



**CIMSPA PROFESSIONAL STANDARD  
POPULATION SPECIALISM**

**Working with People with  
Long Term Conditions  
(LTC)**

(FULL STANDARD)

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# CIMSPA PROFESSIONAL STANDARD: POPULATION SPECIALISM

## Working with People with Long Term Conditions

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### ABOUT THIS STANDARD

This document is a CIMSPA Professional Standard (full version).

This full version of the standard is available to CIMSPA awarding organisation, skills development, higher education and further education partners.

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# 1. Overview

## Professional Standard: Population Specialism Working with People with Long Term Conditions

### Background and rationale

This professional standard outlines the knowledge and skills, required by practitioners involved in the support and delivery of physical activity, exercise and behaviour change for adults who are at high(er) risk of developing or living with one or more long term conditions. They may also be sedentary, inactive (not meeting the Chief Medical Officers Physical Activity recommendations) or needing support after a new diagnosis.

The prevalence of long term conditions, predominantly non-communicable diseases, is increasing. For example, over the next 20 years, diseases attributed to obesity are predicted to add an excess of 544,000 - 668,000 cases of diabetes. We have also moved from people living with single conditions to multiple long term conditions and comorbidities. The number of people with three or more long term conditions rose from 1.9 million in 2008 to 2.9 million in 2018 and the ageing population and increased prevalence of long term conditions significantly impacts on health and social care. There are significant health inequalities affecting the population, with those in the poorest areas more likely to die from cardiovascular disease than those in the richest. Multi-morbidity is more common among deprived populations – especially among those that include a mental health problem. The Kings Fund predicts that there will be rising demand for the prevention and management of multi-morbidity rather than of single diseases; a perspective that is also echoed by the Richmond Group of charities.

Health and social care professionals find local physical activity and sport systems difficult to navigate and as a result are often unaware of the most appropriate signposting or referral options for their patient or client. This is compounded by a lack of understanding of who the appropriate exercise and sport professionals are to refer patients too. This often leads health and social care professionals to be over-protective when signposting or referring patients to well qualified local sport and physical activity professionals.

The National Institute for Health Care Excellence (NICE) guidance on behaviour change recommends that people are provided with tailored behaviour change support for a year, with a regularity and format of support that is based on the needs of the individual. This must be integrated into any physical activity programme to prevent and manage long term conditions.

These issues signal the need for physical activity and sport service provision to adapt to a changing landscape, with the workforce delivering the support and interventions needed to develop new or improved existing skills, to meet changing expectations and the increasingly complicated health needs of the population.

This Professional Standard (and new associated standards still in development) seeks to address some of these issues. The Working with People with Long Term Conditions Professional Standard provides practitioners with the framework of skills and knowledge required to work with people with single long term conditions or those at high(er) risk of developing a long term condition: in addition to people who present with comorbidities and multimorbidities.

The following roles are relevant to this overall area of work:

- Wider workforce: e.g. facility reception teams, health navigator, social prescribing link worker.
- Sport and exercise practitioners: e.g. sports coach, gym instructor, group exercise leaders, personal trainers.

- Managers of physical activity services: e.g. activity/health manager, activity/health coordinator.

For further information see the occupational map for outline roles and common/core health and physical activity skills and knowledge.

## **Professional standard: Population Specialism Working with People with Long Term Conditions**

This standard provides guidance for the development of educational products that will be endorsed by CIMSPA.

*Note: “Professional Standard: Population Specialism” will be abbreviated throughout this document to “Population Specialism”, the reader should understand this abbreviation as the full title. The use of the term “long term conditions” will also be abbreviated to LTC throughout the document, the reader should understand this abbreviation as the full phrase.*

A full version of this standard is available to CIMSPA awarding organisations, skills development, higher education and further education partners.

The agreed industry pre-requisite to be able to work with those at high(er) risk of developing or living with one or more long term condition(s) is to have achieved a CIMSPA endorsed educational product that fully meets the Professional Standard for the occupational role plus this Population Specialism. e.g. Personal Trainer plus Working with People with Long Term Conditions.

### **This Professional Standard Population Specialism can be used as follows:**

1. Combined with an occupation standard to form an educational product: e.g. Occupation: Coach; Population Specialism: Working with People with Long Term Conditions.
2. Combined with an occupation standard and additional specialism(s) to form an education product: e.g. Occupation: Coach; Environment Specialism: Working in the Community Sport Environment; Population Specialism: Working with People with Long Term Conditions.
3. As a standalone product that can be completed as continuing professional development: e.g. working with cancer rehabilitation or coronary heart disease rehabilitation patients.

### **Endorsed qualification logo**

Qualifications that meet the requirements of this CIMSPA Professional Standard will display this official CIMSPA endorsement logo.



## 2. Scope of the Working with People with Long Term Conditions Population Specialism

The role and purpose of an individual who works with people with long term conditions (LTC) is to motivate, educate and support clients to remain or become physically active safely. Working on a one-to-one or small group basis, the individual who is working with people with long term conditions will seek to encourage and support them to improve their health and wellbeing. This should be achieved in conjunction with them, by developing and delivering an appropriate physical activity programme, educating on the positive effects of regular participation in physical activity on their long term condition and providing strategies for better self-management of their long term condition.

Client outcomes will be achieved through the design, planning and delivery of creative services comprised of high quality and personalised exercise and physical activity programming, lifestyle management advice and tailored behaviour change support.

Someone who has achieved the standard to work with people with long term conditions will:

- Work with those who are at high(er) risk of developing or have pre-existing long term conditions (including comorbidities and multimorbidities) and who may also be:
  - Sedentary.
  - Inactive i.e. not meeting the national recommendations for physical activity (including the cardiovascular, muscle strength and balance components of fitness).
  - Active with a new diagnosis in order to support and educate around continued appropriate physical activity.
- Provide triage for referrals from both the health and social care sector and self-referral sources and by using an inclusive person-centred approach agree to devise, and appropriately review, an action plan that takes account of functional and other biopsychosocial capabilities and limitations, medical history including comorbidities and multimorbidities and level of risk associated with physical activity.
- Understand the theory of behaviour change, apply appropriate techniques to support individuals to begin and maintain both short and long term physical activity participation and communicate with clients in a person-centred, non-judgemental and supportive manner to maximise change.
- Oversee the entire client journey (from initial access to the programme through to exit routes and long term maintenance), quality assuring (as appropriate and where possible) when the physical activity and exercise programme involves related physical activity professionals, ensuring they work within agreed levels of delegated responsibility and their own professional boundaries.
- Deliver and adapt physical activity and exercise programmes based on individual assessment of client aspirations, needs, medical condition(s), level of risk during exercise and functional capacity based on knowledge of the effects of activity on long term conditions.
- Monitor client progress during physical activity and exercise sessions with a knowledge of when to consult with and/or refer back to a health professional if signs or symptoms of disease progression suggest the client's long term condition is no longer stable, or there are significant changes to the individual's health status.
- In conjunction with the client and based on their preferences and needs, signpost to a wide range of physical activity and other health and wellbeing services that may contribute to further improvements in their health at any stage of the physical activity and exercise programme.
- Where possible employ customer relationship management systems to manage and support the client journey and to encourage maximum adherence to the physical activity programme.

- Understand the importance of the collection of robust performance management data against key service outcomes, the construction of an appropriate evaluation framework and the communication of both to key programme stakeholders.
- Recognise the role and influence of care-givers, family and friends or partner on the progress and engagement of the client and seek to develop a productive relationship as appropriate.
- Build strong relationships with clinical partners, particularly health practitioners but also wider stakeholders including social care and the community sector; through partnership working ensure care pathways are joined up, allow for appropriate communication and information exchange and contribute to a positive client experience.
- Use credible up to date national resources and guidance to inform scope of practice.

### 3. CIMSPA membership eligibility

Graduates of this standard will meet the requirements to be a CIMSPA member. They will:

#### **UNDERSTAND**

- How to work with people who are at high(er) risk of developing, who have one or more long term conditions, who are sedentary, inactive – not meeting Chief Medical Officer's (CMO) physical activity recommendations – or that are active but require support and guidance to continue being so.

#### **HAVE DEMONSTRATED**

- The ability to work to an appropriate level in accordance with person-centred needs, with individuals or groups of people affected by long term conditions, in order to improve physical (including functional), and psychosocial outcomes and to encourage people to maintain physical activity levels that are beneficial for health in the long term.

Additional specialist standards (population, environment or technical) can be added to educational products to widen the scope of the role and enable an individual to show their expertise in additional populations, in different environments and with technical specialisms.

#### **Examples of specialisms that may be added:**

- Working with children 0-5.
- Working with children 5-18
- Working in the school environment (out of curriculum).

*Refer to the CIMSPA Professional Standards Matrix for a comprehensive overview as to how job roles relate to populations, environments and technical specialisms.*

## 4. Summary of knowledge and skills

### Working with People with Long Term Conditions

Topic	Knowledge and understanding	Skills
<b>Understanding health context</b>	<ul style="list-style-type: none"><li>• Know about:<ul style="list-style-type: none"><li>– Relevant UK wide, national and local physical activity health inequalities.</li><li>– Health and social care policy for the promotion of physical activity, the prevention of inactivity and sedentary behavior.</li><li>– Policy relating to the management of LTCs by use of physical activity.</li></ul></li><li>• Understand the evidence and insight work that supports the improvement of health outcomes and enables sustained behaviour change and an awareness of associated research trends and initiatives.</li><li>• Know about UK wide and local health care system structures across primary, secondary and tertiary care, the roles and responsibilities of key organisations and the health professionals involved.</li><li>• Understand key national and local care pathways for a range of commonly occurring disease categories (including the role that physical activity may play within them) with reference to national and local disease specific initiatives or services, and non-clinical pathways such as integrated lifestyle services or social prescribing.</li></ul>	<ul style="list-style-type: none"><li>• Utilise the health knowledge acquired to communicate in a credible manner with health, social care and third sector professionals at different levels that are working within the health and social care system.</li><li>• Utilise knowledge of clinical and non-clinical pathways to develop high quality local relationships and communicate with health and social care practitioners and the wider workforce, in order to ensure services offered are part of an integrated seamless system.</li><li>• Deliver high quality, empathetic person-centred support that includes education, behaviour change techniques, physical activity advice and exercise that is derived from the best health/clinical outcome evidence and insight and that takes into account the target audiences.</li></ul>



Topic	Knowledge and understanding	Skills
<b>Epidemiology, anatomy and physiology, pathophysiology and pharmacology</b>	<ul style="list-style-type: none"> <li>• Understand the prevalence of inactivity and other lifestyle behaviours, the impacts on health and the correlation between these behaviours, risk factors and LTCs.</li> <li>• Understand the anatomy, physiology and biomechanics of the human body including the cardiorespiratory, musculoskeletal, nervous, endocrine and cognitive systems and how ageing, disease and injury affects each one.</li> <li>• Understanding of the most prevalent LTCs, their associated risk factors and the ways in which these are medically managed.</li> <li>• Understand how the medical management of an LTC may impact upon the health and quality of life of an individual, including functional (exercise) and mental capacity.</li> <li>• Understand the protective effects of physical activity and exercise for both the prevention and management of a range of LTCs, including the physiological, biochemical, anatomical and psychological response to physical activity.</li> <li>• Understand the levels of functional, cognitive or other biopsychosocial limitations for those at high(er) risk of developing or with long term condition(s) including comorbidities and multimorbidities, and how physical activity services could be developed and delivered to improve all limitations with a focus on individual capabilities.</li> </ul>	<ul style="list-style-type: none"> <li>• Demonstrate how to apply knowledge of the cardiorespiratory, musculoskeletal, nervous, endocrine and cognitive systems, the ageing and disease processes in order to design and deliver a safe and effective physical activity programme.</li> <li>• Interpret information about the medical management for people at higher risk of, or who are living with, LTCs and demonstrate how to apply this knowledge in the development and delivery of a safe and effective physical activity programme.</li> <li>• To design and deliver a physical activity programme that focuses on selecting and adapting appropriate exercises that accommodate the functional, cognitive and other biopsychosocial limitations that are common to a group of individuals across a range of risk factors or condition(s) and through identifying and enhancing individual capabilities, improve capacity to achieve Activities of Daily Living (ADLs).</li> </ul>

Topic	Knowledge and understanding	Skills
<b>Service design, set up and evaluation</b>	<ul style="list-style-type: none"> <li>• Understand the skills, knowledge and values required by support staff: e.g. peer mentors and/or volunteers supporting or delivering part of the programme, including how to motivate and support them.</li> <li>• Know how to conduct appropriate risk assessments for venues and activities to ensure access for those with a disability.</li> <li>• Know about national or local referral and self-referral protocols (including inclusion and exclusion criteria) that ensure safe access into the service, including the role of local health, social care and third sector professionals and the range of communication strategies that promote the service.</li> <li>• Know about legislation and best practice with regard to safeguarding vulnerable people and data protection protocols including the collection, storage and use of sensitive medical and personal information.</li> <li>• Understand the importance and value of monitoring and evaluating service outcomes, knowledge of data systems and evaluation frameworks including a range of validated physical and mental wellbeing outcome measures.</li> <li>• Based on both local and national tools and insight, develop a comprehensive knowledge of local physical activity opportunities, health interventions and other wider community assets to ensure seamless links to further support and motivate clients.</li> </ul>	<ul style="list-style-type: none"> <li>• Mentor and guide support staff: e.g. peer mentors, sports coaches or gym instructors and oversee their delivery of specific elements of the physical activity service.</li> <li>• Ensure equipment, exercise and associated spaces utilised in the service are safe before and during the delivery and any mitigating actions are in place.</li> <li>• To utilise appropriate screening and safety protocols and tools during the early assessment process for individuals who are referred or self-refer.</li> <li>• Ensure personal and sensitive data is dealt with in accordance with local clinical governance guidelines and internal service protocols.</li> <li>• Select and use appropriate measurement tools, monitoring frameworks and data collection systems ensuring where relevant accurate data entry.</li> <li>• Identify and signpost individuals to appropriate local physical activity and health opportunities and other wider community assets that support improvements in health that are relevant to the participant's preferences and needs.</li> </ul>

Topic	Knowledge and understanding	Skills
<b>Providing support and behaviour change</b>	<ul style="list-style-type: none"> <li>• Understanding the barriers and motivators to becoming more physically active for adults at high(er) risk of developing or living with an LTC including comorbidities and multimorbidities.</li> <li>• Understand relevant behaviour change theories and models, for example, the Health Belief Model, Self Determination Theory, COM-B and the Transtheoretical Model.</li> <li>• Understand how to deliver an evidence-based intervention protocol meeting the needs of those who are at high(er) risk of developing or living with one or more long term conditions using, as appropriate, combinations of 1:1, group, peer led, face to face and remote support.</li> <li>• Understand both the most effective techniques that can be used to support someone to change their behaviour and how best to apply such motivational support in a physical activity session.</li> <li>• Understand the importance of using a customer relationship management (CRM) system to monitor change in behaviour and to track and tailor follow up motivational support based on individual need and circumstance.</li> </ul>	<ul style="list-style-type: none"> <li>• To design physical activity and exercise programmes based on the service users' biopsychosocial needs taking into account safety considerations, motivation levels, medical information, and personal motivations and preferences; reviewing and adapting behavioural strategies as appropriate, at regular intervals.</li> <li>• To carry out assessments at an appropriate point in a behaviour change intervention, in an empathetic and non-judgemental style.</li> <li>• To apply behaviour change theory to competently deliver person-centred behaviour change using a variety of skills, including an integrative style that pulls on the following methods of behaviour change: <ul style="list-style-type: none"> <li>– Goal setting.</li> <li>– Motivational Interviewing.</li> <li>– Solution Focused Brief Therapy.</li> <li>– Cognitive Behaviour Therapy.</li> <li>– Positive Psychology.</li> </ul> </li> <li>• To deliver face to face, group, individual and remote behaviour change support using an empathetic and motivational approach.</li> <li>• Where possible use an appropriate local CRM system to keep service user records up to date and use this to manage behaviour change support.</li> </ul>

Topic	Knowledge and understanding	Skills
<b>Service delivery</b>	<ul style="list-style-type: none"> <li>• Understand and interpret referral protocols including clinical information, relevant medical diagnosis and terminology, the need for a pre-exercise health screening assessment and a range of functional (including sub-maximal tests) and/or other clinical assessments that may be conducted to clarify baseline position, demonstrate improvements in functional or other clinical outcomes over time and provide appropriate exercise during the programme.</li> <li>• Understand the functional, cognitive and other biopsychosocial limitations and the impact on everyday activity which are common to people who are at high(er) risk of developing or living with a range of multiple long term conditions or comorbidities, also the associated safety considerations to accommodate limitations and to identify and enhance capabilities during an exercise session.</li> <li>• Understand how to design, adapt, monitor and review a safe and effective individual and group based physical activity programme for an individual based on the need and personal preference.</li> <li>• Understand the contra-indications to exercise and the signs and symptoms of a number of adverse events associated with a range of medical conditions and how to respond including the use of emergency first aid including CPR.</li> <li>• Know the UK wide and national government evidence, recommendations and primary messaging for physical activity, healthy eating and other common lifestyle behaviours.</li> <li>• Understand the principles and practice of promoting self-management with knowledge of how, why, when and where it may be appropriate to further refer or signpost participants to another professional with appropriate skills and capabilities or move people on to other opportunities.</li> <li>• Fully understand the processes and protocols where such delegated responsibility is integrated in the delivery of services for people at high(er) risk of developing or living with LTCs.</li> </ul>	<ul style="list-style-type: none"> <li>• To interpret medical / clinical information from referring health care professionals, know when to and how to refer back and to elicit and accurately record full client details.</li> <li>• To manage participant safety, respond quickly and effectively to medical emergencies and to record any incidents according to the relevant operating procedures.</li> <li>• To interpret and apply processes and protocols where delegated authority or onward referral or signposting is appropriate and agreed.</li> <li>• Using a person-centred behaviour change approach: <ul style="list-style-type: none"> <li>– Select and deliver an appropriate pre-exercise health screening assessment using appropriate risk stratification tools (e.g. PreCise, ACSM) and appropriate functional or other clinical assessment(s).</li> <li>– Devise, deliver, monitor, review and adapt safe 1:1 and group physical activity tailored to the need of the individual in terms of improving jointly identified goals: e.g. strength, balance, bone density, cardio-respiratory fitness, reducing fatigue, well-being and social inclusion.</li> <li>– Provide evidence-based messaging, education and support using a range of teaching styles that is appropriate for the individual or group.</li> <li>– Work towards goals of participant independence and self-management while maintaining communication with referring professionals, as appropriate.</li> <li>– Ensure participants are supported to continue to be physically active in the long term.</li> </ul> </li> </ul>

Topic	Knowledge and understanding	Skills
<b>Professional development</b>	<ul style="list-style-type: none"> <li>• Understand the importance, benefits and mechanisms of keeping technical knowledge and skills up to date through a variety of both traditional and innovative learning activities and reflective practice.</li> <li>• Understand both the scope of industry requirements and how to access relevant and recognised continuing professional development (CPD) activities.</li> <li>• A clear understanding of the industry and other codes of conduct, ethical issues and professional boundaries relevant to the role in terms of both relationships with clinicians, nutritionists/dieticians, referring professionals and participants.</li> <li>• Understanding of a requirement to work within the practitioner's own personal skill set, knowledge (based on qualifications), and experience; with an understanding that there may be a need to access more advanced clinical advice or personal support as required.</li> <li>• Strong understanding of the role of the practitioner and the distinction between management/coordinator roles including interdependencies.</li> </ul>	<ul style="list-style-type: none"> <li>• To ensure relevant individual CPD opportunities are identified and knowledge and experience are updated regularly and in-line with industry requirements.</li> <li>• To work within professional boundaries; ensuring participant and personal safety and that appropriate developed protocols and insurance requirements are fulfilled.</li> </ul>

## 5. Product development guidance

This section is aimed at organisations developing formal educational products mapping to this Population Specialism. The requirements should be considered in the development of all educational products seeking CIMSPA endorsement.

The CIMSPA Professional Development Board (PDB) has agreed any of the formal educational products listed in the table below can be developed for the Population Specialism, Working with People with Long Term Conditions. Where evidence that all elements of the Population Specialism are included, CIMSPA endorsement can be sought.

<b>Educational product</b>	<b>Mapping requirements</b>	<b>Professional Standard achieved on attainment?</b>
Regulated vocational qualification	Fully mapped	YES
Apprenticeship programme	Fully mapped	YES
HE programme/modules	Fully mapped	YES

All formal educational products that are seeking CIMSPA endorsement must be submitted to CIMSPA and should include all elements outlined in the Population Specialism and assessed in line with the intention of the standard.

Education providers seeking CIMSPA endorsement for a product against this Population Specialism are asked to consider the following:

- a) They determine and justify the level of the product they have developed, in line with regulator guidance. To ensure parity, the level for all educational products that fully map to this Population Specialism should be the same.

The level assigned is determined by leading awarding organisations currently offering qualifications in the sector in which the role resides.

This is not a first-to-post exercise but one in which education providers are invited to submit their levelled units/full qualification for review as part of the CIMSPA endorsement process.

Once agreed by CIMSPA, all subsequent fully-mapped educational products must conform to the level set for this Population Specialism.

Level descriptors set out the generic knowledge and skills associated with the typical holder of a qualification at a given level and it should be ensured that educational products fully mapping to this Population Specialism are a 'best-fit' for the level assigned.

- b) They determine the total qualification time for the qualification/unit and outline the minimum requirements for practical assessment.

When working with people with long term conditions sufficient time between engaging a client and final assessment needs to be allowed to show improvements in the client's lifestyle, health and fitness. Evidence suggests that for behaviour change to be effective support is required for at least one year (NICE PH 49 Behaviour Change: Individual Approaches 2014).

- c) They stipulate practical assessment must be conducted, where practically possible, in a real-world environment, ideally using a 'real' client to develop a theoretical case study. For roles

where the individual is working with a person with a long term condition this could include the following settings: a gym, studio, sports hall, outdoors, client's home and should include Activities of Daily Living and/or exercise dependent, on the clients preferences. For example, 'on the job' or at work.

Where possible a practical end-point assessment is conducted with 'real participants'.

The use of peers for an end-point practical assessment is not deemed appropriate.

Reasonable adjustments can be applied where specific circumstances make this unviable: e.g. delivery in the prison sector.

- d) Their quality assurance meets the appropriate regulator's guidance, including: internal and external quality assurance, staffing requirements and assessment generation and evidence.

## 6. Learning and development requirements (LDRs)

The LDRs outline the key areas of learning and assessment that should be contained within any educational product seeking CIMSPA endorsement against a Professional Standard. There are 6 key areas of learning and development for the Population Specialism: Working with People with Long Term Conditions, of which all areas are interconnected and mandatory. The key areas are:

1. Understanding the health context
2. Epidemiology, anatomy and physiology, pathophysiology and pharmacology
3. Service design, set up and evaluation
4. Providing support and behaviour change
5. Service delivery
6. Professional practice

N.B. Examples (e.g.) are given within the LDRs to provide an overview of the knowledge and skills most relevant to the role: It is not mandatory to assess learners against 100% of the examples provided, however, sufficient coverage to ensure occupational competence on achievement must be ensured. This will be reviewed as part of the CIMSPA endorsement process.



## 1. Understanding health context

Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K1.1	Health policy	<ul style="list-style-type: none"> <li>• Know about:               <ul style="list-style-type: none"> <li>– Relevant UK wide, national and local physical activity health inequalities.</li> <li>– Health and social care policy for the promotion of physical activity, the prevention of inactivity and sedentary behavior.</li> <li>– Policy relating to the management of long term conditions by use of physical activity.</li> </ul> </li> <li>• Know about local health strategies and needs assessments that influence the development of local services including physical activity and sedentary behaviour.</li> <li>• Understand the wider determinants of health, their impact on health inequalities and on an individual's health, and the use of health profiles to understand local demographics.</li> </ul>
K1.2	Evidence	<ul style="list-style-type: none"> <li>• Understand the latest evidence that supports the improvement of clinical outcomes and enables sustained behaviour change for people at high(er) risk of developing or living with LTCs: e.g. NICE clinical and public health guidelines on physical activity, condition management and behaviour change.</li> <li>• Know about research trends and initiatives that are emerging that support behaviour change and increases in physical activity.</li> <li>• Understand the insight for people with lived experience of an LTC including barriers and motivators for the different medical conditions and for those with comorbidities or multimorbidities examples of organisations that you could talk to include: Macmillan, Richmond Group.</li> <li>• Know about segmentation tools that can assist in understanding barriers, motivators and preferred types of physical activity: e.g. Sport England market segmentation.</li> </ul>
K1.3	Building local relationships	<ul style="list-style-type: none"> <li>• Know about UK wide and local health care system structures across primary, secondary and tertiary care, the roles and responsibilities of key organisations and the health, social care and third sector professionals involved.</li> <li>• Understand the importance of engaging and maintaining strong relationships with key stakeholders including commissioners, senior managers, community providers, service users and their carers and how this informs service development of a local physical activity programme.</li> <li>• Know about key national and local care pathways that will link to the provision of local physical activity services including:               <ul style="list-style-type: none"> <li>– Non-clinical: e.g. integrated lifestyle services, social prescribing, Making Every Contact Count (MECC).</li> <li>– Clinical: e.g. diabetes prevention, NHS health checks, IAPT and weight management and rehabilitation services including:                   <ul style="list-style-type: none"> <li>○ Cardiac.</li> <li>○ Cancer.</li> <li>○ Pulmonary.</li> <li>○ MSK.</li> <li>○ Neurological.</li> <li>○ Falls.</li> </ul> </li> </ul> </li> <li>• Understand the language used in the health and social care sector.</li> </ul>

<b>Ref</b>	<b>Skills:</b>	<b>A person who works with people with Long Term Conditions must be able to:</b>
<b>S1.1</b>	Health context	<ul style="list-style-type: none"> <li>• Use local health strategies, needs assessments and health profiles to understand the make-up of the local population and target audiences.</li> </ul>
<b>S1.2</b>	Evidence	<ul style="list-style-type: none"> <li>• Find, utilise and interpret the latest evidence and research, as well as critically appraise emerging trends to inform delivery of the physical activity, exercise, education and behaviour change components of the programme: e.g. NICE public health or clinical guidance.</li> <li>• Apply the latest evidence to ensure that they improve clinical outcomes and enable sustained behaviour change for people at high(er) risk of or living with LTCs taking into account health inequalities.</li> </ul>
<b>S1.3</b>	Building local relationships	<ul style="list-style-type: none"> <li>• Utilise knowledge of the customer experience and the impact of health inequalities to ensure empathy with, and appropriate signposting for, participants throughout their journey into, through and out of the service.</li> <li>• Build strong relationships with a range of health professionals (both managers and practitioners) who are working in local primary, secondary or tertiary care services, and the wider workforce including social care, third sector professionals and carers to ensure a smooth customer journey.</li> <li>• Utilise health knowledge to communicate in a credible manner with health, social care and third sector professionals at different levels working within the health and social care system.</li> </ul>

## 2. Epidemiology, anatomy and physiology, pathophysiology and pharmacology

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<b>Ref</b>	<b>Knowledge and understanding:</b>	<b>A person who works with people with Long Term Conditions must:</b>
<b>K2.1</b>	Epidemiology	<ul style="list-style-type: none"><li>• Understand the prevalence of inactivity and other lifestyle behaviours by social demographics, disease and predicted trends and the correlation between these behaviours, risk factors, long term conditions and comorbidities or multimorbidities; and the relationship between these and the wider determinants of health.</li></ul>
<b>K2.2</b>	Anatomy and physiology	<ul style="list-style-type: none"><li>• Understand the anatomy, physiology and biomechanics of the human body including the cardiorespiratory, musculoskeletal, nervous, endocrine and cognitive systems.</li><li>• Understand how ageing, disease and injury affects the anatomy, physiology and biomechanics of the human body including the cardiorespiratory, musculoskeletal, nervous, endocrine and cognitive systems.</li><li>• Understand how ageing, injury and disease impact on functional capacity and health outcomes for a range of health conditions.</li><li>• Understand the protective effects of physical activity and exercise for both the prevention and management of a range of LTCs, including the physiological, biochemical, anatomical and psychological response to physical activity.</li></ul>

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Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K2.3	Aetiology (causes) of conditions	<ul style="list-style-type: none"> <li>• Understand the aetiology of the most prevalent long term conditions and their associated risk factors including the following: <ul style="list-style-type: none"> <li>- Diabetes and metabolic conditions: e.g. <ul style="list-style-type: none"> <li>○ Pre-diabetic.</li> <li>○ Obesity.</li> <li>○ Hyperlipidaemia.</li> <li>○ Hypercholesterolemia.</li> <li>○ Hyperglycaemia.</li> <li>○ Type I and II diabetes.</li> <li>○ Hypo/hyperthyroidism.</li> </ul> </li> <li>- Circulatory including cardiovascular and respiratory: e.g. <ul style="list-style-type: none"> <li>○ Cardiovascular disease risk.</li> <li>○ Coronary heart disease.</li> <li>○ Hypertension.</li> <li>○ Peripheral vascular disease.</li> <li>○ Asthma.</li> <li>○ Chronic obstructive pulmonary disease.</li> </ul> </li> <li>- Musculoskeletal including: <ul style="list-style-type: none"> <li>○ Osteopaenia.</li> <li>○ Osteoporosis.</li> <li>○ Osteoarthritis.</li> <li>○ Rheumatoid arthritis.</li> <li>○ Lower back pain.</li> <li>○ Joint replacement.</li> <li>○ Connective tissue disease.</li> <li>○ Spinal cord injury.</li> </ul> </li> <li>- Mental health conditions: e.g. <ul style="list-style-type: none"> <li>○ Anxiety.</li> <li>○ Stress.</li> <li>○ Depression.</li> <li>○ Bipolar.</li> <li>○ Phobias.</li> <li>○ Schizophrenia.</li> <li>○ Eating disorders.</li> <li>○ Substance misuse.</li> </ul> </li> <li>- Chronic fatigue.</li> <li>- Cancers (all types grouped to: outcomes – 1-2 year survival, 5 year survival, 10 years+ survival; and stages of cancer care - diagnosis, treatment, survivorship, advanced / end of life).</li> <li>- Neurological including: <ul style="list-style-type: none"> <li>○ Transient ischaemic attack and stroke.</li> <li>○ Multiple sclerosis.</li> <li>○ Parkinson's disease.</li> <li>○ Fibromyalgia.</li> </ul> </li> <li>- Dementia: e.g. early onset dementia, mild to moderate cognitive impairment, Alzheimer's.</li> </ul> </li> <li>• Know about common comorbidities and multimorbidities that individuals encounter.</li> <li>• Understand the significant underlying importance of mental health and wellbeing for people at high(er) risk of developing, or living with, single LTCs or comorbidities and the factors that can influence an individual's wellbeing.</li> </ul>

<b>Ref</b>	<b>Knowledge and understanding:</b>	<b>A person who works with people with Long Term Conditions must:</b>
<b>K2.4</b>	Medical management	<ul style="list-style-type: none"> <li>• Understand the ways in which the above conditions may be medically managed: i.e. medications and how they work, investigations, intervention or treatments and surgery.</li> <li>• Understand how the medical management of the above LTCs and associated risk factors may impact upon the health and quality of life of an individual, including functional and mental capacity.</li> <li>• Understand the pharmacological implications of common drugs and the possible side effects of treatments or surgery and how these might impact upon exercise tolerance and functional capability.</li> </ul>
<b>K2.5</b>	Limitations for Exercise	<ul style="list-style-type: none"> <li>• Understand the levels of functional, cognitive or other biopsychosocial limitations for the above LTCs, including comorbidities and multimorbidities, and how physical activity services could be developed and delivered to improve all limitations with a focus on individual capabilities.</li> <li>• Understand the physiology and psychology of pain and how this may impact upon the functional and mental capacity of an individual.</li> </ul>
<b>Ref</b>	<b>Skills:</b>	<b>A person who works with people with Long Term Conditions must be able to:</b>
<b>S2.1</b>	Anatomy and physiology	<ul style="list-style-type: none"> <li>• Demonstrate how to apply knowledge of the cardiorespiratory, musculoskeletal, nervous, endocrine and cognitive systems in order to design and deliver a safe and effective physical activity programme.</li> <li>• Demonstrate how to apply knowledge of physical activity, ageing and disease processes to design and deliver a safe and effective physical activity programme.</li> <li>• Demonstrate how to communicate the impact of exercise on the human body in simple terms to a participant.</li> </ul>
<b>S2.2</b>	Medical management	<ul style="list-style-type: none"> <li>• Take account of medical management in the development and delivery of safe and effective physical activity programmes for people at higher risk of, or living with, LTC(s).</li> <li>• Interpret information about the medical management for people at higher risk of, or living with, a range of LTCs and demonstrate how to apply this knowledge in the development and delivery of safe and effective physical activity programmes.</li> </ul>
<b>S2.3</b>	Accommodating functional and psychological limitations and capabilities	<ul style="list-style-type: none"> <li>• To design and deliver a physical activity programme that focuses on selecting and adapting appropriate exercises that accommodate the functional and other biopsychosocial limitations that are common to a group of individuals across a range of risk factors/condition(s) and through identifying and enhancing individual capabilities, improve capacity to achieve Activities of Daily Living (ADLs).</li> </ul>

### 3. Service design, set up and evaluation

Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K3.1	Quality assurance	<ul style="list-style-type: none"> <li>• Appreciate service capacity and understand the skills, competencies and values required by staff and volunteers supporting or delivering part of the programme.</li> <li>• Understand how to motivate, value and support peer mentors and/or volunteers.</li> <li>• Understand how to support and guide other instructors/coaches providing part of a programme of sport and exercise.</li> <li>• Know how to conduct appropriate risk assessments for the venues and activities proposed including ensuring access for those with a disability.</li> </ul>
K3.2	Referral and self-referral	<ul style="list-style-type: none"> <li>• Understand the distinctions between referral and self-referral.</li> <li>• Understand how to set-up an agreed, simple, and seamless self-referral and referral protocol (including inclusion and exclusion criteria) with local professionals and allied services.</li> <li>• Understand the various communication strategies required for the promotion of a physical activity programme both via referral and self-referral routes including the use of:               <ul style="list-style-type: none"> <li>- Community outreach.</li> <li>- Digital marketing and social media.</li> <li>- Local press.</li> <li>- Posters and leaflets.</li> <li>- Health routes.</li> </ul> </li> </ul>
K3.3	Governance	<ul style="list-style-type: none"> <li>• Understand the legislation surrounding the safeguarding of vulnerable people.</li> <li>• Understand data protection law: e.g. GDPR and implications for collecting, storing and sharing personal and sensitive data that includes medical information and the importance of confidentiality.</li> </ul>
K3.4	Monitoring and evaluation	<ul style="list-style-type: none"> <li>• Understand the importance and value of monitoring and evaluating service outcomes including knowledge of key evaluation documents e.g. Public Health England (PHE) Standard Evaluation Framework and the Sport England Monitoring and Evaluation Framework.</li> <li>• Understand the various data methodologies e.g. qualitative, quantitative, customer feedback, process evaluation, impact and cost data and the instructor's role in the data collection process.</li> <li>• Know about a range of validated service evaluation outcome measurement tools including those designed to measure physical (including functional), and mental wellbeing outcomes.</li> <li>• Know about the use and value of electronic data management systems (including customer relationship management systems) that aid data collection, evaluation and support to individual participants.</li> </ul>

<b>Ref</b>	<b>Knowledge and understanding:</b>	<b>A person who works with people with Long Term Conditions must:</b>
<b>K3.5</b>	Physical activity and health opportunities	<ul style="list-style-type: none"> <li>• Understand the importance of providing a full spectrum of opportunity for clients to engage in physical activity that includes activities of daily living, active travel, active recreation through to structured exercise, dance and sport, and that embraces the wide range of stakeholders and providers that can support this.</li> <li>• Understand the importance of linking to health interventions and other wider community assets that can support the participant and knowing how, when and where to signpost: e.g. health trainers, Improving Access to Psychological Therapies (IAPT), stop smoking services, physiotherapy, pharmacy, befriending, group learning.</li> </ul>
<b>Ref</b>	<b>Skills:</b>	<b>A person who works with people with Long Term Conditions must be able to:</b>
<b>S3.1</b>	Quality assurance	<ul style="list-style-type: none"> <li>• Quality assure community physical activity opportunities, including identifying training needs.</li> <li>• Mentor and supervise health champions/volunteers by providing 1:1s and group-based learning and action sets to include development of core skills: e.g. communication and general behaviour change techniques.</li> </ul>
<b>S3.2</b>	Referral and self-referral	<ul style="list-style-type: none"> <li>• Work with commissioners and managers within health, social care and third sector, as well as service users, to develop and ensure uncomplicated, streamlined and seamless referral processes and pathways are in place that reflect the needs of the local community.</li> <li>• Understand the need for self-referral pathways that ensure the needs of target audiences are taken into account including safety considerations, the Health Commitment Statement and those that determine level of risk of an 'event' during exercise: e.g. PARQ, PARQ+, PreCise tool, ACSM health screening.</li> </ul>
<b>S3.3</b>	Governance	<ul style="list-style-type: none"> <li>• Take into consideration and/or use local clinical governance guidelines when delivering a physical activity service for people at risk of, or living with, an LTC.</li> <li>• Enter relevant personal and sensitive data and ensure its safe storage and transfer at all stages within the physical activity programme and with due regard to local and NHS/other information governance requirements.</li> <li>• Ensure that medical and other sensitive/personal information imparted by clinicians and/or the participants is confidential.</li> </ul>
<b>S3.4</b>	Monitoring and evaluation	<ul style="list-style-type: none"> <li>• Select and use appropriate measurement tools, monitoring frameworks and data collection systems.</li> <li>• Collect locally agreed data both pre, during and post intervention from individual participants and enter accurately onto systems.</li> <li>• Gather and provide qualitative feedback from participants including case studies.</li> <li>• Provide feedback on progress of clients to referring professionals as appropriate.</li> </ul>

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<b>Ref</b>	<b>Skills:</b>	<b>A person who works with people with Long Term Conditions must be able to:</b>
<b>S3.5</b>	Physical activity and health opportunities	<ul style="list-style-type: none"><li>• Know about relevant physical activity opportunities across an area and be able to signpost individuals onward.</li><li>• Identify and build effective relationships with all relevant wider health opportunities and community assets that support health improvement across an area in order to be able to cross signpost/refer individuals to, according to individual participant's need.</li></ul>

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## 4 Providing support and behaviour change

Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K4.1	Theory of behaviour change	<ul style="list-style-type: none"> <li>• Know about the relevant behaviour change theories: e.g. Health Belief Model, Self Determination Theory, COM-B and the Transtheoretical Model required to design and deliver an intervention in order to meet the needs of those who are at high(er) risk of developing, or living with, one or more LTCs, with health inequalities. These interventions must take into account and support people at different stages of change and will motivate them to become and stay more active and cope with relapse.</li> <li>• Understand the barriers and motivators (capability, opportunity, motivation) of inactive adults, those at risk or living with of LTCs including comorbidities and multimorbidities, to become physically active.</li> <li>• Understand the most effective techniques that can be used to support someone to change their behaviour both on a 1:1 basis or as part of a group.</li> <li>• Understand how to apply motivational support (including the use of peer support) in a physical activity session.</li> </ul>
K4.2	Style of intervention	<ul style="list-style-type: none"> <li>• Understand the evidence for providing 1:1, group and peer behaviour change support and face to face versus remote communication: e.g. digital, print and telephone. Also, how these can be combined to develop an intervention protocol to meet the needs of those at high(er) risk of developing or living with long term conditions, including comorbidities or multimorbidities and those with health inequalities.</li> </ul>
K4.3	Customer relationship management (CRM)	<ul style="list-style-type: none"> <li>• Understand what a customer relationship management system (CRM) is and how it can support the practitioner and participant to manage behaviour change.</li> <li>• Understand the importance of using a CRM system to monitor change in behaviour and tailor follow up motivational support according to individual needs.</li> </ul>
Ref	Skills:	A person who works with people with Long Term Conditions must be able to:
S4.1	Theory of behaviour change	<ul style="list-style-type: none"> <li>• Use and apply relevant behaviour change theory to design an intervention to meet the needs of the target population, that takes into account and supports people at different stages of change and will motivate them to become and stay more active and cope with relapse.</li> <li>• Identify the relevant behaviour change techniques (from the behaviour change taxonomy) and apply them in a person-centred consultation and in all service user interactions.</li> <li>• Use evidence for providing 1:1, group and peer behaviour change support and face to face versus remote communication, for example digital, print and telephone, and use these to develop an intervention protocol for the identified populations.</li> </ul>

Ref	Skills:	A person who works with people with Long Term Conditions must be able to:
S4.2	Person-centred techniques	<ul style="list-style-type: none"> <li>• Competently use person-centred behaviour change incorporating a variety of skills in an integrative style that draws on the following methods:               <ul style="list-style-type: none"> <li>– Motivational Interviewing.</li> <li>– Solution Focused Brief Therapy.</li> <li>– Cognitive Behavioural Therapy (CBT).</li> <li>– Positive Psychology.</li> </ul> </li> <li>• Design physical activity programmes based on service user clinical and biopsychological needs taking into account safety considerations, motivation levels, medical information, and personal preferences. Review and adapt at regular intervals as appropriate.</li> <li>• Adopt a person-centred empathetic approach that takes account of the wider determinants of health and the impact on an individual's ability to change their behaviour.</li> <li>• Deliver face to face, group, individual and remote behaviour change support using an empathetic and motivational approach.</li> <li>• Carry out assessments at an appropriate point in a behaviour change intervention, in an empathetic and non-judgemental style.</li> </ul>
S4.3	Customer relations management (CRM)	<ul style="list-style-type: none"> <li>• Use any relevant local CRM system, keep service user records up to date and use to manage behaviour change support.</li> </ul>

## 5. Service delivery

Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K5.1	Medical terminology	<ul style="list-style-type: none"> <li>Understand the pertinent medical terminology that is relevant to the listed conditions.</li> </ul>
K5.2	Pre-exercise screening	<ul style="list-style-type: none"> <li>Understand a range of medical diagnoses and how to interpret clinical information shared on a health care referral, including knowing when and how to refer back to referring practitioners.</li> <li>Understand the need for a pre-exercise health screening assessment and the pros and cons of different methodologies, understand the evidence for these and impact on practice in selection and use and understand how to use within a person-centred behaviour change approach.</li> <li>Understand what health and personal information is required and why.</li> </ul>
K5.3	Functional and clinical assessment	<ul style="list-style-type: none"> <li>Understand how to select and administer appropriate functional (including sub-maximal tests) or other clinical assessments to establish a baseline and measure change in functional/clinical outcomes over time.</li> <li>Understand how to interpret and apply the results of a variety of assessment tools.</li> </ul>
K5.4	Exercise prescription	<ul style="list-style-type: none"> <li>Understand how to design, adapt and review a safe and effective individual and group based physical activity programme for an individual based on the individual's needs and personal preferences (both clinical and psychological).</li> <li>Understand the functional, cognitive and other biopsychosocial limitations which are common across people living with multiple LTCs or comorbidities and multimorbidities.</li> </ul>
K5.5	Monitoring physical activity and exercise	<ul style="list-style-type: none"> <li>Understand the relevant methods of monitoring an individual or group of participants both before, during and after exercise including use of Perceived Rate of Exertion (estimation and production modes) for intensity or breathlessness, heart rates and utilising skilled observation and questioning techniques.</li> <li>Understand the role of evidence-based technologies that support the uptake and maintenance of physical activity.</li> </ul>
K5.6	Safety considerations	<ul style="list-style-type: none"> <li>Know what the signs and symptoms of a number of adverse events associated with a range of medical conditions are and how to respond to these, including how to support an individual with mental health problems.</li> <li>Understand emergency first aid including CPR.</li> <li>Understand the signs and symptoms of different LTCs and associated risk factors and the safety considerations required for these during an exercise session.</li> </ul>

<b>Ref</b>	<b>Knowledge and understanding:</b>	<b>A person who works with people with Long Term Conditions must:</b>
<b>K5.7</b>	Education and lifestyle advice	<ul style="list-style-type: none"> <li>• Understand UK wide and national government evidence, recommendations and primary messaging for physical activity including the benefits of physical activity for a number of conditions e.g. UK Chief Medical Officer's (CMOs) Guidelines contained within Start Active Stay Active.</li> <li>• Understand UK wide and national government evidence, recommendations and primary messaging for a range of other common lifestyle behaviours: e.g. Public Health England (PHE) healthy eating guidance and stop smoking brief.</li> <li>• Understand how national and local marketing campaigns support awareness of the promotion of physical activity e.g. PHE's One You, Change4Life.</li> <li>• Understand the Level 4 competence framework set out by the Association for Nutrition specifically for exercise instructors in relation to: <ul style="list-style-type: none"> <li>- Fundamentals of human nutrition.</li> <li>- Improving health and wellbeing.</li> <li>- Nutrition monitoring and data collection techniques.</li> </ul> </li> <li>• Understand the principles of self-management which will enable participants to maintain physical activity and other lifestyle changes beyond the intervention.</li> </ul>
<b>K5.8</b>	Delegated responsibility	<ul style="list-style-type: none"> <li>• Fully understand the processes and protocols where delegated responsibility is integrated in the delivery of services for people at high(er) risk of developing or living with LTCs.</li> </ul>
<b>K5.9</b>	Onward referral	<ul style="list-style-type: none"> <li>• Know at what stage of the intervention it would be appropriate to refer or signpost on to another professional with the skills and capabilities to plan and manage a safe and effective exercise programme or to another type of health intervention: e.g. stop smoking service, to meet the needs of the individual.</li> </ul>

<b>Ref</b>	<b>Skills:</b>	<b>A person who works with people with Long Term Conditions must be able to:</b>
<b>S5.1</b>	Pre-exercise assessment	<ul style="list-style-type: none"> <li>• Elicit and record full and accurate health details and personal information from a service user, and to deliver this within a person-centred behaviour change approach.</li> <li>• Interpret medical/clinical information from referring health and social care professionals.</li> <li>• Carry out a pre-exercise health screening assessment using appropriate risk stratification tools: e.g. PAR-Q, PreCise, American College of Sports Medicine (ACSM).</li> <li>• Gain informed consent from the individual to take part in the exercise programme outlining risks and benefits of participation.</li> </ul>
<b>S5.2</b>	Functional and clinical assessment	<ul style="list-style-type: none"> <li>• Select and conduct the appropriate functional/clinical assessment(s), interpret and apply results in order to establish a base line and to demonstrate individual progress and collective outcomes.</li> <li>• Demonstrate how to apply the results of these assessments to plan and deliver a safe and effective exercise programme for an individual.</li> </ul>
<b>S5.3</b>	Delegated authority	<ul style="list-style-type: none"> <li>• Interpret and apply processes and protocols where delegation is adopted, including clear reporting mechanisms.</li> </ul>

Ref	Skills:	A person who works with people with Long Term Conditions must be able to:
S5.4	Exercise delivery	<ul style="list-style-type: none"> <li>• Deliver 1:1 and/or group based physical activity classes that are tailored to the need of the individual to improve jointly identified biopsychosocial health and well-being goals and outcomes and adapt and review to support changes such as progression, regression and maintenance according to the individual's needs. Outcomes include:               <ul style="list-style-type: none"> <li>- Function.</li> <li>- Strength.</li> <li>- Balance.</li> <li>- Bone density.</li> <li>- Cardio-respiratory fitness.</li> <li>- Fatigue.</li> <li>- Well-being.</li> <li>- Social-isolation.</li> </ul> </li> <li>• Provide opportunities for social interaction both before/after and during the exercise component.</li> </ul>
S5.5	Education and lifestyle advice	<ul style="list-style-type: none"> <li>• Provide education or advice at an appropriate level both for individuals and in groups using appropriate language underpinned by evidenced based health and lifestyle messaging and delivered in a non-judgemental manner.</li> </ul>
S5.6	Monitoring clients	<ul style="list-style-type: none"> <li>• Monitor individual participants or groups by selecting appropriate methods and work towards them being able to understand and self-manage the intensity or level of difficulty or challenge they work at.</li> <li>• Monitor changes to individual's circumstances, both physical and emotional improvements and/or decline, review and follow up appropriately: e.g. advanced cancer or spinal cord injury.</li> </ul>
S5.7	Managing participant safety	<ul style="list-style-type: none"> <li>• Ensure the venue, equipment and activity are suitable for people with long term conditions and take account of mitigating actions from the risk assessment(s) process.</li> <li>• Manage participant safety and record any incidents according to the relevant operating procedures.</li> <li>• Respond quickly and effectively to a medical emergency.</li> <li>• Determine safety considerations in relation to physical activity, taking into account all relevant health and well-being information.</li> <li>• Adapt and tailor exercise appropriately based on presenting signs and symptoms of risk factors for long term conditions according to the needs of the individual.</li> <li>• Liaise with health care and social care professionals where there are considerable concerns for a participant's safety and refer back where necessary.</li> </ul>

## 6. Professional practice

Ref	Knowledge and understanding:	A person who works with people with Long Term Conditions must:
K6.1	Continuing professional development	<ul style="list-style-type: none"> <li>• Understand the importance, benefits and mechanisms of keeping technical knowledge and skills up to date through a variety of both traditional and innovative learning activities and reflective practice. Examples include:               <ul style="list-style-type: none"> <li>- Health policy and guidance and implications for practice.</li> <li>- Peer to peer mentoring and action learning sets.</li> <li>- Strategies for emotional resilience for working with vulnerable people and/or with people with long term conditions, advanced stages of a condition or those who are palliative.</li> <li>- On-going learning and supervision for communication techniques including motivational interviewing, and behaviour change.</li> </ul> </li> <li>• Understand both the scope of industry requirements and how to access relevant and recognised continuing professional development (CPD) activities.</li> </ul>
K6.2	Professional boundaries	<ul style="list-style-type: none"> <li>• Understand the professional boundaries that apply including the distinction between the roles and responsibilities of clinicians, referring professionals, nutritionists/dieticians and exercise practitioners and working within own knowledge and competence based on qualifications and experience and where to access clinical advice or personal support when required.</li> <li>• Understand the role of the practitioner and the distinction between management/coordinator roles including interdependencies.</li> <li>• Understand the industry code of conduct, ethical issues and other associated codes of conduct: e.g. Association for Nutrition (AfN) relevant to the role in terms of both relationships with clinicians, nutritionists/dieticians, referring professionals and participants.</li> </ul>
Ref	Skills:	A person who works with people with Long Term Conditions must be able to:
S6.1	Continuing professional development	<ul style="list-style-type: none"> <li>• Ensure relevant individual CPD opportunities are identified and knowledge and experience are updated regularly and in-line with industry requirements.</li> <li>• Apply reflective practice on a regular basis.</li> </ul>
S6.2	Professional boundaries	<ul style="list-style-type: none"> <li>• Work within professional boundaries and ensuring appropriate insurance is in place for the target audiences.</li> <li>• Adhere to the industry standard code of conduct and ethical practice during decision making processes and delivery of exercise.</li> <li>• Provide education or advice on nutrition within the boundaries set out by the Association for Nutrition in the 'Competence Framework for Nutrition for Fitness and Leisure' including for 'specialist instructors working with vulnerable groups'.</li> </ul>

## 7. Glossary

<b>Aetiology</b>	The cause or set of causes, or manner of causation of a disease or condition.
<b>Biopsychosocial</b>	Concerned with the biological, psychological, and social aspects in contrast to the strictly biomedical aspects of disease.
<b>Carer</b>	Anyone who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid.
<b>Care pathway</b>	A term to describe what needs to happen, when, where, for whom and by whom.
<b>Comorbidity</b>	The presence of one or more additional diseases or disorders co-occurring with (that is, concomitant or concurrent with) a primary disease or disorder.
<b>Clinical governance</b>	A system through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.
<b>Delegated responsibility</b>	The advance exercise practitioner has triaged the participant and signposted to a specific activity and has oversight of the exercise programme.
<b>Epidemiology</b>	The study and analysis of the distribution and determinants of health and disease conditions in defined populations.
<b>High(er) Risk</b>	Individuals with risk factors or a combination of risk factors that place them at greater risk (defined by clinical assessment) of developing an LTC: e.g. Pre-diabetics, osteopenia, risk of cardiovascular disease, metabolic syndrome.
<b>Inclusive</b>	Embracing all people irrespective of race, gender, disability, medical or other need.
<b>Long term conditions</b>	Also known as a diagnosed chronic disease or chronic health condition.
<b>Multi-morbidity</b>	Multiple LTCs.
<b>Pathophysiology</b>	The physiological processes or mechanisms whereby conditions develop and progress.
<b>Person-centred</b>	Is about focusing care on the needs of the individual. Ensuring that people's preferences, needs and values guide clinical decisions, and providing care that is respectful of and responsive to them. (Health Education England).
<b>Pharmacology</b>	The branch of biology concerned with the study of drug action.
<b>Rehabilitation</b>	The action of restoring someone to health or normal life through training and therapy after illness.
<b>Self-referral</b>	A client gaining access to services by themselves and not involving a clinical referral.
<b>Social prescribing</b>	Sometimes referred to as community referral, is a means of enabling GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services. (Kings Fund).
<b>Risk factors</b>	Any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease.

<b>Treatment</b>	The application of medicines or surgery to a patient
<b>UK and national health organisations</b>	<ul style="list-style-type: none"> <li>• Department of Health and Social Care (England).</li> <li>• Welsh Government Health and Social Services.</li> <li>• Department of Health (NI).</li> <li>• Scottish Government Health and Social Care.</li> </ul>
<b>Wider determinants</b>	Also known as social determinants, a diverse range of social, economic and environmental factors which impact on people's health.

## References and relevant publications.

- BHF Cardiovascular Disease Statistics 2017
- Barnett K, Mercer SW, Norbury M, Watt G, Wyke S, Guthrie B (2012). Research paper. [Epidemiology of multimorbidity and implications for health care, research, and medical education: a cross-sectional study](#) *The Lancet online*
- The Kings Fund (2013) Time to think differently
- Richmond Group of Charities, (2018) Multi-morbidity understanding the challenge
- NICE Public Health Guidance 49 (2013) Individual Behaviour Change
- NICE Public Health Guidance 54 (2015) Exercise on Referral
- The Department of Health and Social Care. [Start active, stay active: report on Physical Activity in the UK.](#) (2016). Includes Chief Medical Officers (CMO) guidelines.



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- Robert Sage: NHS Wales
- Jenny Carter: Erewash Borough Council. (CIMSPA employer partner)
- Jeannie Wyatt-Williams: Welsh LGA
- Donna Williamson: Everybody Sport and Recreation (CIMSPA employer partner)
- Flora Jackson: NHS Health Scotland
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- Sam Kirk: Oxley Sports Centre (CIMSPA employer partner)
- Michelle Roberts: The Richmond Group of Charities
- Bex Townley: Later Life Training (CIMSPA skills development partner)
- Simon Stevens: Swim England Qualifications (CIMSPA awarding organisation partner)
- Andrew Power: The Wright Foundation (CIMSPA skills development partner)
- Elaine McNish: Swim England
- Tom Burton: Sport England
- Sion Kitson: Sport England

### **CIMSPA Health Partners engaged in the consultation process.**

- Michael Brannan: Public Health England.
- Sarah Ruane: Sport England.
- Tom Burton: Sport England.
- Beelin Baxter: Department of Health
- Michelle Roberts: Richmond Group of Charities
- Jess Kuehne: Centre for Aging Better
- Caitlin Thomas: GLL
- Jeannie Wyatt Williams: Welsh LGA

- Sarah Simmonds: Active Luton
- Zoe Williams: Royal College of General Practitioners
- Roger Wolman: Royal College of Physicians
- Dane Vishnubala: British Association of Sport and Exercise Medicine
- Priya Dasoju: Chartered Society of Physiotherapists
- Paul Sanderson: National Centre for Sport and Exercise Medicine
- Hamish Reid: Moving Medicine (FSEM)
- Louise Barnett: Royal Borough of Greenwich
- Kenny Butler: ukactive
- Anne Elliott: Middlesex University
- Rob Wallis: Walking for Health
- John Etherington: Faculty of Sport and Exercise Medicine
- Tom Holden: British Association of Sport and Exercise Science