Adapting an exercise referral programme

Unit: Planning exercise referral programmes with patients

TASK: consider the following

Recap and Refresh

What are the principles of training?

Principles of training

- **Frequency** – how often the activity is undertaken (number of times per week)

- **Intensity** – how hard the activity needs to be, the effort

- **Time/duration** – how long the activity needs to be maintained for (single session/bout)

- **Type/specificity** – the type of activity to bring about the desired training effect (e.g. flexibility, muscular strength/endurance, cardiovascular etc.)

Principles of training

- **Overload** – working the body a little harder to bring about the desired benefits

- **Adaptation** – the way the body responds and adapts to the exercise demands

- **Reversibility** –the loss of training benefits/adaptations when regular activity/exercise ceases

- **Progression** – making an activity or exercise harder (overload)

- **Regression** – making an activity or exercise easier to maintain or sustain the same level of functioning and health (reduce the rate of further deterioration from the condition)

TASK: consider the following

How can the principles of training be modified when goals are not being achieved or when new goals are identified?

Principles of training

- **Frequency** – decrease or increase

- **Intensity** – decrease or increase

- **Time/duration** – decrease or increase

- **Type/specificity** – change, cross train, add variety, different exercises for same muscles, different positions etc

Principles of training

- **Overload** – decrease of increase (FITT principles)

  - **Adaptation** –the body responds according to the demands

  - **Reversibility** – adaptations will be reversed if activity ceases

  - Overload may be achieved at comparatively lower levels of intensity when a condition worsens

- **Progression** – making an activity harder (overload)

- **Regression** – making an activity easier

  - to maintain the same level of functioning and health

  - reduce the rate of further deterioration from the condition

  - disease progression may mean programme regression

TASK: consider the following

What training systems do you know and use?

Any appropriate or modifiable for use with referred clients?

System examples

Cardiovascular

- Continuous

    – Long slow distance

    – Steady state

- Interval

- Fartlek

Flexibility

- Static

- Dynamic

- PNF

Muscular

- Single set

- Circuit approach

- Multiple set

- Super set

TASK

Choose one or more training systems

- *Summarise advantages and disadvantages*
- *Discuss suitability for referred clients*
- *Using examples to highlight findings.*

Appropriate training systems

- Maintain client motivation

- Promote adherence

- Accommodate specific needs

- Provide variety

- Offer a starting point for exercise

- Offer a means of progression or regression

TASK: consider the following

What programme records would you need to maintain?

Why are these needed?

How would you store these records?

Keeping accurate records

- Client use
- Other instructor use, e.g. cover
- Monitoring and evaluation purposes
- Scheme quality assurance.
- Medico-legal requirement
  - Record any reasons for making changes
  - To keep health professionals informed
  - what changed and state why
- Audit trail
- Legal
- Commissioning

TASK: consider the following

When may you need to share changes to the programme?

Sharing changes to exercise programmes

- Periodical programme reviews
- To seeking additional support and information
- Exit routes
- Session cover, e.g. leave or sickness
- New symptoms present
- Legal
- Commissioning

- GPs
- Multi-disciplinary working
- Other health care professionals, e.g. physiotherapist, dietician
- Other instructors, e.g. cover,
- Follow procedures for sharing information, e.g. Confidentiality and informed consent