

Access to Physical Activity Process

Fitness Facility and Program Assessment

Use this template to assess a local fitness facility or program (e.g. private fitness club/facility, community center, local school, aerobics class, etc.) It will be necessary to interview the facility and/or program manager.

Review results with the health director and/or health promotion coordinator.

Site/Location/Country:

Facility or Program Name:

Interview/Assessment Completed By:

Date:

The facility must provide equipment and individual consultation to address each of the following fitness components:

- Cardiovascular fitness/endurance
- Flexibility
- Muscular strength and endurance

Comments/Observations:

PERSONNEL

The facility personnel must have the following certifications/credentials, respectively:

- Fitness Manager/Supervisor: (need to check A or B):
 - A. Four year degree (or equivalent) in exercise physiology or a related exercise science field.
 - B. Minimum five years experience in exercise prescription AND certification from one of the following:
 - ACE (American Council on Exercise)
 - ACSM (American College of Sports Medicine)
 - AFAA (Aerobic & Fitness Association of America)
 - AFPA (American Fitness Professionals Association)

- NETA (National Exercise Trainers Association)
- NCSF (National Council on Strength and Fitness)
- NSCA (National Strength and Conditioning Association)
- NFPT National Federation of Professional Trainers
- The Cooper Institute
- W.I.T.S (World Instructor Training Schools)
- BOC (Board of Certification)
- YMCA/YWCA
- ISSA International Sports Sciences Association
- CAN-FIT-PRO (Canadian Fitness Professional Association)
- NASM (National Academy of Sports Medicine)
- Global equivalent (Please record local/country/national certification and review with appropriate manager). _____

Fitness Specialists/Floor Personnel/Programmers: (need to check A or B):

- A. Four year degree (or equivalent) in exercise physiology or a related exercise science field.
- B. Minimum two years experience in exercise prescription AND certification from one of the associations listed above.

Group Exercise Instructors (need to check at least one):

- ACE (American Council on Exercise)
- ACSM (American College of Sports Medicine)
- AFAA (Aerobic & Fitness Association of America)
- The Cooper Institute
- Can-Fit Pro (Canadian Fitness Professional Association)
- YMCA/YWCA
- Global equivalent (Please record local/country/national certification and review with appropriate manager). _____

All instructors and support staff maintain current CPR/AED and First Aid certifications.

Investigate specialty programs. All “specialty” program instructors have current certifications/credentials in those designated specialty areas. (Please record certification and review with the appropriate manager).

Comments/Observations:

FACILITY AND OPERATIONS

The facility meets the following **SAFETY** requirements:

- The facility must ensure that all staff involved in group or personal exercise instruction have professional liability insurance or are covered by the facility’s liability policy.
- The facility provides an on-going maintenance program for all equipment. (Have staff explain and provide documentation of maintenance program).
- Facility appearance is clean and well maintained.
- Emergency contact numbers are displayed and accessible to staff and members at all times.
- Emergency plan(s) is displayed.
- Relevant signage and markers are displayed for easy access/exit to and from the facility.
- Basic first-aid equipment and materials are readily accessible.
- Exercise guidelines (warm-up, perceived exertion, cool-down, stretching) are posted.
- Water supply is in close proximity to the exercise equipment and all programming areas.
- Facility must follow all federal, state and local codes and regulations regarding fire safety.

- The facility meets the following **PROGRAMMING** requirements:
- The facility uses a pre-participation screening process that is consistent with industry standard. For example, the PAR-Q (Physical Activity Readiness Questionnaire). Ask for a copy.
 - The facility has the ability and agrees to provide employee member participation data.
 - An orientation program is provided or, at a minimum, a physical walk-through of the facility is provided to all new members. Members that are new to exercise are provided with an orientation and individualized program.
 - A staff person is responsible for supervision of the exercise floor during all hours of operation.
 - Fitness center promotes individualized exercise prescription – emphasizing both cardiovascular fitness and strength training.
 - Fitness center ensures its fitness programmers continually work with participants, following-up on goals and attendance.
 - The facility ensures that “specialty” areas and programs (e.g. – nutrition, back health, prenatal conditioning) are instructed by professionals with certification in their given specialty area.
 - Fitness center has AT LEAST two (2) pieces of cardiovascular equipment (e.g. – treadmills, stair climbers) and a variety of strength training equipment.
 - There is no promotion or selling of weight loss/gain supplements or exercise equipment.

Comments:

If the facility or program does not comply with the above criteria, but may still provide value, contact the appropriate manager for assistance and consult.

Facility is acceptable

Facility not acceptable

ADDITIONAL FACILITY OR PROGRAM INFORMATION

Description of facility programs and services: (Have facility provide membership and programming brochures).

Address:

Phone:

Contact Person:

Membership Fees/Costs Information:

Document any discussions or opportunities for partnering:

- Reduced membership or corporate fees
- Specialty programming (e.g., nutrition consultation by certified dietician)
- Opportunity for facility staff to provide on-site programming
- Opportunities for community health programming

Are services covered by benefits?

Details:

Additional Observations, Information or Comments: