

Collecting client information

Conducting client consultations to support positive behaviour change

What information needs collecting?

- Medical history (screening).
- Informed consent.
- Personal information.
- Lifestyle information.
- Motivation and exercise preferences.
- Goals and reasons for exercise.
- Current levels of health and fitness.

Importance of collecting client information

- Identify any underlying medical conditions.
- Identify the need for referral to another health or medical professional.
- Information provided supports the design of a tailored programme that is:
 - At the appropriate intensity and challenge for the client's fitness levels.
 - Aligned with the client's goals.
 - Aligned with the client's exercise likes and dislikes.
- Provides the opportunity for rapport-building between client and instructor.

Methods of collecting client information

- How can you gather information from clients?
- What are the advantages and disadvantages of each method identified?





Questionnaire

Interview

Observation

Physical
assessments

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Questionnaires

Advantages	Disadvantages
Easy and quick to complete.	Potential language barriers.
Can be done in client's own time.	Do not allow for clarification.
Written record for protection against claims.	Information may be out of date.
Recognised as valid and reliable.	Some require permission for use.
Information is immediate.	Instructor needs time to read and respond to answers.

Interview

Advantages	Disadvantages
Open-ended questions can provide a lot of information.	Time-consuming.
Personal approach helps to establish trust and build a rapport.	Remembering and recording information accurately requires skill.
Opportunity for clarification, which can encourage elaboration.	Requires empathy and effective active listening and questioning skills.
	Risk of disclosure of information outside role boundaries, especially sensitive information, for example, medical conditions.

Observation

Advantages	Disadvantages
Quick and immediate.	Some information must be checked for accuracy (e.g. age range) and recorded appropriately.
Effective for gathering information such as gender, age, posture, body composition, walking gait, facial expressions, skin-colour changes during activity, clothing, footwear and whether the client is a healthy weight.	Ineffective for gathering certain information, such as lifestyle behaviours and medical conditions that cannot be seen (e.g. depression, osteoarthritis).

Physical assessments

Advantages	Disadvantages
Provide baseline information that can inform programme design.	Informed consent is required.
Provide objective information.	Some may pose a risk to clients.
Can identify medical contraindications.	Some may be invasive.
Can be re-tested to show progress and evaluate success of exercise programme.	Equipment is costly and needs regular maintenance/updating.
	Accuracy of assessment requires skill.
	Time-consuming.

Informed consent

- What is informed consent?
- What information would a person need to know about an exercise session or fitness assessment to be considered 'informed'?



Informed consent

An explanation of the potential risks, discomforts and benefits.

Mandatory document obtained before fitness testing or exercise participation.

The client must understand that his/her participation is entirely voluntary (not compulsory) and be given the opportunity to ask questions, which must be answered.

One of many records that can be produced in a court of law in the event of a lawsuit.

Informed consent can only be given when certain information has been explained by the instructor and fully understood by the client.

Risk-stratification

- To ensure that fitness instructors work within their professional scope of practice, wherever there is any doubt, they must risk-stratify their clients.
- There is a range of local and national tools for risk-stratification, and it is important that fitness instructors are familiar and confident in using those prescribed within their place of work.



NQAF pyramid and Irwin and Morgan

Two of the more common risk-stratification models are:

- NQAF patient characteristics and exercise professional expertise pyramid.
- Irwin and Morgan risk-stratification tool.

See pages 10–11 in your manual (consultation unit).



Reasons for medical referral

Health-
screening
response

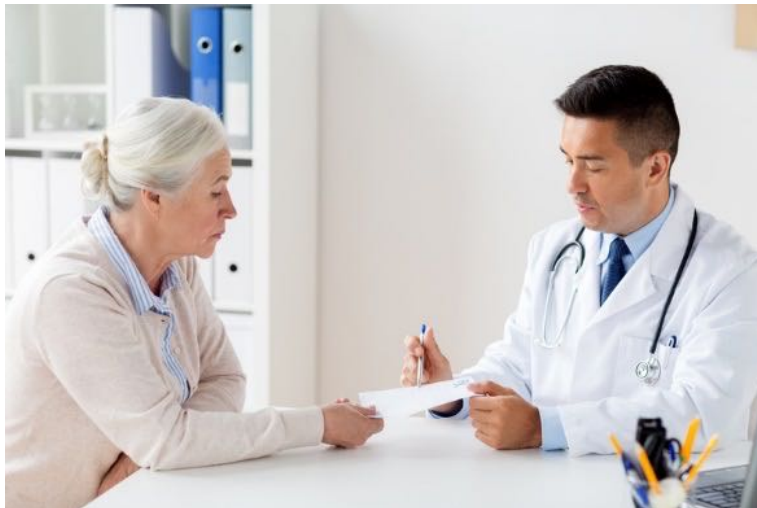
Combined
risk factors

Injury or
illness

Instructor
doubt or
uncertainty

Client
preference
or doubt

Age



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Out of scope of practice? Who to refer to

GP

Dietitian

Physiotherapist

Counsellor

Sports
massage
practitioner

Osteopath

Pre and
postnatal
instructor

Strength and
conditioning
specialist

Level 4
specialist
instructor

Recording and storing information

- Keeping paper records in locked files.
- Storing electronic records using secure systems with passwords.
- Not disclosing client information to other people or third parties.
- Ensuring information is transferred securely.
- Only using information for its intended purpose.
- Only keeping records for as long as they are required.
- Disposing of records securely.



Health-related measurements and fitness testing

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Pre-test information



Food and drink consumption.

Physical activity.

Health (medication and illness).

Clothing.

Test conditions

The environment in which tests are conducted can influence the accuracy (validity and reliability) of the results. Other factors to take into account when conducting tests are:

Time of day

Same time, same day of the week.

Environmental factors

Temperature, weather (if conducted outside).

Privacy

A private area should be used.

All procedures

Should be followed and repeated each time.

Grounds for stopping tests

- Chest pain and the onset of angina-like symptoms (N.B. this can also require emergency response).
- Significant drop (10mmHg) in systolic blood pressure with increased work rate.
- Excessive rise in blood pressure: systolic pressure : 250mmHg or diastolic pressure > 115mmHg.
- Shortness of breath, wheezing, leg cramps or claudication.
- Signs of poor perfusion: light-headedness, confusion, ataxia, pallor, cyanosis, nausea or cold, clammy skin.
- Failure of heart rate to increase with heightened exercise intensity.
- Noticeable change in heart rhythm.
- Client requests to stop.
- Physical or verbal signs of severe fatigue.
- Failure of testing equipment.

(ACSM, 2017)



Health-related measurements



Resting heart rate
(pulse).



Height and weight
(BMI).



Hip and waist
measurements.

Others:

- Blood pressure.
- Body composition (body fat %).
- Peak flow.
- Blood-sugar levels (diabetic clients).
- Other circumference measurements.

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Fitness tests – other options

Press-up
test

1RM/
10RM test

Cooper
Run

Rockport
walk

Bleep

Step test

Sit and
reach

Astrand
bike

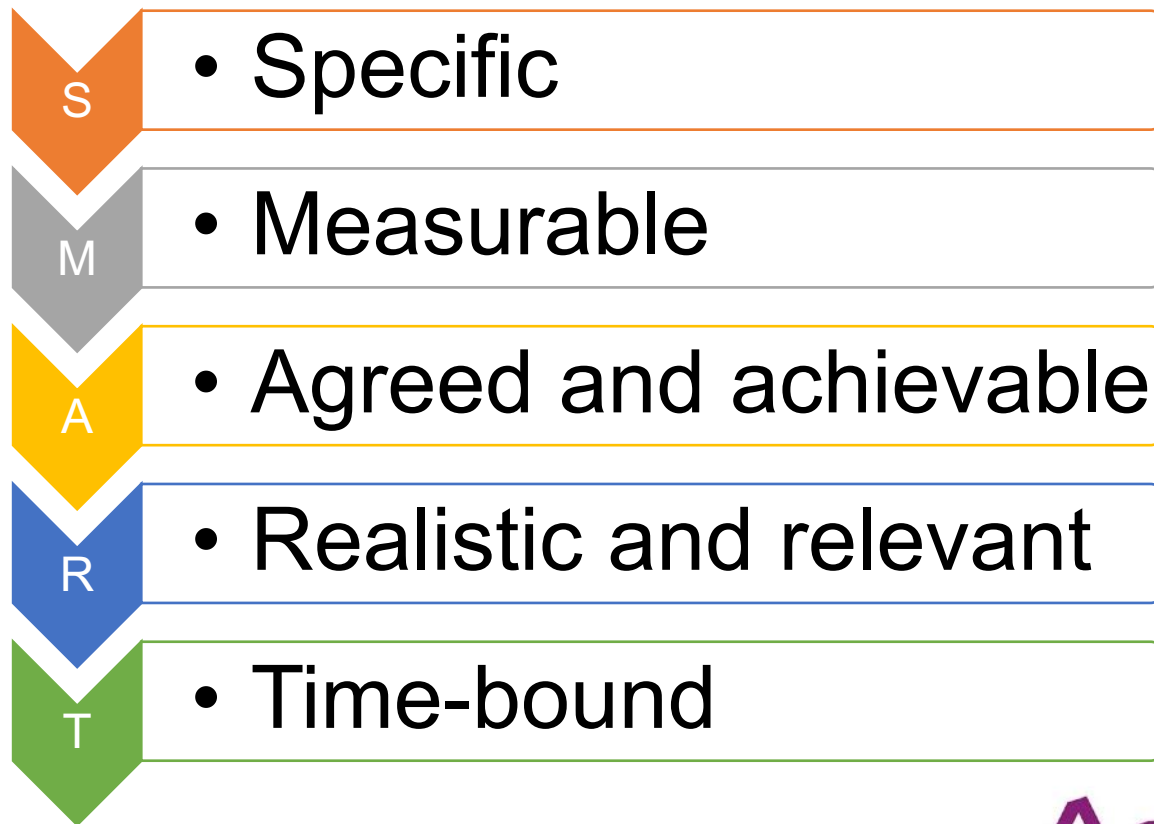
Bruce test

Goal-setting and review

Conducting client consultations to support positive behaviour change

SMART goal-setting

When setting goals it is useful to use the following acronym:



Goal-setting

Definition: a goal is what an individual is trying to achieve. It is the object or aim of an action.

There are several different types of goal:

1. Personal goals.
2. Business/career/economic goals.
3. Self-improvement goals.
4. Performance goals.
5. Process goals.
6. Outcome goals.



Goal categories

Long-term goals can be broken down into short- and medium-term goals.

Short-term

One day
to one
month

Usually 4-6 weeks

Medium-term

One
month to
six
months

Usually 3 months

Long-term

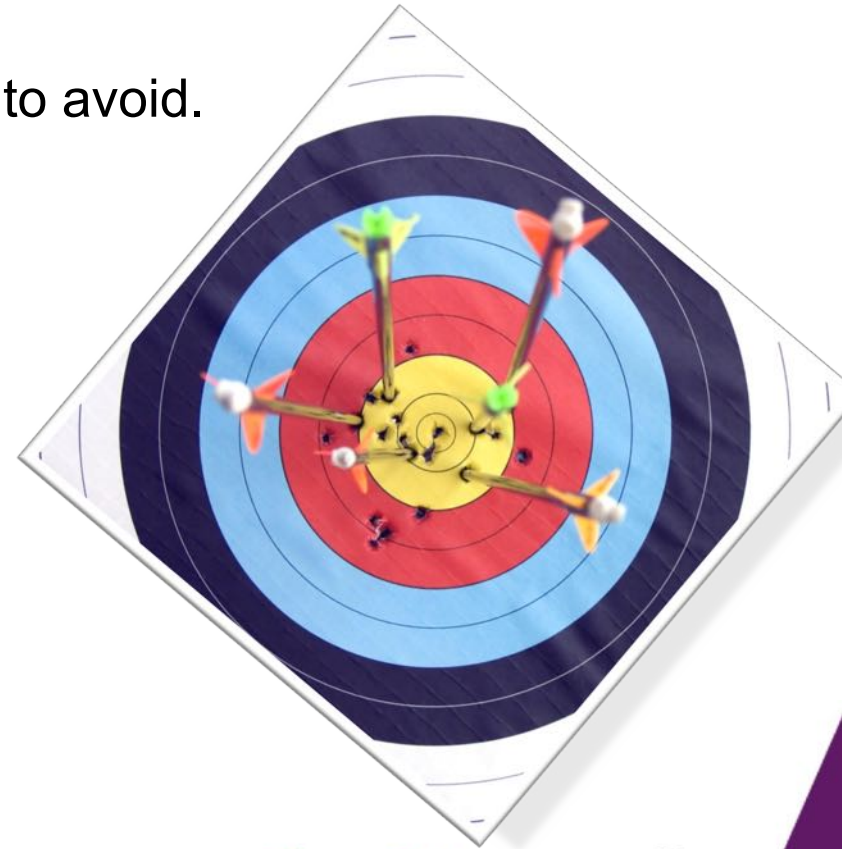
Six
months to
over
several
years

Usually 6 months plus

Principles of goal-setting

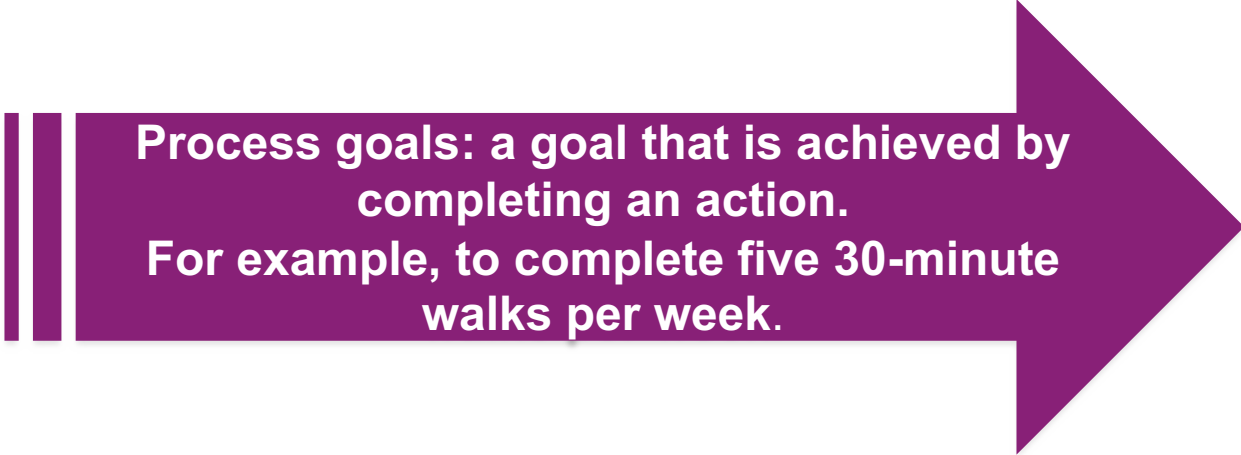
There are seven principles associated with effective goal-setting:

1. Say what you want, not what you want to avoid.
2. Make goals challenging and realistic.
3. Influence the result directly.
4. Measure progress.
5. Check resources.
6. Count the cost.
7. Provide rewards.




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Process and outcome goals



Process goals: a goal that is achieved by completing an action.
For example, to complete five 30-minute walks per week.

- Easy to achieve.
- Success easy to monitor.
- Beginners find these goals easier and more motivational.



Outcome goals: is defined by an end result. e.g. to lose five pounds in one month.

- Harder to achieve.
- Success not clear until re-tests occur.
- More suited to performance goals.

Reviewing and monitoring client progress and goals

Why is it important to review and monitor client progress and goals?

- Helps to provide accountability and feedback.
- Can help determine how realistic and effective the original goals were.
- Creates accountability: a client is much more likely to stick to a programme if they know they will be measured at the end.
- Allows small adjustments to be made along the way to ensure the most efficient attainment of the objectives.

