <ul style="list-style-type: none"> sheer force is maintained for an appropriate period of time
Technique	<p>[all categories]</p> <ul style="list-style-type: none"> a singular massage therapy application, eg, gliding or digital ischemic pressure
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none"> a sequence of events incorporating the application of treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome is designed to return the athlete/client to optimal function usually of an agreed duration, dependent on the performance parameters individualised to the athlete/client's requirements should be developed in accord with the scope of the therapists current competencies should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and the knowledge and ability to assess myofascial restriction and safely apply appropriate techniques to facilitate the mobilisation of tissue, i.e., safely apply myofascial tension techniques • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ describe and explain the principles of myofascial tension techniques ○ identify contraindications and precautions for myofascial tension techniques through case history, observation and palpation ○ design and negotiate an treatment plan with the athlete/client that incorporates myofascial tension techniques ○ apply myofascial tension techniques ○ demonstrate self-care principles such as body positioning, body weight and reinforced hand/thumb weight
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Structure and nature of connective tissue as it relates to the sustained myofascial tension techniques ○ Relevant human anatomy and physiology ○ Common musculoskeletal injuries in sport ○ Relevant principles of human movement and sport biomechanics ○ Relevant pharmacology

	<ul style="list-style-type: none"> ○ Relevant pathology and symptomology ● Required skills <ul style="list-style-type: none"> ○ Ability to design a treatment plan and describe it's progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	1	1	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Describe and explain principles of myofascial tension techniques • Communicating ideas and information - Encourage client to voice queries • Planning and organising activities - Design a treatment plan incorporating myofascial techniques • Working with teams and others - Develop network with other allied health professionals • Using mathematical ideas and techniques - Identify appropriate tests • Solving problems - Identify contraindications and precautions • Using technology - Use proper technical equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS006A	APPLY APPROPRIATE STRETCHING TECHNIQUES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to assess and safely apply appropriate stretching technique covering therapist assisted and athlete/client initiated stretching.

ELEMENT	PERFORMANCE CRITERIA
1 Describe different stretching techniques	1.1 Describe and explain the principles of stretching are described and explained 1.2 Describe and explain contraindications and precautions for stretching
2 Assess the need to apply stretching techniques	2.1 Identify contraindications and precautions for stretching techniques through case history, observation and palpation 2.2 Explain and discuss contraindications and precautions for stretching techniques with the athlete/client and, where necessary, refer athlete/client to appropriate other health professionals in a massage therapy setting 2.3 Demonstrate the ability to differentiate between signs and symptoms caused by other sources of pain 2.4 Relevant pain referral patterns of soft tissues are identified and explained to the athlete/client 2.5 Design and negotiate a treatment plan incorporating relevant stretching techniques with the athlete/client
3 Apply stretching techniques	3.1 Apply stretching techniques safely and correctly 3.2 Apply techniques with appropriate rhythm, tempo, rate, pressure and repetition to create the desired outcome 3.3 Apply techniques in accordance with industry standard massage therapy principles while stretching within a treatment plan
4 Instigate self-stretching	4.1 Explain, demonstrate and clarify techniques in the self-stretching program with the athlete/client

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/clients	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Contraindications and precautions for stretching	<p>[all categories]</p> <ul style="list-style-type: none"> • massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contraindications of conditions • stretching is contraindicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • always refer for diagnosis when symptoms do not have a logical explanation. Indications for referral include <ul style="list-style-type: none"> ○ pain, eg, local, sharp, dull, achy, deep, surface ○ fatigue. ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ edema ○ mood alterations, eg, depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea ○ temperature, eg, hot or cold
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same

	or similar situation
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events ○ accommodation venues ○ in transit, i.e., on buses, planes
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Referred	<p>[all categories]</p> <ul style="list-style-type: none"> • written request for assistance or contribution to treatment of a specific client by an appropriate health professional • recommendation of a athlete/client to another health professional for care/treatment
Stretching techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • static stretching • dynamic stretching • ballistic stretching • Proprioceptive Neuromuscular Facilitation stretching <ul style="list-style-type: none"> ○ contract - relax ○ hold - relax
Stretching within a treatment plan	<p>[all categories]</p> <ul style="list-style-type: none"> • massage therapy setting with therapist assisted stretching • massage therapy setting with athlete/client initiated stretching • home care athlete/client initiated stretching
Self stretching program	<p>[all categories]</p>

	<ul style="list-style-type: none">• assisting the athlete/client in areas such as<ul style="list-style-type: none">○ activities or tasks to avoid○ warm-ups and cool downs○ self-massage techniques○ corrective positioning
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none">• a sequence of events incorporating the application of treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome• is designed to return the athlete/client to optimal function• usually of an agreed duration, dependent on the performance parameters• individualised to the athlete/client's requirements• should be developed in accord with the scope of the therapists current competencies• should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and the knowledge and ability to safely apply stretching techniques • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ describe principles of stretching ○ assess the need to apply stretching ○ identify contraindications and precautions for stretching techniques through case history, observation and palpation ○ design and negotiate a treatment plan incorporating relevant stretching techniques with the athlete/client ○ apply stretching techniques
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well-being of clients ○ Relevant principles of human movement and sport biomechanics ○ Common musculoskeletal injuries in sport ○ Relevant neuromuscular physiology ○ Exercise physiology related to stretching • Required skills

	<ul style="list-style-type: none"> ○ Ability to design a treatment plan and describe it's progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills ○ Ability to demonstrate basic stretching techniques
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	1	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Develop handout to explain key stretching techniques • Communicating ideas and information - Encourage client to voice queries • Planning and organising activities - Develop and negotiate a treatment plan incorporating stretching techniques • Working with teams and others - Develop network with other allied health professionals • Using mathematical ideas and techniques - Identify appropriate tests • Solving problems - Identify contraindications and precautions associated with stretching • Using technology - Use proper technical equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS007A	APPLY TRIGGER POINT TECHNIQUES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to assess and safely apply specific massage therapy techniques to identify and/or treat active, latent, secondary and satellite trigger points and, where relevant, their associated pain referral patterns.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the nature of trigger points	1.1 Identify acquisition of <i>trigger points</i> 1.2 Identify common/major trigger point pain referral patterns 1.3 Identify the relationships between <i>primary trigger points</i> , <i>secondary trigger points</i> and <i>satellite trigger points</i> 1.4 Identify <i>contraindications and precautions for trigger point techniques</i>
2 Assess the need to apply trigger point techniques	2.1 Recognise characteristics of <i>active trigger points</i> through case history, observation and palpation 2.2 Recognise characteristics of <i>latent trigger points</i> through palpation 2.3 Identify <i>primary trigger points</i> , <i>secondary trigger points</i> and <i>satellite trigger points</i> 2.4 Demonstrate the ability to differentiate between signs and symptoms caused by active <i>trigger points</i> from <i>other sources of pain</i> 2.5 Identify and explain relevant pain referral patterns of <i>trigger points</i> to the <i>athlete/client</i> 2.6 Identify <i>contraindications and precautions for trigger point techniques</i> through case history, observation and palpation 2.7 Explain and discuss <i>contraindications and precautions for trigger point techniques</i> with the <i>athlete/client</i> and, where necessary, refer <i>athlete/client</i> to appropriate <i>other health professionals</i> 2.8 Design and negotiate a <i>treatment plan</i> incorporating relevant <i>trigger point techniques</i> with the <i>athlete/client</i>
3 Apply trigger point techniques	3.1 Use <i>trigger point techniques</i> to conduct treatment 3.2 Apply techniques in accordance with <i>industry standard massage therapy principles</i>
4 Instigate self-management program	4.1 Introduce a relevant <i>self-management program</i> in consultation with the <i>athlete/client</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups ○ are sometimes below the age of 16 years and require parent/guardian consent prior to being included in massage therapy sessions
Active trigger points	<p>[all categories]</p> <ul style="list-style-type: none"> • disproportionate pain on pressure • predictable pain referral • local involuntary muscular twitch on palpation • taut band on palpation • possible loss of muscular range • possible loss of contractile efficiency • possible long lasting low intensity pain
Contraindications and precautions for trigger point techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contraindications of conditions • massage is contraindicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a health professional • always refer for diagnosis when symptoms do not have a logical explanation. Indications for referral include <ul style="list-style-type: none"> ○ pain, eg, local, sharp, dull, achy, deep, surface ○ fatigue ○ inflammation ○ lumps and tissue changes ○ rashes and changes in the skin ○ edema ○ mood alterations, eg, depression, anxiety ○ infection ○ changes in habits such as appetite elimination or sleep ○ bleeding and bruising ○ nausea, vomiting or diarrhoea

	<ul style="list-style-type: none"> ○ temperature, eg, hot or cold ● endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ○ anterior triangle of the neck ○ posterior triangle of the neck ○ axillary area ○ medial epicondyle ○ lateral epicondyle ○ area of the sternal notch and anterior throat ○ umbilicus area ○ twelfth rib dorsal body ○ sciatic notch ○ inguinal triangle ○ popliteal fossa
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> ● relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct ● documents/policies, regulations and guidelines ● relevant national, state/territory or local government regulations and guidelines ● employer organisations policies and procedures ● accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations ● current and past good practice demonstrated by self or peers in the same or similar situation
Latent trigger points	<p>[all categories]</p> <ul style="list-style-type: none"> ● local tenderness greater than surrounding tissue after sustained pressure ● possible taut band on palpation ● no referral with out excessive pressure applied ● no involuntary muscle twitch
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> ● practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Other sources of pain	<p>[all categories]</p>

	<ul style="list-style-type: none"> • locally occurring tissue pathology • other sources of pain referral such as <ul style="list-style-type: none"> ○ visceral conditions ○ neuromeningeal irritation
Primary trigger point	<p>[all categories]</p> <ul style="list-style-type: none"> • active trigger point or previously active • the initial trigger point
Satellite trigger points	<p>[all categories]</p> <ul style="list-style-type: none"> • a latent or active trigger point that occurs within the pain referral pattern of the primary trigger point
Secondary trigger points	<p>[all categories]</p> <ul style="list-style-type: none"> • a latent or active trigger that occurs as a result of overload or compensation due to the change in function of the tissue containing the primary trigger point
Self-management programs	<p>[all categories]</p> <ul style="list-style-type: none"> • assisting the athlete/client in areas such as <ul style="list-style-type: none"> ○ activities or tasks to avoid ○ warm-ups and cool downs ○ simple temperature therapy techniques ○ self-massage techniques
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none"> • a sequence of events incorporating the application of advanced treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome • is designed to return the athlete/client to optimal function • usually of an agreed duration, dependent on the performance parameters • individualised to the client's requirements • should be developed in accord with the scope of the therapists current competencies • should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent
Trigger points	<p>[all categories]</p> <ul style="list-style-type: none"> • hypersensitive area within hypertonic myofascia, i.e., the combination of contractile tissue and its accompanying fascial tissue
Trigger point techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • apply digital ischemic pressure and/or apply stretching after treatment <ul style="list-style-type: none"> ○ ischemic pressure ○ stretching

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and the knowledge and ability to assess and safely apply specific massage therapy techniques to identify and/or treat active, latent, secondary and satellite trigger points and, where relevant, their associated pain referral patterns • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ describe and explain the nature of trigger points ○ describe and explain the common/major trigger point pain referral patterns ○ describe and explain the relationships between primary trigger points, secondary trigger points and satellite trigger points ○ identify contraindications and precautions for trigger point techniques through case history, observation and palpation ○ design a treatment plan ○ apply trigger point techniques ○ instigate relevant self-management programs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Common musculoskeletal injuries in sport ○ Relevant neurophysiology and proprioception ○ Location of trigger points

	<ul style="list-style-type: none"> ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well-being of clients ○ Relevant principles of human movement and sport biomechanics ● Required skills <ul style="list-style-type: none"> ○ Ability to design an advanced treatment plan and describe it's progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of in a massage therapy setting, or competition/activity setting with a range of real clients. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	2	1	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Describe and explain relationship between type of trigger points • Communicating ideas and information - Encourage client to voice queries • Planning and organising activities - Develop and negotiate a treatment plan incorporating trigger point therapy techniques • Working with teams and others - Develop network with other allied health professionals • Using mathematical ideas and techniques - Identify appropriate tests • Solving problems - Identify contraindications and precautions associated with stretching trigger point therapy • Using technology - Use technical aids properly <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS008A	APPLY DEEP TISSUE TECHNIQUES TO TREAT COMMON MUSCULOSKELETAL INJURIES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to integrate knowledge of massage therapy techniques and modalities to provide a deep tissue massage treatment for athlete/client with common musculoskeletal injuries.

ELEMENT	PERFORMANCE CRITERIA
1 Identify common musculoskeletal injuries and associated treatment procedures	1.1 Incorporate <i>causes of common musculoskeletal injury</i> and the <i>performance parameters</i> into consultation with <i>athlete/client</i> 1.2 Incorporate <i>industry standard massage therapy principles</i> regarding procedures and/or approaches for treating <i>common musculoskeletal injuries</i> into consultation with <i>athlete/client</i>
2 Assess musculoskeletal injury and dysfunction	2.1 Assess <i>athlete/client's</i> musculoskeletal <i>dysfunctions</i> using case history, observation, palpation and functional assessment tests during a <i>massage therapy setting</i> 2.2 Advise <i>athlete/client</i> of optimal number of treatments and likely prognosis 2.3 Explain and discuss <i>contraindications for massage</i> with the <i>athlete/client</i> and, where necessary, refer <i>athlete/client</i> to appropriate <i>other health professionals</i>
3 Treat musculoskeletal injury and dysfunction	3.1 Develop a <i>treatment package</i> incorporating packaging of advanced massage techniques and/or <i>massage therapy techniques</i> to treat <i>common musculoskeletal injuries</i> for the <i>athlete/client</i> 3.2 Implement a <i>treatment package</i> through the <i>integration of various techniques</i> 3.3 Establish, explain, clarify and investigate <i>self-management programs</i> with the <i>athlete/client</i> 3.4 Refer <i>athlete/client</i> to <i>other health professionals</i> in relation to areas/aspects in which the therapist is not currently competent

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special need ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Causes of common musculoskeletal injury	<p>[all categories]</p> <ul style="list-style-type: none"> • congenital • traumatic • degenerative • infections • postural
Common musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • sporting injuries may be divided into acute injuries and overuse injuries which include <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ fracture ▪ periosteal contusion ▪ overuse <ul style="list-style-type: none"> ▪ stress fracture ▪ 'bone strain', 'stress reaction' ▪ osteitis/periostitis ▪ apophysitis ○ articular cartilage <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ osteochondral/chondral fractures ▪ minor osteochondral injury ▪ overuse ▪ chondropathy, eg, softening, fibrillation, fissuring, chondromalacia ○ joint <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ dislocation ▪ subluxation ▪ overuse

	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ▪ synovitis ▪ osteoarthritis ○ ligament <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ sprain/tear (grades I - III) ▪ overuse ○ inflammation muscle <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ strain/tear (grades I - III) ▪ contusion ▪ cramp ▪ acute compartment syndrome ▪ overuse <ul style="list-style-type: none"> ▪ chronic compartment syndrome ▪ delayed onset muscle soreness ▪ focal tissue thickening/fibrosis ○ tendon <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ tear (complete or partial) ▪ overuse <ul style="list-style-type: none"> ▪ tendinitis ▪ paratendinitis/tenosynovitis ▪ tendinosis ○ bursa <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ traumatic bursitis ▪ overuse <ul style="list-style-type: none"> ▪ bursitis ○ nerve <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ neuropraxia ▪ minor nerve injury/irritation ▪ overuse <ul style="list-style-type: none"> ▪ entrapment ▪ increased neural tension ○ skin <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ laceration ▪ abrasion ▪ puncture wound ▪ overuse <ul style="list-style-type: none"> ▪ blister
Contraindications for massage	<p>[all categories]</p> <ul style="list-style-type: none"> • contraindications for application of massage include <ul style="list-style-type: none"> ○ massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contraindications of condition ○ massage is contraindicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner ○ always refer for diagnosis when symptoms do not have a logical explanation ○ indications for referral include <ul style="list-style-type: none"> ▪ pain, eg, local, sharp, dull, achy, deep, surface ▪ fatigue ▪ inflammation ▪ lumps and tissue changes

	<ul style="list-style-type: none"> ▪ rashes and changes in the skin ▪ edema ▪ mood alterations, eg, depression, anxiety ▪ infection ▪ changes in habits such as appetite elimination or sleep ▪ bleeding and bruising ▪ nausea, vomiting or diarrhoea ▪ temperature, eg, hot or cold ○ endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ▪ anterior triangle of the neck ▪ posterior triangle of the neck ▪ axillary area ▪ medial epicondyle ▪ lateral epicondyle ▪ area of the sternal notch and anterior throat ▪ umbilicus area ▪ twelfth rib dorsal body ▪ sciatic notch ▪ inguinal triangle ▪ popliteal fossa
Dysfunctions	<p>[all categories]</p> <ul style="list-style-type: none"> • musculoskeletal injuries and any compromise to function relative to activity being undertaken
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Integration of various techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the integration of <ul style="list-style-type: none"> ○ trigger point techniques ○ Proprioceptive Neuromuscular Facilitation stretching ○ deep transverse friction techniques ○ myofascial tension techniques ○ corrective exercise
Massage therapy techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • cross fibre techniques <ul style="list-style-type: none"> ○ technique applied in a gliding manner over the superficial tissue in a direction perpendicular to the fibres of the target tissue ○ are applied to breakdown tissue adhesions and promote fibre correction and healing • deep friction techniques

	<ul style="list-style-type: none"> ○ movement of superficial tissue above underlying structures in circular, longitudinal or transverse directions ○ movement of the therapist's fingers and athlete/client's superficial tissue over deeper structures ○ movement of fingers/thumbs in a circular, longitudinal or transverse direction at a depth to effect underlying structures ○ are applied to create friction at a variety of tissue depths to aid in the rehabilitation of specific conditions • digital compression techniques <ul style="list-style-type: none"> ○ ability to apply focal pressure with thumb or fingers to a local area for appropriate frequency and duration ○ are applied at a high level of skill through the use of focal pressure to treat specific conditions using thumb or fingers to local area of vascular tissue exhibiting elevated tone • longitudinal strokes <ul style="list-style-type: none"> ○ apply strokes parallel with the fibres of the target tissue ○ are applied using fingers, thumb, fist and/or forearm to demonstrate stroking parallel with specific fibres utilizing various degrees of depth to produce changes in blood flow and tissue extensibility
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any genuine work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics ○ change rooms ○ open or enclosed areas at sporting events ○ accommodation venues ○ in transit, i.e., on buses, planes
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Performance parameters	<p>[all categories]</p> <ul style="list-style-type: none"> • biomechanical, physiological and/or psychological components of an activity to which the athlete/client wishes to return, eg, sport specific movements • fitness, training, competition, general health and/or lifestyle targets

Self-management programs	<p>[all categories]</p> <ul style="list-style-type: none"> • assisting the client in areas such as <ul style="list-style-type: none"> ○ activities or tasks to avoid ○ warm-ups and cool downs ○ simple temperature therapy techniques ○ self-massage techniques
Technique	<p>[all categories]</p> <ul style="list-style-type: none"> • a singular massage therapy application, eg, effleurage or digital ischemic pressure
Treatment package/s	<p>[all categories]</p> <ul style="list-style-type: none"> • the combination of the assessment process, techniques, modalities and attitudes to achieve prescribed outcomes • incorporates massage therapy • can incorporate other modalities depending the current competencies of the therapist
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none"> • a sequence of events incorporating the application of advanced treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome • is designed to return the athlete/client to optimal function • usually of an agreed duration, dependent on the performance parameters • individualised to the athlete/client's requirements • should be developed in accord with the scope of the therapists current competencies • should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

<p>Critical aspects of evidence to be considered</p>	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and ability to integrate knowledge of massage therapy techniques and modalities to provide a comprehensive massage treatment package for athlete/client with musculoskeletal dysfunctions • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ identify common musculoskeletal dysfunctions ○ assess musculoskeletal dysfunctions ○ develop a treatment package to treat musculoskeletal injuries ○ implement a treatment package through the integration of various techniques ○ apply massage therapy techniques such as deep friction techniques, digital compression techniques and deep longitudinal strokes
<p>Interdependent assessment of units</p>	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS009A Integrate massage techniques to support athletes • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
<p>Required knowledge and skills</p>	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well-being of athlete/client ○ Relevant principles of human movement and sport biomechanics ○ Common musculoskeletal injuries in sport • Required skills <ul style="list-style-type: none"> ○ Ability to design an advanced treatment plan and describe it's

	<p>progressions</p> <ul style="list-style-type: none"> ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	2	3	2	1	3	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Develop client record by obtaining information through case history, observation, palpation, and other tests • Communicating ideas and information - Encourage client to voice queries • Planning and organising activities - Develop and negotiate a treatment package through integration of various techniques • Working with teams and others - Establish database of other allied health professionals • Using mathematical ideas and techniques - Identify appropriate tests and functional assessments • Solving problems - Evaluate musculoskeletal dysfunctions, contraindications and precautions • Using technology - Use technical aids properly <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAS009A	INTEGRATE MASSAGE TECHNIQUES TO SUPPORT ATHLETES
MAS	Massage therapy

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to integrate knowledge of massage therapy techniques and modalities to provide a comprehensive massage treatment package for athlete/client.

ELEMENT	PERFORMANCE CRITERIA
1 Identify common musculoskeletal injuries and associated treatment procedures	1.1 Identify and describe <i>common musculoskeletal injuries</i> in sport and their causes 1.2 Explain and describe <i>Industry standard massage therapy principles</i> regarding procedures and/or approaches for treating <i>common musculoskeletal injuries</i> in sport
2 Treat common musculoskeletal injuries	2.1 Develop a <i>treatment package</i> incorporating packaging of advanced massage techniques and/or massage therapy techniques to treat <i>common musculoskeletal injuries</i> in sport for the <i>athlete/client</i> in a <i>massage therapy setting</i> 2.2 Implement a <i>treatment package</i> through the <i>integration of various techniques</i> 2.3 Recommend relevant <i>thermotherapy, cryotherapy</i> and corrective exercise for rehabilitation of sporting injuries to the <i>athlete/client</i> 2.4 Establish, explain, clarify and instigate <i>self-management programs</i> with the <i>athlete/client</i> 2.5 Refer <i>athlete/client</i> to <i>other health professionals</i> in relation to areas/aspects in which the therapist is not currently competent
3 Provide support packages for athlete/client	3.1 Incorporate relevant elements of <i>pre-event massage, post-event massage</i> and <i>maintenance massage</i> in the <i>athlete/client's</i> massage therapy <i>treatment plan</i> 3.2 Establish, explain, clarify and instigate <i>self-management programs</i> with the <i>athlete/client</i> 3.3 Explain advantages and/or disadvantages of taping and/or splinting
4 Provide self massage programs	4.1 Advise <i>athlete/client</i> and teach relevant <i>self massage techniques</i> to assist in <i>self management programs</i> 4.2 Explain and discuss <i>contraindications for massage</i> with <i>athlete/client</i>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Athlete/client	<p>[all categories]</p> <ul style="list-style-type: none"> • are usually committed and self-motivated to return to optimal function and/or improve performance • can be so motivated that unnecessary pain is tolerated in mistaken belief that 'no pain, no gain' • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Common musculoskeletal injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • sporting injuries may be divided into acute injuries and overuse injuries which include <ul style="list-style-type: none"> ○ bones <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ fracture ▪ periosteal contusion ▪ overuse <ul style="list-style-type: none"> ▪ stress fracture ▪ 'bone strain', 'stress reaction' ▪ osteitis/periostitis ▪ apophysitis ○ articular cartilage <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ osteochondral/chondral fractures ▪ minor osteochondral injury ▪ overuse <ul style="list-style-type: none"> ▪ chondropathy, eg, softening, fibrillation, fissuring, chondromalacia ○ joint <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ dislocation ▪ subluxation ▪ overuse <ul style="list-style-type: none"> ▪ synovitis ▪ osteoarthritis ○ ligament <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ sprain/tear (grades I - III) ▪ overuse ○ inflammation muscle <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ strain/tear (grades I - III) ▪ contusion

	<ul style="list-style-type: none"> ▪ cramp ▪ acute compartment syndrome ▪ overuse <ul style="list-style-type: none"> ▪ chronic compartment syndrome ▪ delayed onset muscle soreness ▪ focal tissue thickening/fibrosis ○ tendon <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ tear (complete or partial) ▪ overuse <ul style="list-style-type: none"> ▪ tendinitis ▪ paratendinitis/tenosynovitis ▪ tendinosis ○ bursa <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ traumatic bursitis ▪ overuse <ul style="list-style-type: none"> ▪ bursitis ○ nerve <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ neuropraxia ▪ minor nerve injury/irritation ▪ overuse <ul style="list-style-type: none"> ▪ entrapment ▪ increased neural tension ○ skin <ul style="list-style-type: none"> ▪ acute <ul style="list-style-type: none"> ▪ laceration ▪ abrasion ▪ puncture wound ▪ overuse <ul style="list-style-type: none"> ▪ blister
Contraindications for massage	<p>[all categories]</p> <ul style="list-style-type: none"> • massage therapists are not expected to diagnose any conditions but must be able to recognise the indications and contraindications of conditions • massage is contraindicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner • always refer for diagnosis when symptoms do not have a logical explanation • indications for referral include <ul style="list-style-type: none"> ▪ pain, eg, local, sharp, dull, achy, deep, surface ▪ fatigue ▪ inflammation ▪ lumps and tissue changes ▪ rashes and changes in the skin ▪ edema ▪ mood alterations, eg, depression, anxiety ▪ infection ▪ changes in habits such as appetite elimination or sleep ▪ bleeding and bruising ▪ nausea, vomiting or diarrhoea ▪ temperature, eg, hot or cold ○ endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected <ul style="list-style-type: none"> ▪ anterior triangle of the neck ▪ posterior triangle of the neck ▪ axillary area

	<ul style="list-style-type: none"> ▪ medial epicondyle ▪ lateral epicondyle ▪ area of the sternal notch and anterior throat ▪ umbilicus area ▪ twelfth rib dorsal body ▪ sciatic notch ▪ inguinal triangle ▪ popliteal fossa
Cryotherapy	<p>[all categories]</p> <ul style="list-style-type: none"> • application of fundamental forms of cryotherapy refers to <ul style="list-style-type: none"> ○ conduction, eg, cold packs, ice massage and immersion baths ○ convection, eg, cooling devices • possible adverse reactions to topical applications of cryotherapy refers to <ul style="list-style-type: none"> ○ skin irritations ○ neural irritations ○ muscle cramps • indications for cryotherapy refers to <ul style="list-style-type: none"> ○ acute injury ○ inflammation • contraindications and precautions for cryotherapy refers to <ul style="list-style-type: none"> ○ any contraindication for massage ○ in particular <ul style="list-style-type: none"> ▪ skin disorders ▪ open wounds • correct duration for cryotherapy refers to <ul style="list-style-type: none"> ○ adequate time to achieve cryotherapy goals without adverse reactions, eg, Huntington's response ○ usually 10 minutes
Industry standard massage therapy principles	<p>[all categories]</p> <ul style="list-style-type: none"> • relevant national, state/territory or local massage therapy organisations' and/or associations' Code of Ethics or Code of Conduct documents/policies, regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Integration of various techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the integration of <ul style="list-style-type: none"> ○ trigger point techniques ○ Proprioceptive Neuromuscular Facilitation stretching ○ deep transverse friction techniques ○ myofascial tension techniques ○ corrective exercise
Massage therapy setting	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to any genuine work environment where massage therapy is provided <ul style="list-style-type: none"> ○ clinics

	<ul style="list-style-type: none"> ○ change rooms ○ open or enclosed areas at sporting events ○ accommodation venues ○ in transit, ie, on buses, planes
Other health professionals	<p>[all categories]</p> <ul style="list-style-type: none"> • practitioners who can competently make assessments regarding conditions that may potentially be complicated by the application of massage techniques <ul style="list-style-type: none"> ○ medical practitioners ○ physiotherapists ○ chiropractors ○ osteopaths ○ other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specialising in oriental modalities <ul style="list-style-type: none"> ▪ naturopaths/homeopath therapists ▪ podiatrists ▪ yoga/relaxation/tai chi instructors ▪ dentists ▪ exercise therapists ▪ acupuncturists
Pre-event massage	<p>[all categories]</p> <ul style="list-style-type: none"> • integration of treatment techniques to assist the athlete/client with <ul style="list-style-type: none"> ○ physiological warm-up ○ psychological preparation including <ul style="list-style-type: none"> ▪ where appropriate, stress release, ie, relaxation ▪ where appropriate, to raise pre-event arousal levels
Post-event massage	<p>[all categories]</p> <ul style="list-style-type: none"> • integration of treatment techniques to assist the athlete/client with <ul style="list-style-type: none"> ○ physiological cool-down, ie, return to homeostasis ○ physiological recovery, ie, removal of lactic acid ○ where appropriate, psychological recovery, ie, emotional stress release ○ identify potential injuries and commence appropriate treatment ○ the restoration of range of motion/flexibility
Maintenance massage	<p>[all categories]</p> <ul style="list-style-type: none"> • a package of massage therapy techniques designed to assist injury prevention, physiological recovery, tissue extensibility, muscle tone, ie, reduction of micro-tears in myofibrils
Self-management programs	<p>[all categories]</p> <ul style="list-style-type: none"> • assisting the client in areas such as <ul style="list-style-type: none"> ○ activities or tasks to avoid ○ warm-ups and cool downs ○ simple temperature therapy techniques ○ self-massage techniques

Self massage techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • using athlete/client's own hands/forearms/knuckles to perform massage techniques • using massage equipment to perform techniques such as <ul style="list-style-type: none"> ○ ice for ice massage ○ tennis ball for digital ischaemic pressure and trigger point work
Technique	<p>[all categories]</p> <ul style="list-style-type: none"> • a singular massage therapy application, eg, effleurage or digital ischemic pressure
Thermotherapy (or heat therapy)	<p>[all categories]</p> <ul style="list-style-type: none"> • application of fundamental forms thermotherapy refers to <ul style="list-style-type: none"> ○ conduction, eg, heat packs and immersion baths ○ radiation, eg, ray lamps ○ friction ○ topical applications • indications for thermotherapy refers to <ul style="list-style-type: none"> ○ myofascial hypertonicity, ie, stiffness ○ fascial adherence • contraindications and precautions for thermotherapy refers to <ul style="list-style-type: none"> ○ any contraindication for massage <ul style="list-style-type: none"> ▪ pain, eg, local, sharp, dull, achy, deep, surface ▪ fatigue ▪ inflammation ▪ lumps and tissue changes ▪ rashes and changes in the skin ▪ edema ▪ mood alterations, eg, depression, anxiety ▪ infection ▪ changes in habits such as appetite elimination or sleep ▪ bleeding and bruising ▪ nausea, vomiting or diarrhoea ▪ temperature, eg, hot or cold ○ in particular <ul style="list-style-type: none"> ▪ skin disorders ▪ open wound ▪ acute injury ▪ acute inflammation ▪ vascular disorders • correct angle and distance for indirect application of thermotherapy refers to <ul style="list-style-type: none"> ○ safe and effective placement of the heat lamp in accord with manufacturers instructions and directions ○ heat source perpendicular to area to be treated ○ minimum distance of 30cm from area to be heated • appropriate duration for thermotherapy is described <ul style="list-style-type: none"> ○ adequate time to achieve heat therapy goals without adverse reactions ○ usually 10-20 minutes ○ in accord with manufacturers instructions and directions • possible adverse reactions to topical applications of thermotherapy refers to <ul style="list-style-type: none"> ○ burning ○ skin irritations

	<ul style="list-style-type: none"> ○ re-initiate internal bleeding
Treatment package/s	<p>[all categories]</p> <ul style="list-style-type: none"> • the combination of the assessment process, techniques, modalities and attitudes to achieve prescribed outcomes • incorporates the application of the <ul style="list-style-type: none"> ○ principles of relaxation massage, and/or ○ principles of sports massage therapy • can incorporate other modalities depending the current competencies of the therapist
Treatment plan/s	<p>[all categories]</p> <ul style="list-style-type: none"> • sequence of events incorporating the application of advanced treatment packages negotiated between the therapist and the athlete/client leading to a desired outcome • is designed to return the athlete/client to optimal function • usually of an agreed duration, dependent on the performance parameters • individualised to the athlete/client's requirements • should be developed in accord with the scope of the therapists current competencies • should refer the athlete/client to an appropriate alternative practitioner in relation to areas/aspects in which the therapist is not currently competent

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm comprehensive knowledge of anatomy and physiology and the ability to integrate knowledge of massage therapy techniques and modalities to provide a comprehensive massage treatment package for athlete/client, in particular athlete/client with sports injuries • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ identify common sports injuries ○ assess sports injuries ○ develop a treatment package incorporating packaging of advanced massage techniques and/or massage therapy techniques to treat common sports injuries ○ implement a treatment package through the integration of various techniques and modalities ○ recommend thermotherapy, cryotherapy, corrective exercise for rehabilitation of sporting injuries ○ establish, explain, clarify and instigate self-management programs with athlete/client's
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after the attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM5A Administer a practice ○ HLTIN1A Comply with infection control policies and procedures ○ HLTREM1A Work within a massage framework ○ HLTREM2A Provide the remedial massage treatment ○ HLTREM3A Plan the remedial massage treatment strategy ○ HLTREM4A Apply remedial massage assessment framework ○ HLTREM5A Perform remedial massage health assessment ○ SRSMAS003A Implement, monitor and adjust a massage therapy treatment plan ○ SRSMAS004A Apply temperature therapy ○ SRSMAS005A Apply myofascial tension techniques ○ SRSMAS006A Apply appropriate stretching techniques ○ SRSMAS007A Apply trigger point techniques ○ SRSMAS008A Apply deep tissue techniques to treat common musculoskeletal injuries • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Relevant human anatomy and physiology ○ Relevant pathology/symptomology ○ Relevant pharmacology ○ Relevant nutrition for the general well-being of clients ○ Relevant principles of human movement and sport biomechanics

	<ul style="list-style-type: none"> ○ Common musculoskeletal injuries in sport ● Required skills <ul style="list-style-type: none"> ○ Ability to design an advanced treatment plan and describe its progressions ○ Ability to palpate and identify all bones/structures and muscle groups available to palpation ○ Comprehensive ability to gather and interpret information through the tactile senses ○ Comprehensive ability to apply tactile techniques ○ Ability to convey and interpret information ○ Adequate numeracy and literacy skills
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ access to athlete/client, ○ massage therapy facilities in a massage therapy setting, or competition/activity setting ○ massage therapy equipment ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as variable client effectiveness this unit of competency must be assessed over a period of time in order to gather evidence of performance over the Range Statements and contexts applicable to the massage therapy work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency is most appropriately assessed in the context in a massage therapy setting, or competition/activity setting with a range of real clients or in a simulated workplace under the normal range of work conditions. For valid and reliable assessment the activity should be conducted at a massage therapy facility. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a period of time and/or in a number of locations, any evidence should be authenticated by colleagues, supervisors, athlete/clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Develop client record by obtaining information through case history, observation, palpation, and other tests • Communicating ideas and information - Use a variety of performance parameters to clearly communicate assessment • Planning and organising activities - Develop, negotiate, and implement a treatment package including advanced massage therapy techniques • Working with teams and others - Establish database of other allied health professionals • Using mathematical ideas and techniques - Identify appropriate tests and functional assessments • Solving problems - Evaluate and recommend best treatment for rehabilitation of sports injuries • Using technology - Use technical aids properly <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

OLDER ADULTS

Contents

SRFOLD001B Plan and deliver exercise for older adults... Error! Bookmark not defined.

SRFOLD001B	PLAN AND DELIVER EXERCISE FOR OLDER ADULTS
OLD	Older adults

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge, skills and attitudes necessary to plan and deliver exercise for older adults in consultation with an allied health professional or medical practitioner.

ELEMENT	PERFORMANCE CRITERIA
1 Work within a network of fitness trainers, allied health and medical professionals	1.1 Recognise and act upon the legal and ethical limitations of a physical activity instructor of older adults 1.2 Contact other suitably qualified allied health professionals and medical professionals to establish a consultative process that meets the client's needs
2 Develop fitness plans for older adults	2.1 Develop a plan incorporating progression methods, performance targets and self-management strategies in consultation with health professionals relevant to the client's needs, eg, the client's medical practitioner and suitably qualified allied health professionals 2.2 Consult clients and the client's relevant health professionals, eg, medical advisers and suitably qualified allied health professionals , as needed, to establish the acceptability of the exercise plan and programs 2.3 Develop ongoing review sessions with clients
3 Apply fitness assessment protocols and procedures to older adults	3.1 Select a modified fitness assessment protocol, suitable for older adult clients accommodating limitations imposed by lifestyle and the physical and psychological effects of aging 3.2 Assess the older client's fitness level using the above fitness assessment protocol 3.3 Use assessment results to establish the exercise program including: frequency, intensity, duration and type for specific older clients 3.4 Following screening, clients who disclose a health, medical or injury condition are recommended to make an appointment with a medical practitioner in order to obtain medical clearance
4 Apply older adult exercise guidelines to older adults	4.1 Design and implement an exercise class for a group of older adults in a range of environments in consultation with relevant health professionals, as needed, eg, the client's medical advisers and suitably qualified allied health professionals 4.2 Select exercises and programs that match the client's needs, abilities and goals 4.3 Identify relevant occupational health and safety issues and implement safe working practices 4.4 Instructors working with older adult clients with identified medical problems or injuries, liaise and consult with health professionals relevant to the client's needs, eg, the client's medical advisers and suitably qualified allied health professionals

<p>5 Modify exercises to incorporate the physical changes that occur with the ageing process when instructing older clients</p>	<p>5.1 Instructors working with older adult clients have knowledge of age associated physical changes and conditions</p> <p>5.2 Instructors inform older adult clients about the physical changes which occur with the ageing process and ways to maintain a good functional lifestyle</p> <p>5.3 Instructors make modifications to exercises to make them safer and effective for older adult clients</p>
<p>6 Modify exercises to incorporate the social and psychological changes that occur with the ageing process when instructing older clients</p>	<p>6.1 Instructors working with older adult clients have knowledge of age associated social and psychological changes and conditions</p> <p>6.2 Instructors inform older adult clients of the social and psychological changes that occur with the ageing process that are related to exercise</p> <p>6.3 Explain the social and psychological benefits that older adults can achieve from exercise to clients</p> <p>6.4 Modify exercise programs to maximise the social and psychological benefits of participation for older clients</p>
<p>7 Modify exercises to incorporate age related health conditions when planning exercise for older adults</p>	<p>7.1 Instructors working with older adult clients have knowledge of age related health conditions</p> <p>7.2 Instructors inform older adult clients about age related health conditions and exercise modification for safe client participation</p> <p>7.3 Explain the health benefits that older adults can achieve from exercise to clients</p> <p>7.4 Modify exercise programs to accommodate the health benefits of participation for older clients with identified age related health conditions</p>
<p>8 Motivate a group of older adults</p>	<p>8.1 Instructors have an understanding of the physical, psychological and social reasons why the clients are participating in the fitness activity</p> <p>8.2 Apply appropriate motivational techniques during class and in other relevant situations</p> <p>8.3 Provide positive and effective feedback to clients</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Age related health conditions	<p>[all categories]</p> <ul style="list-style-type: none"> • musculoskeletal <ul style="list-style-type: none"> ○ arthritis ○ joint replacement ○ osteoporosis • cardiovascular <ul style="list-style-type: none"> ○ hypotension ○ hypertension ○ claudication ○ other cardiac conditions • neurological <ul style="list-style-type: none"> ○ Parkinson's disease ○ stroke • other medical <ul style="list-style-type: none"> ○ diabetes ○ metabolic conditions • thyroid disorders <ul style="list-style-type: none"> ○ cancers ○ obesity ○ under-nutrition ○ incontinence • psychological <ul style="list-style-type: none"> ○ depression ○ dementia • respiratory <ul style="list-style-type: none"> ○ asthma ○ emphysema
Aging process	<p>[all categories]</p> <ul style="list-style-type: none"> • physiological • biomechanical • psychological • social • lifestyle/cultural • general population characteristics
Allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths

	<ul style="list-style-type: none"> • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Benefits	<p>[all categories]</p> <ul style="list-style-type: none"> • improve and/or maintain <ul style="list-style-type: none"> ○ functional capacity ○ bone mass ○ postural issues ○ immune system • management of chronic conditions • enhanced social and recreational opportunities • prevention of falls injury
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • older adult experienced or inexperienced in exercise • frail aged or active aged • medical or injury condition cleared by medical practitioner • Culturally And Linguistically Diverse Communities (CALD)
Exercise class	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise selection/modality • required modifications • sequence of exercises • general training principles • exercise volume/quantity • equipment • program progression • music, if used • enjoyment, participation and motivation
Group	<ul style="list-style-type: none"> • more than five (5) clients whose medical or injury conditions have been cleared by a medical practitioner or allied health professional
Medical practitioner	<p>[all categories]</p> <ul style="list-style-type: none"> • general practitioners (GP) • medical specialists

Physical changes	[all categories] <ul style="list-style-type: none">• musculoskeletal• neuromuscular/neurological• cardiovascular• respiratory• metabolic• body systems, eg, hormones, immune
Range of environments	<ul style="list-style-type: none">• gentle exercise, floor based• resistance training facility• water based facility• community facility• fitness facility• residential facility

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment of performance should be over a period of time covering all categories of all ranges of variable statements that are applicable to exercise with older adult clients. In particular, assessment must confirm the ability to <ul style="list-style-type: none"> ○ plan and deliver exercise for older adults ○ assess the fitness levels of older adult clients ○ instruct older adult exercise classes
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Anatomy and physiology ○ Basic biomechanics • Required skills <ul style="list-style-type: none"> ○ Appropriate verbal, written and listening communication skills for the age and values of the older adult client, in order to develop and implement an appropriate and effective exercise plan ○ Interpersonal skills to enhance interaction with older adult clients ○ Technical expertise and experience in the activity being provided for the older adult client ○ Advanced instructional skills related to the specific concerns of the older adult client ○ Experience in assisting an instructor or trainer working with older adults to improve or maintain fitness

Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ aerobics room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	2	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

PERSONAL TRAINING

Contents

SRFPTI001B Plan and deliver personal training Error! Bookmark not defined.

SRFPTI001B	PLAN AND DELIVER PERSONAL TRAINING
PTI	Personal training

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills to be able to operate effectively as a personal trainer in the fitness industry.

ELEMENT	PERFORMANCE CRITERIA
1 Establish a personal training client base	1.1 Investigate the <i>market</i> for <i>personal training</i> services for <i>clients</i> with no identified health, medical, or injury conditions 1.2 Prepare and implement <i>marketing</i> campaign 1.3 Establish <i>business relationships</i> with fitness enterprises 1.4 Maintain <i>records</i> pertaining to the <i>personal training</i> business
2 Explain the concept of personal training to clients	2.1 Define the term <i>personal training</i> to <i>clients</i> 2.2 Explain the role of <i>personal training</i> in community health promotion to <i>clients</i> 2.3 Explain the benefits and costs of <i>personal training</i> compared with <i>non-supervised exercise</i> and <i>group exercise activities</i> in terms of adherence, safety, achievement of physiological health and fitness benefits and, accessibility to <i>clients</i>
3 Prepare personal training exercise plans	3.1 Induct, screen and appraise <i>clients</i> 3.2 Prepare a timetable of sessions, with draft <i>programs</i> including the aim and objectives of each session, for individual <i>clients</i> 3.3 Plan suitable <i>instructional techniques</i> and strategies 3.4 Plan suitable session <i>assessment</i> techniques 3.5 Consider the <i>exercise environment</i> to ensure client safety
4 Instruct clients using the different learning styles and instructional techniques	4.1 Assess <i>clients</i> for prior knowledge and skill in the activity/ies 4.2 Analyse <i>clients</i> for learning style preferences 4.3 Instruct <i>clients</i> using a range of different <i>instructional styles</i> relevant to the client's <i>learning styles</i> 4.4 Supervise instructors working with <i>clients</i> 4.5 Complete an <i>assessment</i> of the instruction process
5 Improve client exercise adherence	5.1 Record the short and long-term responses of <i>clients</i> in relation to motivation to exercise 5.2 Use <i>motivational theory</i> for individual and group training to increase performance and adherence to exercise 5.3 Identify factors that affect <i>client's</i> adherence to exercise and increase adherence to exercise 5.4 Maintain reports on the motivational techniques used and their effectiveness with <i>clients</i> 5.5 Recommend and implement steps that improve exercise adherence to <i>clients</i>

6 Apply motivational and teaching skills to a long term client

- 6.1 Prepare and review an information brochure related to a request for information from an existing client with the client
- 6.2 Prepare and implement a goal setting review session for a client
- 6.3 Perform a follow up fitness assessment on a client and motivate the through a review of fitness changes and adaptations
- 6.4 Recommend referral to a medical professional for all **clients** who disclose health, medical or injury conditions
- 6.5 Update exercise plans for **clients** and prepare and deliver new exercise programs

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Assessment	<p>[all categories]</p> <ul style="list-style-type: none"> • familiarity and usage of equipment • clarity of instruction • empathy with the client • level of instruction compared with prior level of client knowledge • logical progression • attainment of client goals • attainment of instructors goals • benefits and limitations of each mode of instructional techniques • effects of delivery presentation on the learning of the client
Business relationships	<p>[all categories]</p> <ul style="list-style-type: none"> • operational and financial outcomes • contract/s
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • adults/various ages • screened • active or inactive
Exercise environment	<p>[all categories]</p> <ul style="list-style-type: none"> • indoors • outdoors <ul style="list-style-type: none"> ○ weather ○ location ○ access ○ organisational factors ○ safety factors
Group exercise activities	<p>[all categories]</p> <ul style="list-style-type: none"> • circuit classes • aerobic classes • water based classes • specialty classes • other fitness activities

Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • communication <ul style="list-style-type: none"> ○ voice <ul style="list-style-type: none"> ▪ modulation ▪ tempo ▪ projection ○ body language <ul style="list-style-type: none"> ▪ eye contact ▪ body gestures ▪ facial expressions • listening skills • building rapport • questioning technique • observational technique • feedback • reinforcement
Instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • formal • non-formal
Learning styles	<p>[all categories]</p> <ul style="list-style-type: none"> • activist • pragmatists • theorists • reflectors • visual learners • auditory learners • kinesthetic learners
Market	<p>[all categories]</p> <ul style="list-style-type: none"> • within a facility • within a geographic area • within a specific target population • within the general population
Marketing	<p>[all categories]</p> <ul style="list-style-type: none"> • self analysis • benefits to target market • marketing plan • product definition • pricing • market definition • message • channel • goals and objectives • time management

	<ul style="list-style-type: none"> • budget
Medical professional	<p>[all categories]</p> <ul style="list-style-type: none"> • general practice doctors • medical specialists
Motivational theory	<p>[all categories]</p> <ul style="list-style-type: none"> • indirect versus direct competition • zero-sum versus non zero-sum competition • games theory • drive theory • inverted 'u' • zone of optimal function
Non-supervised exercise	<p>[all categories]</p> <ul style="list-style-type: none"> • walking • jogging • running • bike riding • roller blading • home based • water based • outdoor recreation
Personal training	<p>[all categories]</p> <ul style="list-style-type: none"> • self employed • sub contractor • companies • employee
Programs	<p>[all categories]</p> <ul style="list-style-type: none"> • fitness facility based, such as <ul style="list-style-type: none"> ○ gym ○ floor ○ pool • community setting • outdoors, such as <ul style="list-style-type: none"> ○ walking ○ jogging ○ running ○ bike riding ○ roller blading ○ home based ○ water based ○ outdoor recreation • types <ul style="list-style-type: none"> ○ aerobic ○ interval ○ circuit

	<ul style="list-style-type: none">○ fartlek○ anaerobic threshold○ strength○ speed○ power
Records	[all categories] <ul style="list-style-type: none">• financial<ul style="list-style-type: none">○ budget○ accounting○ taxation○ client transactions• time• objective measures• client assessment• client plans and session records

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ demonstrate and teach exercises incorporating teaching and learning styles appropriate to the client ○ use suitable motivation techniques to motivate a client ○ educate a client in healthy fitness activities
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT007B Undertake relevant exercise planning and programming ○ SRFFIT008B Utilise a broad knowledge of exercise science in exercise planning, programming and instruction ○ SRFFIT009B Undertake postural appraisal of low risk clients ○ SRFFIT010B Utilise a broad range of fitness equipment ○ SRFFIT011B Provide exercise for fitness industry clients with special requirements ○ SRFFIT012B Utilise an understanding of motivational psychology with fitness clients ○ SRFFIT013B Provide information and exercise related to nutrition and body composition ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRXGRO003A Provide leadership to groups ○ SRXOHS002B Implement and monitor the organisation's Occupational Health and Safety policies, procedures and programs • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT013B Provide information and exercise related to nutrition and body composition
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Small business management <ul style="list-style-type: none"> ▪ Self management skills ▪ Basic small business planning ▪ Health and safety guidelines ▪ Legal and insurance considerations

	<ul style="list-style-type: none"> ▪ Cash management and basic account keeping ▪ Awareness of and adherence to small business regulatory requirements ▪ Maintaining client schedules, records and confidentiality ▪ Basic marketing and sales ○ Manage quality client service • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills to enhance interaction with clients ○ Communication (verbal, written and listening skills) related to a wide range of clients to develop goals, motivation, and the development of comprehensive exercise plans ○ Technical expertise and experience in the fitness activity being provided to a specific client to ensure the safety and effectiveness of the activity for the client ○ Instructional skills related to the specific activity being provided to the client to ensure correct explanation, demonstration, and feedback to the client
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of the competency requires access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ○ a fitness centre with the appropriate facilities and equipment for the context of delivery such as <ul style="list-style-type: none"> ▪ a weights gym ▪ aerobics room ▪ pool ▪ community fitness environment ▪ an outdoor environment such as a running track ○ clients able to give information regarding progress in their fitness program • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and context applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”,

	any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	3	3	3	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — • Communicating ideas and information — • Planning and organising activities — • Working with teams and others — • Using mathematical ideas and techniques — • Solving problems — • Using technology — <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SPORTS ADMINISTRATION

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SRSSPA008A	DEVELOP AND MAINTAIN VOLUNTEER PARTICIPATION
SPA	Sports administration

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to develop and maintain the participation and involvement of volunteers in sport clubs and/or organisations.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse needs for volunteer participation	1.1 Identify the organisation's <i>human resource plan</i> 1.2 Identify the benefits to be derived from the participation of <i>volunteers</i> to the organisation and to the volunteers
2 Implement volunteer recruitment program	2.1 Define the purpose and <i>role of volunteers</i> in an appropriate position description 2.2 Identify <i>volunteer rewards</i> and incorporate into recruitment program 2.3 Delegate responsibilities for volunteer coordination to relevant parties 2.4 Identify <i>target areas</i> from which volunteers might be recruited 2.5 Provide opportunities for potential volunteers to experience work roles prior to commitment 2.6 Develop a <i>recruitment and selection checklist</i> based on human resource needs 2.7 Conduct interviews or appraisal test according to human resource management approach to select volunteers
3 Conduct activities to maximise volunteer retention	3.1 Identify and communicate the value of volunteers' <i>diversity</i> , motives and roles 3.2 Develop the <i>human resource plan</i> to reflect a climate of recognition and support for volunteers as part of the <i>work environment</i> and organisation's policy 3.3 Provide suitable induction and training for volunteers to ensure work roles, responsibilities and rights are clearly understood 3.4 Communicate organisational support and commitment in the retention of volunteers 3.5 Conduct counselling and reviews of work roles with volunteers 3.6 Identify areas of concern to volunteers for further action 3.7 Identify <i>social and other motivations</i> of participants in volunteer activity
4 Manage event volunteers	4.1 Communicate role and responsibilities of volunteers in the successful coordination and delivery of events 4.2 Identify the position of volunteer management and planning within the context of <i>event management</i> 4.3 Communicate the value of event volunteers to the organisation 4.4 Communicate the major processes in which event volunteers are involved
5 Develop volunteer management policy	5.1 Identify <i>target areas</i> and outline a rationale for policy development 5.2 Clarify the lines of responsibility for policy development 5.3 Develop policies that address the interaction of volunteers and the organisation 5.4 Ensure policies for volunteer management processes and priorities are documented and transparent to stakeholders
6 Coordinate	6.1 Identify the position and <i>role of volunteers</i> in the organisation

volunteers	6.2 Identify the skills and attributes that may be characteristic of a successful volunteer coordinator 6.3 Develop the roles and responsibilities of the <i>volunteer coordinator</i>
7 Demonstrate leadership in volunteer management	7.1 Identify the role of effective <i>leadership</i> in <i>volunteer management policy</i> 7.2 Provide a creative and motivating environment for volunteers 7.3 Empower volunteers through effective delegations and support for their initiatives 7.4 Encourage volunteers to develop innovative approaches to the performance of work 7.5 Establish <i>problem solving processes</i> to identify and minimise problems, grievances and conflicts 7.6 Promote and manage <i>diversity</i> effectively in volunteer management

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Creating vision	[all categories] <ul style="list-style-type: none"> Inspiring commitment of human resource efforts toward organisational objectives
Diversity	[all categories] <ul style="list-style-type: none"> Any difference between individuals and groups Age Gender Race Nationality Political and philosophical beliefs Or any other different individual or group characteristic
Event management	[all categories] <ul style="list-style-type: none"> Planning and management of events <ul style="list-style-type: none"> Staged once by a particular event organiser eg state hockey championship Annual activities, eg, pro-am golf tournament Events conducted regularly eg, fun runs and walks Open to public or a specific interest group Predetermined opening and closing dates Do not require permanent structures owned by organiser
Human resource plan	[all categories] <ul style="list-style-type: none"> Documentation showing details of an organisations personnel matched to roles and responsibilities
Leadership	[all categories] <ul style="list-style-type: none"> Motivation Volunteers in teams Conflict management Stress management Dealing with difficult volunteers Good practice examples Rewards and recognition
Problem solving processes	[all categories]

	<ul style="list-style-type: none"> • Grievance procedures • Dispute resolution procedures • Mediation • Conciliation • Arbitration
Role of volunteers	<p>[all categories]</p> <ul style="list-style-type: none"> • Coach • Fundraiser • Instructor • Judge • Umpire • Referee • Administrator • Organiser • Leader • Catering • Team support • Management of events • Projects • Finance • Administration of facilities • Administration of equipment/uniforms • Assist with marketing/promotions • Technical assistance • Maintenance • Run events • Supervision of children • Activity leaders • Transport
Recruitment and selection checklist	<p>[all categories]</p> <ul style="list-style-type: none"> • Human resource needs • Job analysis • Recruitment plan • Criteria to screen applicants • Interview process • Reference check
Responsibilities	<p>[all categories]</p> <ul style="list-style-type: none"> • Resource management • Finance • Personnel management • Coaching • Administration
Social and other motivations	<p>[all categories]</p> <ul style="list-style-type: none"> • Socialisation • Enjoyment • Loyalty

	<ul style="list-style-type: none"> • Desire to do something different • Support of family members and/or friends • Meet new people • Break from routine • Sense of involvement • Learn new skills • Increased self esteem • Pathway to employment • Travel • Acknowledgment • Status
Target areas	<p>[all categories]</p> <ul style="list-style-type: none"> • Past and present membership • Family • Friends • Local community and community groups • Volunteer agencies • Unemployed people • Service organisations
Volunteer coordinator	<p>[all categories]</p> <ul style="list-style-type: none"> • Position similar to human resource manager or personnel officer • Manages the volunteer program and volunteer policies • Link between management committee or board and volunteers
Volunteer management policy	<p>[all categories]</p> <ul style="list-style-type: none"> • Volunteer management philosophy • Volunteer eligibility • Rights and responsibilities • Out-of-pocket expenses • Record keeping • Training and accreditation • Absences • Conflict of interest • Dismissing volunteers
Volunteer rewards	<p>[all categories]</p> <ul style="list-style-type: none"> • Free admittance to games/competitions/events • Free/discounted merchandise • Meet new people • Break from routine • Sense of involvement • Learn new skills • Increased self esteem • Pathway to employment

Work environment	[all categories] <ul style="list-style-type: none">• Size of organisation• Type of organisation• Location• Complexity• Product/service range
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of the development and implementation of volunteer management within a club or organisation • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ analyse needs for volunteer participation ○ implement volunteer recruitment program ○ conduct activities to maximise volunteer retention ○ manage event volunteers ○ develop volunteer management policy ○ coordinate volunteers ○ demonstrate leadership in volunteer management
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSPA009A Develop practices to conduct effective club management
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Health and Safety and environmental issues, equal opportunity, industrial relations and anti-discrimination ○ Knowledge of recruitment methods and training processes ○ Knowledge of organisation's policy and procedures for developing roles and responsibilities for volunteers ○ Knowledge of work supervision ○ Knowledge of team facilitation ○ Knowledge of relevant policies related to volunteers ○ Knowledge of human resource specialist assistance available ○ Knowledge of organisational plans and objectives ○ Knowledge of human resource planning ○ Knowledge of organisational support services for volunteers (external and internal) • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills in order to develop rapport with all relevant persons ○ Communication skills, written and verbal, in order to effectively communicate with all relevant persons

Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ◦ relevant guidelines, policies and procedures • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ◦ be competent in this unit ◦ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ◦ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to the issues such as variable sports administration situations, this unit of competency must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to sports administration
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted in a real or simulated environment with sporting participants. The environment should be safe, with noise to a level experienced with an activity in full operation and support serviced provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	-	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Collect and analyse information related to volunteer management • Communicating ideas and information - Develop plan to manage volunteers • Planning and organising activities - Prepare documentation for induction and training of volunteers • Working with teams and others - Seek advice from others • Using mathematical ideas and techniques - Not applicable • Solving problems - Deal with contingencies and establish problem solving processes • Using technology - Use computer to prepare documentation <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSSPA009A	DEVELOP PRACTICES TO CONDUCT EFFECTIVE CLUB MANAGEMENT
SPA	Sports administration

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills to develop practices to conduct effective club management.

ELEMENT	PERFORMANCE CRITERIA
1 Collect information related to formation of a club	1.1 Identify the sport and recreation activity patterns and interests of the local community 1.2 Identify the emerging sport and recreation participation trends 1.3 Identify the existence of sport and recreation facilities 1.4 Identify the demographic trends of the community related to sport and recreation 1.5 Identify transport routes and systems related to sport and recreation access 1.6 Collect information related to town planning and sport and recreation 1.7 Identify the procedure to follow in the formation of a new sport or recreation club or organisation
2 Examine the role of planning	2.1 Identify the advantages of planning and the reasons why planning should be conducted in a sport environment , sports club or organisation 2.2 Identify who is responsible for planning in a sports club or organisation 2.3 Identify the steps in order to conduct a planning workshop in a sports club or organisation 2.4 Clarify the components of a SWOT analysis
3 Identify the role and structure of a committee	3.1 Identify the roles and responsibilities of committees 3.2 identify the structure and processes of committees 3.3 Collect information related to the characteristics of effective committees and committee members
4 Examine the purpose and procedure of meetings	4.1 Identify a variety of meeting types conducted by sports clubs and organisations 4.2 Collect information related to common procedures that occur within meetings 4.3 Develop a basic meeting agenda for a sub-committee
5 Identify the role of club treasurer	5.1 Clarify the position and role of the treasurer within a sports club or organisation 5.2 Identify the skills and equipment required by a club treasurer 5.3 Collect information related to the routine functions of the treasurer as the manager of financial resources in a sport club or organisation
6 Identify the role of sponsorship and fundraising	6.1 Identify the purpose of sponsorship and fundraising in a sports club or organisation 6.2 Establish possible sources for grants and donations 6.3 Identify key fundraising techniques suitable for sports clubs or organisations

7 Recognise the role of marketing and sport promotion	7.1 Identify the purpose of marketing and sport promotion 7.2 Provide the characteristics related to attitude, knowledge and skills needed to undertake the marketing role in a sports club or organisation 7.3 Distinguish the components of a marketing plan
8 Recognise the requirements of personnel in event management	8.1 Identify the main tasks associated with the conduct of a major sport event 8.2 Distinguish the skills, attributes, processes and resources needed to conduct an event
9 Recognise basic legal and risk management issues in sport	9.1 Identify basic legal issues associated within the sport environment 9.2 Collect information related to risk management within the sport environment 9.3 Identify the importance of contractual obligations, copyright issues and specific legislation related to child protection within the sport environment

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Advantages	[all categories] <ul style="list-style-type: none"> • Clarify organisation purpose and direction • Proactive rather than reactive decision making • Initiate and influence outcomes in favour of club or organisation • More control over destiny • Systematic approach to change • Improve financial performance and use resources effectively • Increase awareness of operating environment • Better control and coordination of activities • Better teamwork off the field
Agenda	[all categories] <ul style="list-style-type: none"> • List of items or business to be discussed at the meeting • Prioritise list of items • Change order of agenda
Committees	[all categories] <ul style="list-style-type: none"> • Standing committee • Subcommittee • Management committee
Demographic trends	[all categories] <ul style="list-style-type: none"> • Changes over time in the characteristics of the population <ul style="list-style-type: none"> ○ Population size ○ Age ○ Income levels
Event management	[all categories] <ul style="list-style-type: none"> • Planning and management of events <ul style="list-style-type: none"> ○ Staged once by a particular event organiser eg state hockey championship ○ Annual activities, eg, pro-am golf tournament ○ Events conducted regularly eg fun runs and walks • Open to public or a specific interest group • Predetermined opening and closing dates • Do not require permanent structures owned by organiser
Fundraising	[all categories]

	<ul style="list-style-type: none"> • Systematic approach to secure funds • Beyond operating budget • Used for special activities and projects • Activities include <ul style="list-style-type: none"> ○ Raffles ○ Doorknock appeals ○ Fun runs ○ Walkathons ○ Sausage sizzle
Legal issues	<p>[all categories]</p> <ul style="list-style-type: none"> • Incorporation • Constitution • Negligence • Insurance • Child protection legislation • Harassment • Contracts • Copyright
Marketing	<p>[all categories]</p> <ul style="list-style-type: none"> • Direct organisation central focus and attention to customer's needs • Selling • Product, price, promotion and place
Meeting types	<p>[all categories]</p> <ul style="list-style-type: none"> • Informal • Formal • Committee • Adhoc • Decision making sessions • Group meetings • Briefing session
Participation trends	<p>[all categories]</p> <ul style="list-style-type: none"> • Changes over time in the activity behaviour of the population <ul style="list-style-type: none"> ○ Number and percentage participating in different sports or activities

Planning workshop	<p>[all categories]</p> <ul style="list-style-type: none"> • Involve broad cross section of members • Structured planning process • Collaboration of members
Procedures	<p>[all categories]</p> <ul style="list-style-type: none"> • Standing orders <ul style="list-style-type: none"> ○ Motions ○ Voting ○ Consensus ○ Taking minutes ○ Quorum • Agenda • Chairing the meeting
Promotion	<p>[all categories]</p> <ul style="list-style-type: none"> • Creating awareness • Stimulating interest • Creating desire • Generating action by customer for organisation's products and services
Risk management	<p>[all categories]</p> <ul style="list-style-type: none"> • Protect assets and financial resources • Reduce risk and potential loss • Risk management strategies <ul style="list-style-type: none"> ○ Risk identification ○ Risk assessment ○ Risk reduction
Sponsorship	<p>[all categories]</p> <ul style="list-style-type: none"> • Reciprocal relationship between two parties • Mutual benefits through equitable exchange • Business agreements • Contracts • Specific terms and conditions
Sport environment	<p>[all categories]</p> <ul style="list-style-type: none"> • Size of club or organisation • Type of club or organisation • Location • Complexity • Product/service range

SWOT analysis	[all categories] <ul style="list-style-type: none">• Analysis of a club or organisation related to<ul style="list-style-type: none">○ Internal strengths○ Internal weaknesses○ External opportunities○ External threats
Treasurer	[all categories] <ul style="list-style-type: none">• Position on the management committee or board• Report on financial operations• Accounting of all financial transactions• Responsible for financial position of the organisation at all times• Prepare financial statements

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of the basic practices for effective management of administration activities within a club or organisation • Assessment of performance should be over a period of time covering all categories from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ collect information related to formation of a club ○ examine the role of planning ○ identify the role and structure of a committee ○ examine the purpose and procedure of meetings ○ identify the role of club treasurer ○ identify the role of sponsorship and ○ recognise the role of marketing and sport promotion ○ recognise the requirements of personnel in event management ○ recognise basic legal and risk management issues in sport
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSPA008A Develop and maintain volunteer participation
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Health and Safety and environmental issues, equal opportunity, industrial relations and anti-discrimination ○ Knowledge of organisation's procedures for creating a club ○ Knowledge of club planning to better focus on continuous improvement ○ Knowledge of committee management ○ Knowledge of fundamental meeting procedure ○ Knowledge of role and responsibilities of position of club treasurer ○ Knowledge of basic purpose and strategies for marketing and sport promotion ○ Knowledge of basic principles of sponsorship and fundraising • Required skills <ul style="list-style-type: none"> ○ Interpersonal skills in order to develop rapport with all relevant persons ○ Communication skills, written and verbal, in order to effectively communicate with all relevant persons

Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ relevant guidelines, policies and procedures • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to the issues such as variable sports administration situations, this unit of competency must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to sports administration
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted in a real or simulated environment with sporting participants. The environment should be safe, with noise to a level experienced with an activity in full operation and support serviced provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
1	2	1	2	-	1	-
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Collect and analyse relevant resources • Communicating ideas and information - Explain ideas and information related to aspects of club management • Planning and organising activities - Prepare documentation such as meeting agenda to assist club management • Working with teams and others - Seek advice from others • Using mathematical ideas and techniques - Not applicable • Solving problems - Use meeting procedures to solve problems • Using technology - Not applicable <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SPECIFIC POPULATIONS

Contents

SRFSPP002A Develop and apply an awareness of specific populations to exercise delivery.....	Error! Bookmark not defined.
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SRFSPP002A	DEVELOP AND APPLY AN AWARENESS OF SPECIFIC POPULATIONS TO EXERCISE DELIVERY
SPP	Specific populations

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the skills and knowledge to provide appropriate advice to specific population clients on participation in fitness appraisals and fitness activities. It covers the pathology of the more common disease states and conditions encountered within the fitness industry and the limiting effects of the condition on exercise performance and functional capacity.

ELEMENT	PERFORMANCE CRITERIA
1 Identify specific population clients	<p>1.1 Recognise possible medical conditions, possible injuries and possible use of prescribed medications that should exclude an individual from undertaking pre-exercise screening and fitness appraisal or participating in exercise without a medical clearance and discuss with client</p> <p>1.2 Apply a recognised risk evaluation process to the client's information to determine the risk status of the client and/or the level of risk associated with participation in exercise</p> <p>1.3 Recommend clients who need to make an appointment with a medical professional as required and implement actions resulting from evaluation of risk status</p> <p>1.4 Identify specific populations common to the fitness industry requiring modification to exercise or exercise programs</p>
2 Provide advice to specific population clients regarding exercise testing and participation	<p>2.1 Explain to the client, the limitations of a fitness instructor in prescribing and delivering exercise to identified specific populations are acknowledged and the need for a suitably qualified exercise professional, allied health professional or medical professional to design an exercise program</p> <p>2.2 Apply an understanding of the specific requirements of individuals with specific disease states or conditions when providing information about exercise testing or exercise participation</p> <p>2.3 Apply an understanding of the pathology of the identified disease state, condition or injury to exercise</p> <p>2.4 Evaluate the presence of secondary complications</p> <p>2.5 Use knowledge of the effect of the disease or injury on the acute response to exercise is described and limitations of the individual's functional capacity when delivering exercise to clients</p> <p>2.6 Investigate the effects of medications commonly used to manage the disease or condition through consultation or research</p> <p>2.7 Promote the benefits of exercise for specific populations and discuss the anticipated structural and/or physiological improvements with clients</p> <p>2.8 Provide recommended exercise prescription guidelines for specific populations after consultation with medical and allied health professionals</p> <p>2.9 Recommend suitable fitness activities/exercises and identify unsuitable or contraindicated activities/exercises</p> <p>2.10 Provide advice regarding exercise programs currently available in the fitness industry for specific population clients or groups</p>

<p>3 Provide modifications to the delivery of exercise techniques, exercise programs, fitness equipment and/or facilities for specific populations under the guidance of medical or allied health professionals</p>	<p>3.1 Obtain a medical clearance from clients with disease states or injury prior to participation in any fitness activity</p> <p>3.2 Contact medical and allied health professionals to design an exercise program for a client identified as a specific population or to provide information about their participation in a regular fitness activity</p> <p>3.3 Identify modifications to fitness activities, exercise techniques, fitness equipment and fitness facilities in consultation with a medical professional and suitably qualified allied health professional</p> <p>3.4 Apply exercise considerations and exercise prescription guidelines relevant to the identified specific populations to the delivery of fitness activities undertaken by specific population clients under the supervision of an appropriate medical professional</p> <p>3.5 Advise clients that exhibit signs of poor exercise tolerance to any fitness activity to stop the exercise immediately and make an appointment to see a medical professional</p> <p>3.6 Set realistic and attainable goals for clients and outline strategies to overcome emotional and psychological factors that may hinder exercise adherence</p>
<p>4 Work with a network of medical and allied health professionals to deliver exercise for special populations</p>	<p>4.1 Refer fitness clients to medical and allied health professionals when contraindications to exercise are identified in accordance with organisational policies and procedures</p> <p>4.2 Use appropriate documentation and terminology to communicate information to medical and allied health professionals when referring fitness clients</p> <p>4.3 Maintain client confidentiality at all times</p> <p>4.4 Acknowledge the legal and ethical limitations and social justice rights of fitness instructors designing exercise programs or providing specific advice regarding exercise to specific populations</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Actions resulting from evaluation of risk status	<p>[all categories]</p> <ul style="list-style-type: none"> • referral to a medical professional for further medical evaluation and clearance • clinical test • medical professional present for maximal testing • medical professional present for sub-maximal testing • fitness professional conducts sub-maximal testing
Allied health professionals	<p>[all categories]</p> <p>the following allied health professionals may be suitably credentialled</p> <ul style="list-style-type: none"> • Physiotherapists • Chiropractors • Exercise Physiologist • Occupational Therapists • Osteopaths • Massage Therapists • Sports Physicians • Medical Practitioners • Podiatrists • Dietitians • Therapeutic recreation (Diversional Therapist)
Benefits of exercise for specific populations	<p>[all categories]</p> <ul style="list-style-type: none"> • improved functional capacity • improved quality of life • independence • decreased mortality • decreased morbidity • decrease in medication dosage • relief of symptoms
Clients	<p>[all categories]</p> <ul style="list-style-type: none"> • experienced or inexperienced • adult or children • specific populations with medical clearance • medical conditions or injury under the supervision of an appropriate health or medical professional

Contraindications to exercise	<p>[all categories]</p> <ul style="list-style-type: none"> • absolute • relative • risk of participation outweighs any perceived benefits
Exercise prescription guidelines	<p>[all categories]</p> <ul style="list-style-type: none"> • frequency of exercise • intensity of exercise • duration of exercise or volume of exercises • exercises or activities selected • order of the exercises • equipment utilised • duration of recovery
Exercise programs	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance training • circuit training • endurance training • aerobic fitness • group exercise fitness class • aqua fitness class • circuit training • spinning • gentle exercise • aqua therapy • stretching class
Fitness appraisal	<p>[all categories]</p> <ul style="list-style-type: none"> • heart rate • blood pressure • range of motion • strength • anthropometric measurements <ul style="list-style-type: none"> ○ girth measurements ○ skin folds • basic sub-maximal appraisal of aerobic fitness capacity <ul style="list-style-type: none"> ○ tri-level bicycle ergometer test ○ step up test ○ treadmill • functional tests
Fitness equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • free weights • pin loaded weights • hydraulic systems • air braked systems • cardiovascular/electronic equipment • aquatic equipment

	<ul style="list-style-type: none"> • group fitness equipment • bands • fitball
Fitness facilities	<p>[all categories]</p> <ul style="list-style-type: none"> • weights room • aerobic room • pool • community setting
Level of risk	<p>[all categories]</p> <ul style="list-style-type: none"> • low risk • moderate risk • high risk
Medical conditions	<p>[all categories]</p> <ul style="list-style-type: none"> • cardiovascular disease <ul style="list-style-type: none"> ○ coronary artery disease ○ hypertension ○ congestive heart failure ○ arteriosclerosis ○ peripheral vascular disease ○ cerebrovascular disease • pulmonary disease <ul style="list-style-type: none"> ○ chronic obstructive pulmonary disorder ○ asthma • metabolic disease or conditions <ul style="list-style-type: none"> ○ diabetes ○ obesity ○ thyroid disorder ○ pregnancy • musculoskeletal conditions <ul style="list-style-type: none"> ○ rheumatoid arthritis ○ osteoarthritis ○ osteoporosis ○ lower back pain • cognitive/emotional/sensory disorders <ul style="list-style-type: none"> ○ depression ○ anxiety ○ hearing impairment ○ visual impairment ○ intellectual impairment ○ Alzheimer's • immunological disorders <ul style="list-style-type: none"> ○ acquired immune deficiency syndrome ○ hepatitis ○ glandular fever ○ chronic fatigue • neurological disease <ul style="list-style-type: none"> ○ spinal cord injury ○ cerebral palsy ○ muscular dystrophy ○ Parkinson's disease

	<ul style="list-style-type: none"> ○ cancer • renal disease • liver disease
Medications	<p>[all categories]</p> <ul style="list-style-type: none"> • beta blockers • ace inhibitors • diuretics • calcium channel blockers • vasodilators • hormones — insulin
Medical professional	<p>[all categories]</p> <ul style="list-style-type: none"> • general practitioner • medical specialist
Modifications to exercise or exercise programs	<p>[all categories]</p> <ul style="list-style-type: none"> • frequency of exercise • intensity of exercise • duration of exercise or volume of exercises • exclusion of selected exercises or activities • inclusion of selected exercises or activities • exercise variation • variation of postural position • order of the exercises • equipment utilised • range of movement • speed of movement
Pathology	<p>[all categories]</p> <ul style="list-style-type: none"> • the pathophysiology of the condition • variations of the pathophysiology of the disease/condition • the physical or physiological effects of the disease/condition • the psychological effects of the disease/condition • method of how a sufferer should be managed if complications arise during a fitness activity • effect of the condition on exercise behaviour
Poor signs of exercise tolerance	<p>[all categories]</p> <ul style="list-style-type: none"> • shortness of breath • pallor • dizziness or light-headedness • swelling of ankles • nausea or vomiting • fatigue • claudication • leg cramps

Pre-exercise screening	<p>[all categories]</p> <ul style="list-style-type: none"> • initial screening may consist of <ul style="list-style-type: none"> ○ questionnaire ○ interview ○ medical clearance • initial screening should determine whether the client <ul style="list-style-type: none"> ○ has a medical condition ○ has an injury ○ is on prescribed medication • forms used <ul style="list-style-type: none"> ○ pre-activity screening questionnaire ○ informed consent ○ medical clearance • information obtained <ul style="list-style-type: none"> ○ medical history ○ functional limitations ○ medication ○ lifestyle evaluation ○ fitness goals ○ exercise history ○ time availability
Risk status	<p>[all categories]</p> <ul style="list-style-type: none"> • known disease • increased risk — symptomatic • increased risk — asymptomatic • cardiac risk factors • aged • low risk
Social justice rights	<p>[all categories]</p> <ul style="list-style-type: none"> • <i>Disability Discrimination Acts</i> • <i>Equal Opportunity Acts</i>
Special requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • rehabilitation of musculoskeletal injuries • pre-natal concerns for the mother and foetus • post-natal considerations for the mother • medical condition

Specific populations	[all categories] <ul style="list-style-type: none">• individuals diagnosed with a selection of disease states or conditions which may limit or alter the capacity to exercise• specific populations — clients with specific physiological needs• asthmatic• diabetic• arthritic• osteoporotic• pregnant• older adult• obese• hypertensive• children• injured• specific disability or impairment
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment should confirm sufficient knowledge of exercise guidelines for specific populations. • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ identify specific population clients ○ apply knowledge of the pathology of the disease, condition or injury to exercise prescription and delivery ○ provide suitable advice to specific population clients about exercise participation ○ modify exercise delivery for specific population clients after referral and under the supervision of health professionals
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT004B Develop basic fitness programs ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Basic exercise science ○ The client induction and screening process ○ A industry standard risk evaluation process ○ The principles of training, exercise planning and programming ○ Basic biomechanics ○ Social justice rights ○ Occupational health and safety regulations and relevant industry standard equipment and safety requirements ○ Special needs and requirements of specific population groups • Required skills <ul style="list-style-type: none"> ○ Effective oral and written communication skills to obtain information in order to determine exercise requirements and exercise limitations ○ Interpersonal skills to develop rapport with a range of clients with specific needs ○ Ability to modify instructional techniques to accommodate differing needs of specific population clients ○ Safe operation of fitness equipment
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency requires access to <ul style="list-style-type: none"> ○ a fitness centre with appropriate fitness equipment and facilities such as a weights gym, an exercise to music room, and/or a pool, and/or a community fitness setting ○ appropriate documentation and resources normally used in the workplace including an industry standard screening tool ○ specific population fitness clients • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment

	<p>Guidelines. That is, assessors (or persons within the assessment team) must</p> <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of the fitness industry in Australia. For valid and reliable assessment the fitness activity or procedure should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes. Where the learner does not have the opportunity to cover all categories in the Range Statement in the work environment, the remainder may be assessed through realistic simulations, case studies, projects or oral/written questioning of 'What if' scenarios. ● Where performance is not directly observed and/or is required to be demonstrated over a "period of time" and/or in a "number of locations", any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	3	1	3	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — To identify medication conditions, disease states or injury, to determine specific requirements and needs, to research information about conditions, obtain information about medications • Communicating ideas and information — Provide information to clients about exercise, refer clients to health professionals, consult with health professionals about suitable exercise programs • Planning and organising activities — Deliver exercise programs, modify fitness activities to accommodate clients with specific needs • Working with teams and others — Network with a range of allied health and medical professionals, provide support and advice for a range clients with differing needs • Using mathematical ideas and techniques — Apply concepts relating to physiological responses • Solving problems — Deal with situations where clients rights and specific needs must be met, use information collected to determine most appropriate course of action • Using technology — Utilise technology and fitness equipment to deliver exercise programs and liaise with health professionals <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SPORTS TRAINER

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SRSSPT001A	IMPLEMENT INJURY PREVENTION AND APPLY BASIC SPORTS FIRST AID
SPT	Sports trainer

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the application of sports first aid knowledge and skills to implement an effective injury prevention program, follow immediate injury management strategies in a sport setting in the absence of, and until the arrival of, a health care professional or paramedic. Personnel undertaking this unit would be providing sports first aid in a sport setting.

ELEMENT	PERFORMANCE CRITERIA
1 Operate as a sports first aider	1.1 Conduct sports first aid activities in accord with the accepted <i>roles and responsibilities of a sports first aider</i> 1.2 Maintain hygiene for protection of self, the athlete and others 1.3 Adopt a calm, <i>caring and reassuring manner</i> during interactions with the athlete/s and <i>other relevant stakeholders</i> 1.4 Assist other <i>health care professionals</i> and/or other members of the <i>organisation's medical support team</i> in their tasks in accordance with organisational standards and personal level of responsibility and competence
2 Prepare and implement an injury prevention program	2.1 Assess suitability of <i>playing area, facilities and equipment</i> for safe participation and advise relevant people 2.2 Encourage <i>development of skill and correct technique</i> for individual athletes 2.3 Promote physical fitness to athletes to prevent fatigue 2.4 Emphasise the importance of sportsmanship, fair play and obeying the rules to the athletes 2.5 Maintain individual and team <i>protective equipment</i> and advise relevant people of any needs 2.6 Manage existing injuries 2.7 Assess <i>conditions and external influences</i> effecting sports performance and advise relevant people 2.8 Observe principles of a <i>balanced competition</i> and inform relevant authorities of discrepancies 2.9 Monitor and support athletes with known <i>medical conditions</i> or illnesses 2.10 Assess <i>organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment</i>
3 Assist with warm-up, stretching and cool-down	3.1 Conduct <i>warm-up, stretching and cool-down components</i> of a session in consultation with the team/squad coach
4 Assist with fluid replacement	4.1 Provide fluid replacement to the athletes in consultation with the team/squad coach and/or relevant contact in the <i>organisation's medical support team</i>

<p>5 Follow defined sports first aid crisis management strategies</p>	<p>5.1 Understand details of the incident and provide crisis management in the absence of, and until the arrival of, a health care professional or paramedic</p> <p>5.2 Implement the Danger, Response, Airway, Breathing, Circulation regime including resuscitation procedures and techniques where necessary</p> <p>5.3 Inform the injured athlete and other relevant stakeholders where possible of procedures which are to take place</p> <p>5.4 Operate first aid equipment in accordance with manufacturer's guidelines and instructions and organisational standards, procedures and protocols</p>
<p>6 Follow defined sports first aid immediate injury management strategies</p>	<p>6.1 Provide immediate injury management in the absence of, and until the arrival of, a health care professional or paramedic</p> <p>6.2 Approach injury situations systematically in accord with the Stop, Talk, Observe, Prevent further injury regime or similar</p> <p>6.3 Recognise and identify soft tissue injuries and apply the principles of the Rest, Ice, Compression, Elevation, Referral regime for soft tissue injury immediate management</p> <p>6.4 Recognise life threatening injuries and manage by appropriate action</p> <p>6.5 Recognise serious injuries and manage by appropriate action</p> <p>6.6 Recognise less serious injuries and manage by appropriate action</p> <p>6.7 Recognise overuse injuries and manage by appropriate action</p> <p>6.8 Inform the injured athlete and other relevant stakeholders where possible of the procedures which are to take place</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Balanced competition	<p>[all categories]</p> <ul style="list-style-type: none"> • age • size • strength • skill • gender • disabilities • height • weight
Caring and reassuring manner	<p>[all categories]</p> <ul style="list-style-type: none"> • personal introduction and identification consistent with other priorities • explaining what you are doing and why • treating the 'person', not just the injury
Conditions and external influences	<p>[all categories]</p> <ul style="list-style-type: none"> • environmental/weather conditions • other facility users • injury/illness of athletes • volume/intensity of other training commitments • competition program • sport specific coach influence
Details of the incident	<p>[all categories]</p> <ul style="list-style-type: none"> • the injured athlete • visual assessment of scene • others at the scene
Danger, Response, Airway, Breathing, Circulation regime	<p>[all categories]</p> <ul style="list-style-type: none"> • dangers are assessed to <ul style="list-style-type: none"> ○ self ○ athlete ○ environment • responses <ul style="list-style-type: none"> ○ method of assessing response <ul style="list-style-type: none"> ▪ 'shake and shout' or similar conscious assessment ○ management of <ul style="list-style-type: none"> ▪ a responsive athlete ▪ an unresponsive athlete • airway

	<ul style="list-style-type: none"> ○ methods of clearing and opening airway ○ management of athlete with <ul style="list-style-type: none"> ▪ partial obstruction <ul style="list-style-type: none"> ▪ coughing ▪ complete obstruction <ul style="list-style-type: none"> ▪ conscious <ul style="list-style-type: none"> ▪ head down ▪ back slaps ▪ unconscious <ul style="list-style-type: none"> ▪ head down ▪ back slaps ▪ finger sweeps ▪ lateral chest thrusts ▪ fainting ● breathing <ul style="list-style-type: none"> ○ methods for assessing breathing <ul style="list-style-type: none"> ▪ look, listen and feel ○ management of athlete with breathing difficulty ○ management of a non-breathing athlete ○ Expired Air Resuscitation <ul style="list-style-type: none"> ▪ how ▪ dangers <ul style="list-style-type: none"> ▪ vomiting and regurgitation ▪ stomach inflates ● circulation <ul style="list-style-type: none"> ○ methods of assessing circulation <ul style="list-style-type: none"> ▪ colour of skin ▪ pulse <ul style="list-style-type: none"> ▪ locality ▪ rate ○ management of an athlete with chest pain ○ management of an athlete with no pulse <ul style="list-style-type: none"> ▪ call ambulance ▪ commence External Cardiac Compressions ▪ Cardio-Pulmonary Resuscitation ● bleeding <ul style="list-style-type: none"> ○ signs of <ul style="list-style-type: none"> ▪ internal bleeding ▪ external bleeding ○ management of internal bleeding (shock) <ul style="list-style-type: none"> ▪ refer ○ management of external bleeding <ul style="list-style-type: none"> ▪ direct pressure ▪ elevation ▪ pad and bandage ▪ immobilisation ▪ check ▪ refer ○ considerations <ul style="list-style-type: none"> ▪ unable to control bleeding ○ specific injuries <ul style="list-style-type: none"> ▪ nose ▪ hand ▪ foreign body ● or similar regime
Equipment	<p>[all categories]</p> <ul style="list-style-type: none"> ● first aid kit

	<ul style="list-style-type: none"> • personal protective equipment • stretchers including improvised
Health care professional	<p>[all categories]</p> <ul style="list-style-type: none"> • medical practitioners • physiotherapists • chiropractors • osteopaths • paramedics • massage therapists
Less serious injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • soft tissue injury <ul style="list-style-type: none"> ○ bumps strains ○ sprains ○ management and action ○ RICER • bruises <ul style="list-style-type: none"> ○ management and action ○ RICER • cuts <ul style="list-style-type: none"> ○ management and action ○ control bleeding ○ clean, compress ○ seek medical help ○ seek stitching within 2 hours • blisters <ul style="list-style-type: none"> ○ management and action ○ clean, relieve pressure and friction with appropriate padding • cramps and stitches <ul style="list-style-type: none"> ○ management and action ○ fluid intake ○ stretching ○ gradual conditioning • winded player <ul style="list-style-type: none"> ○ management and action ○ rest in comfortable position ○ do not push knees to chest • bleeding nose <ul style="list-style-type: none"> ○ management and action ○ sit with head forward ○ pinch soft part of nose ○ seek medical help if bleeding persists more than 20 minutes

Life threatening injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • head injuries <ul style="list-style-type: none"> ○ concussion ○ brain damage ○ fractured skull ○ management and action <ul style="list-style-type: none"> ▪ DRABC or similar regime ▪ seek medical help ▪ call ambulance • neck injuries <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ stop activity ▪ do not move if conscious ▪ call ambulance • abdominal injuries <ul style="list-style-type: none"> ○ spleen ○ liver ○ kidney ○ lungs ○ management and action <ul style="list-style-type: none"> ▪ stop activity ▪ ensure victim's safety ▪ seek medical help ▪ call ambulance ▪ rest in pain free position
Medical conditions	<p>[all categories]</p> <ul style="list-style-type: none"> • asthma, in particular exercise induced asthma • known allergies eg bee stings • diabetes • chronic fatigue syndrome • epilepsy
Organisational health and safety requirements, safe and appropriate dress and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • legislation relevant to the provision of emergency care • legislation relevant to the organisation • operational performance standards • appropriate footwear and clothing and personal equipment i.e. activity specific • technical equipment being in safe working order • Australian Sports Commission Doping Policy • State policies on Occupational Health and Safety issues pertaining to safe work practices
Organisations' medical support team	<p>[all categories]</p> <ul style="list-style-type: none"> • medical practitioners • physiotherapists • chiropractors • osteopaths • massage therapists

	<ul style="list-style-type: none"> • rehabilitation therapists
Other relevant stakeholders	<p>[all categories]</p> <ul style="list-style-type: none"> • the client • coach/es • other health professionals • parents/guardians • family • friends • other involved/appropriate personnel • manager • facility manager • facility owner
Overuse injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • shin soreness <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ decrease painful activity ▪ RICER or similar regime ▪ correct footwear ▪ orthotic control • knee pain <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ decrease activity ▪ RICER or similar regime ▪ physiotherapy ▪ tape ▪ correct footwear ▪ orthotic control • heel pain <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ decrease activity ▪ RICER or similar regime ▪ physiotherapy ▪ stretching ▪ correct footwear ▪ orthotic control • shoulder pain <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ decrease activity ▪ RICER or similar regime ▪ physiotherapy ▪ stretching ▪ exercises ▪ modify activity • elbow pain <ul style="list-style-type: none"> ○ management and action <ul style="list-style-type: none"> ▪ decrease activity ▪ RICER or similar regime ▪ physiotherapy ▪ stretching ▪ elbow brace ▪ modify technique

Playing area, facilities and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • building • playing field indoors, eg, slippery floors • playing field outdoors eg exposed sprinkler heads • equipment, eg, goal posts, gymnastic mats
Protective equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • clothing • shin pads • face masks • shoulder pads • chest pads • protectors • head gear • helmets • other protective equipment as deemed necessary by the sport • protective equipment used should be <ul style="list-style-type: none"> ○ designed to protect against injury ○ light and comfortable to wear ○ in good condition ○ correctly assembled ○ correctly worn by the participant ○ an approximate size and fit and not interfere with function ○ appropriate for the sport and conditions encountered
Resuscitation procedures and techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • are conducted in accord with recognised resuscitation standards • includes <ul style="list-style-type: none"> ○ 'shake and shout' or similar assessment ○ roll to stable side or recovery position ○ management techniques for clearing the airway <ul style="list-style-type: none"> ▪ removal of foreign objects ▪ head tilt and jaw support ▪ back slaps ▪ lateral chest thrusts ○ look, listen and feel breathing assessment ○ management techniques to maintain a clear airway <ul style="list-style-type: none"> ▪ head tilt ▪ jaw support ▪ jaw thrust ○ check for signs of circulation ○ recovery checks <ul style="list-style-type: none"> ▪ conscious state ▪ airway ▪ breathing ▪ pulse ○ Expired Air Resuscitation using mouth to mouth ○ Cardio - Pulmonary Resuscitation in a one person situation ○ Cardio - Pulmonary Resuscitation as part of a two person team ○ steps to be taken if the chest doesn't rise, stomach inflates or vomiting occurs ○ adaptations to resuscitation techniques for children and infants

RICER regime	<p>[all categories]</p> <ul style="list-style-type: none"> • Rest • Ice • Compression • Elevation • Referral • or similar
Role and responsibilities of a sports first aider	<p>[all categories]</p> <ul style="list-style-type: none"> • maintaining injury management records • crisis management in the absence of, and until the arrival of, a health care professional or paramedic • immediate injury management in the absence of, and until the arrival of, a health care professional or paramedic • prevention of injury by <ul style="list-style-type: none"> ○ assessing and advising on the suitability of venues for safe participation ○ assessing and advising on the safety, cleanliness and hygiene of the change rooms ○ maintaining team protective equipment ○ managing existing illness or injury ○ managing group hygiene • the sports first aider will be able to assist with, under the guidance of the team/squad coach <ul style="list-style-type: none"> ○ warm-ups, stretching and cool down ○ fluid replacement • the sports first aider will be able to advise on <ul style="list-style-type: none"> ○ appropriateness of change room facilities ○ individual protective equipment ○ personal hygiene ○ environmental conditions affecting sports performance • The sports first aider will have a knowledge of the importance of the following factors in relation to the prevention of injury or medical situation <ul style="list-style-type: none"> ○ development of skills in sport ○ rules of the game they are involved with ○ balanced competition ○ taping and bracing ○ common medical conditions which may be significant during sports participation
Serious injuries	<p>[all categories]</p> <ul style="list-style-type: none"> • head and facial injuries <ul style="list-style-type: none"> ○ eye injury <ul style="list-style-type: none"> ▪ management and action ▪ cover both eyes ▪ seek medical help ○ broken jaw <ul style="list-style-type: none"> ▪ management and action ▪ victim supports jaw with hand ▪ RICER ▪ seek medical help ○ broken nose <ul style="list-style-type: none"> ▪ management and action ▪ RICER

	<ul style="list-style-type: none"> ▪ do not blow nose ▪ seek medical help ○ teeth injuries <ul style="list-style-type: none"> ▪ management and action ▪ rinse in milk ▪ reinsert if possible ▪ transport to dentist in milk or cling wrap ▪ seek dental help within 4 hours ● broken bones <ul style="list-style-type: none"> ○ management and action ○ stop activity ○ ensure victims safety ● soft tissue injury <ul style="list-style-type: none"> ○ tendon or muscle tears ○ joint injury ○ management and action ○ RICER ○ seek medical help
Soft tissue injuries	<p>[all categories]</p> <ul style="list-style-type: none"> ● bumps ● sprain ● strain ● management and action ● RICER
STOP regime	<p>[all categories]</p> <ul style="list-style-type: none"> ● stop <ul style="list-style-type: none"> ○ stop the athlete from participating or moving ○ stop the game if necessary ● talk <ul style="list-style-type: none"> ○ what happened? ○ how did it happen? ○ what did you feel? ○ where does it hurt? ○ does it hurt anywhere else? ○ can you play on? ○ if no, arrange appropriate transport ● observe <ul style="list-style-type: none"> ○ observe whilst talking to the athlete ○ general <ul style="list-style-type: none"> ▪ Is the athlete distressed? ▪ is the athlete lying in an unusual position/posture? ○ injury site <ul style="list-style-type: none"> ▪ is there any swelling, deformity or discoloration? ▪ can the athlete move the injured part? ▪ if yes, ● does it hurt to move? ● is the range of movement restricted compared to normal? ● is the range of movement restricted compared to the other side or limb? <ul style="list-style-type: none"> ○ if no, arrange appropriate transport ● prevent further injury ● or similar regime

Warm-up, stretching and cool-down components	[all categories] <ul style="list-style-type: none">• warm-up<ul style="list-style-type: none">○ series of rhythmic activities and exercise that gradually increases the body and muscle temperature• stretching<ul style="list-style-type: none">○ series of activities and exercises that helps to lengthen muscles and increase joint mobility to reduce strain during exercise• cool-down<ul style="list-style-type: none">○ series of exercises that gradually lowers the body and muscle temperature○ decreases the blood and oxygen supply to the working muscles after a period of prolonged exercise
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of an effective injury prevention program and the principles of sports first aid in a sports setting • Assessment of performance should be over a period of time covering all categories of sports training from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ operate in accord with the accepted roles and responsibilities of a sports first aider ○ prepare and implement an injury prevention program ○ assist with warm-up, stretching and cool down ○ assist with fluid replacement ○ follow defined Sports First Aid crisis management strategies ○ follow defined Sports First Aid immediate injury management strategies ○ recognise life threatening injuries and apply injury management action ○ recognise serious injuries and apply injury management action ○ recognise less serious injuries and apply injury management action ○ recognise overuse injuries and apply injury management action
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of development of skills in sport relevant to injury prevention ○ Knowledge of rules of game relevant to injury prevention ○ Knowledge of balanced competition relevant to injury prevention ○ Knowledge of common medical conditions which may be significant during sports participation ○ Knowledge of the principles of warm-up, stretching and cool-down ○ Knowledge of basic anatomy and physiology relevant to applying basic first aid ○ Knowledge of relevant occupational health and safety legislation ○ Knowledge of relevant occupational health and safety guidelines for lifting and carrying ○ Knowledge of factors which affect healing ○ Knowledge of dressings available for dry wound management and moist wound management, how to use them and their advantages and disadvantages ○ Knowledge of causes and management of unconscious person ○ Knowledge of procedures for managing life threatening injuries ○ Knowledge of procedures for managing serious injuries ○ Knowledge of procedures for managing less serious injuries ○ Knowledge of procedures for managing overuse injuries

	<ul style="list-style-type: none"> ○ Knowledge of the principles of the DRABC regime or similar regime ○ Knowledge of the principles of the RICER regime or similar regime ○ Knowledge of the principles of the STOP regime or similar regime ○ Knowledge of procedures for effectively controlling external bleeding ○ Knowledge of the role and responsibilities of a sports first aider • Required skills <ul style="list-style-type: none"> ○ Accurately perform resuscitation techniques and procedures on a manikin in accord with approved standards ○ Communicate verbally with casualties and others ○ Provide verbal reports to paramedical personnel ○ Work with others in a team situation, as applicable
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ a group of clients participating in a physical activity ○ simulated client injury incident ○ first aid equipment • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as reliability and observation this unit of competency must be assessed over a period of time in order to ensure consistency of performance over the Range Statements and contexts applicable to sports training
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of simulated clients. For valid and reliable assessment the activity should be conducted with clients participating in a workplace with simulated sports injury incidents. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
1	2	1	2	1	1	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Observe, question and compile relevant details of an incident • Communicating ideas and information - Provide clear and comprehensive reports • Planning and organising activities - Prepare and implement an injury prevention plan • Working with teams and others - Manage group hygiene and support athletes • Using mathematical ideas and techniques - Follow relevant infectious disease procedures • Solving problems - Recognise and apply management techniques for injury • Using technology - Monitor safety and cleanliness of first aid equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

STRENGTH AND CONDITIONING

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SRSSTC001A	TEACH OR DEVELOP BASIC SKILLS OF STRENGTH AND CONDITIONING
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills required to use skills to use drills, exercises and activities to teach or develop basic skills or strength and conditioning.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the basic skills	1.1 Identify the basic skills of strength and conditioning for specified outcomes according to characteristics of the sport 1.2 Identify and document a technique checklist
2 Prepare the athlete for involvement in a strength and conditioning program	2.1 Clarify the basic skills of strength and conditioning to be developed, to the athlete and relevant support personnel 2.2 Clarify the principles of the physiological adaptations to training to the athlete and relevant support personnel 2.3 Clarify the principles of the anatomical adaptations to training to the athlete and relevant support personnel 2.4 Clarify a range or approaches for programming for specific outcomes to the athlete and relevant support personnel 2.5 Assess organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment
3 Identify preferred teaching/coaching methods and styles to develop the basic skills	3.1 Identify teaching methods in consultation with the athlete in the context of specific skills 3.2 Use feedback in coaching/teaching 3.3 Use demonstrations when coaching/teaching 3.4 Use different types of questions in the coaching/teaching 3.5 Use a variety of coaching or teaching styles in relation to a range of coaching/teaching situations 3.6 Ensure the type and style of explanation and terminology used is understood by the athlete 3.7 Adapt the types and use of coaching/instructional styles to suit a range of coaching/teaching situations
4 Assess the athlete's readiness for involvement in a strength and conditioning program	4.1 Evaluate the athletes health and training status 4.2 Discuss training background and exercise history in strength and conditioning programs with the athlete and relevant support personnel 4.3 Assess athlete/s readiness to acquire and perform the core lifts and exercises that form the basis of the basic skill/s of strength and conditioning 4.4 Select appropriate testing protocols and implement to assess the athlete's readiness to develop/acquire the basic skills of strength and conditioning 4.5 Select the core lifts and exercises that form the basis of the basic skills of strength and conditioning to be included in the program based on testing 4.6 Recognise and address factors which may affect the acquisition of the basic skills of strength and conditioning as result of testing

<p>5 Conduct drills, activities and/or games to teach or develop basic skills</p>	<p>5.1 Select teaching methods and coaching/instructional styles to match the participants readiness, the environment, the activity and the equipment available</p> <p>5.2 Allocate sufficient space and resources for the drill, activity and/or game</p> <p>5.3 Deliver relevant information, explanations and demonstrations to ensure drills, activities and/or games concisely and precisely</p> <p>5.4 Use technological aids to supplement presentations</p> <p>5.5 Place emphasis on practical involvement while adjusting or refining skills on an individualised basis</p> <p>5.6 Observe participants to see that the drills, activities and/or games are conducted in accord with the rules, regulations, policies and accepted best practice principles of strength and conditioning</p> <p>5.7 Observe participants skill execution and apply correction techniques to improve basic skills on an individualised basis</p> <p>5.8 Observe with minimal disruption to the flow of the drill, activity or game</p> <p>5.9 Make modifications to the activity when necessary</p> <p>5.10 Monitor the skill being taught, the teaching method and coaching/instructional styles during the instruction and assess following the instruction</p> <p>5.11 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience</p>
<p>6 Conduct strength and conditioning training techniques</p>	<p>6.1 Demonstrate fundamental exercise techniques to athletes which they conduct</p> <p>6.2 Conduct resistance training techniques related to hypertrophy, strength, power and endurance training</p> <p>6.3 Supervise athletes in practice for core lifts and exercises that form the basis of resistance training</p> <p>6.4 Conduct training methods and exercises for elastic energy training</p> <p>6.5 Conduct training methods and exercises for speed and agility training</p> <p>6.6 Conduct training methods and exercises for aerobic training</p> <p>6.7 Conduct training methods and exercises for anaerobic training</p> <p>6.8 Conduct training methods and exercises for flexibility training</p> <p>6.9 Conduct training methods and exercises for stability training</p> <p>6.10 Use a range of approaches for programming for specific outcomes</p>
<p>7 Review and adapt the teaching of the basic skills of strength and conditioning in response to feedback</p>	<p>7.1 Make relevant points of emphasis before, during and/or after demonstration of techniques and training methods</p> <p>7.2 Implement modifications to the teaching method and coaching style in response to results of the monitoring</p> <p>7.3 Give participants the opportunity to comment and/or ask questions</p> <p>7.4 Adapt the teaching method and coaching style in consideration of pre-adolescent athletes, females and older athletes</p> <p>7.5 Apply modification to training methods and adaptations to include pre-adolescent athletes, females and older athletes</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aerobic training	[all categories] <ul style="list-style-type: none"> • continuous training • interval training • fartlek training • cross training
Anaerobic training	[all categories] <ul style="list-style-type: none"> • high intensity short interval training
A range of approaches for programming for specific outcomes	[all categories] <ul style="list-style-type: none"> • modes of resistance training for strength • modes of power training • modes of elastic energy training • modes of speed/agility training • modes of aerobic training • modes of anaerobic training • modes of stability training • modes of recovery training
Adaptations to include pre-adolescent athletes, females and older athletes	[all categories] <ul style="list-style-type: none"> • refers to recommended programming guidelines in relation to appropriate sets and reps • preference for the use body weight support and resistance exercises • benefits of appropriate training • should follow the best practice principles of strength and conditioning
Athletes	[all categories] <ul style="list-style-type: none"> • are usually committed and self-motivated to improve their performance • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • are usually over the age of 10 years with some sport specific exceptions such as gymnastics or swimming where they may be younger and/or • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups

Basic skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance training for strength, power and muscle endurance • speed and agility • aerobic endurance • anaerobic endurance • flexibility • stability • elastic energy
Best practice principles of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • the sport's coaches or instructors code of conduct policy developed by the peak bodies responsible for the development of teaching and coaching • Australian Sports Commission's Harassment-free Sport policy • Australian Sports Commission's drugs in sport policy • National Activity Organisation's regulations and guidelines • relevant National, State/Territory or Local government regulations and guidelines • employer organisations policies and procedures • the culture of the sport/activity • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation styles adopted by the instructor or coach to communicate with the client/athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding negotiable issues, eg, safety factors ○ humorous when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in athletes
Core lifts and exercises that form the basis of the basic skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • abdomen <ul style="list-style-type: none"> ○ bent-knee sit-up ○ crunch <ul style="list-style-type: none"> ▪ roll outs ▪ reverse crunch ▪ side bends ▪ prone & hold • back <ul style="list-style-type: none"> ○ bent over row ○ lat pulldown

	<ul style="list-style-type: none"> ○ seated row ○ pull ups ○ good mornings ○ back extensions ○ deadlifts ○ Romanian deadlifts • biceps <ul style="list-style-type: none"> ○ biceps curl ○ hammer curl ○ preacher curl • calves and ankles <ul style="list-style-type: none"> ○ standing calf (heel) raise ○ seated calf (heel) raise ○ anterior lower leg ○ dorsi flexor ○ peroneal flexions & wobble board • chest <ul style="list-style-type: none"> ○ flat bench press (and dumbbell version) ○ incline dumbbell press (and barbell version) ○ flat dumbbell fly (and incline version) ○ vertical chest press ○ dips ○ push ups • forearms <ul style="list-style-type: none"> ○ wrist curl ○ wrist extension • hip/thigh <ul style="list-style-type: none"> ○ hip sled ○ back squat ○ front squat ○ forward lunge ○ step-up ○ deadlift ○ stiff leg deadlift ○ leg (knee) extension ○ leg (knee) curl ○ multi hip ○ kneeling fall forward ○ medicine ball hamstring throws • shoulders <ul style="list-style-type: none"> ○ seated shoulder press ○ machine shoulder press ○ upright row ○ flyes, front raises, bent over flyes ○ shrugs ○ rotator cuff internal external rotation • triceps <ul style="list-style-type: none"> ○ lying triceps extension ○ triceps pushdown ○ bent over tricep extension ○ close grip bench press • power exercises <ul style="list-style-type: none"> ○ push press (and push jerk) ○ clean & power clean ○ snatch and power snatch ○ snatch and clean pulls ○ medicine ball throws • proprioception and neuromuscular coordination exercises <ul style="list-style-type: none"> ○ overhead squat
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	<ul style="list-style-type: none"> ○ drop snatch ○ swiss ball ○ balance board
Fundamental exercise techniques	<p>[all categories]</p> <ul style="list-style-type: none"> ● hand grips ● stable body and limb positioning ● movement range of motion and speed ● breathing ● spotting
Flexibility training	<p>[all categories]</p> <ul style="list-style-type: none"> ● types of stretching <ul style="list-style-type: none"> ○ static stretch ○ ballistic stretch ○ dynamic stretch ○ proprioneuromuscular facilitation (PNF) ○ range of motion ● stretching techniques include exercises for <ul style="list-style-type: none"> ○ neck ○ shoulders and chest ○ posterior of upper arm ○ upper back ○ lower back ○ hips ○ torso ○ anterior of thigh and hip flexor ○ posterior of thigh and hip extensors ○ groin ○ calf ○ iliotibial band
Health and training status	<p>[all categories]</p> <ul style="list-style-type: none"> ● athletes current condition of level of preparedness to begin a new or revised program
Organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> ● appropriate footwear and clothing and personal equipment ● technical equipment, eg, safe working order ● assess, prescribe and monitor athlete loading ● the Australian Sports Commission doping policy ● State/Territory policies on Occupational health and safety issues pertaining to safe work practices ● gymnasiums, Local Council facilities and private facilities ● appropriate safety equipment
Principles of the physiological adaptation to training	<p>[all categories]</p> <ul style="list-style-type: none"> ● hypertrophy adaptations ● neural adaptations

	<ul style="list-style-type: none"> cellular adaptations
Resistance training techniques	<p>[all categories]</p> <ul style="list-style-type: none"> whole body or compound exercises exercises for specific muscle groups or isolation exercises strength exercises power exercises stability or proprioceptive exercises
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> human resources - a ratio of coaches to athletes that allows for maximum participation in a safe environment equipment - a ratio of equipment to athletes that allows for maximum participation in a safe environment access to first aid facilities/equipment appropriate facilities to conduct training/competition in a safe environment
Speed, agility training / elastic energy training	<p>[all categories]</p> <ul style="list-style-type: none"> speed refers to <ul style="list-style-type: none"> running speed based on stride frequency and stride length sprinting technique acceleration agility refers to <ul style="list-style-type: none"> sport/event related change in direction and speed horizontal, vertical, two point and four point movement patterns elastic energy drills for <ul style="list-style-type: none"> lower body <ul style="list-style-type: none"> jumps in place standing jumps multiple jumps and hops box drills depth jumps upper body <ul style="list-style-type: none"> throws push ups
Strength and conditioning programs	<p>[all categories]</p> <ul style="list-style-type: none"> programs designed to develop the basic skills of strength and conditioning
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> administrators coaches sports scientists sports medicine providers agents other health professionals parents guardians other involves/appropriate personnel

Teaching methods	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional or coaching approaches adopted by the instructor or coach to convey instructional content to the client/athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole, part, whole approaches ○ shaping approaches ○ command and response approaches ○ reciprocal or peer tutoring approaches ○ directive approaches through specific set tasks ○ feedback and refinement approaches ○ guided discovery approaches (setting problems and allowing athletes to discover solutions) and/or ○ experimental or problem solving approaches
Testing protocols	<p>[all categories]</p> <ul style="list-style-type: none"> • to conduct appropriate test measures the following physiological parameters <ul style="list-style-type: none"> ○ aerobic performance ○ anaerobic performance ○ strength/power ○ speed/agility ○ core, pelvic, trunk and shoulder stability
Training background and exercise history	<p>[all categories]</p> <ul style="list-style-type: none"> • training that occurred before athlete began new or revised program including consideration to <ul style="list-style-type: none"> ○ type of training program, eg, strength, sprint, plyometric ○ length of recent regular participation in previous training programs ○ level of intensity involved in previous training programs ○ degree of exercise technique experienced

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of techniques, drills and activities to teach and develop the basic skills of strength and conditioning • Assessment of performance should be over a period of time covering all categories of strength and conditioning training from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ provide a safe teaching environment ○ consider athlete/team in context of training status ○ analyse the biomechanical characteristics of sporting technique to develop basic skills of strength and conditioning ○ identify appropriate teaching methods and coaching styles to develop basic skills of strength and conditioning ○ assess athlete/team readiness to acquire and perform the basic skills of strength and conditioning ○ conduct drills, activities and games to teach or develop the basic skills of strength and conditioning ○ modify teaching methods and activities according to feedback
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC002A Plan and prepare a strength and conditioning program for a competitive athlete ○ SRSSTC003A Operate in accord with accepted strength and conditioning industry health and safety practices ○ SRSSTC004A Operate and maintain strength and conditioning facilities and equipment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of human muscular physiology ○ Knowledge of human neuromuscular anatomy and adaptation to conditioning ○ Knowledge of biomechanics of sport technique ○ Knowledge of human bioenergetics and metabolism ○ Knowledge of bone, muscle and connective tissue adaptation to physical activity ○ Knowledge of adverse neural tension in athletes ○ Knowledge of stability exercises ○ Knowledge of anatomical, physiological and biomechanical differences of athletes including age and sex ○ Knowledge of adaptation to aerobic endurance training ○ Knowledge of resistance training and spotting techniques ○ Knowledge of speed, agility and plyometric training

	<ul style="list-style-type: none"> ○ Knowledge of flexibility training and types of stretching ○ Knowledge of aerobic endurance exercise training ○ Knowledge of periodisation and training variation ○ Knowledge of exercise prescription principles ○ Knowledge of overuse injury and other conditions that may affect planning for strength and conditioning program ○ Knowledge of affect of pain on performance ○ Knowledge of rehabilitation programs ○ Knowledge of drills, activities and games to teach the basic skills of strength and conditioning ○ Knowledge of relevant equipment and safety requirements (including Occupational Health and safety and legislative requirements) ● Required skills <ul style="list-style-type: none"> ○ Skills used to teach the advanced skills of strength and conditioning (eg, movement, voice, use of technical aids) ○ Ability to provide explanations and demonstrations, eg, self, other athletes as models, videos ○ Monitoring/observation skills in order to make necessary adjustments to training programs to improve skills ○ Feedback and questioning skills in order to communicate effectively with participants ○ Ability to conduct drills, activities and/or games in accordance with the accepted best practice in coaching strength and conditioning ○ Ability to use modern technology to assess athletes and apply to planning programs ○ Ability to measure postural stability to plan for strength and conditioning ○ Ability to provide social support to an athlete with overall pain
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access <ul style="list-style-type: none"> ○ a group of athletes participating in a strength and conditioning activity ○ a gymnasium or strength training facility and other equipment ○ rules, policies and regulations of relevant peak bodies and/or employer organisations ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as coaching effectiveness this unit of competency must be assessed over three (3) sessions in order to ensure consistency in performance over the Range Statements and contexts applicable to prescribing exercise for athletes in strength and conditioning
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the sporting activity should be conducted in a sports training facility with competitive athletes participating in strength and conditioning activities. The environment should be safe, with a noise to a level experienced with

	<p>an activity in full operation and support services provided for optimum performance</p> <ul style="list-style-type: none">• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Create biomechanical checklist of basic skills • Communicating ideas and information - Vary instructing styles according to participants' readiness • Planning and organising activities - Plan space, resources and time accordingly • Working with teams and others - Lead a class • Using mathematical ideas and techniques - Use proper lifting techniques • Solving problems - Observe and modify basic skill faults • Using technology - Ensure that teaching and audio-visual aids are in good working order <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSTC002A	PLAN AND PREPARE A STRENGTH AND CONDITIONING PROGRAM FOR A COMPETITIVE ATHLETE
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills required to plan and prepare a strength and conditioning program for a competitive athlete.

ELEMENT	PERFORMANCE CRITERIA
1 Assess the athlete's readiness for involvement in a strength and conditioning program	1.1 Evaluate the athletes strengths and weaknesses and health and training status 1.2 Discuss training background and exercise history in strength and conditioning programs with the athlete and relevant support personnel 1.3 Assess athlete/s readiness to acquire and perform the core lifts and exercises that form the basis of the basic skill/s of strength and conditioning 1.4 Select appropriate testing protocols and implement to assess the athlete's readiness to develop/acquire the basic skills of strength and conditioning 1.5 Select the core lifts and exercises that form the basis of the basic skills of strength and conditioning to be included in the program based on testing 1.6 Recognise and address factors which may affect the acquisition of the advanced skills of strength and conditioning as result of testing
2 Plan a strength and conditioning training program	2.1 Analyse and document athletes selected activity or sports discipline 2.2 Develop profiles for each individual athlete or team participating in the training program using appropriate assessment measures 2.3 Establish fixed points of the program and identify and document phases within the training program 2.4 Develop objectives for the training program, and each phase within the training program in consultation with the athletes and reflect the analysis of the activity and the athletes profiles 2.5 Design a process to develop identified aims and integrate all components of the training and development program 2.6 Plan requirements for each session within the program 2.7 The training program empowers the athlete 2.8 Plan methods and scheduling of monitoring the training program prior to implementation 2.9 Assess work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress, safety and hygiene rules and requirements, venue and equipment
3 Apply exercise prescription to training program	3.1 Apply exercise selection and exercise order to maximise performance 3.2 Conduct training methods based on training load, repetition and volume 3.3 Conduct training methods based on work duration, rest periods, and frequency 3.4 Conduct training methods related to periodisation and training variation 3.5 Conduct training methods related to rehabilitation and reconditioning 3.6 Apply modifications to training methods and adaptations to include pre-adolescent athletes, women and mature-aged athletes 3.7 Apply modifications to training methods and adaptations to include athletes with a disability 3.8 Observe participants to see that exercises are conducted in accord with rules and regulations and accepted best practice principles of strength

	<i>and conditioning</i>
4 Prepare a strength and conditioning training program for a competitive athlete	<p>4.1 Prepare a training program for strength and conditioning with appropriate documentation</p> <p>4.2 Prescribe exercises to maximise performance and minimise and or decrease injury susceptibility</p> <p>4.3 Prepare requirements and resources for each session within the program</p> <p>4.4 Prepare methods and scheduling of monitoring the training program prior to implementation</p> <p>4.5 Select exercises based on athletes health and training status, strength and conditioning levels and training goals</p> <p>4.6 Prepare resistance training exercises for a training program</p> <p>4.7 Prepare conditioning exercises for a training program</p> <p>4.8 Prepare plyometric exercises for a training program</p> <p>4.9 Prepare flexibility training exercises for a training program</p> <p>4.10 Prepare exercises to improve speed and agility in a training program</p> <p>4.11 Prepare exercises to improve core stability in a training program</p> <p>4.12 Prepare exercises to improve healthy and injured shoulder joint position sense</p> <p>4.13 Prepare exercises to improve pelvic position sense</p> <p>4.14 Prepare exercises to re-establish proprioception and neuromuscular control in an injured athlete</p>
5 Plan for competitive performance situations within the training program	<p>5.1 Develop a competitive strategy which matches the athletes and/or teams profiles</p> <p>5.2 Identify strengths and weaknesses of the opposition in activities in which information will affect the athletes performances</p> <p>5.3 Develop athlete and/or team tactics to match the high performance strategy and the opposition profile where that is identified</p> <p>5.4 Identify and document support needs for the competition/performance</p> <p>5.5 Develop job descriptions for support personnel</p> <p>5.6 Match support needs with available resources</p> <p>5.7 Identify potential barriers to communication with athletes during competition/performance, and within relevant rules and regulations, develop strategies to overcome these barriers</p> <p>5.8 Integrate multiple performance objectives over a period of time</p>
6 Plan a recovery program	<p>6.1 Plan appropriate recovery methods and strategies according to the training program</p>
7 Plan rehabilitation and reconditioning programs	<p>7.1 Identify and document the body's physiological responses to injury and the healing processes</p> <p>7.2 Identify and document potential psychological responses to injury</p> <p>7.3 Identify clinical factors that influence the program are identified</p>
8 Liaise with other coaches and specialists	<p>8.1 Establish ongoing liaison between coaches/instructors where coaches/instructors work with the same athlete</p> <p>8.2 Identify and document role and responsibilities of the individual coaches/instructors</p> <p>8.3 Identify potential conflicts and conflict resolution</p>

9 Selection procedures are identified	<ul style="list-style-type: none">9.1 Establish selection policies, procedures and criteria9.2 Critique methods of testing and assessing athletes9.3 Identify data required in relation to the context of the selection and explain the strategy9.4 Develop a strategy for determining an individuals skills in a team environment
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Adaptations to include athletes with a disability	[all categories] <ul style="list-style-type: none"> • athletes with sensory, physical, intellectual impairment <ul style="list-style-type: none"> ○ sight loss ○ hearing loss ○ physical disability, eg, amputees, wheel chair athletes
Adaptations to include pre-adolescent athletes, women and mature aged athletes	[all categories] <ul style="list-style-type: none"> • refers to recommended programming guidelines in relation to appropriate sets and repetitions • preferences for the use body weight support and resistance exercises • benefits of appropriate training • should follow the best practice principles of strength and conditioning
Analyse	[all categories] <ul style="list-style-type: none"> • physical • psychological • tactical • technical
Athlete/s	[all categories] <ul style="list-style-type: none"> • are usually committed and self-motivated to improve their performance • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • are usually over the age of 10 years with some sport specific exceptions such as gymnastics or swimming where they may be younger, and/or • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Assessment measures	[all categories] <ul style="list-style-type: none"> • field assessments of fitness components • interviews with athletes • observation of performance • performance history
Best practice principles of strength	[all categories]

and conditioning	<ul style="list-style-type: none"> • accepted preventative practice adopted throughout the strength and conditioning industry to minimise safety hazards or risks • the sport's coaches or instructors code of conduct policy developed by the peak bodies responsible for the development of teaching and coaching • Australian Sports Commission's Harassment-free Sport policy • Australian Sports Commission's drugs in sport policy • National Activity Organisation's regulations and guidelines • relevant National, State/Territory or Local government regulations and guidelines • employer organisations policies and procedures • the culture of the sport/activity • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Components	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical and leadership
Conflict resolution	<p>[all categories]</p> <ul style="list-style-type: none"> • discussion • mediation • negotiation
Core lifts and exercises that form the basis of the basic skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • abdomen <ul style="list-style-type: none"> ○ bent-knee sit-up ○ crunch <ul style="list-style-type: none"> ▪ roll outs ▪ reverse crunch ▪ side bends ▪ prone & hold • back <ul style="list-style-type: none"> ○ bent over row ○ lat pulldown ○ seated row ○ pull ups ○ good mornings ○ back extensions ○ deadlifts ○ Romanian deadlifts • biceps <ul style="list-style-type: none"> ○ biceps curl ○ hammer curl ○ preacher curl • calves and ankles <ul style="list-style-type: none"> ○ standing calf (heel) raise ○ seated calf (heel) raise ○ anterior lower leg ○ dorsi flexor

	<ul style="list-style-type: none"> ○ peroneal flexions & wobble board ● chest <ul style="list-style-type: none"> ○ flat bench press (and dumbbell version) ○ incline dumbbell press (and barbell version) ○ flat dumbbell fly (and incline version) ○ vertical chest press ○ dips ○ push ups ● forearms <ul style="list-style-type: none"> ○ wrist curl ○ wrist extension ● hip/thigh <ul style="list-style-type: none"> ○ hip sled ○ back squat ○ front squat ○ forward lunge ○ step-up ○ deadlift ○ stiff leg deadlift ○ leg (knee) extension ○ leg (knee) curl ○ multi hip ○ kneeling fall forward ○ medicine ball hamstring throws ● shoulders <ul style="list-style-type: none"> ○ seated shoulder press ○ machine shoulder press ○ upright row ○ flyes, front raises, bent over flyes ○ shrugs ○ rotator cuff internal external rotation ● triceps <ul style="list-style-type: none"> ○ lying triceps extension ○ triceps pushdown ○ bent over tricep extension ○ close grip bench press ● power exercises <ul style="list-style-type: none"> ○ push press (and push jerk) ○ clean & power clean ○ snatch and power snatch ○ snatch and clean pulls ○ medicine ball throws ● proprioception and neuromuscular coordination exercises <ul style="list-style-type: none"> ○ overhead squat ○ drop snatch ○ swiss ball ○ balance board
Development program	<p>[all categories]</p> <ul style="list-style-type: none"> ● support provided ● options discussed ● goals identified ● achievement strategy identified
Empowers	<p>[all categories]</p>

	<ul style="list-style-type: none"> • awareness of the underlying principles and reasons for the program • opportunities for self directed learning • training diary • input into the program • athletes needs and commitments outside the activity are recognised
Exercise selection and exercise order	<p>[all categories]</p> <ul style="list-style-type: none"> • choosing exercises for a resistance training program based on <ul style="list-style-type: none"> ○ types of resistance training exercises ○ movement analysis of sport ○ athletes exercise technique experience ○ available equipment and training time • exercise order refers to a sequence of resistance exercise performed during one training session <ul style="list-style-type: none"> ○ power, the other core then assisted exercises ○ pre-exhaustion method ○ upper and lower body exercise (alternated) ○ supersets and compound sets
Fixed points	<p>[all categories]</p> <ul style="list-style-type: none"> • structure and subdivision of the high performance • availability of facilities • rules of the activity • rules of the competition/performance • individual and/or team involvement • intended peaks • selection dates and criteria • athletes lifestyle and availability of support personnel
Flexibility training	<p>[all categories]</p> <ul style="list-style-type: none"> • in relation to flexibility training may include <ul style="list-style-type: none"> ○ static stretching ○ ballistic stretching ○ dynamic stretching ○ proprioneuromuscular facilitation (PNF) ○ range of motion • stretching techniques include exercises for <ul style="list-style-type: none"> ○ neck ○ shoulders and chest ○ posterior of upper arm ○ upper back ○ lower back ○ hips ○ torso ○ anterior of thigh and hip flexor ○ posterior of thigh ○ groin ○ calf
Healing processes	<p>[all categories]</p> <ul style="list-style-type: none"> • first aid treatment for injuries common to the activity

	<ul style="list-style-type: none"> • recovery and rehabilitation period and activities • return to participation
Health and training status	<p>[all categories]</p> <ul style="list-style-type: none"> • athletes current condition of level of preparedness to begin a new or revised program
Job descriptions	<p>[all categories]</p> <ul style="list-style-type: none"> • total time • timing of position • skills • tasks and communication
Objectives	<p>[all categories]</p> <ul style="list-style-type: none"> • athlete enjoyment • competition/performance • physical • psychological • tactical • technical and leadership skills • selection • principles of training • specificity • progressive training • rest and recovery • reversibility • frequency • intensity • duration • periodisation • tapering • peaking • individuality and maintenance
Other coaches and specialists	<p>[all categories]</p> <ul style="list-style-type: none"> • health professionals • physiologists • biomechanics

Periodisation	<p>[all categories]</p> <ul style="list-style-type: none"> • variations in training specificity, intensity and volume organised into planned periods or cycles within an overall program including <ul style="list-style-type: none"> ○ macrocycles ○ mesocycles ○ microcycles • Matveyev model includes <ul style="list-style-type: none"> ○ hypertrophy/endurance phase ○ basic strength phase ○ strength/power phase
Phase	<p>[all categories]</p> <ul style="list-style-type: none"> • macro-cycles • micro-cycles • meso-cycles • pre-season • in-season • post-season
Plyometric	<p>[all categories]</p> <ul style="list-style-type: none"> • plyometric or elastic energy training refers to <ul style="list-style-type: none"> ○ quick powerful movement using a prestretch or countermovement, that involves the stretch-shortening cycle • plyometric or elastic energy drills for • lower body <ul style="list-style-type: none"> ○ jumps in place ○ standing jumps ○ multiple hops and jumps ○ bounds ○ box drills depth jumps • upper body <ul style="list-style-type: none"> ○ throws ○ push ups • trunk
Potential barriers	<p>[all categories]</p> <ul style="list-style-type: none"> • background noise • time availability • stress level of coach/instructor and the swimmers • information overload
Potential conflicts	<p>[all categories]</p> <ul style="list-style-type: none"> • coaching/instructing styles • training program • competition/performance program • discipline procedures • techniques • tactics and time commitments

Profiles	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical • leadership skills
Psychological responses	<p>[all categories]</p> <ul style="list-style-type: none"> • denial • despair • anger and coping strategies
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resources, eg, a ratio of coaches to athletes that allows for maximum participation in a safe environment • equipment, eg, a ratio of equipment to athletes that allows for maximum participation in a safe environment • access to first aid facilities/equipment • appropriate facilities to conduct training/competition in a safe environment
Requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • objectives • structure • specific activities • range of activities • time • equipment and safety
Recovery methods	<p>[all categories]</p> <ul style="list-style-type: none"> • drills and activities that contribute to recovery of muscles after physical activity
Skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance training for strength, power and muscle endurance • speed and agility • aerobic endurance • flexibility • elastic energy training • stability training

Strategy	<p>[all categories]</p> <ul style="list-style-type: none"> • weighting given to different sources of information • weighting given to different information
Strategies	<p>[all categories]</p> <ul style="list-style-type: none"> • sign language • time outs • athlete/s in charge in participation environment
Strengths and weaknesses	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical and leadership skills
Support needs	<p>[all categories]</p> <ul style="list-style-type: none"> • training facilities • equipment • finance • transport • coach/instructor • management and/or specialist support
Tactics	<p>[all categories]</p> <ul style="list-style-type: none"> • written competition/performance strategy • strategy communicated to athletes
Testing protocols	<p>[all categories]</p> <ul style="list-style-type: none"> • past performance • discussion with trainees • physical ability tests • trial • performances in familiar environment • performances in unfamiliar environment • where relevant to the activity • positions trialled in • subjective assessments

Training background and exercise history	<p>[all categories]</p> <ul style="list-style-type: none"> • training that occurred before athlete began new or revised program including consideration to <ul style="list-style-type: none"> ○ type of training program, eg, strength, sprint, plyometric ○ length of recent regular participation in previous training programs ○ level of intensity involved in previous training programs ○ degree of exercise technique experienced
Training load, repetition and volume	<p>[all categories]</p> <ul style="list-style-type: none"> • load refers to <ul style="list-style-type: none"> ○ the amount of weight assigned to an exercise set ○ commonly described as a percentage of one-repetition maximum (1RM) or the most weight lifted for a specified number of repetitions • repetition <ul style="list-style-type: none"> ○ the number of times a weight is lifted ○ the number of times an exercise can be performed inversely related to the lead lifted • volume or volume load <ul style="list-style-type: none"> ○ the total amount of work completed in a session or unit of time eg total weight lifted, distance completed
Training program	<p>[all categories]</p> <ul style="list-style-type: none"> • a forward training plan which covers a four year Olympic cycle
Work duration, rest periods and frequency	<p>[all categories]</p> <ul style="list-style-type: none"> • work duration refers to <ul style="list-style-type: none"> ○ the time period to complete training unit or session, eg, 2-5 minutes for long interval training • rest period refers to <ul style="list-style-type: none"> ○ the time duration of recovery period between work durations, eg, 2-6 minutes ○ may be considered in work to rest ratios • frequency refers to <ul style="list-style-type: none"> ○ the number of completed work sessions in a training cycle
Work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress, safety and hygiene rules and requirements venue and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate apparel and personal equipment • personal hygiene requirements • strength and conditioning training equipment • technical equipment <ul style="list-style-type: none"> ○ stopwatch ○ whiteboard ○ clipboards • safety equipment as listed in state Occupational Health and Safety requirements for sports training facilities • other recommended safety guidelines are <ul style="list-style-type: none"> ○ training aids should be inspected before use ○ sun safety guidelines should be followed

	<ul style="list-style-type: none">○ hydration guidelines should be followed○ competition/training facilities should be inspected before use○ access to first aid facilities/equipment
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of planning and preparing a strength and conditioning program for a competitive athlete • Assessment of performance should be over a period of time covering all categories of coaching from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ develop a strength and conditioning training program for a competitive athlete that improves the performance of the athlete while maintaining their well-being ○ plan for competitive/performance situations within the strength and conditioning program ○ apply exercise prescription to training program ○ plan rehabilitation and reconditioning programs
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC001A Teach or develop basic skills of strength and conditioning ○ SRSSTC003A Operate in accord with accepted strength and conditioning industry health and safety practices ○ SRSSTC004A Operate and maintain strength and conditioning facilities and equipment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of human muscular physiology ○ Knowledge of human neuromuscular anatomy and adaptation to conditioning ○ Knowledge of biomechanics of sport technique ○ Knowledge of human bioenergetics and metabolism ○ Knowledge of bone, muscle and connective tissue adaptation to physical activity ○ Knowledge of adverse neural tension in athletes ○ Knowledge of stability exercises ○ Knowledge of anatomical, physiological and biomechanical differences of athletes including age and sex ○ Knowledge of adaptation to aerobic endurance training ○ Knowledge of resistance training and spotting techniques ○ Knowledge of speed, agility and plyometric training ○ Knowledge of flexibility training and types of stretching ○ Knowledge of aerobic endurance exercise training ○ Knowledge of periodisation and training variation ○ Knowledge of exercise prescription principles ○ Knowledge of overuse injury and other conditions that may

	<ul style="list-style-type: none"> ○ affect planning for strength and conditioning program ○ Knowledge of affect of pain on performance ○ Knowledge of rehabilitation programs ○ Knowledge of drills, activities and games to teach the basic skills of strength and conditioning ○ Knowledge of relevant equipment and safety requirements (including Occupational Health and safety and legislative requirements) ● Required skills <ul style="list-style-type: none"> ○ Skills used to teach the advanced skills of strength and conditioning, eg, movement, voice, use of technical aids ○ Ability to provide explanations and demonstrations, eg, self, other athletes as models, videos ○ Monitoring/observation skills in order to make necessary adjustments to training programs to improve skills ○ Feedback and questioning skills in order to communicate effectively with participants ○ Ability to conduct drills, activities and/or games in accordance with the accepted best practice in coaching strength and conditioning ○ Ability to use modern technology to assess athletes and apply to planning programs ○ Ability to measure postural stability to plan for strength and conditioning ○ Ability to provide social support to an athlete with overall pain
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access <ul style="list-style-type: none"> ○ a group of athletes participating in a strength and conditioning activity ○ a gymnasium or strength training facility and other equipment ○ rules, policies and regulations of relevant peak bodies and/or employer organisations ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as coaching effectiveness this unit of competency must be assessed over a period of time in order to ensure consistency in performance over the Range Statements and contexts applicable to prescribing exercise for athletes in strength and conditioning
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted in a sports training facility with competitive athletes participating in strength and conditioning activities. The environment should be safe, with a noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes

	<ul style="list-style-type: none">• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Establish checklist of key selection policies, procedures and criteria • Communicating ideas and information - Identify barriers to communication • Planning and organising activities - Plan requirements for each training component and program session • Working with teams and others - Liaise with other coaches and instructors • Using mathematical ideas and techniques - Establish selection procedures • Solving problems - Identify and resolve potential conflicts • Using technology - Use appropriate technical and testing equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSSTC003A	OPERATE IN ACCORD WITH ACCEPTED STRENGTH AND CONDITIONING INDUSTRY HEALTH AND SAFETY PRACTICES
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills required to analyse the principles of strength and conditioning health and safety and their application to the strength and conditioning teaching/coaching environment.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse the principles of strength and conditioning and health and safety	1.1 Identify and document the <i>principles of strength and conditioning and health and safety</i>
2 Apply the principles of health and safety to prepare the strength and conditioning teaching/coaching environment	2.1 Assess venue and equipment to ensure they satisfy health and safety requirements 2.2 Assess safety and other risks in the work environment and confirm as within acceptable level of the activity prior to commencing participation 2.3 Act appropriately based on an assessment of the <i>conditions and external influences</i>
3 Apply the principles of health and safety to prepare the participants for the strength and conditioning teaching/coaching session	3.1 Complete and check relevant medical clearance forms prior to participation 3.2 Explain safety and hygiene rules and requirements to the participants 3.3 Explain the value and reasons for 'warm up' to participants and undertake warm up activities 3.4 Inform and encourage participants to comply with relevant <i>rules, policies and regulations</i> and the need to minimise the damage to the environment 3.5 Assess <i>work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment</i>
4 Apply the principles of health and safety to conduct a strength and conditioning teaching/coaching session	4.1 Allocate equipment, <i>resources</i> and space to clients according to existing recognised procedures 4.2 Provide <i>safety and spotting instructions</i> before commencement of lifting weights 4.3 Use relevant <i>communication aids and safety instructions</i> appropriately and effectively 4.4 Undertake <i>supervision, monitoring and interventions</i> of activities and participants to ensure their physical and emotional safety 4.5 Modify activities as required for safety reason 4.6 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience 4.7 Intervene to prevent hazards occurring and ensure client safety 4.8 Follow recognised procedures, in the case of emergencies, calmly, correctly and with speed 4.9 <i>Communicate in a style appropriate to the participants</i>

<p>5 Apply the principles of health and safety to conclude the teaching/coaching session</p>	<p>5.1 Identify indicators and give feedback to participants who may be in difficulty</p> <p>5.2 Assess the factors involved in conducting a rescue and formulate rescue plan</p> <p>5.3 Develop an emergency care plan to detail the proper procedures for caring for injuries</p> <p>5.4 Determine the type of emergency care required, and equipment/personnel needed</p> <p>5.5 Carry out cardiopulmonary resuscitation (CPR), where required</p>
<p>6 Apply the principles of health and safety to conclude the teaching/coaching session</p>	<p>6.1 Explain clearly the value and reasons for 'cooling down' to clients and undertake cool down activities</p> <p>6.2 Make checks to ensue minimal environmental impact has been made to areas/facilities, and that these are left in original or improved conditions</p> <p>6.3 Collect and check equipment and resources</p> <p>6.4 Report damage of non-functional equipment, which the coach/instructor is unable to deal with personally, to the appropriate authority</p> <p>6.5 Arrange for security of equipment and/ the site correctly</p> <p>6.6 Supervise clients departure in a manner appropriate to the situation</p>
<p>7 Apply risk management practices</p>	<p>7.1 Identify potential litigation in the strength and conditioning facility</p> <p>7.2 Identify the requirement and application of professional liability insurance for strength and conditioning for coaches and instructors</p> <p>7.3 Evaluate the consequences of product liability and potential risk to strength and conditional professionals</p> <p>7.4 Develop and implement policies and procedures manual for operation of strength and conditioning facility</p> <p>7.5 Develop and implement the roles and responsibilities for strength and conditioning staff operating in a strength and conditioning facility and/or environment</p> <p>7.6 Establish a records system and file</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communications aids and safety instructions	<p>[all categories]</p> <ul style="list-style-type: none"> • use of microphones, whistles and other aids to gain participants attention • instructions regarding the safe conduct of an activity, including prohibited behaviour
Communicate in a style appropriate to the participants	<p>[all categories]</p> <ul style="list-style-type: none"> • age • preferred language • sensory or intellectual impairment, eg, sight loss or hearing loss • the coaches code of conduct policy
Conditions and external influences	<p>[all categories]</p> <ul style="list-style-type: none"> • removal of any unsafe objects, activities or persons • environmental/weather conditions • other facility users • spectators • parents • officials and administrators • other coaches
Emergency care plan	<p>[all categories]</p> <ul style="list-style-type: none"> • a written document that details the proper procedures and actions for caring for injuries
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • verbal • written • visual • tactile • should be an information exchange between client and practitioner regarding treatment progress and their perceived well-being • addresses <ul style="list-style-type: none"> ○ agreed and evolving program objectives ○ information pertinent to technical adjustments

Litigation	<p>[all categories]</p> <ul style="list-style-type: none"> • strength and conditioning professionals must be concerned with legal liability and the possibility of contesting a lawsuit or legal contest
Policies and procedures manual	<p>[all categories]</p> <ul style="list-style-type: none"> • a written document that details procedures and processes for the operation and maintenance of the facility and equipment
Principles of strength and conditioning and health and safety	<p>[all categories]</p> <ul style="list-style-type: none"> • facility safety requirements • emergency actions plans • cardio-pulmonary resuscitation skills • basic first aid <ul style="list-style-type: none"> ○ cuts ○ abrasions • supervision requirements around water • accident records and reporting • medical conditions and clearances • infectious diseases and hygiene requirements
Product liability	<p>[all categories]</p> <ul style="list-style-type: none"> • the legal responsibilities of those whom manufacture or sell products if a person sustains injury or damage as a result of using the product
Professional liability insurance	<p>[all categories]</p> <ul style="list-style-type: none"> • it insures a person and/or an entity, eg, corporation • against claims made by third parties, eg, clients, patients, customers alleging negligence in the rendering of, or the failure to render professional services
Records system	<p>[all categories]</p> <ul style="list-style-type: none"> • cleaning and maintenance • safety procedures • manufacturers warranties and guidelines • assumption of risk forms • personnel credentials • professional guidelines • injury report forms
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resources, eg, a ratio of coaches to athletes that allows for maximum participation in a safe environment • equipment, eg, a ratio of equipment to athletes that allows for maximum participation in a safe environment • access to first aid facilities/equipment

	<ul style="list-style-type: none"> • appropriate facilities to conduct training/competition in a safe environment
Role and responsibilities	<p>[all categories]</p> <ul style="list-style-type: none"> • duties and functions of strength and conditioning personnel
Rules, policies and regulations	<p>[all categories]</p> <ul style="list-style-type: none"> • current edition of the International Activity Organisation rules • best practice Codes of Ethics such as those developed by the peak bodies responsible for the development of teaching and coaching strength and conditioning • Australian Coaching councils Code of Ethics • policies of employer organisations, eg, anti-doping policy • Australian Sports Commissions Harassment-free Sport policy
Safety and spotting instructions	<p>[all categories]</p> <ul style="list-style-type: none"> • a spotter is someone who assists in the execution of an exercise to help protect the athlete from injury and assist with forced repetitions and partner assisted actions
Supervision, monitoring and Interventions	<p>[all categories]</p> <ul style="list-style-type: none"> • constant surveillance of participants to ensure their physical well being • staying within close vicinity of participants at all time • taking action in the event of a situation or potential situation that endangers the safety of participants
Work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate apparel and personal equipment • personal hygiene requirements • strength and conditioning equipment • technical equipment <ul style="list-style-type: none"> ○ clock ○ stopwatch ○ whiteboard ○ clipboards • safety equipment as listed in state Occupational Health and Safety requirements for sports training facilities • other recommended safety guidelines are <ul style="list-style-type: none"> ○ training aids should be inspected before use ○ sun safety guidelines should be followed ○ hydration guidelines should be followed ○ competition/training facilities should be inspected before use ○ access to first aid facilities/equipment

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of accepted strength and conditioning industry health and safety practices and operate in accordance to them • Assessment of performance should be over a period of time covering all categories of relative practices and operations from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ prepare safe environment ○ prepare participants for safe session ○ conduct a safe session ○ deal with an emergency situation including performance a rescue ○ safely conclude a session ○ prepare risk management
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC001A Teach or develop basic skills of strength and conditioning ○ SRSSTC002A Plan and prepare a strength and conditioning program for a competitive athlete ○ SRSSTC004A Operate and maintain strength and conditioning facilities and equipment • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of health and safety principles in order to apply these to a strength and conditioning coaching session or supervision ○ Knowledge of spotting techniques for strength and conditioning activities ○ Knowledge of emergency care procedures ○ Knowledge of safety and hygiene rules and requirements as they apply to a strength and conditioning environment ○ Knowledge of risk management practices for strength and conditioning • Required skills <ul style="list-style-type: none"> ○ Use of relevant communication skills ○ Supervision and monitoring skills in order to manage a class of participants and to adjust training to improve skills ○ Group control skills in order to manage a class of participants effectively ○ Skills in order to respond to a emergency ○ Cardio-pulmonary resuscitation skills

Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access <ul style="list-style-type: none"> ○ a group of clients participating in a strength and conditioning activity ○ rules, policies and regulations of relevant peak bodies and/or employer organisations • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as coaching effectiveness this unit of competency must be assessed over a period of time in order to ensure consistency in performance over the Range Statements and contexts applicable to coaching strength and conditioning
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted in a sports training facility with athletes participating in strength and conditioning at an appropriate level. The environment should be safe, with a noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	1	2	2
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Create database of potential health and safety hazards • Communicating ideas and information - Identify, select and use appropriate communication aids effectively • Planning and organising activities - Assess factors to formulate emergency care plan • Working with teams and others - Maintain group control to ensure safety and enjoyment • Using mathematical ideas and techniques - Identify key health and safety principles • Solving problems - Assess and ensure venue and equipment meet health and safety requirements • Using technology - Use relevant technical aids <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSSTC004A	OPERATE AND MAINTAIN STRENGTH AND CONDITIONING FACILITIES AND EQUIPMENT
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit provides the coach or instructor with the basic knowledge and skills to maintain a facility and equipment commonly used in strength and conditioning and operate it to manufacturer's specifications.

ELEMENT	PERFORMANCE CRITERIA
1 Conduct basic maintenance of facilities at sports training centre	1.1 Identify key aspects of facility maintenance and cleaning that promotes principles of strength and conditioning, health and safety and a safe strength and conditioning environment 1.2 Maintain and clean surfaces used for strength and conditioning 1.3 Develop and implement a schedule for routine maintenance and cleaning for strength and conditioning facilities 1.4 Complete facility maintenance logs routinely for feedback on facilities 1.5 Act appropriately based on assessment of the conditions and external influences 1.6 Develop and implement a policies and procedures manual for maintenance of facilities
2 Conduct basic maintenance of strength and conditioning equipment	2.1 Identify key aspects of equipment maintenance and cleaning that promotes a safe strength and conditioning environment 2.2 Maintain and clean strength and conditioning equipment to ensure functional and safe use, and to avoid litigation and product liability 2.3 Develop and implement a schedule as part of the roles and responsibilities for routine maintenance and cleaning of strength and conditioning equipment 2.4 Complete equipment maintenance logs routinely 2.5 Develop an emergency care plan to detail the proper procedures for responding to danger situations 2.6 Assess work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment, safety and hygiene rules and requirements and venue and equipment
3 Access tools for maintenance and cleaning	3.1 Identify tools and resources necessary for maintaining the strength and conditioning facility and equipment 3.2 Establish and maintain tools and resources necessary for maintaining the strength and conditioning facility and equipment
4 Access supplies for maintenance and cleaning	4.1 Identify supplies and resources necessary for cleaning the strength and conditioning facility and equipment 4.2 Establish and maintain supplies and resources necessary for cleaning the strength and conditioning facility and equipment

<p>5 Assist clients in the safe operation of the major types of equipment used in a sports training centre</p>	<p>5.1 Apply the principles of action and safe method of operation of strength and conditioning equipment supplies by the manufacturer, when instructing clients</p> <p>5.2 Supervise the use of strength and conditioning equipment by clients to ensure safety</p> <p>5.3 Base supervision, monitoring and interventions of strength and conditioning on group size and equipment availability</p> <p>5.4 Determine staff to athlete ratios for supervision in line with rules, policies and regulations</p> <p>5.5 Use relevant communication aids and safety instructions</p> <p>5.6 Communicate in a style appropriate to participants</p>
<p>6 Arrange equipment in the strength and conditioning facility</p>	<p>6.1 Determine equipment placement by aspects safety and function</p> <p>6.2 Determine space needs and safety and spotting instructions for traffic flow, stretching and warm-up areas, circuit training area, free weights, Olympic lifting area and aerobic for safe use</p> <p>6.3 Determine space needs for prone and supine, standing exercises and standing exercises from a rack for safe use</p>
<p>7 Schedule effective use of strength and conditioning facility</p>	<p>7.1 Develop an effective facility usage schedule to maximise use of strength and conditioning facilities by athletes and teams</p> <p>7.2 Identify the requirement and application of professional liability insurance for strength and conditioning coaches and instructors</p> <p>7.3 Establish a records system and file</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communication aids and safety instructions	<p>[all categories]</p> <ul style="list-style-type: none"> • use of microphones, whistles and other aids to gain participants attention • instructions regarding the safe conduct of an activity including prohibited behaviour
Communicate in a style appropriate to participants	<p>[all categories]</p> <ul style="list-style-type: none"> • age • preferred language • sensory or intellectual impairment, eg, sight loss, hearing loss • best practice Code of Ethics such as those developed by the peak bodies responsible for the development of teaching and coaching strength and conditioning
Conditions and external influences	<p>[all categories]</p> <ul style="list-style-type: none"> • removal of any unsafe objects, activities or persons • environmental/weather conditions • other facility users • spectators • parents • officials and administrators • other coaches
Emergency care plan	<p>[all categories]</p> <ul style="list-style-type: none"> • written document that contains detail of proper procedures and actions for caring for injuries and danger situations
Feedback	<p>[all categories]</p> <ul style="list-style-type: none"> • verbal • written • visual • tactile • should be an information exchange between athlete and coach regarding progress of performance or training and perceived well-being

Litigation	<p>[all categories]</p> <ul style="list-style-type: none"> • strength and conditioning professionals must be concerned with legal liability and the possibility of contesting a lawsuit or legal contest
Policies and procedures manual	<p>[all categories]</p> <ul style="list-style-type: none"> • written document that details procedures and processes for operation and maintenance of the facility and equipment
Principles of strength and conditioning, health and safety	<p>[all categories]</p> <ul style="list-style-type: none"> • facility safety requirements • emergency action plans • cardiopulmonary resuscitation skills • basic first aid <ul style="list-style-type: none"> ○ cuts ○ abrasions • supervision requirement around water • accident records and reporting • medical conditions and clearances • infectious diseases and hygiene requirements
Product liability	<p>[all categories]</p> <ul style="list-style-type: none"> • the legal responsibilities of those whom manufacturer or sell products if a person sustains injury or damage as a result of using the product
Professional liability insurance	<p>[all categories]</p> <ul style="list-style-type: none"> • insures a person and/or an entity, eg, corporation • against claims made by a third party, eg, gym clients alleging negligence in the rendering of, or the failure to render, professional advice
Records system	<p>[all categories]</p> <ul style="list-style-type: none"> • cleaning and maintenance • safety procedures • manufacturer's warranties and guidelines • assumption-of-risk forms • medical waivers and clearance forms • personal credentials • professional guidelines • injury report forms

Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resources, eg, a ration of coaches to athletes that allows for maximum participation in a safe environment • physical resources, eg, a ratio of equipment to athletes that allows for maximum participation in a safe environment • access to first aid facilities/equipment • appropriate facilities to conduct training competition in a safe environment
Roles and responsibilities	<p>[all categories]</p> <ul style="list-style-type: none"> • duties and functions of strength and conditioning personnel
Rules, policies and regulations	<p>[all categories]</p> <ul style="list-style-type: none"> • best practice Code of Ethics such as those developed by the peak bodies responsible for the development of teaching and coaching strength and conditioning
Safety and spotting instructions	<p>[all categories]</p> <ul style="list-style-type: none"> • a spotter is someone who assists in the execution of an exercise to help protect the athlete from injury and assist with forced repetitions and partner-assisted actions
Supervision, monitoring and interventions	<p>[all categories]</p> <ul style="list-style-type: none"> • constant surveillance of participants to ensure their physical well being • staying within close vicinity of participants at all times • taking action in the event of a situation or potential situation that endangers the safety of participants
Work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment safety and hygiene rules and requirements and venue and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate training uniform and personal equipment • personal hygiene requirements • strength and conditioning equipment • technical equipment <ul style="list-style-type: none"> ○ clock ○ stopwatch ○ whiteboard and markers ○ clipboards and pens • safety equipment as listed in state Occupational Health and Safety requirements for sports training facilities • other recommended safety guidelines are <ul style="list-style-type: none"> ○ training aids should be inspected before use ○ sun safety guidelines should be followed ○ hydration guidelines should be followed ○ competition/training facilities should be inspected before use ○ access to first aid facilities/equipment ○ use of towels, eg, sweating and equipment use

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of the acceptable strength and conditioning industry health and safety practices to operate a facility effectively • Assessment of performance should be over a period of time covering all categories of facility management from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ prepare a safe environment ○ prepare participants for a safe strength and conditioning training session ○ deal with an emergency situation, including developing an emergency care plan ○ safely conclude a strength and conditioning training session ○ prepare risk management practices
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC001A Teach or develop basic skills of strength and conditioning ○ SRSSTC002A Plan and prepare and strength and conditioning program for a competitive athlete ○ SRSSTC003A Operate in accord with accepted strength and conditioning industry health and safety practices • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of health and safety principles in order to apply these to a strength and conditioning coaching session or supervision ○ Knowledge of spotting techniques for strength and conditioning activities ○ Knowledge of emergency care procedures ○ Knowledge of safety and hygiene rules and requirements as they apply to a strength and conditioning environment ○ Knowledge of the principles of risk management in relation to strength and conditioning teaching/coaching environment • Required skills <ul style="list-style-type: none"> ○ Use of relevant communication skills ○ Ability to apply supervision and monitoring skills in order to manage a group of participants and to adjust training to improve skills ○ Ability to prepare and implement a risk management plan for a strength and conditioning teaching or coaching environment ○ Group control skills in order to manage a class of participants effectively

	<ul style="list-style-type: none"> ○ Emergency care skills in order to respond to an emergency or danger situation ○ Cardio-pulmonary resuscitation skills
Resource implications	<ul style="list-style-type: none"> • Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ a group of participants at a strength and conditioning facility ○ personal safety equipment ○ strength and conditioning equipment ○ rules, policies and regulations of relevant peak bodies and/or employer organisations • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to the issues such as effective supervision this unit of competency must be assessed over a period of time in order to ensure consistency in performance over the Range Statements and contexts applicable to coaching strength and conditioning
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted at a sports training centre or similar with athletes participating in strength and conditioning activities. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Document and analyse the key aspects of facility maintenance and cleaning • Communicating ideas and information - Convey process of emergency action plan in clear direct language • Planning and organising activities - Create emergency action plan • Working with teams and others - Involve support personnel to develop emergency action plan • Using mathematical ideas and techniques - Extract data from risk management reports • Solving problems - Create in-service activity to role play emergency action plan • Using technology - Use appropriate technical equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSSTC005A	TEACH OR DEVELOP ADVANCED SKILLS OF STRENGTH AND CONDITIONING
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills required to use skills to use drills, exercises and activities to teach or develop advanced skills or strength and conditioning.

ELEMENT	PERFORMANCE CRITERIA
1 Identify the advanced skills of strength and conditioning	1.1 Identify the <i>advanced skills of strength and conditioning</i> for specified outcomes according to characteristics of the sport 1.2 Identify and document a technique checklist
2 Prepare the athlete for involvement in a strength and conditioning program	2.1 Clarify the <i>advanced skills of strength and conditioning</i> to be developed for the athlete and relevant <i>support personnel</i> 2.2 Clarify the <i>principles of the physiological adaptations to training</i> for the athlete and relevant <i>support personnel</i> 2.3 Clarify a range or approaches for programming for specific outcomes for the athlete and relevant <i>support personnel</i> 2.4 Assess <i>organisation's Occupational Health and Safety, safe and appropriate dress and equipment</i>
3 Identify preferred teaching/coaching methods and styles to develop the advanced skills of strength and conditioning	3.1 Identify <i>teaching methods</i> in consultation with the athlete in the context of specific skills 3.2 Use feedback in coaching/teaching and clarify with the athlete 3.3 Use appropriate demonstrations 3.4 Use different types of questioning techniques in the coaching/teaching 3.5 Use a variety of <i>coaching/instructional styles</i> in relation to a range of different coaching/teaching situations 3.6 Explain to the athlete the terminology used in the coaching/teaching process
4 Assess the athlete's readiness for involvement in a strength and conditioning program	4.1 Evaluate the <i>athletes health and training status</i> 4.2 Discuss <i>training background and exercise history</i> in strength and conditioning programs with the athlete and relevant <i>support personnel</i> 4.3 Assess <i>athlete/s</i> readiness to acquire and perform the <i>core lifts and exercises that form the basis of the advanced skill/s of strength and conditioning</i> 4.4 Select appropriate <i>testing protocols</i> and implement to assess the athlete's readiness to develop/acquire the <i>advanced skills of strength and conditioning</i> 4.5 Select the <i>core lifts and exercises that form the basis of the advanced skills of strength and conditioning</i> to be included in the program based on testing 4.6 Recognise and address factors which may affect the acquisition of the <i>advanced skills of strength and conditioning</i> as result of testing

<p>5 Conduct drills, activities and/or games to teach or develop advanced skills of strength and conditioning</p>	<p>5.1 Select teaching methods and coaching/instructional styles to match the participants readiness, the environment, the activity and the equipment available</p> <p>5.2 Allocate sufficient space and resources for the drill, activity and/or game</p> <p>5.3 Deliver relevant information, explanations and demonstrations to ensure drills, activities and/or games concisely and precisely</p> <p>5.4 Use technological aids to supplement presentations</p> <p>5.5 Place emphasis on practical involvement while adjusting or refining skills on an individualised basis</p> <p>5.6 Observe participants to see that the drills and activities are conducted in accord with the rules, regulations, policies and accepted best practice principles of strength and conditioning</p> <p>5.7 Observe participants skill execution and apply correction techniques to improve advanced skills on an individualised basis</p> <p>5.8 Observe with minimal disruption to the flow of the drill or activity</p> <p>5.9 Make modifications to the activity when necessary</p> <p>5.10 Monitor the skill being taught, the teaching methods and coaching/instructional styles during the instruction and assess accordingly</p> <p>5.11 Maintain group control to ensure the safety and enjoyment of the individual and group</p>
<p>6 Conduct strength and conditioning training techniques</p>	<p>6.1 Demonstrate to athletes and conduct the fundamental exercise techniques</p> <p>6.2 Conduct resistance training techniques related to hypertrophy, strength, power and endurance training</p> <p>6.3 Supervise athletes in practice or core lifts and exercises that form the basis of resistance training techniques</p> <p>6.4 Conduct training methods and exercises for speed, agility and plyometric training</p> <p>6.5 Conduct training methods and exercises for aerobic training</p> <p>6.6 Conduct training methods and exercises for anaerobic training</p> <p>6.7 Conduct training methods and exercises for flexibility training</p> <p>6.8 Use a range of approaches for programming for specific outcomes</p>
<p>7 Apply exercise prescription to training methods</p>	<p>7.1 Apply exercise and exercise order to maximise performance</p> <p>7.2 Conduct training methods on training load, repetition and volume</p> <p>7.3 Conduct training methods based on work duration, rest periods and frequency</p> <p>7.4 Conduct training methods related to rehabilitation and reconditioning</p> <p>7.5 Conduct training methods related to periodisation and training variation</p> <p>7.6 Apply modifications to training methods and adaptations to include pre-adolescent athletes</p> <p>7.7 Apply modifications to training methods and adaptations to include females and older athletes</p>
<p>8 Review and adapt the teaching of the advanced skills of strength and conditioning in response to feedback</p>	<p>8.1 Make relevant points of emphasis before, during and/or after demonstration of techniques and training methods</p> <p>8.2 Implement modifications to the teaching method and coaching style in response to results of the monitoring</p> <p>8.3 Give participants the opportunity to comment and/or ask questions</p>

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Aerobic training	[all categories] <ul style="list-style-type: none"> • continuous training • interval training • fartlek training • cross training
Anaerobic training	[all categories] <ul style="list-style-type: none"> • high intensity • short interval training
A range of approaches for programming for specific outcomes	[all categories] <ul style="list-style-type: none"> • modes of resistance training for strength • modes of power training • modes of elastic energy training • modes of speed/agility training • modes of aerobic training • modes of anaerobic training • modes of stability training • modes of recovery training
Adaptations to include pre-adolescent athletes, females and older athletes	[all categories] <ul style="list-style-type: none"> • refers to recommended programming guidelines in relation to appropriate sets and reps • preference for the use body weight support and resistance exercises • benefits of appropriate training • should follow the best practice principles of strength and conditioning
Athletes	[all categories] <ul style="list-style-type: none"> • are usually committed and self-motivated to improve their performance • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • are usually over the age of 10 years with some sport specific exceptions such as gymnastics or swimming where they may be younger, and/or • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups

Advanced skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance training for strength, power and muscle endurance • speed and agility • aerobic endurance • anaerobic endurance • flexibility
Best practice principles of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • the sport's coaches or instructors code of conduct policy developed by the peak bodies responsible for the development of teaching and coaching • Australian Sports Commission's Harassment-free Sport policy • Australian Sports Commission's drugs in sport policy • National Activity Organisation's regulations and guidelines • relevant National, State/Territory or Local government regulations and guidelines • employer organisations policies and procedures • the culture of the sport/activity • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instructional styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation styles adopted by the instructor or coach to communicate with the client/athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a professional distance ○ clear, precise and, if appropriate, directive regarding negotiable issues, eg, safety factors ○ humorous when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in athletes
Core lifts and exercises that form the basis of the advanced skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • abdomen <ul style="list-style-type: none"> ○ bent-knee sit-up ○ crunch <ul style="list-style-type: none"> ▪ roll outs ▪ reverse crunch ▪ side bends ▪ prone & hold • back <ul style="list-style-type: none"> ○ bent over row ○ lat pulldown ○ seated row ○ pull ups

	<ul style="list-style-type: none"> ○ good mornings ○ back extensions ○ deadlifts ○ Romanian deadlifts ● biceps <ul style="list-style-type: none"> ○ biceps curl ○ hammer curl ○ preacher curl ● calves and ankles <ul style="list-style-type: none"> ○ standing calf (heel) raise ○ seated calf (heel) raise ○ anterior lower leg ○ dorsi flexor ○ peroneal flexions & wobble board ● chest <ul style="list-style-type: none"> ○ flat bench press (and dumbbell version) ○ incline dumbbell press (and barbell version) ○ flat dumbbell fly (and incline version) ○ vertical chest press ○ dips ○ push ups ● forearms <ul style="list-style-type: none"> ○ wrist curl ○ wrist extension ● hip/thigh <ul style="list-style-type: none"> ○ hip sled ○ back squat ○ front squat ○ forward lunge ○ step-up ○ deadlift ○ stiff leg deadlift ○ leg (knee) extension ○ leg (knee) curl ○ multi hip ○ kneeling fall forward ○ medicine ball hamstring throws ● shoulders <ul style="list-style-type: none"> ○ seated shoulder press ○ machine shoulder press ○ upright row ○ flyes, front raises, bent over flyes ○ shrugs ○ rotator cuff internal external rotation ● triceps <ul style="list-style-type: none"> ○ lying triceps extension ○ triceps pushdown ○ bent over tricep extension ○ close grip bench press ● power exercises <ul style="list-style-type: none"> ○ push press (and push jerk) ○ clean & power clean ○ snatch and power snatch ○ snatch and clean pulls ○ medicine ball throws ● proprioception and neuromuscular coordination exercises <ul style="list-style-type: none"> ○ overhead squat ○ drop snatch ○ swiss ball
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	<ul style="list-style-type: none"> ○ balance board
Fundamental exercise techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • hand grips • stable body and limb positioning • movement range of motion and speed • breathing • spotting
Flexibility training	<p>[all categories]</p> <ul style="list-style-type: none"> • types of stretching <ul style="list-style-type: none"> ○ static stretch ○ ballistic stretch ○ dynamic stretch ○ proprioneuromuscular facilitation (PNF) ○ range of motion • stretching techniques include exercises for <ul style="list-style-type: none"> ○ neck ○ shoulders and chest ○ posterior of upper arm ○ upper back ○ lower back ○ hips ○ torso ○ anterior of thigh and hip flexor ○ posterior of thigh and hip extensors ○ groin ○ calf ○ iliotibial band
Health and training status	<p>[all categories]</p> <ul style="list-style-type: none"> • athletes current condition of level of preparedness to begin a new or revised program
Organisation's Occupational Health and Safety requirements, safe and appropriate dress and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate footwear and clothing and personal equipment • technical equipment, eg, safe working order • assess, prescribe and monitor athlete loading • the Australian Sports Commission doping policy • State/Territory policies on Occupational health and safety issues pertaining to safe work practices • gymnasiums, Local Council facilities and private facilities • appropriate safety equipment
Periodisation	<p>[all categories]</p> <ul style="list-style-type: none"> • variations in training specificity intensity and volume organised into planned periods or cycles within an overall program including <ul style="list-style-type: none"> ○ macrocycles ○ mesocycles ○ microcycles

	<ul style="list-style-type: none"> • Matveyev model includes • hypertrophy/endurance phase • basic strength phase • strength/power phase
Principles of the physiological adaptations to training	<p>[all categories]</p> <ul style="list-style-type: none"> • hypertrophy adaptations • neural adaptations • cellular adaptations
Rehabilitation and reconditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • active strength and conditioning activities to assist return of injured athlete to competition • adapted to each athlete and his or her specific requirements and goals • rehabilitation and reconditioning based on clinical and scientific research • progressive rehabilitation and reconditioning strategies
Resistance training techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to exercise types for <ul style="list-style-type: none"> ○ abdomen ○ back ○ biceps ○ calves ○ chest ○ forearms ○ hip/thigh ○ shoulders ○ triceps ○ power exercises
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resources, eg, a ratio of coaches to athletes that allows for maximum participation in a safe environment • equipment, eg, a ratio of equipment to athletes that allows for maximum participation in a safe environment • training equipment • access to first aid facilities/equipment • appropriate facilities to conduct training/competition in a safe environment

Speed, agility and elastic energy training	<p>[all categories]</p> <ul style="list-style-type: none"> • speed refers to <ul style="list-style-type: none"> ○ running speed based on stride frequency and stride length ○ sprinting technique ○ acceleration • agility refers to <ul style="list-style-type: none"> ○ sport/event related change in direction and speed ○ horizontal, vertical, two point and four point movement patterns • elastic energy drills for <ul style="list-style-type: none"> ○ lower body <ul style="list-style-type: none"> ▪ jumps in place ▪ standing jumps ▪ multiple jumps and hops ▪ box drills ▪ depth jumps ○ upper body <ul style="list-style-type: none"> ▪ throws ▪ push ups
Strength and conditioning program	<p>[all categories]</p> <ul style="list-style-type: none"> • programs designed to develop the basic skills of strength and conditioning
Support personnel	<p>[all categories]</p> <ul style="list-style-type: none"> • administrators coaches • sports scientists • sports medicine providers • agents • other health professionals • parents guardians • other involves/appropriate personnel
Teaching methods	<p>[all categories]</p> <ul style="list-style-type: none"> • instructional or coaching approached adopted by the instructor or coach to convey instructional content to the client/athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following approaches and/or any associated variations <ul style="list-style-type: none"> ○ whole, part, whole approaches ○ shaping approaches ○ command and response approaches ○ reciprocal or peer tutoring approaches ○ directive approaches through specific set tasks ○ feedback and refinement approaches ○ guided discovery approaches (setting problems and allowing athletes to discover solutions) and/or ○ experimental or problem solving approaches

Testing protocols	<p>[all categories]</p> <ul style="list-style-type: none"> • to conduct appropriate test measures the following physiological parameters <ul style="list-style-type: none"> ○ aerobic performance ○ anaerobic performance ○ strength/power ○ speed/agility ○ core, pelvic, trunk and shoulder stability
Training background and exercise history	<p>[all categories]</p> <ul style="list-style-type: none"> • training that occurred before athlete began new or revised program including consideration to <ul style="list-style-type: none"> ○ type of training program, eg, strength, sprint, plyometric ○ length of recent regular participation in previous training programs ○ level of intensity involved in previous training programs ○ degree of exercise technique experienced
Training load, repetition and volume	<p>[all categories]</p> <ul style="list-style-type: none"> • load refers to <ul style="list-style-type: none"> ○ the amount of weight assigned to an exercise set ○ commonly described as a percentage of one-repetition maximum (1RM) or the most weight lifted for a specified number of repetitions • repetition <ul style="list-style-type: none"> ○ the number of times a weight is lifted ○ the number of times an exercise can be performed in inversely related to the load lifted • volume or volume load <ul style="list-style-type: none"> ○ the total amount of work completed in a session or unit of time eg total weight lifted, distance completed
Work duration, rest periods and frequency	<p>[all categories]</p> <ul style="list-style-type: none"> • work duration refers to <ul style="list-style-type: none"> ○ the time period to complete training unit or session, eg, 2-5 minutes for long interval training • rest period refers to <ul style="list-style-type: none"> ○ the time duration of recovery period between work durations, eg, 2-6 minutes ○ may be considered in work to rest ratios • frequency refers to <ul style="list-style-type: none"> ○ the number of completed work sessions in a training cycle

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of techniques, drills and activities to teach or develop the advanced skills of strength and conditioning • Assessment of performance should be over a period of time covering all categories of strength and conditioning training from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ provide a safe teaching environment ○ consider athlete/team in context of training status ○ analyse the biomechanical characteristics of sporting technique to develop advanced skills of strength and conditioning ○ identify appropriate teaching methods and coaching styles to develop advanced skills of strength and conditioning ○ assess athlete/team readiness to acquire and perform the advanced skills of strength and conditioning ○ conduct drills, activities and games to teach or develop the advanced skills of strength and conditioning ○ modify teaching methods and activities according to feedback
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC001A Teach or develop basic skills of strength and conditioning ○ SRSSTC002A Plan and prepare a strength and conditioning program for a competitive athlete ○ SRSSTC003A Operate in accordance with accepted strength and conditioning industry health and safety procedures ○ SRSSTC004A Operate and maintain strength and conditioning facilities and equipment • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals ○ SRSSTC006A Plan and prepare a strength and conditioning program for a high performance athlete • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of human muscular physiology ○ Knowledge of human neuromuscular anatomy and adaptation to conditioning ○ Knowledge of biomechanics of sport technique ○ Knowledge of human bioenergetics and metabolism ○ Knowledge of bone, muscle and connective tissue adaptation to physical activity ○ Knowledge of adverse neural tension in athletes ○ Knowledge of stability exercises

	<ul style="list-style-type: none"> ○ Knowledge of anatomical, physiological and biomechanical differences of athletes including age and sex ○ Knowledge of adaptation to aerobic endurance training ○ Knowledge of resistance training and spotting techniques ○ Knowledge of speed, agility and plyometric training ○ Knowledge of flexibility training and types of stretching ○ Knowledge of aerobic endurance exercise training ○ Knowledge of periodisation and training variation ○ Knowledge of exercise prescription principles ○ Knowledge of overuse injury and other conditions that may affect planning for strength and conditioning program ○ Knowledge of affect of pain on performance ○ Knowledge of rehabilitation programs ○ Knowledge of drills, activities and games to teach the advanced skills of strength and conditioning ○ Knowledge of relevant equipment and safety requirements (including Occupational Health and safety and legislative requirements) ● Required skills <ul style="list-style-type: none"> ○ Skills used to teach the advanced skills of strength and conditioning, eg, movement, voice, use of technical aids ○ Ability to provide explanations and demonstrations, eg, self, other athletes as models, videos ○ Monitoring/observation skills in order to make necessary adjustments to training programs to improve skills ○ Feedback and questioning skills in order to communicate effectively with participants ○ Ability to conduct drills, activities and/or games in accordance with the accepted best practice in coaching strength and conditioning ○ Ability to use modern technology to assess athletes and apply to planning programs ○ Ability to measure postural stability to plan for strength and conditioning ○ Ability to provide social support to an athlete with overall pain
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access <ul style="list-style-type: none"> ○ a group of athletes participating in a strength and conditioning activity ○ a gymnasium or strength training facility and other equipment ○ rules, policies and regulations of relevant peak bodies and/or employer organisations ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>

Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as coaching effectiveness this unit of competency must be assessed over three (3) sessions in order to ensure consistency in performance over the Range Statements and contexts applicable to prescribing exercise for athletes in strength and conditioning
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the sporting activity should be conducted in a sports training facility with competitive athletes participating in strength and conditioning activities. The environment should be safe, with a noise to a level experienced with an activity in full operation and support services provided for optimum performance • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	2	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Create biomechanical checklist of advanced skills • Communicating ideas and information - Vary instructing styles according to players' readiness • Planning and organising activities - Plan space, resources and time accordingly • Working with teams and others - Lead a class • Using mathematical ideas and techniques - Use proper lifting techniques • Solving problems - Observe and modify advanced skill faults • Using technology - Ensure that teaching and audio-visual aids are in good working order <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSSTC006A	PLAN AND PREPARE A STRENGTH AND CONDITIONING PROGRAM FOR A HIGH PERFORMANCE ATHLETE
STC	Strength and conditioning

DESCRIPTION: This unit has been developed for the Sport Industry Training Package.

This unit covers the knowledge and skills required to plan and prepare a strength and conditioning program for a high performance athlete.

ELEMENT	PERFORMANCE CRITERIA
1 Assess the athlete's readiness for involvement in a strength and conditioning program	1.1 Evaluate the athletes health and training status 1.2 Discuss training background and exercise history in strength and conditioning programs with the athlete and relevant support personnel 1.3 Assess athlete/s readiness to acquire and perform the core lifts and exercises that form the basis of the skill/s of strength and conditioning 1.4 Select and implement appropriate testing protocols to assess the athlete's readiness to develop/acquire the high performance skills of strength and conditioning 1.5 Select the core lifts and exercises that form the basis of the high performance skills of strength and conditioning to be included in the program, based on testing 1.6 Recognise and address factors which may affect the acquisition of the skills of strength and conditioning as result of testing 1.7 Assess work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress, safety and hygiene rules and regulations and requirements, venue and equipment
2 Plan a strength and conditioning training program	2.1 Analyse and document athletes selected activity or sports discipline 2.2 Develop profiles for each individual athlete or team participating in the training program using appropriate assessment measures 2.3 Establish fixed points of the program and identify and document phases within the training program 2.4 Develop objectives for the training program , and each phase within the training program in consultation with the athletes and reflect the analysis of the activity and the athletes profiles 2.5 Design a process to develop identified aims and integrate all components of the training program 2.6 Plan requirements for each session within the development program 2.7 Ensure the training program empowers the athlete 2.8 Plan methods and scheduling of monitoring the training program prior to implementation 2.9 Select appropriate testing protocols and implement to assess the athlete's readiness to develop skills of strength and conditioning
3 Apply exercise prescription to training program	3.1 Apply exercise selection and exercise order to maximise performance 3.2 Conduct training methods based on training load, repetition and volume 3.3 Conduct training methods based on work duration, rest periods, and frequency 3.4 Conduct training methods related to periodisation and training variation 3.5 Conduct training methods related to rehabilitation and reconditioning 3.6 Apply modifications to training methods and adaptations to include pre-adolescent athletes, women and mature-aged athletes 3.7 Apply modifications to training methods and adaptations to include athletes with a disability

	3.8 Conduct training methods according to best practice principles of strength and conditioning
4 Prepare a strength and conditioning training program for a high performance athlete	<p>4.1 Prepare a training program for strength and conditioning for high performance athlete/s with appropriate documentation in accordance with rules, policies and regulations</p> <p>4.2 Prescribe exercises to maximise performance and minimise and or decrease injury susceptibility</p> <p>4.3 Prepare requirements for each session within the program</p> <p>4.4 Prepare methods and scheduling of monitoring the training program prior to implementation</p> <p>4.5 Select exercises based on athletes health status, strength and conditioning levels and training goals</p> <p>4.6 Select exercises for sport specific function and utility</p> <p>4.7 Select exercises based on muscle group or groups</p> <p>4.8 Select exercises based on type of kinetic chain movement</p> <p>4.9 Prepare resistance training exercises in a training program</p> <p>4.10 Prepare conditioning exercises in a training program</p> <p>4.11 Prepare plyometric exercises in a training program</p> <p>4.12 Prepare flexibility exercises in a training program</p> <p>4.13 Prepare exercises to improve speed and agility in a training program</p>
5 Plan for high performance situations within the training program	<p>5.1 Develop a high performance strategy which matches the athletes and/or teams profiles</p> <p>5.2 Identify strengths and weaknesses of the opposition in activities in which information will affect the athletes performances</p> <p>5.3 Develop athlete and/or team tactics to match the high performance strategy and the opposition profile where that is identified</p> <p>5.4 Identify and document support needs for the competition/performance</p> <p>5.5 Develop job descriptions for support personnel</p> <p>5.6 Match support needs with available resources</p> <p>5.7 Identify potential barriers to communication with athletes during competition/performance, and within relevant rules and regulations, develop strategies to overcome these barriers</p> <p>5.8 Integrate multiple performance objectives over a period of time</p>
6 Plan a recovery program	6.1 Plan appropriate recovery methods and strategies to the training program
7 Plan rehabilitation and reconditioning programs	<p>7.1 Identify and document the body's physiological responses to injury and the healing processes</p> <p>7.2 Identify and document potential psychological responses to injury</p>
8 Liaise with other coaches and specialists	<p>8.1 Establish ongoing liaison between coaches/instructors where coaches/instructors work with the same athlete</p> <p>8.2 Identify and document role and responsibilities of the individual coaches/instructors</p> <p>8.3 Identify potential conflict and resolutions</p>

9 Selection procedures are identified	9.1 Establish selection policies, procedures and criteria 9.2 Critique methods of <i>testing and assessing</i> athletes 9.3 Identify data required in relation to the context of the selection and explain the <i>strategy</i> 9.4 Develop <i>strategies</i> for determining an individuals skills in a team environment
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Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Adaptations to include athletes with a disability	[all categories] <ul style="list-style-type: none"> • athletes with sensory, physical, intellectual impairment <ul style="list-style-type: none"> ○ sight loss ○ hearing loss ○ physical disability, eg, amputees, wheel chair athletes
Adaptations to include pre-adolescent athletes, women and mature aged athletes	[all categories] <ul style="list-style-type: none"> • refers to recommended programming guidelines in relation to appropriate sets and reps • preferences for the use body weight support and resistance exercises • benefits of appropriate training • should follow the best practice principles of strength and conditioning
Analyse	[all categories] <ul style="list-style-type: none"> • physical • psychological • tactical • technical
Athlete/s	[all categories] <ul style="list-style-type: none"> • are usually committed and self-motivated to improve their performance • can be talented with various levels of motivation and commitment • may be beginner through to high performance level competitors • are usually over the age of 10 years with some sport specific exceptions such as gymnastics or swimming where they may be younger, and/or • can be <ul style="list-style-type: none"> ○ female or male ○ with or without a disability or special needs ○ with or without social disadvantage ○ and/or from minority ethnic and cultural groups
Assessment measures	[all categories] <ul style="list-style-type: none"> • field assessments of fitness components • interviews with athletes • observation of performance • performance history
Best practice principles of strength	[all categories]

and conditioning	<ul style="list-style-type: none"> • accepted preventative practice adopted throughout the strength and conditioning industry to minimise safety hazards or risks • the sport's coaches or instructors code of conduct policy developed by the peak bodies responsible for the development of teaching and coaching • Australian Sports Commission's Harassment-free Sport policy • Australian Sports Commission's drugs in sport policy • National Activity Organisation's regulations and guidelines • relevant National, State/Territory or Local government regulations and guidelines • employer organisations policies and procedures • the culture of the sport/activity • accepted preventative practices adopted by self or peers to minimise safety hazards and risks in the same or similar situations • current and past good practice demonstrated by self or peers in the same or similar situation
Components	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical and leadership
Conflict and resolutions	<p>[all categories]</p> <ul style="list-style-type: none"> • discussion • mediation • negotiation
Core lifts and exercises that form the basis of the basic skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • abdomen <ul style="list-style-type: none"> ○ bent-knee sit-up ○ crunch <ul style="list-style-type: none"> ▪ roll outs ▪ reverse crunch ▪ side bends ▪ prone & hold • back <ul style="list-style-type: none"> ○ bent over row ○ lat pulldown ○ seated row ○ pull ups ○ good mornings ○ back extensions ○ deadlifts ○ Romanian deadlifts • biceps <ul style="list-style-type: none"> ○ biceps curl ○ hammer curl ○ preacher curl • calves and ankles <ul style="list-style-type: none"> ○ standing calf (heel) raise ○ seated calf (heel) raise ○ anterior lower leg ○ dorsi flexor

	<ul style="list-style-type: none"> ○ peroneal flexions & wobble board • chest <ul style="list-style-type: none"> ○ flat bench press (and dumbbell version) ○ incline dumbbell press (and barbell version) ○ flat dumbbell fly (and incline version) ○ vertical chest press ○ dips ○ push ups • forearms <ul style="list-style-type: none"> ○ wrist curl ○ wrist extension • hip/thigh <ul style="list-style-type: none"> ○ hip sled ○ back squat ○ front squat ○ forward lunge ○ step-up ○ deadlift ○ stiff leg deadlift ○ leg (knee) extension ○ leg (knee) curl ○ multi hip ○ kneeling fall forward ○ medicine ball hamstring throws • shoulders <ul style="list-style-type: none"> ○ seated shoulder press ○ machine shoulder press ○ upright row ○ flyes, front raises, bent over flyes ○ shrugs ○ rotator cuff internal external rotation • triceps <ul style="list-style-type: none"> ○ lying triceps extension ○ triceps pushdown ○ bent over tricep extension ○ close grip bench press • power exercises <ul style="list-style-type: none"> ○ push press (and push jerk) ○ clean & power clean ○ snatch and power snatch ○ snatch and clean pulls ○ medicine ball throws • proprioception and neuromuscular coordination exercises <ul style="list-style-type: none"> ○ overhead squat ○ drop snatch ○ swiss ball ○ balance board
Development program	<p>[all categories]</p> <ul style="list-style-type: none"> • support provided • options discussed • goals identified • achievement strategy identified
Empowers	<p>[all categories]</p>

	<ul style="list-style-type: none"> • awareness of the underlying principles and reasons for the program • opportunities for self directed learning • training diary • input into the program • athletes needs and commitments outside the activity are recognised
Exercise selection and exercise order	<p>[all categories]</p> <ul style="list-style-type: none"> • choosing exercises for a resistance training program based on <ul style="list-style-type: none"> ○ types of resistance training exercises ○ movement analysis of sport ○ athletes exercise technique experience ○ available equipment and training time • exercise order refers to a sequence of resistance exercise performed during one training session <ul style="list-style-type: none"> ○ power, the other core then assisted exercises ○ pre-exhaustion method ○ upper and lower body exercise (alternated) ○ supersets and compound sets
Fixed points	<p>[all categories]</p> <ul style="list-style-type: none"> • structure and subdivision of the high performance • availability of facilities • rules of the activity • rules of the competition/performance • individual and/or team involvement • intended peaks • selection dates and criteria • athletes lifestyle and availability of support personnel
Flexibility exercises	<p>[all categories]</p> <ul style="list-style-type: none"> • in relation to flexibility training may include <ul style="list-style-type: none"> ○ static stretching ○ ballistic stretching ○ dynamic stretching ○ proprioneuromuscular facilitation (PNF) ○ range of motion • stretching techniques include exercises for <ul style="list-style-type: none"> ○ neck ○ shoulders and chest ○ posterior of upper arm ○ upper back ○ lower back ○ hips ○ torso ○ anterior of thigh and hip flexor ○ posterior of thigh ○ groin ○ calf
Healing processes	<p>[all categories]</p> <ul style="list-style-type: none"> • first aid treatment for injuries common to the activity

	<ul style="list-style-type: none"> • recovery and rehabilitation period and activities • return to participation
Health and training status	<p>[all categories]</p> <ul style="list-style-type: none"> • athletes current condition of level of preparedness to begin a new or revised program
Job descriptions	<p>[all categories]</p> <ul style="list-style-type: none"> • total time • timing of position • skills • tasks and communication
Kinetic chain movement	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise may be classified based upon type of kinetic chain movement <ul style="list-style-type: none"> ○ closed kinetic chain movement ○ open kinetic chain movement
Objectives	<p>[all categories]</p> <ul style="list-style-type: none"> • athlete enjoyment • competition/performance • physical • psychological • tactical • technical and leadership skills • selection • principles of training • specificity • progressive training • rest and recovery • reversibility • frequency • intensity • duration • periodisation • tapering • peaking • individuality and maintenance

Other coaches and specialists	<p>[all categories]</p> <ul style="list-style-type: none"> • health professionals • physiologists • biomechanics
Periodisation	<p>[all categories]</p> <ul style="list-style-type: none"> • variations in training specificity, intensity and volume organised into planned periods or cycles within an overall program including <ul style="list-style-type: none"> ○ macrocycles ○ mesocycles ○ microcycles • Matveyev model includes <ul style="list-style-type: none"> ○ hypertrophy/endurance phase ○ basic strength phase ○ strength/power phase
Phase	<p>[all categories]</p> <ul style="list-style-type: none"> • macro-cycles • micro-cycles • meso-cycles • pre-season • in-season • post-season
Plyometric	<p>[all categories]</p> <ul style="list-style-type: none"> • plyometric or elastic energy training refers to <ul style="list-style-type: none"> ○ quick powerful movement using a prestretch or countermovement, that involves the stretch-shortening cycle • plyometric or elastic energy drills for • lower body <ul style="list-style-type: none"> ○ jumps in place ○ standing jumps ○ multiple hops and jumps ○ bounds ○ box drills depth jumps • upper body <ul style="list-style-type: none"> ○ throws ○ push ups • trunk
Potential barriers	<p>[all categories]</p> <ul style="list-style-type: none"> • background noise • time availability • stress level of coach/instructor and the swimmers • information overload
Potential conflict	<p>[all categories]</p>

	<ul style="list-style-type: none"> • coaching/instructing styles • training program • competition/performance program • discipline procedures • techniques • tactics and time commitments
Profile	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical • leadership skills
Psychological responses	<p>[all categories]</p> <ul style="list-style-type: none"> • denial • despair • anger and coping strategies
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resource, eg, a ratio of coaches to athletes that allows for maximum participation in a safe environment • equipment, eg, a ratio of equipment to athletes that allows for maximum participation in a safe environment • access to first aid facilities/equipment • appropriate facilities to conduct training/competition in a safe environment
Requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • objectives • structure • specific activities • range of activities • time • equipment and safety
Recovery methods	<p>[all categories]</p> <ul style="list-style-type: none"> • drills and activities that contribute to recovery of muscles after physical activity
Rehabilitation and reconditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • active strength and conditioning activities to assess return of injured athlete to competition • adapted to each athlete and his or her specific requirements and goals • rehabilitation and reconditioning based on clinical and scientific research • progressive rehabilitation and reconditioning strategies

Rules, policies and regulations	<p>[all categories]</p> <ul style="list-style-type: none"> • current edition of the International Activity Organisation rules • best practice Codes of Ethics such as those developed by the peak bodies responsible for the development of teaching and coaching • policies of employer organisations, eg, anti doping policy • Australian Sports Commission's Harassment-free Sport policy
Skills of strength and conditioning	<p>[all categories]</p> <ul style="list-style-type: none"> • resistance training for strength, power and muscle endurance • speed and agility • aerobic endurance • flexibility • anaerobic endurance
Strategy	<p>[all categories]</p> <ul style="list-style-type: none"> • weighting given to different sources of information • weighting given to different information
Strategies	<p>[all categories]</p> <ul style="list-style-type: none"> • sign language • time outs • athlete/s in charge in participation environment
Strengths and weaknesses	<p>[all categories]</p> <ul style="list-style-type: none"> • physical • psychological • tactical • technical and leadership skills
Support needs	<p>[all categories]</p> <ul style="list-style-type: none"> • training facilities • equipment • finance • transport • coach/instructor • management and/or specialist support

Tactics	<p>[all categories]</p> <ul style="list-style-type: none"> • written competition/performance strategy • strategy communicated to athletes
Testing protocols	<p>[all categories]</p> <ul style="list-style-type: none"> • past performance • discussion with trainees • physical ability tests • trial • performances in familiar environment • performances in unfamiliar environment • where relevant to the activity • positions trialled in • subjective assessments
Training background and exercise history	<p>[all categories]</p> <ul style="list-style-type: none"> • training that occurred before athlete began new or revised program including consideration to <ul style="list-style-type: none"> ○ type of training program, eg, strength, sprint, plyometric ○ length of recent regular participation in previous training programs ○ level of intensity involved in previous training programs ○ degree of exercise technique experienced
Training load, repetition and volume	<p>[all categories]</p> <ul style="list-style-type: none"> • load <ul style="list-style-type: none"> ○ the amount of weight assigned to an exercise set ○ commonly described as a percentage of one-repetition maximum (1RM) or the most weight lifted for a specified number of repetitions • repetition <ul style="list-style-type: none"> ○ the number of times a weight is lifted ○ the number of times an exercise can be performed inversely related to the load lifted • volume or volume load <ul style="list-style-type: none"> ○ the total amount of work completed in a session or unit of time eg total weight lifted, distance completed
Training program	<p>[all categories]</p> <ul style="list-style-type: none"> • a forward training plan which covers a four year Olympic cycle

Work duration, rest periods and frequency	<p>[all categories]</p> <ul style="list-style-type: none"> • work duration refers to <ul style="list-style-type: none"> ○ the time period to complete training unit or session, eg, 2-5 minutes for long interval training • rest period refers to <ul style="list-style-type: none"> ○ the time duration of recovery period between work durations, eg, 2-6 minutes ○ may be considered in work to rest ratios • frequency refers to <ul style="list-style-type: none"> ○ the number of completed work sessions in a training cycle
Work environment, organisation's Occupational Health and Safety requirements, safe and appropriate dress, safety and hygiene rules and requirements, venue and equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate apparel and personal equipment • personal hygiene requirements • strength and conditioning training equipment • technical equipment <ul style="list-style-type: none"> ○ stopwatch ○ whiteboard ○ clipboards • safety equipment as listed in state Occupational Health and Safety requirements for sports training facilities • other recommended safety guidelines are <ul style="list-style-type: none"> ○ training aids should be inspected before use ○ sun safety guidelines should be followed ○ hydration guidelines should be followed ○ competition/training facilities should be inspected before use ○ access to first aid facilities/equipment

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge of planning and preparing a strength and conditioning program for a competitive athlete • Assessment of performance should be over a period of time covering all categories of coaching from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ assess athletes readiness for involvement in a strength and conditioning program ○ develop a strength and conditioning training program for a high performance athlete that improves the performance of the athlete while maintaining their well-being ○ apply exercise prescription principles to strength and conditioning training program ○ plan for high performance/performance situations within the strength and conditioning program ○ apply exercise prescription to training program ○ plan rehabilitation and reconditioning programs ○ plan a recovery program
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC001A Teach or develop basic skills of strength and conditioning ○ SRSSTC002A Plan and prepare a strength and conditioning program for a competitive athlete ○ SRSSTC003A Operate in accordance with accepted strength and conditioning industry health and safety procedures ○ SRSSTC004A Operate and maintain strength and conditioning facilities and equipment • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSSTC005A Teach or develop advanced skills of strength and conditioning ○ HLTCOM6A Make referrals to other health care professionals when appropriate ○ HLTCOM8A Use practice specific/medical terminology in order to communicate with client/patients, fellow workers and health care professionals • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of human muscular physiology as applied to strength and conditioning ○ Knowledge of strength and conditioning principles of training ○ Knowledge of human neuromuscular anatomy and adaptation to conditioning ○ Knowledge of biomechanics of sport technique ○ Knowledge of human bioenergetics and metabolism ○ Knowledge of bone, muscle and connective tissue adaptation to physical activity ○ Knowledge of adverse neural tension in athletes

	<ul style="list-style-type: none"> ○ Knowledge of stability exercises ○ Knowledge of anatomical, physiological and biomechanical differences of athletes including age and sex ○ Knowledge of adaptation to aerobic and anaerobic endurance training ○ Knowledge of resistance training and spotting techniques ○ Knowledge of speed, agility and plyometric training ○ Knowledge of flexibility training and types of stretching ○ Knowledge of aerobic endurance exercise training ○ Knowledge of periodisation and training variation ○ Knowledge of exercise prescription principles ○ Knowledge of drills, activities and games to teach the basic skills of strength and conditioning ○ Knowledge of relevant equipment and safety requirements including Occupational Health and safety and legislative requirements ● Required skills <ul style="list-style-type: none"> ○ Skills used to teach the advanced skills of strength and conditioning eg movement, voice, use of technical aids ○ Ability to gather information to prepare a plan for strength and conditioning ○ Monitoring/observation skills in order to make necessary adjustments to training programs to improve skills ○ Feedback and questioning skills in order to communicate effectively with participants ○ Ability to conduct drills, activities and/or games in accordance with the accepted best practice in coaching strength and conditioning
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access <ul style="list-style-type: none"> ○ a group of athletes participating in a strength and conditioning activity ○ a gymnasium or strength training facility and other equipment ○ rules, policies and regulations of relevant peak bodies and/or employer organisations ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as coaching effectiveness this unit of competency must be assessed over a period of time in order to ensure consistency in performance over the Range Statements and contexts applicable to prescribing exercise for athletes in strength and conditioning
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the activity should be conducted in a sports training facility with competitive athletes participating in strength and conditioning activities. The environment should be safe, with a noise to a level experienced with an activity in full operation and support services provided for optimum performance

	<ul style="list-style-type: none">• This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes• Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
3	3	3	2	2	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Establish checklist of key selection policies, procedures, and criteria • Communicating ideas and information - Identify barriers to communication • Planning and organising activities - Plan requirements for training components and for each program session • Working with teams and others - Liaise with other coaches, specialist and instructors • Using mathematical ideas and techniques - Establish selection procedures • Solving problems - Identify and resolve potential conflicts • Using technology - Use appropriate technical and testing equipment <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

TAI CHI

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SRFTCH001A	INSTRUCT A TAI CHI BASED FITNESS CLASS FOR HEALTH AND WELLBEING
TCH	Tai Chi

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers the knowledge and skills needed to plan and instruct a Tai Chi based fitness classes for the general health and wellbeing of client groups.

ELEMENT	PERFORMANCE CRITERIA
1 Plan a Tai Chi based fitness class	1.1 Plan and prepare the class incorporating general <i>Tai Chi exercises promoting health and well being</i> 1.2 Assess and apply the organisation's <i>occupational health and safety requirements</i> to class plan including <i>resourcing requirements</i> 1.3 Document the plan including class structure and progression
2 Establish effective communication and educate participants of the benefits of Tai Chi on general health and well being	2.1 Use a variety of <i>communication</i> styles for effective communication in the instructional environment 2.2 Explain to participants the basic principles of Tai Chi in the context of general health and wellbeing 2.3 Explain the <i>factors for maintenance and improvement of health</i> and how Tai Chi contributes to this 2.4 Identify the range of <i>Tai Chi exercises promoting health and well being</i>
3 Instruct a Tai Chi based fitness class	3.1 Instruct participants in accordance with class plan applying appropriate <i>instructional techniques</i> 3.2 Demonstrate and explain <i>Tai Chi exercises promoting health and well being</i> 3.3 Incorporate <i>safety aspects</i> into the Tai Chi exercises 3.4 Explain the many styles of Tai Chi from the meditative exercises to a more vigorous, athletic form 3.5 Explain during routine the <i>medical conditions to which Tai Chi acts as a preventative measure and therapy</i> 3.6 Modify instructional techniques continually throughout class to match participant <i>readiness</i> 3.7 Monitor <i>precautions</i> continually throughout class and apply correction techniques where required 3.8 Undertake observation with minimal disruption to the class 3.9 Maintain group control to ensure safety and enjoyment of the individual and group, and a satisfactory outcome to the experience

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • in a style appropriate to the discipline with <ul style="list-style-type: none"> ○ instructor, client interaction ○ instructor, broader community interaction ○ instructor, media interaction • in accord with <ul style="list-style-type: none"> ○ appropriate use of verbal, non-verbal and written modes ○ the instructors code of conduct policy ○ the culture of the tai chi discipline
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the client • establishing a rapport <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire or casual when appropriate ○ organized and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in client • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clear communication lines • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality • demonstration strategies • motivational strategies • avoidance against competing with the client

Factors for maintenance and improvement of health	<p>[all categories]</p> <ul style="list-style-type: none"> • understanding of the desirable components for health improvement and maintenance, eg, to improve cardiopulmonary fitness, muscular strength and flexibility • scientific evidence to show how Tai Chi exercises are conducted • understanding of the chronic illnesses that could be modified or prevented with the Tai Chi exercises
Medical conditions to which Tai Chi acts as a preventative measure and therapy	<p>[all categories]</p> <ul style="list-style-type: none"> • improves general health • improves conditions such as: <ul style="list-style-type: none"> ○ arthritis ○ diabetes ○ heart disease ○ respiratory diseases ○ other chronic diseases • improves balance • prevents falls • helps posture • builds immunity to disease • improves mental illness, depression and stress
Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate clothing and personal equipment relevant to tai chi • hygiene requirements • ensuring occupational health and safety is addressed in accordance with legislative requirements and organisational policies and procedures • other recommended safety guidelines are <ul style="list-style-type: none"> ○ instructional aids should be inspected before use ○ hydration guidelines should be followed ○ practice facilities should be inspected before use ○ access to first aid facilities/equipment and trained first aid personnel
Precautions	<p>[all categories]</p> <ul style="list-style-type: none"> • too fast • impatience • incorrect posture <ul style="list-style-type: none"> ○ not being upright ○ too tense • over-stretching • lack of mental focus • unable to achieve control of speed, fluidity and smoothness of movements • understanding of correct breathing method • understanding of the basic concept of qi cultivation • aware of weight transfer • show mind and body integration • understanding of how to develop internal strength • too much harsh force • general exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises

	<ul style="list-style-type: none"> ○ avoid tai chi movements which may cause injuries, for example, not to bend the knees too much ○ learn how to prevent damage to the joints, muscles and ligaments
Readiness	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate levels of fitness • cardio-respiratory capacity • endurance • strength • motor performance <ul style="list-style-type: none"> ○ agility ○ speed ○ coordination • psychological, level of arousal which will enhance performance • emotional, stable and positive approach to enjoyment and performance
Resourcing requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • well ventilated area • adequate space to ensure the absence of physical contact with other participants during all facets of the class • provision of appropriate equipment, eg, mats • floor surface
Safety aspects	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises in general ○ understand how to manage first aid of any injury • avoid tai chi movements which may cause injuries, for example, not to bend the knees too much, maintain good balance and slowly working up to higher levels of exertion • learn how to prevent injuries to muscles, joints and ligaments, and if they occur, how to manage them rationally
Tai Chi exercises promoting health and well being	<p>[all categories]</p> <ul style="list-style-type: none"> • warm-up exercises • stretching exercises including <ul style="list-style-type: none"> ○ neck ○ shoulders ○ spine ○ hips ○ knees ○ ankles • cool-down exercises • qigong exercises <ul style="list-style-type: none"> ○ the posture infinity ○ the posture of Tai Chi ○ the posture of opening and closing ○ the posture of yin yang harmony • foundation exercises <ul style="list-style-type: none"> ○ Tai Chi walking forward yang style ○ brush knee yang style ○ Tai Chi walking backward yang style

	<ul style="list-style-type: none">○ repulse the monkey yang style• basic exercises<ul style="list-style-type: none">○ commencement form○ parting wild horse's mane yang style○ white crane flashing wings yang style○ brush knees yang style○ playing the lute yang style○ repulse the monkey yang style○ closing form
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ document plan for class structure and progression incorporating Tai Chi exercises promoting health and well being ○ educate class participants on the basic principles of Tai Chi in the context of general health and well being ○ educate class participants on the medical conditions to which Tai Chi acts as a preventative measure and therapy ○ instruct a group class in Tai Chi exercises that promote health and well being ○ monitor precautions continually throughout class and apply correction techniques where required
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRSMAR020A Teach and develop the basic skills of Tai Chi ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFTCH002A Instruct a Tai Chi based fitness class for clients with Diabetes ○ SRFTCH003A Instruct a Tai Chi based fitness class for clients with Arthritis
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Safety considerations for all Tai Chi instruction ○ Different types of Tai Chi techniques ○ Muscles employed in the different Tai Chi techniques ○ Bio–mechanical principles of the different stances, body movement and weight transference ○ Preventative measures and therapies of Tai Chi ○ occupational health and safety issues ○ Philosophies and regulations of Tai Chi • Required skills

	<ul style="list-style-type: none"> ○ Communication styles ○ Instruction methods ○ Stances ○ Body movements ○ Weight transference ○ Breathing techniques
Resource implications	<ul style="list-style-type: none"> • Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace • Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> • Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> • This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace • This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes • Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Evaluate key Tai Chi skills • Communicating ideas and information — Use appropriate verbal, nonverbal and written forms of communication in any given situation • Planning and organising activities — Develop and coordinate drills and training activities • Working with teams and others — Develop cooperation among students while providing a safe and non-threatening environment • Using mathematical ideas and techniques — Use space and resources effectively • Solving problems — Analyse and correct skill development • Using technology — Select and use appropriate teaching and technological aids <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFTCH002A	INSTRUCT A TAI CHI BASED FITNESS CLASS FOR CLIENTS WITH DIABETES
TCH	Tai Chi

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers knowledge and skills needed to plan and instruct a Tai Chi based fitness classes for client groups with diabetes.

ELEMENT	PERFORMANCE CRITERIA
1 Plan a Tai Chi based fitness class for client groups with diabetes	1.1 Plan and prepare the class incorporating general <i>Tai Chi exercises for clients with diabetes</i> 1.2 Assess and apply the organisation's <i>Occupational Health and Safety requirements</i> to class plan including <i>resourcing requirements</i> 1.3 Document the plan including class structure and progression
2 Establish effective communication and educate participants of the benefits of Tai Chi on general health and well being	2.1 Use a variety of <i>communication</i> styles for effective communication in the instructional environment 2.2 Explain to participants the basic principles of Tai Chi in the context of <i>diabetes</i> 2.3 Explain the <i>factors for maintenance and improvement of health</i> and how Tai Chi contributes to this 2.4 Identify the range of <i>Tai Chi exercises promoting health and well being</i>
3 Instruct a Tai Chi based fitness class	3.1 Instruct participants in accordance with class plan applying appropriate <i>instructional techniques</i> 3.2 Demonstrate and explain <i>Tai Chi exercises for clients with diabetes</i> 3.3 Incorporate <i>safety aspects</i> into the Tai Chi exercises 3.4 Explain the many styles of Tai Chi from the meditative exercises to a more vigorous, athletic form 3.5 Explain during routine the <i>medical conditions to which Tai Chi acts as a preventative measure and therapy</i> 3.6 Modify instructional techniques continually throughout class to match participant <i>readiness</i> 3.7 Monitor <i>precautions</i> continually throughout class and apply correction techniques where required 3.8 Undertake observation with minimal disruption to the class 3.9 Maintain group control to ensure safety and enjoyment of the individual and group, and a satisfactory outcome to the experience

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • in a style appropriate to the discipline with <ul style="list-style-type: none"> ○ instructor, client interaction ○ instructor, broader community interaction ○ instructor, media interaction • in accord with <ul style="list-style-type: none"> ○ appropriate use of verbal, non-verbal and written modes ○ the instructors code of conduct policy ○ the culture of the tai chi discipline
Diabetes	<p>[all categories]</p> <ul style="list-style-type: none"> • types of diabetes: <ul style="list-style-type: none"> ○ type 1 ○ type 2 • avoid problems of diabetes with tai chi exercise • help improve health conditions • work with health professionals
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the client • establishing a rapport <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire or casual when appropriate ○ organized and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in client • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clear communication lines • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non verbal communication <ul style="list-style-type: none"> ○ mannerisms ○ personality • demonstration strategies

	<ul style="list-style-type: none"> • motivational strategies • avoidance against competing with the client
Factors for maintenance and improvement of health	<p>[all categories]</p> <ul style="list-style-type: none"> • understanding of the desirable components for health improvement and maintenance, eg, to improve cardiopulmonary fitness, muscular strength and flexibility • scientific evidence to show how Tai Chi exercises are conducted • understanding of the chronic illnesses that could be modified or prevented with the Tai Chi exercises
Medical conditions to which Tai Chi acts as a preventative measure and therapy	<p>[all categories]</p> <ul style="list-style-type: none"> • improves general health • improves conditions such as <ul style="list-style-type: none"> ○ arthritis ○ diabetes ○ heart disease ○ respiratory diseases ○ other chronic diseases • improves balance • prevents falls • helps posture • builds immunity to disease • improves mental illness, depression and stress
Occupational Health and Safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate clothing and personal equipment relevant to Tai Chi • hygiene requirements • ensuring occupational health and safety is addressed in accordance with legislative requirements and organisational policies and procedures • other recommended safety guidelines are <ul style="list-style-type: none"> ○ instructional aids should be inspected before use ○ hydration guidelines should be followed ○ practice facilities should be inspected before use ○ access to first aid facilities/equipment and trained first aid personnel
Precautions	<p>[all categories]</p> <ul style="list-style-type: none"> • too fast • impatience • incorrect posture <ul style="list-style-type: none"> ○ not being upright ○ too tense • over-stretching • lack of mental focus • unable to achieve control of speed, fluidity and smoothness of movements • understanding of correct breathing method • understanding of the basic concept of qi cultivation • aware of weight transfer • show mind and body integration • understanding of how to develop internal strength

	<ul style="list-style-type: none"> • too much harsh force • general exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises ○ avoid tai chi movements which may cause injuries, for example, not to bend the knees too much ○ learn how to prevent damage to the joints, muscles and ligaments
Readiness	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate levels of fitness • cardio respiratory capacity • endurance • strength • motor performance <ul style="list-style-type: none"> ○ agility ○ speed ○ coordination • psychological, level of arousal which will enhance performance • emotional, stable and positive approach to enjoyment and performance
Resourcing requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • well ventilated area • adequate space to ensure the absence of physical contact with other participants during all facets of the class • provision of appropriate equipment, eg, mats • floor surface
Safety aspects	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises in general ○ understand how to manage first aid of any injury • avoid tai chi movements which may cause injuries, for example, not to bend the knees too much, maintain good balance and slowly working up to higher levels of exertion • learn how to prevent injuries to muscles, joints and ligaments, and if they occur, how to manage them rationally
Tai Chi exercises for clients with diabetes	<p>[all categories]</p> <ul style="list-style-type: none"> • commencement movement • opening and closing hands of sun style • waving hands in the cloud x3 left of yang style • opening and closing hands of sun style • fair lady working at the shuttle of sun style • opening and closing hands of sun style • toes kicks left and right of yang style • opening and closing of sun style • waving hands in the cloud of yang style • opening and closing hands of sun style • closing movement • waving hands in the cloud x3 of yang style • opening and closing hands of sun style • stroking bird's tail left of yang style

	<ul style="list-style-type: none">• opening and closing hands of sun style• stroking bird's tail right of yang style• opening and closing hands of sun style• waving hands in the cloud x3 of yang style• opening and closing hands of sun style• closing movements
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ document plan for class structure and progression incorporating Tai Chi exercises for client groups with diabetes ○ educate class participants on the basic principles of Tai Chi in the context of diabetes ○ educate class participants on the medical conditions to which Tai Chi acts as a preventative measure and therapy ○ instruct a group class in Tai Chi exercises to support clients with diabetes ○ monitor precautions continually throughout class and apply correction techniques where required
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRSMAR020A Teach and develop the basic skills of Tai Chi ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFTCH001A Instruct a Tai Chi based fitness class for health and wellbeing ○ SRFTCH003A Instruct a Tai Chi based fitness class for clients with Arthritis
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Background of Tai Chi ○ Background of diabetes ○ The origin of Tai Chi for diabetes ○ Ailments of diabetes and both associated physical and mental problems ○ Suitable exercises for people with diabetes ○ Benefits of each exercise ○ Precautions needed for exercising with clients with diabetes ○ Safety precautions as part of teaching methods ○ Occupational health and safety ○ Essential principles of Tai Chi

	<ul style="list-style-type: none"> ○ Endorsed standards of Diabetes Australia ● Required skills <ul style="list-style-type: none"> ○ Exercises for clients with diabetes ○ Warm-up exercises ○ Wind-down exercises ○ Variety of instructional styles ○ Variety of communication styles
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Design process to identify aims to integrate with all components of instructing Tai Chi for clients with arthritis • Communicating ideas and information — Use appropriate verbal, non-verbal and written forms of communication in any given situation • Planning and organising activities — Develop and coordinate drills and activities • Working with teams and others — Develop skills and coordination among clients while providing a safe and non-threatening environment • Using mathematical ideas and techniques — Use space and resources effectively • Solving problems — Analyse and correct skill development • Using technology — Select and use appropriate teaching aids <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRFTCH003A	INSTRUCT A TAI CHI BASED FITNESS CLASS FOR CLIENTS WITH ARTHRITIS
TCH	Tai Chi

DESCRIPTION: This unit has been developed for the Fitness Industry Training Package and covers knowledge and skills needed to plan and instruct a Tai Chi based fitness classes for client groups with arthritis.

ELEMENT	PERFORMANCE CRITERIA
1 Plan a Tai Chi based fitness class for client groups with arthritis	1.1 Plan and prepare the class incorporating general <i>Tai Chi exercises for clients with arthritis</i> 1.2 Assess and apply the organisation's <i>Occupational Health and Safety requirements</i> to class plan including <i>resourcing requirements</i> 1.3 Document the plan including class structure and progression
2 Establish effective communication and educate participants of the benefits of Tai Chi on general health and well being	2.1 Use a variety of <i>communication</i> styles for effective communication in the instructional environment 2.2 Explain to participants the basic principles of Tai Chi in the context of <i>arthritis</i> 2.3 Explain the <i>factors for maintenance and improvement of health</i> and how Tai Chi contributes to this 2.4 Identify the range of <i>Tai Chi exercises promoting health and well being</i>
3 Instruct a Tai Chi based fitness class	3.1 Instruct participants in accordance with class plan applying appropriate <i>instructional techniques</i> 3.2 Demonstrate and explain <i>Tai Chi exercises for clients with arthritis</i> 3.3 Incorporate <i>safety aspects</i> into the Tai Chi exercises 3.4 Explain the many styles of Tai Chi from the meditative exercises to a more vigorous, athletic form 3.5 Explain during routine the <i>medical conditions to which Tai Chi acts as a preventative measure and therapy</i> 3.6 Modify instructional techniques continually throughout class to match participant <i>readiness</i> 3.7 Monitor <i>precautions</i> continually throughout class and apply correction techniques where required 3.8 Undertake observation with minimal disruption to the class 3.9 Maintain group control to ensure safety and enjoyment of the individual and group, and a satisfactory outcome to the experience

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Arthritis	<p>[all categories]</p> <ul style="list-style-type: none"> • kinds of arthritis <ul style="list-style-type: none"> ○ inflammatory type, eg, rheumatoid arthritis ○ degenerative type, eg, osteoarthritis • common problems <ul style="list-style-type: none"> ○ pain and stiffness ○ tiredness ○ depression ○ loss of physical function
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • in a style appropriate to the discipline with <ul style="list-style-type: none"> ○ instructor, client interaction ○ instructor, broader community interaction ○ instructor, media interaction • in accord with <ul style="list-style-type: none"> ○ appropriate use of verbal, non-verbal and written modes ○ the instructors code of conduct policy ○ the culture of the Tai Chi discipline
Instructional techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor to communicate with the client • establishing a rapport <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non-negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire or casual when appropriate ○ organized and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in client • instructional position <ul style="list-style-type: none"> ○ body language ○ eye contact ○ clear communication lines • verbal communication <ul style="list-style-type: none"> ○ encouragement ○ voice clarity • non-verbal communication <ul style="list-style-type: none"> ○ mannerisms

	<ul style="list-style-type: none"> ○ personality • demonstration strategies • motivational strategies • avoidance against competing with the client
Factors for maintenance and improvement of health	<p>[all categories]</p> <ul style="list-style-type: none"> • understanding of the desirable components for health improvement and maintenance, eg, to improve cardiopulmonary fitness, muscular strength and flexibility • scientific evidence to show how Tai Chi exercises are conducted • understanding of the chronic illnesses that could be modified or prevented with the Tai Chi exercises
Medical conditions to which Tai Chi acts as a preventative measure and therapy	<p>[all categories]</p> <ul style="list-style-type: none"> • improves general health • improves conditions such as <ul style="list-style-type: none"> ○ arthritis ○ diabetes ○ heart disease ○ respiratory diseases ○ other chronic diseases • improves balance • prevents falls • helps posture • builds immunity to disease • improves mental illness, depression and stress
Occupational health and safety requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate clothing and personal equipment relevant to Tai Chi • hygiene requirements • ensuring occupational health and safety is addressed in accordance with legislative requirements and organisational policies and procedures • other recommended safety guidelines are <ul style="list-style-type: none"> ○ instructional aids should be inspected before use ○ hydration guidelines should be followed ○ practice facilities should be inspected before use ○ access to first aid facilities/equipment and trained first aid personnel
Precautions	<p>[all categories]</p> <ul style="list-style-type: none"> • too fast • impatience • incorrect posture <ul style="list-style-type: none"> ○ not being upright ○ too tense • over-stretching • lack of mental focus • unable to achieve control of speed, fluidity and smoothness of movements • understanding of correct breathing method • understanding of the basic concept of qi cultivation • aware of weight transfer

	<ul style="list-style-type: none"> • show mind and body integration • understanding of how to develop internal strength • too much harsh force • general exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises ○ avoid tai chi movements which may cause injuries, for example, not to bend the knees too much ○ learn how to prevent damage to the joints, muscles and ligaments
Readiness	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate levels of fitness • cardio respiratory capacity • endurance • strength • motor performance <ul style="list-style-type: none"> ○ agility ○ speed ○ coordination • psychological, level of arousal which will enhance performance • emotional, stable and positive approach to enjoyment and performance
Resourcing requirements	<p>[all categories]</p> <ul style="list-style-type: none"> • well ventilated area • adequate space to ensure the absence of physical contact with other participants during all facets of the class • provision of appropriate equipment, eg, mats • floor surface
Safety aspects	<p>[all categories]</p> <ul style="list-style-type: none"> • exercise precautions <ul style="list-style-type: none"> ○ avoid any dangerous exercises in general ○ understand how to manage first aid of any injury • avoid tai chi movements which may cause injuries, for example, not to bend the knees too much, maintain good balance and slowly working up to higher levels of exertion • learn how to prevent injuries to muscles, joints and ligaments, and if they occur, how to manage them rationally
Tai Chi exercises for clients with arthritis	<p>[all categories]</p> <ul style="list-style-type: none"> • commencement form of sun style • opening and closing hands of sun style • single whip of sun style • waving hands in the cloud of sun style • opening and closing hands of sun style • closing form • brush knee and twist step of sun style • playing the lute of sun style • step forward to deflect downwards, parry and punch of sun style • block and close of sun style • pushing the mountain of sun style • opening and closing hands of sun style

	<ul style="list-style-type: none">• closing form
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Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm integrated demonstration of all elements of competency and their performance criteria, in particular the ability to <ul style="list-style-type: none"> ○ document plan for class structure and progression incorporating Tai Chi exercises for client groups with arthritis ○ educate class participants on the basic principles of Tai Chi in the context of arthritis ○ educate class participants on the medical conditions to which Tai Chi acts as a preventative measure and therapy ○ instruct a group class in Tai Chi exercises to support clients with arthritis ○ monitor precautions continually throughout class and apply correction techniques where required
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ SRFFIT001B Provide orientation to clients prior to undertaking a fitness program ○ SRFFIT003B Undertake client induction and screening ○ SRFFIT004B Develop basic fitness programs ○ SRFFIT005B Apply basic exercise science to exercise instruction ○ SRFFIT006B Use and maintain core fitness industry equipment ○ SRFFIT014A Provide advice to clients on the application of basic anatomy and physiology to fitness programs ○ SRFFIT015A Provide nutrition advice to clients in accordance with recommended guidelines ○ SRFGYM001B Instruct fitness activity skills to a client using fitness equipment ○ SRFSP002A Develop and apply an awareness of specific populations to exercise delivery ○ SRSMAR020A Teach and develop the basic skills of Tai Chi ○ SRXGRO003A Provide leadership to groups • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ Nil • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRFTCH001A Instruct a Tai Chi based fitness class for health and wellbeing ○ SRFTCH002A Instruct a Tai Chi based fitness class for clients with diabetes
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Background of Tai Chi ○ Background of arthritis ○ The origin of Tai Chi for arthritis ○ Ailments of arthritis and both associated physical and mental problems ○ Suitable exercises for people with arthritis ○ Benefits of each exercise ○ Precautions needed for exercising with clients with arthritis ○ Safety precautions as part of instructional methods ○ Occupational health and safety ○ Essential principles of Tai Chi

	<ul style="list-style-type: none"> ○ Endorsed standards of Diabetes Australia ● Required skills <ul style="list-style-type: none"> ○ Exercises for clients with diabetes ○ Warm-up exercises ○ Wind-down exercises ○ Variety of instructional styles ○ Variety of communication styles
Resource implications	<ul style="list-style-type: none"> ● Physical resources — assessment of this competency require access to <ul style="list-style-type: none"> ○ a real or simulated work environment ○ appropriate documentation and resources normally used in the workplace ● Human resources — assessment of this unit of competency will require human resources consistent with those outlined in the Assessment Guidelines. That is, assessors (or persons within the assessment team) must <ul style="list-style-type: none"> ○ be competent in this unit but preferably be competent in the unit at the level above ○ be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ have attained the mandatory competency requirements for assessors under the Australian Quality Training Framework (AQTF) as specified in Standard 7.3 of the <i>Standards for Registered Training Organisations</i>
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as demonstrating safety requirements and delivery of appropriate techniques, this unit of competency must be assessed over a minimum of three (3) different occasions to ensure consistency of performance over the Range Statements and contexts applicable to the work environment
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of fitness in Australia. For valid and reliable assessment the fitness activity should closely replicate the work environment. The environment should be safe, with the hazards, circumstances and equipment likely to be encountered in a real workplace ● This unit of competency should be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a “period of time” and/or in a “number of locations”, any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information — Design process to identify aims to integrate with all components of instructing Tai Chi for clients with arthritis • Communicating ideas and information — Use appropriate verbal, non-verbal and written forms of communication in any given situation • Planning and organising activities — Develop and coordinate drills and activities • Working with teams and others — Develop skills and coordination among clients while providing a safe and non-threatening environment • Using mathematical ideas and techniques — Use space and resources effectively • Solving problems — Analyse and correct skill development • Using technology — Select and use appropriate teaching aids <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						

SRSMAR020A	TEACH AND DEVELOP THE INTERMEDIATE SKILLS OF TAI CHI
MAR	Martial arts

DESCRIPTION: This unit has been developed for the Sport Industry Training Package and covers the knowledge and skills to use drills, activities and games to teach and develop intermediate skills of Tai Chi.

ELEMENT	PERFORMANCE CRITERIA
1 Analyse intermediate skills/ techniques of Tai Chi	1.1 Explain basic biomechanical principles in the context of Tai Chi skills/techniques 1.2 Identify an intermediate skill/technique and its purposes and break the skill into components 1.3 Identify observable body movements for each stage of the skill/technique in priority of importance to performance of the skill/technique
2 Identify appropriate teaching methods and coaching/instruction styles to develop the teaching of the intermediate skill/technique of Tai Chi	2.1 Identify teaching methods and explain in the context of specific skills 2.2 Use a variety of feedback techniques during coaching 2.3 Use a range of demonstrations when coaching 2.4 Use a range of questioning techniques in the coaching process 2.5 Use appropriate coaching/instruction styles in relation to a range of coaching situations 2.6 Use teaching methods and coaching/instruction styles that demonstrate best practice principles 2.7 Use a variety of communication styles for effective communication in a sporting environment
3 Assess players readiness to acquire and perform the intermediate skill/techniques of Tai Chi	3.1 Identify the skill/technique of Tai Chi to be developed 3.2 Identify factors which affect the acquisition of the intermediate skill/techniques of Tai Chi and describe in relation to skill acquisition of participants 3.3 Assess participants regarding their readiness to acquire the skill/technique being taught or developed
4 Conduct drills, activities and/or games to teach or develop the intermediate skill/techniques of Tai Chi	4.1 Select teaching methods and coaching/instruction styles to match the players readiness , the environment , the intermediate skill/techniques and the equipment available 4.2 Allocate sufficient space and resources for the drills, activities and/or games 4.3 Use space and training equipment effectively to conduct the training session 4.4 Deliver relevant information, explanations and demonstrations to conduct drills, activities and/or games concisely and precisely for Tai Chi 4.5 Use technological aids to supplement presentations 4.6 Place emphasis on practical involvement while adjusting or refining skills on an individualised basis 4.7 Observe players to see that the drills, activities and/or games are conducted to enhance the essential principles and general philosophies of Tai Chi 4.8 Observe players skill/technique execution and apply correction techniques to improve skill/technique execution on an individualised and/or group basis 4.9 Observe with minimal disruption to the flow of the drills, activities and/or games 4.10 Monitor the skill/technique being taught, the teaching method and coaching/instruction styles during the instruction and assess following the instruction

	4.11 Maintain group control to ensure the safety and enjoyment of the individual and group, and a satisfactory outcome to the experience
5 Review and adapt the teaching of an <i>intermediate skill/technique</i> in response to feedback	<ul style="list-style-type: none">5.1 Make relevant points of emphasis before, during and/or after coaching sessions5.2 Adapt coaching methods and procedures to the current needs of participants5.3 Give participants the opportunity to have input to the coaching sessions5.4 Modify planned program to accommodate participants actual progress

Range Statements

The Range Statements provide advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. The Range Statements relate to the unit as a whole and helps facilitate holistic assessment. In addition, the following variables may be present for this particular unit of competency:

RANGE STATEMENT	CATEGORIES
Best practice principles	<p>[all categories]</p> <ul style="list-style-type: none"> • accepted preventative practice adopted throughout the martial arts industry to minimise safety hazards or risks • coaches and/or instructors Code of Conduct policies developed by the peak bodies responsible for the development of teaching and coaching Tai Chi and martial arts • Tai Chi and Martial Arts Industry Association regulations and guidelines • relevant national, state/territory or local government regulations and guidelines • Tai Chi and Martial Arts Industry Association policies and procedures • the culture of martial arts and Tai Chi • current and past good practice demonstrated by self or peers in the same or similar situation
Coaching/instruction styles	<p>[all categories]</p> <ul style="list-style-type: none"> • refers to the presentation style/s adopted by the instructor or coach to communicate with the athlete • depending on the situation the coach or instructor should be able to incorporate a range of combinations of the following styles and/or any associated variations <ul style="list-style-type: none"> ○ friendly and approachable while maintaining a 'professional distance' ○ clear, precise and, if appropriate, directive regarding non negotiable issues, eg, safety factors ○ humorous when appropriate ○ laissez faire or casual when appropriate ○ organised and efficient ○ a 'critical friend' ○ motivational and encouraging ○ disciplinarian, including modification of undesirable behaviours in athletes
Communication	<p>[all categories]</p> <ul style="list-style-type: none"> • in a style appropriate to the Tai Chi and martial arts community with <ul style="list-style-type: none"> ○ coach, player interaction ○ coach, official interaction ○ coach, broader community interaction ○ coach, media interaction • in accord with <ul style="list-style-type: none"> ○ appropriate use of verbal, non-verbal and written modes ○ the Tai Chi and Martial Arts Industry Association Code of Practice for Martial Arts Centres and Martial Arts Instructors or similar

	<ul style="list-style-type: none"> ○ the culture of martial arts and Tai Chi
Drills, activities and/or games	<p>[all categories]</p> <ul style="list-style-type: none"> • that are designed to teach or develop the intermediate skills/techniques of Tai Chi <ul style="list-style-type: none"> ○ hand and arm techniques <ul style="list-style-type: none"> ▪ different hand techniques in different styles ▪ upper limb movements ○ foot and leg technique <ul style="list-style-type: none"> ▪ stepping and kicking of different styles ○ single hand - 4push hand technique <ul style="list-style-type: none"> ▪ ward off, roll back, press and push ▪ understand and acquire the elementary skill of single hand push hand technique ○ stances, body movement and transference of weight <ul style="list-style-type: none"> ▪ stances of different styles, body alignment and transference of weight ○ history <ul style="list-style-type: none"> ▪ what is Tai Chi? ▪ comparing with external schools, the common ground and the differences ▪ general characteristics, the force redirection as core principles ▪ background history and different styles
Environment	<p>[all categories]</p> <ul style="list-style-type: none"> • weather conditions • condition of floor • dojo facilities • spectators must behave in a manner which reflects the intention of the spectators code of conduct as prescribed by the Tai Chi environment is appropriate and safe for competition and/or training
Equipment	<p>[all categories]</p> <ul style="list-style-type: none"> • all personal equipment in competition conforms to rules and regulations of Tai Chi • technical equipment is appropriate and safe for the activities undertaken • personal equipment is appropriate and safe for the activities undertaken at that time • should be utilised in a safe and effective manner which maximises participation
Intermediate skills/techniques	<p>[all categories]</p> <ul style="list-style-type: none"> • hand and arm techniques <ul style="list-style-type: none"> ○ different hand techniques in different styles ○ upper limb movements • foot and leg technique <ul style="list-style-type: none"> ○ stepping and kicking of different styles • single hand - 4push hand technique <ul style="list-style-type: none"> ○ ward off, roll back, press and push ○ understand and acquire the elementary skill of single hand push hand technique

	<ul style="list-style-type: none"> • stances, body movement and transference of weight <ul style="list-style-type: none"> ○ stances of different styles, body alignment and transference of weight • history <ul style="list-style-type: none"> ○ what is Tai Chi? ○ comparing with external schools, the common ground and the differences ○ general characteristics, the force redirection as core principles ○ background history and different styles
Readiness	<p>[all categories]</p> <ul style="list-style-type: none"> • appropriate levels of fitness • cardio respiratory capacity • strength • motor performance factors <ul style="list-style-type: none"> ○ agility ○ speed ○ coordination • social, compatibility between players • psychological, level of arousal which will enhance performance • emotional, stable and positive approach to enjoyment and performance
Resources	<p>[all categories]</p> <ul style="list-style-type: none"> • human resources should be sufficient to provide a safe and meaningful experience for participants • equipment, eg, correct footwear • dojo facilities both indoor and outdoor
Rules, regulations and policies	<p>[all categories]</p> <ul style="list-style-type: none"> • essential principles and general philosophies of Tai Chi • codes of ethics such as <ul style="list-style-type: none"> ○ Tai Chi Association of Australia code of ethics • policies of the employer organisation of either <ul style="list-style-type: none"> ○ Australian Kung-Fu Wu-Shu Federation ○ Tai Chi Association of Australia • age restrictions, as appropriate

Evidence Guide

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competence for this unit. This is an integral part of the assessment of competence and should be read in conjunction with the Range Statements.

Critical aspects of evidence to be considered	<ul style="list-style-type: none"> • Assessment must confirm sufficient knowledge to teach or develop the intermediate skills of Tai Chi • Assessment of performance should be over a period of time covering all categories of coaching from the Range Statements • Assessment must confirm the ability to apply knowledge and appropriate techniques to <ul style="list-style-type: none"> ○ provide a safe teaching environment ○ consider an individual participant in the context of a total lifestyle ○ analyse an intermediate skill/technique of Tai Chi ○ identify appropriate teaching methods and coaching/instruction styles to develop the intermediate skills/techniques of Tai Chi ○ assess players readiness to acquire and perform the intermediate skill/techniques of Tai Chi ○ conduct drills, activities and/or games to teach or develop the intermediate skills/techniques of Tai Chi ○ review and adapt the teaching of an intermediate skill/technique in response to feedback
Interdependent assessment of units	<ul style="list-style-type: none"> • This unit must be assessed after attainment of competency in the following unit(s) <ul style="list-style-type: none"> ○ Nil • This unit must be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSMAR005A Teach or develop the intermediate skills of martial arts • For the purpose of integrated assessment, this unit may be assessed in conjunction with the following unit(s) <ul style="list-style-type: none"> ○ SRSCGP001A Operate in accord with accepted coaching practices, styles and legal and ethical responsibilities ○ SRSCGP002A Include special interest groups or people with special needs ○ SRSCGP003A Implement the fundamental principles of sports psychology ○ SRSCGP004A Provide information about the fundamental principles of eating for peak performance ○ SRSOGP002A Apply rules and regulations to conduct games and competitions ○ SRSSPT003A Implement sports first aid procedures and apply sports first aid ○ SRXCAI004B Plan a session or program for participants ○ SRXCAI005B Conduct a sport and recreation session for participants ○ SRXCAI006B Organise a sport and recreation program ○ SRXCAI007B Conduct a sport and recreation program ○ SRXGRO001A Facilitate a group ○ SRXGRO002A Deal with conflict
Required knowledge and skills	<ul style="list-style-type: none"> • Required knowledge <ul style="list-style-type: none"> ○ Knowledge of the intermediate skills/techniques of Tai Chi ○ Knowledge of the biomechanics of the skills/techniques of Tai Chi ○ Knowledge of energy systems related to Tai Chi ○ Knowledge of drills, activities and games to teach the intermediate skills of Tai Chi

	<ul style="list-style-type: none"> ○ Knowledge of the essential principles of Tai Chi in order to teach these to participants ○ Knowledge of human growth and development to ensure appropriate instruction for skill acquisition for different athletes ○ Knowledge of relevant equipment and safety requirements ○ Knowledge of principles of coaching to teach or develop the intermediate skills/techniques of Tai Chi ○ Knowledge of legal and ethical responsibilities appropriate to coaching athletes ○ Knowledge of risk management related to coaching martial arts ● Required skills <ul style="list-style-type: none"> ○ Ability to organise effective and appropriate intermediate level coaching practices ○ Ability to apply the essential principles of Tai Chi eg movement, voice, use of technical aids, judgement, reporting ○ Ability to provide demonstrations, ie, self, other athletes as models, videos ○ Ability to organise self directed activities for participants ○ Ability to plan, conduct and evaluate long term individualised training programs ○ Communication skills in order that instruction and coaching processes are understood ○ Feedback and questioning skills in order to communicate effectively with participants ○ Observation skills in order to successfully observe the individual skill performance and make accurate skill analysis ○ Negotiation skills to achieve set goals for skill acquisition ○ Risk management skill to ensure safety of athletes
Resource implications	<ul style="list-style-type: none"> ● Physical resources - assessment of this competency requires access to <ul style="list-style-type: none"> ○ a dojo facility ○ equipment ○ participants competing at an appropriate level ● Human resources - assessment of this competency will require <ul style="list-style-type: none"> ○ personnel with competency in coaching Tai Chi at intermediate level or above ○ personnel to be current in their knowledge and understanding of the industry through provision of evidence of professional activity in the relevant area ○ personnel to have attained the National Competency Standards for Assessment BSZ401A, BSZ402A and BSZ403A
Consistency in performance	<ul style="list-style-type: none"> ● Due to issues such as coaching effectiveness this unit of competency must be assessed over three (3) sessions in order to insure consistency in performance over the Range Statements and contexts applicable to coaching Tai Chi
Context for assessment	<ul style="list-style-type: none"> ● This unit of competency must be assessed in the context of a sporting activity with a range of real clients. For valid and reliable assessment the sporting activity should be conducted at a Tai Chi dojo facility with intermediate level Tai Chi participants. The environment should be safe, with noise to a level experienced with an activity in full operation and support services provided for optimum performance ● This unit of competency must be assessed through the observation of processes and procedures, oral and/or written questioning on required knowledge and skills and consideration of required attitudes ● Where performance is not directly observed and/or is required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or

	other appropriate persons
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KEY COMPETENCIES						
Collect, Analyse & Organise Information	Communicate Ideas & Information	Plan & Organise Activities	Work with Others & in Teams	Use Mathematical Ideas & Techniques	Solve Problems	Use Technology
2	2	2	2	1	2	1
<p>These levels do not relate to the Australian Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.</p> <p>The three levels of performance (1, 2 and 3) denote the level of competency required to perform the task:</p> <ol style="list-style-type: none"> 1. Use routine approaches 2. Select from routine approaches 3. Establish new approaches <ul style="list-style-type: none"> • Collecting, analysing and organising information - Evaluate key intermediate skills • Communicating ideas and information - Use appropriate verbal, non-verbal, and written forms of communication • Planning and organising activities - Coordinate drills and activities • Working with teams and others - Interact with players, officials, community and media • Using mathematical ideas and techniques - Use proper scoring techniques • Solving problems - Select appropriate drills and activities • Using technology - Use appropriate technological aids <p>Please refer to the Assessment Guidelines for advice on how to use the Key Competencies.</p>						