



Occupational Standards Older Adults



Contents

The outcomes of these standards are:

- Unit 1 (E1) Understand professional roles and responsibilities
- Unit 2 (E1) Understand the anatomical, physiological and biomechanical changes in older adults
- Unit 3 (E1) Support health and well-being for older adults
- Unit 4 (E1) Collect and analyse information about older adults
- Unit 5 (E1) Plan exercise for older adults
- Unit 6 (E1) Instruct exercise sessions for older adults
- Unit 7 (E1) Evaluate and review exercise for older adults

These standards describe how to plan and deliver exercise for older adults. They involve planning, demonstration, instruction, review and modification of activities and instructional techniques to meet the needs of older adults.

These standards, however, only cover working with apparently healthy (i.e. asymptomatic) older adults or those with medical conditions carrying a low risk of adverse, exercise-related events. It is expected that instructors will already be qualified in exercise instruction before performing the skills in these standards.

Employers can use these standards in their employment practices and to develop their workforce.

These standards are directly taken, with permission, from the International Confederation of Registers of Exercise Professionals (ICREPs) Global Standards. This ensures comparability of standards with other registers of exercise professionals around the world, and ensures REPS Pakistan is operating in line with international best practice.

Unit 1 (E1) Professional roles and responsibilities when working with older adults.

This standard covers working within professional role boundaries in relation to working with older adults and applying professional responsibilities when working with older adults.

Performance Criteria:

Exercise professionals must be able to:

Task 1: Work within professional role boundaries in relation to working with older adults

- P1. Explain the importance of respecting own professional role boundaries, limitations and competency when working with older adults
- P2. Work within the remit of the specific role being undertaken
- P3. Identify legislation, policies, guidance and ethical issues relating to the provision of exercise for older adults
- P4. Identify sources of information and advice on working with older adults
- P5. Identify local or national initiatives to raise awareness of the importance of exercise for older adults

Performance Criteria:

Exercise professionals must be able to:

Task 2: Apply professional responsibilities when working with older adults

- P6. Hold up-to-date first aid skills when working with older adults
- P7. Explain the importance of engaging in regular Continuing Professional Development (CPD) in the area of older adults within specialist areas
- P8. Identify where to source specific information to enhance practice or engage in further education/development
- P9. Explain how to ensure insurance policies covers their instruction of older adults
- P10. Demonstrate their responsibilities and limitations when working with older adults
- P11. Follow equality and diversity legislation and policies
- P12. Ensure older adults feel comfortable in a gym or group fitness environment

Knowledge and Understanding

Exercise professionals must know and understand:

Task 1: Professional role boundaries in relation to working with older adults

- K1. The importance of understanding and respecting own professional role boundaries and limitations when working with older adults
- K2. The importance of working within the remit of the specific role being undertaken

- K3. Legislation, policies, guidance and ethical issues relating to the provision of exercise for older adults including:
 - » Informed consent
 - » GP/medical clearance
 - » Relevant instructor qualifications
- K4. Identify sources of information and advice on working with older adults
- K5. Identify local or national initiatives to raise awareness of the importance of exercise for older adults

Knowledge and Understanding

Exercise professionals must know and understand

Task 2: Professional responsibilities when working with older adults

- K6. The importance for instructors to ensure they hold up-to-date first aid skills when working with older adults
- K7. The importance of engaging in regular CPD in the area of older adults within specialist areas
- K8. Source specific information to enhance practice or engage in further education/development.
- K9. How to ensure insurance policies covers their instruction of older adults
- K10. The responsibilities and limitations of an older adult exercise instructor
 - » acting as a role model
 - » adhering to the code of practice
 - » always wearing uniform and/or name badge if one is provided
 - » understanding and acting upon their responsibilities
 - » recognising the need to protect the rights of participation, for fun, enjoyment and achievement for all
 - » working in an open environment
 - » ensure appropriate conduct at all times to include:
 - maintaining client's dignity
 - use physical contact/touch appropriately
 - using appropriate language
 - being educational, empowering and motivating
- K11. The importance of following relevant equality and diversity legislation and policies
- K12. Common reasons why older adults may feel uncomfortable in a gym or group fitness environment

Unit 2 (E1) The anatomical, physiological and biomechanical changes in older adults.

This standard covers the ageing process and the anatomical, physiological and biomechanical changes.

Performance Criteria

Exercise professionals must be able to:

Task 1: The ageing process

P1. Explain the theories of ageing

Performance Criteria

Exercise professionals must be able to:

Task 2: The anatomical, physiological and biomechanical changes

P2. Identify age-related changes to the following:

- » skeletal system including joints
- » musculoskeletal system
- » respiratory system
- » cardiovascular system
- » nervous system
- » digestive system
- » renal system
- » endocrine system
- » posture

P3. Explain common functional impairments experienced by older adults

P4. Describe the effects of common functional impairments on ability to exercise

P5. Identify the absolute contraindications and relative contraindications relating to participation in exercise

P6. Identify the medical conditions common in old age that impact on safety during physical activity and exercise

P7. Identify the effects of common medications on ability to exercise

P8. Describe the prevalence and presentation of common disease and conditions in older adults

P9. The associated loss of function of the common disease and conditions in older adults

Knowledge and Understanding

Exercise professionals must know and understand:

Task 1: The ageing process

K1. Theories of ageing to include:

- » Chronological ageing refers to our age in years
- » Physiological ageing refers to the progressive decline of physical functioning with age
- » Psychological ageing theories explore the psychological development of individuals and cover self-efficacy, self-esteem and resilience

- » Biological ageing includes genetic and other biological factors over which we have no control
- » Functional ageing refers to the ability to perform daily living activities and/or activities
- » Successful ageing is active life expectancy, the number of years an individual may expect to maintain the ability to perform daily living activities without significant disease
- » Pathological ageing refers to the rate at which individuals age with chronic pathologies that often predispose them to poor quality of life and loss of independence

Knowledge and Understanding

Exercise professionals must know and understand:

Task 2: The anatomical, physiological and biomechanical changes

K2. Age-related changes to the skeletal system to include:

- » loss of bone tissue
- » low bone mass meaning bones are weaker
- » how this places clients at a greater risk of breaks from sudden bumps or falls

K3. Common conditions affecting the musculoskeletal system including:

- » Osteoarthritis
- » Rheumatoid arthritis
- » Osteopenia
- » Osteoporosis

K4. Bones become less dense as we age for a number of reasons, including:

- » an inactive lifestyle causes bone wastage
- » hormonal changes – in women, menopause triggers the loss of minerals in bone tissue
- » in men the gradual decline in hormones leads to the later development of osteoporosis
- » bones lose calcium and other minerals

K5. Age-related changes in joints, including changes to joint movement:

- » movements become stiffer and less flexible because the amount of lubricating fluid inside joints decreases
- » the cartilage becomes thinner

- » ligaments also tend to shorten and lose some flexibility
 - » lack of exercise, being inactive causes the cartilage to shrink and stiffen, reducing joint mobility
- K6. Age-related changes to posture to include:
- » effects of osteopenia and osteoporosis
 - » muscle mass and links to sarcopenia
 - » changes to lean body mass/weight gain
 - » possible effects of arthritis
 - » reduces activity/exercise
 - » diet
 - » changes to discs in the vertebral column
 - » reduction in ribcage mobility and respiratory muscle function
 - » decrease hip and trunk mobility/strength
- K7. Age-related changes in skeletal muscles to include:
- » reduction in protein synthesis
 - » reduction in size and number of muscle fibres, particularly in the lower limbs
 - » decrease in the number of progenitor (satellite) cells
 - » reduction in muscle growth
 - » reduction in the ability of muscles to repair themselves
 - » replacement of active muscle fibres by collagen-rich, non-contractile fibrous tissue
 - » muscle tissue is replaced more slowly and lost muscle tissue is replaced with a tough, fibrous tissue
 - » changes in the nervous system causes muscle to have reduced tone and ability to contract
 - » reduction in the number of motor neurons and deterioration of neuromuscular junctions
 - » increase in fat deposition at the expense of lean muscle tissue
 - » less-efficient metabolism, particularly in fast twitch muscle fibres
 - » reduction in blood flow to the major muscle groups
- K8. Muscular changes associated with ageing and inactivity and the potential consequences, to include a reduction in:
- » power
 - » strength
 - » endurance
 - » fine control
 - » heat production
 - » immune function
 - » changes associated with abdominal, postural and pelvic floor muscles
- K9. The importance of strength and balance training in falls prevention
- K10. Age related changes to the respiratory system to include:
- » changes to the chest wall – progressively becomes more rigid
 - » intervertebral discus gradually become desiccated, less robust and more compressed under the weight of the body
 - » changes in posture relating to reduction in the volume of the rib cage
 - » gradual age-related reduction in respiratory muscle strength, loss of muscle mass in the diaphragm and intercostals
 - » changes to the lower respiratory tract
 - » pressure in the pulmonary artery that gradually increases with age
 - » changes in lung volume, vital capacity and tidal volume
 - » decreases in oxygen saturation
- K9. The importance of strength and balance training in falls prevention
- K10. Age related changes to the respiratory system to include:
- » changes to the chest wall – progressively becomes more rigid
 - » intervertebral discus gradually become desiccated, less robust and more compressed under the weight of the body,
 - » changes in posture relating to reduction in the volume of the rib cage
 - » gradual age-related reduction in respiratory muscle strength, loss of muscle mass in the diaphragm and intercostals
 - » changes to the lower respiratory tract
 - » pressure in the pulmonary artery that gradually increase with age
 - » changes in lung volume, vital capacity and tidal volume
 - » decreases in oxygen saturation
- K11. Age related changes to the cardiovascular system to include:
- » reduced anaerobic threshold
 - » tasks require greater percentage of maximum heart rate
 - » reduced ability to sustain activity
 - » changes to blood pressure
 - » changes to cardiac function
 - » reduced baroreceptor response
 - » changes to blood vessels
- K12. Age related changes to the nervous system to include:
- » reduced reaction time
 - » slower pace of learning

- » reduced short-term memory
 - » reduced balance
 - » increased falls
 - » increased time required to respond to instructions
 - » decreased hearing
 - » increased sight difficulties
 - » reduced speed of movement
 - » decreased co-ordination
 - » reduced kinaesthetic awareness
- K13. Age related changes to the digestive system to include:
- » effects of hormones on appetite
 - » changes to saliva production
 - » changes in posture
 - » effects of inactivity
- K14. Age related changes to the renal system to include: Many anatomical and physiological changes can mean that older people are prone to issues such as:
- » polyuria (frequent need for the toilet)
 - » nocturia (frequently needing the toilet at night)
 - » incontinence
 - » decrease in renal function
- K15. Age related changes to the endocrine system to include:
- » negative effects on hormone secretion by the glands, which makes older people more prone to:
 - » insomnia and sleep disturbances
 - » fractures
 - » diabetes (Pancreas)
 - » cognitive changes
- K16. Changes to the following glands
- » thyroid gland and metabolism
 - » parathyroid glands and hyperparathyroidism
 - » the adrenal glands
 - » pineal gland
- K17. Common functional impairments experienced by older adults
- » upper limb, including tonal changes; impaired grip; reduced range of movement, especially at the shoulder; poor shoulder and trunk posture; poor strength; pain
 - » lower limb, including joint pain; reduced range of movement; poor gait; reduced balance; poor strength and power
 - » sensory, hearing, vision, proprioception
 - » psychological, to include reduced cognition-impaired memory
- K18. Effects of common functional impairments on ability to exercise:
- » communication, to include speech problems impaired hearing/vision
 - » increased risk of falling
 - » increased likelihood of soft tissue injury
 - » joint pain
 - » inability to hold/grip equipment
 - » reduced range of movement (ROM)
 - » inability to perform certain exercises
 - » inability to perform at recommended workloads
 - » lack of motivation to exercise
 - » increased effort and energy level associated with tasks/exercises
 - » slower, weaker muscles
 - » slower reaction times
- K19. Absolute contraindications and relative contraindications relating to participation in exercise. Absolute contraindications: unstable, uncontrolled health conditions, to include:
- » uncontrolled pain or feeling unwell on arrival
 - » lasting, increased pain following a previous session
 - » suspected acute injury
 - » recent injurious fall without medical assessment
 - » severe breathlessness or dizziness
 - » recently diagnosed cardiovascular events
 - » recent medication changes
 - » uncontrolled pulmonary problems
 - » inability to follow simple instructions to the extent that it places client and others at risk of injury
 - » rheumatoid arthritis flare up or acute systemic illness/infection
 - » unexplained lethargy
 - » known current injury/wound that is identified and/or protected
 - » observable pain of a known origin
 - » difficulty in understanding instructions
 - » inability to safely maintain balance while seated
 - » infection control
 - » latex allergy
- K20. Medical conditions common in old age that impact on safety during physical activity and exercise
- » arthritis
 - » diabetes
 - » hypertension
 - » depression
 - » osteoporosis
 - » frozen shoulder

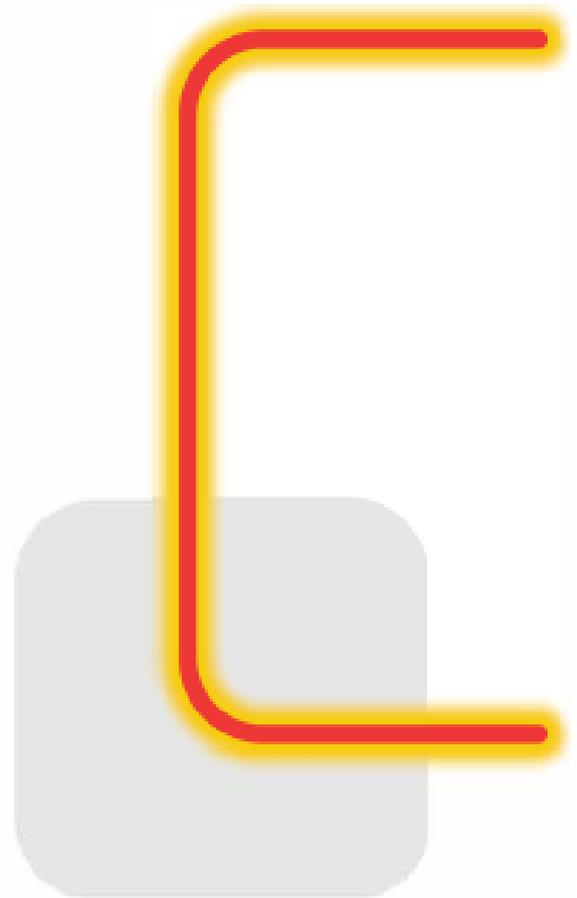
- » emphysema
- » pulmonary disease

K21. The prevalence and presentation of the above disease/conditions

K22. The associated loss of function of the above disease/conditions

K23. Effects of common medications on ability to exercise

- » reduced alertness
- » postural drop
- » reduced balance
- » reduced proprioceptive feedback
- » difficulties with exercise intensity monitoring
- » increased urinary urgency/frequency
- » slowed reaction time and poor co-ordination



Unit 3 (E1) Support health and well-being for older adults .

This standard covers promoting physical activity in older adults, the use of effective communication, marketing strategies and skills, providing information on healthy eating and hydration guidelines to older adults, and managing health and safety.

Performance Criteria

Exercise professionals must be able to:

Task 1: Promote physical activity in older adults

- P1. Identify the demographics relating to the older population in your country
- P2. Explain the functional classification models for the older population
- P3. Identify the range of clients who could participate safely and effectively
- P4. Identify the range for whom 'exercise for independently active, older adults' is considered contraindicated
- P5. Explain the physical, social, emotional and psychological benefits of regular physical activity and exercise during ageing
- P6. Identify the needs and expectations of older adults
- P7. Identify the outcomes that older people may want from physical activity participation
- P8. Identify the relevant guidelines for the prescription for health, well-being and physical fitness and the amount of physical activity for the health and well-being of older adults
- P9. Identify the barriers that older clients may have to physical activity and how to take account of these
- P10. Identify the agencies involved in promoting physical activity for the health of older adults in their home country
- P11. Promote the whole concept of health and exercise to older adults
- P12. Demonstrate motivational techniques that assist older adults to enjoy the session and adhere to physical activity

Performance Criteria

Exercise professionals must be able to:

Task 2: Use effective communication, marketing strategies and skills

- P13. Develop effective motivational communication strategies relating to individual and group dynamics in a range of settings associated with the delivery of exercise for older clients
- P14. Use client friendly language
- P15. Use suitable equipment for the setting
- P16. Develop social support strategies to enable long-term participation
- P17. Use listening skills and address client's feedback

- P18. Develop effective age-friendly marketing strategies, images, messages and events calendar
- P19. Provide opportunities for social interaction in exercise programming and delivery for older adults
- P20. Deliver good customer service recognising that there is an increased level of responsibility for older adult clients who may be considered vulnerable and meeting this duty of care

Performance Criteria

Exercise professionals must be able to:

Task 3: Provide information on healthy eating and hydration guidelines to older adults

- P21. Promote the importance of healthy eating, proper nutrition, hydration and fluid replacement, particularly when participating in physical activity. Ensure the information is correctly referenced

Performance Criteria

Exercise professionals must be able to:

Task 4: Manage health and safety

- P22. Meet the national and local requirements and procedures for the working environment involving older adults
- P23. Identify ways and methods for dealing with emergencies in accordance with internationally recognised procedures
- P24. Recognise the signs indicating that an older adult client should stop exercising immediately or requires medical attention
- P25. Explain the importance of extending the standard appropriate response to an emergency situation

Knowledge and Understanding

Exercise professionals must know and understand:

Task 1: Promote physical activity to older adults

- K1. The demographics relating to the older population(country specific), to include:
 - » statistics: percentage of the population that is over 65/85
 - » considerations for why the older population is growing
 - » implications for society and exercise
 - » statistics for inactivity in this age group
- K2. Functional classification models for the older population, to include:

- » physically elite
 - » physically fit
 - » physically independent
 - » physically frail
 - » physically dependent
- K3. The range of clients who could participate safely and effectively, to include:
- » physically fit and physically independent
 - » definition and description of 'independently active, older people'
- K4. The range for whom 'exercise for independently active, older adults' is considered contraindicated, to include:
- » physically dependent
 - » physically frail
- K5. The physical, social, emotional and psychological benefits of regular physical activity and exercise during ageing to include:
- Short-term evidence-based, to include:**
- » improved sleep, enjoyment, improved mood etc.
- Long-term evidence-based, to include**
- » increased muscular strength and power
 - » reduced likelihood of osteoporosis, diabetes, etc.
 - » increased muscle mass
 - » maintenance and improvement of bone health
 - » improved joint health and flexibility, reduced stiffness
 - » minimising fat levels to prevent disease
 - » improved cardiorespiratory fitness
 - » improved ability to function in everyday tasks
 - » reduced risk of functional decline that is often associated with ageing
 - » prevention of chronic disease related to sedentary life styles and ageing
 - » reduced risk of falls
 - » balance and co-ordination exercises, such as tai chi, can help reduce the risk of falls and isolation
 - » maintenance of independence
 - » role in peer mentoring etc.
- K6. Needs and expectations of older adults which may include:
- » recreational
 - » social
 - » improved fitness levels
 - » strength
 - » and functional movement skills
- K7. Outcomes that older people may want from physical activity participation, to include:
- » maintaining independence
 - » improving fitness for everyday activities and leisure pursuits
 - » reducing likelihood of certain age-associated medical conditions
 - » ability to manage existing medical condition and minimise the effect on function socialisation and other psychological factors
- K8. The relevant guidelines for the prescription for health, well-being and physical exercise and the amount of physical activity for the health and well-being of older adults
- » maintaining independence
 - » improving fitness for everyday activities and leisure pursuits
 - » reducing likelihood of certain age-associated medical conditions
 - » ability to manage existing medical conditions and minimise the effect on function
 - » socialisation and other psychological factors
- K9. The barriers that older clients may have to physical activity and how to take account of these, to include:
- » attitudes
 - » beliefs
 - » anxieties
 - » myths
 - » opinions formed by past experiences
 - » cultural restrictions
- K10. Agencies involved in promoting physical activity for the health of older adults in their home country
- K11. The importance of promoting the whole concept of health and exercise to older adults including:
- » daily exercise
 - » nutrition
 - » wellness
 - » overall healthy lifestyle
- K12. The motivational factors that may assist older adults to enjoy the session and adhere to physical activity
- Knowledge and Understanding**
Exercise professionals must know and understand:
Task 2: Use effective communication, marketing strategies and skills
- K13. How to develop effective motivational communication strategies relating to individual

and group dynamics in a range of settings associated with the delivery of exercise for older clients, to include:

- » sheltered housing
- » residential homes
- » community centre
- » leisure and recreation facilities
- » health and fitness clubs

- K14. The importance of translation of technical terminology into client friendly language
- K15. The importance of considering the use of intimidating equipment e.g. resistance bands rather than dumbbells in the first instance in care setting
- K16. How to develop social support strategies to enable long-term participation
- K17. The importance of listening skills and addressing client's feedback
- K18. How to develop effective age-friendly marketing strategies, images, messages and events calendar
- K19. How to provide opportunities for social interaction in exercise programming and delivery for older adults
- K20. How to deliver good customer service recognising that there is an increased level of responsibility for older adult clients who may be considered vulnerable and meeting this duty of care

Knowledge and Understanding

Exercise professionals must know and

understand: *Task 3: Provide information on healthy eating and hydration guidelines*

- K21. The importance of proper nutrition, hydration and fluid replacement, particularly when participating in physical activity
- K22. The healthy eating guidelines for older clients to enable the provision of accurate information to clients
- K23. The importance of encouraging older adult clients to drink water before, during and after exercise

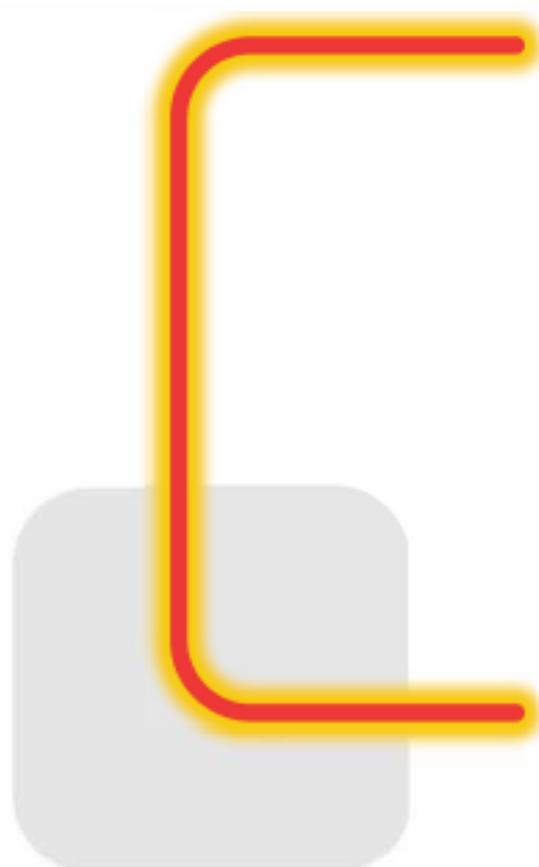
Knowledge and Understanding

Exercise professionals must know and understand:

Task 4: Manage health and safety

- K24. The national and local requirements and procedures for the working environment involving older adults, to include:
- » completing risk assessments
 - » identifying risk and procedures to reduce them
 - » establishment of a specific emergency action plan with and for the senior exercise group

- K25. Ways and methods for dealing with emergencies in accordance with internationally recognised procedures including providing first aid
- K26. How to recognise the signs indicating that an older adult client should stop exercising immediately or requires medical attention
- K27. The importance of extending the standard appropriate response to an emergency situation for example,
- » accompany home
 - » telephone follow up and support
 - » reassurance for other clients



Unit 4 (E1) Collect and analyse information about older adult clients .

This standard covers collecting the relevant information and screening.

Performance Criteria

Exercise professionals must be able to:

Task 1: Collect relevant information

- P1. Collect relevant information from the older adult
- P2. Use suitable adapted pre-screening paperwork for older adults
- P3. Gain informed consent from client prior to participating in the physical activity sessions
- P4. Follow the legal and organisational procedures of screening and collecting client information

Performance Criteria

Exercise professionals must be able to:

Task 2: Screening

- P5. Use a range of suitable screening tools for older adults
- P6. Use suitable methods for assessing older adult's readiness to participate
- P7. Know how and when to recommend referral to appropriate medical or health professionals

Knowledge and Understanding

Exercise professionals must know and understand:

Task 1: Collect relevant information

- K1. Information which can be collected from older adult clients:
 - » informed consent/PAR-Q
 - » lifestyle factors
 - » medical history and medication
 - » physical activity history
 - » attitude and motivation
 - » exercise preferences
 - » barriers to exercise (perceived or actual)
 - » current level of fitness
 - » health status and any contraindications
 - » injury status and any specific recommended adaptations, if appropriate
 - » personal goals
 - » signs that may be contraindications to some types of physical activity
 - » range of movement and functional skills
- K2. The purpose of collecting information on participant's expectations and motivation, level of previous exercise participation and current level of ability
- K3. Suitable methods of collecting client information, could include:

- » physical activity readiness questionnaire (PAR-Q)
- » consultation
- » interview questionnaire
- » adapted fitness tests
- » observation

- K4. Purpose of the adapted pre-screening paperwork for older adults
- K5. Legal and organisational procedures for gaining consent from clients prior to participating in the physical activity sessions
- K6. The legal and ethical implications and responsibilities of screening and of collecting client information, to include:
 - » data protection
 - » storage of documentation
 - » confidentiality of client information
 - » instructor's duty of care to respond appropriately to client's information

Knowledge and Understanding

Exercise professionals must know and understand:

Task 2: Screening

- K7. How to use pre-participation assessments to risk stratify (i.e. asymptomatic or low risk etc.) and manage the risks associated with any conditions and limitations during physical activity
- K8. Identify a range of suitable screening tools and assessments for older adults, this could include assessing the following:
 - » grip strength
 - » flexibility
 - » range of movement
 - » balance
 - » BMI
 - » peak flow
 - » fitness and ability levels
 - » posture
 - » movement control
 - » skeletal alignment
 - » previous injury
 - » exercise history
 - » form
- K9. The importance of recommending referral to appropriate medical or health professionals where necessary
- K10. Awareness of the following injury risks or considerations that may be related to older clients:

- » inadequate skill and physical preparation
- » overtraining
- » biomechanics and exercise technique
- » physical and mental preparation
- » poor core and postural awareness
- » fatigue and recovery
- » history of falls

K11. The conditions that may present in older clients that may require referral to a relevant medical or appropriate allied health professional

K12. The role of medical or health professionals for referral purposes

K13. Methods for client reassessment and programme evaluation

Unit 5 (E1) Plan exercise for older adults .

The standard covers planning how to manage risks in exercise sessions for older adults and planning suitable sessions for older adults.

Performance Criteria

Exercise professionals must be able to:

Task 1: Plan how to manage risks in exercise sessions for older adults

- P1. Plan movements for safety and effectiveness
- P2. Identify ways of reducing the risks associated with unsafe exercise including minimising the risk of falls in the session
- P3. Identify a safe and older adult friendly exercise environment
- P4. Identify an appropriate selection of equipment
- P5. Adhere to evidence-based guidelines for physical activity for previously active and previously inactive older adults

Performance Criteria

Exercise professionals must be able to:

Task 2: Plan suitable sessions for older adults

- P6. Plan a suitably structured session in a format of exercise for which you hold relevant competency qualifications that is suitable to the level of fitness, co-ordination and ability of participants
- P7. Include appropriate adaptations to the structure and content of sessions required for clients with medical conditions commonly associated with old age which may be adversely affected by physical activity
- P8. Structure exercise sessions to provide opportunities for comfort breaks
- P9. Apply knowledge of physiological changes occurring in the body to the planning
- P10. Include functional (life-related) movement patterns and activities into all sessions
- P11. Identify suitable personal maximum heart rates and effective target heart rate training zones based on an individual participant's age and fitness levels

Knowledge and understanding

Exercise professionals must know and understand:

Task 1: Plan how to manage risks in exercise sessions for older adults

- K1. How to plan movements for safety and effectiveness
- K2. Ways of reducing the risks associated with unsafe exercise such as:
 - » exercise intensity
 - » timing
 - » equipment
 - » technique

- » supervision
- K3. How to minimise the risk of falls
- K4. How to identify a safe and older adult friendly exercise environment to include:
 - » accessibility/transport
 - » floor surfaces
 - » hazards, trips and slips
 - » footwear
 - » lighting
 - » access to toilet facilities and drinking water
 - » temperature control
 - » comfortable refreshment facilities
- K5. How to select appropriate equipment and the importance of guidance to minimise the risk of injury caused by misuse
- K6. How to source evidence-based recommended guidelines for physical activity for previously active and previously inactive older adults

Knowledge and understanding

Exercise professionals must know and understand:

Task 2: Plan suitable sessions for older adults

- K7. How to create a structure for an older adult session for both individual and group settings, to include:
 - » durations
 - » frequency, intensity, time, type
 - » principles of training
 - » suitable methods of overload - progression/regression
 - » functional relevance
 - » challenge
 - » suitable activities and intensities for: Warm up, Main activity, Cool down
 - » Suitable exercises for cardiovascular, weight-bearing, body weight, balance, co-ordination, resistance
- K8. Why it is important to only plan a format of exercise for which you hold relevant competency qualifications such as:
 - » Exercise to music/Group exercise
 - » Gym based exercise
 - » Water based exercise
- K9. The appropriate adaptations to the structure and content of sessions required for clients with medical conditions commonly associated with old age which may be adversely affected by physical activity

- K10. The importance of considering the level of fitness, co-ordination and ability of participants in the planning process
- K11. How to structure exercise sessions to provide opportunities for comfort breaks
- K12. The physiological changes occurring in the body and how they affect planning choices
- K13. The types of physical (functional) limitations associated with ageing that may lead to injury and will need specific adaptation for exercise
- K14. Suitable personal maximum heart rates and effective target heart rate training zones based on an individual participant's age and fitness levels
- K15. The importance of educating participants to monitor their own exercise intensity, to include:
 - » heart rate monitoring
 - » Rate of Perceived Exertion (RPE)
- K16. The integration of supervised step by step functional (life-related) movement patterns and activities into all sessions such as:
 - » correct lifting technique
 - » getting up and down from the floor
 - » getting in and out of chairs

Unit 6 (E1) Instruct exercise session for older adults.

This standard covers preparing for the instructing with session, instructing the session, meeting the needs of the older adult and ending the session.

Performance Criteria

Exercise professionals must be able to:

Task 1: Prepare for the session

- P1. Provide suitable preparations to respond appropriately to any medical emergency
- P2. Demonstrate ability to:
 - » ensure sufficient space
 - » assemble resources
 - » check equipment for safety and maintenance requirements
- P3. Verbally screen all participants and respond to their needs
- P4. Demonstrate communication of the type, level and demands of the session to enable participants to make informed decisions about suitability

Performance Criteria

Exercise professionals must be able to:

Task 2: Instructing the session, meeting the needs of the older adult

- P5. Deliver a planned or pre-designed older adult session to a group or individual that is safe, effective and enjoyable
- P6. Provide clear instructions and use questions to confirm participants' understanding.
- P7. Correctly demonstrate exercises, techniques and equipment to participants relevant to the exercise discipline i.e. gym based, group exercise, one-to-one
- P8. Monitor participation and performance to identify signs of exercise intolerance or poor technique
- P9. Regress or adapt exercises to enable participants to achieve correct posture and body alignment, range of motion, control, timing and form for all exercises in a session
- P10. Use suitable teaching skills for participants
- P11. Modify session as required considering basic mechanics, safety and exercise outcomes
- P12. Respond to participants experiencing difficulties and answer questions as required
- P13. Provide a range of intensity and impact options
- P14. Select equipment according to a participant's needs
- P15. Manage risks as they arise in the session
- P16. Recognise signs that indicate that exercise should be discontinued immediately

Performance Criteria

Exercise professionals must be able to:

Task 3: End the session

- P17. Give feedback to participants regarding their performance
- P18. Use appropriate questions to gain relevant information from participants
- P19. Put equipment away and assessing safety for future use
- P20. Leave the environment in safe condition for future use
- P21. Inform or agree with participants the time, location and content of future sessions
- P22. Ensure participants leave the exercise environment safely

Knowledge and understanding

Exercise professionals must know and understand

Task 1: Prepare for the session:

- K1. The importance of making suitable preparations to respond appropriately to any medical emergency, and what kind of medical emergency may arise
- K2. How to:
 - » ensure sufficient space
 - » assemble resources
 - » check equipment for safety and maintenance requirements
- K3. How to verbally screen all participants and respond to their needs

Knowledge and understanding

Exercise professionals must know and understand

Task 2: Instructing the session, meeting the needs of the older adult

- K1. The importance of giving clear instructions and confirming participants' understanding of the instructions
- K2. How to correctly demonstrate exercises, techniques and equipment to participants relevant to the exercise discipline i.e. gym based, group exercise, one-to-one
- K3. How to monitor and observe participation and performance and how to identify signs of exercise intolerance or poor technique
- K4. How to regress or adapt exercises to enable participants to achieve correct posture and body alignment, range of motion, control, timing and form for all exercises in a session

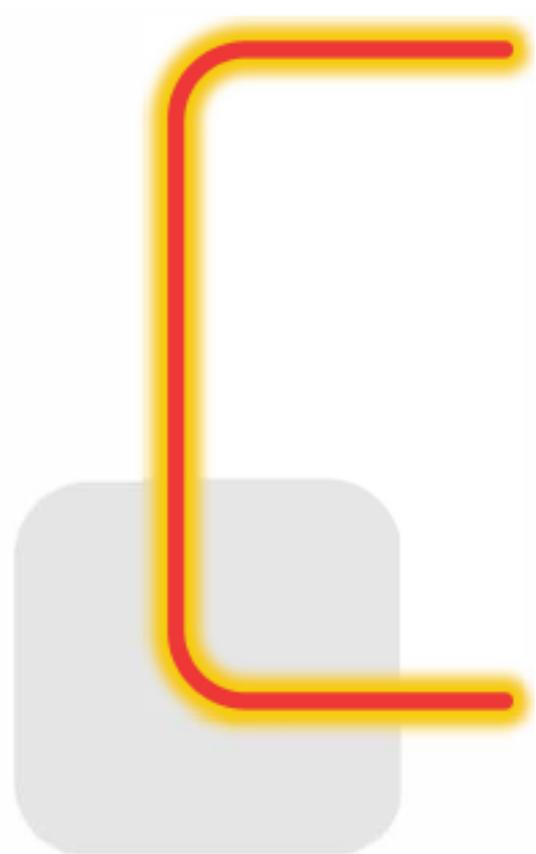
- K5. Suitable teaching skills for participants to include use of:
- » visual and verbal instruction
 - » cueing
 - » observation
 - » speed of instruction
 - » ensuring safe transitions
 - » movement analysis
 - » specific adaptation
 - » communication skills
 - » listening and response skills
 - » motivation
- K9. How to modify the session as required considering basic mechanics, safety and exercise outcomes
- K10. The importance of responding to participants experiencing difficulties
- K11. Why it is important to allow questions as required without it distracting or impacting the session
- K12. How to provide a range of intensity and impact options
- K13. How to select equipment according to a participant's needs
- K14. How to manage risks as they arise in the session and how to address them to prevent injury to clients
- K15. How to develop a safe, effective, enjoyable and older person friendly exercise and physical activity environment to include:
use of suitable equipment
- » suitable music
- K16. How to recognise signs that indicate that exercise should be discontinued immediately and/or medical consultation sought

Knowledge and understanding

Exercise professionals must know and understand:

Task 3: End the session

- K17. The importance of giving feedback to participants regarding their performance
- K18. How to use appropriate questions to gain relevant information from participants
- K19. The importance of putting equipment away and assessing safety for future use
- K20. The importance of leaving the environment in safe condition for future use
- K21. The importance of informing or agreeing with participants the time, location and content of future sessions
- K22. Why it is important to ensure participants leave the exercise environment safely



Performance Criteria

Exercise professionals must be able to:

Task 1: Evaluate session

- P1. Monitor and evaluate exercise session at appropriate intervals throughout the session
- P2. Evaluate exercise session according to participants' feedback, professional judgement and outcomes of sessions
- P3. Gather information from participants to improve personal performance
- P4. Use opportunities to collate and use feedback from:
 - » participants
 - » managers
 - » co-ordinators
 - » colleagues
- P5. Review own performance and identify areas needing improvement

Knowledge and understanding

Exercise professionals must know and understand:

Task 1: Evaluate session

- K1. The importance of monitoring and evaluating exercise session at appropriate intervals throughout the session
- K2. How to evaluate exercise session according to participants' feedback, professional judgement and outcomes of sessions
- K3. The importance of gathering information from participants to improve personal performance
- K4. Different opportunities to collate and use feedback from:
 - » participants
 - » managers
 - » co-ordinators
 - » colleagues
- K5. The benefits of reviewing own performance and identifying areas needing improvement

