

# **NATIONAL SKILL QUALIFICATION FRAMEWORK QUALIFICATION FILE**

Version 6: Draft of 08 March 2016

## **CONTACT DETAILS OF THE BODY SUBMITTING THE QUALIFICATION FILE**

### **Name and address of submitting body:**

Beauty and Wellness Sector Skill Council  
Office No. 405-406, 4th Floor, DLF City Court,  
M.G. Road, Sikanderpur, Gurgaon-122002

### **Name and contact details of individual dealing with the submission**

**Name:** Ms. Annu Wadhwa

**Position in the organisation:** CEO

**Address if different from above:** Same as above

**Tel number(s):** 9810113991

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### **List of documents submitted in support of the Qualifications File**

1. Qualifications Pack
2. Industry Validations letters
3. Industry Endorsement tracker
4. Integrated Occupational Map
5. Summary Sheet

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## SUMMARY

<b>Qualification Title</b>	Personal Trainer
<b>Qualification Code</b>	QP BWS/Q3003
<b>Nature and purpose of the qualification</b>	<p>Nature of the qualification</p> <ul style="list-style-type: none"> <li>- a Qualification Pack (QP)</li> </ul> <p>The main purpose of the qualification</p> <ul style="list-style-type: none"> <li>- is to upgrade the skills of people already in fitness domain for better employability</li> </ul>
<b>Body/bodies which will award the qualification</b>	Beauty & Wellness Sector Skill Council (BWSSC)
<b>Body which will accredit providers to offer courses leading to the qualification</b>	Beauty & Wellness Sector Skill Council (BWSSC)
<b>Body/bodies which will carry out assessment of learners</b>	Confederation of Indian Industry (CII)
<b>Occupation(s) to which the qualification gives access</b>	Personal Trainer (Fitness Services)
<b>Licensing requirements</b>	N/A
<b>Level of the qualification in the NSQF</b>	Level 4
<b>Anticipated volume of training/learning required to complete the qualification</b>	<p>558 hours</p> <p>Optional NOS - Personal Trainer- Special population expert- 126 hours</p> <p>Optional NOS -Sports Conditioning Expert- 96 hours</p>
<b>Entry requirements and/or recommendations</b>	Class X preferred with training of level 3 Gym Assistant or course in personal training, CPR/ AED and experience of 0-12 months experience as a Gym Assistant
<b>Progression from the qualification</b>	Personal Training Manager (Level 5)
<b>Planned arrangements for the Recognition of Prior learning (RPL)</b>	<p>Currently Beauty &amp; Wellness Sector Skill Council (BWSSC) is doing the RPL assessments after covering learning hours of 20 hours and then followed by the assessments. The assessments are happening in online basis. There are three phases of assessments which is followed in all assessment process of different job roles-</p> <ol style="list-style-type: none"> <li>1. Theory- weightage 70%</li> <li>2. Practical- Weightage 30% (Hands on assessment + Viva)</li> </ol> <p>The theory questions are objective type with multiple choice option, out of which we have some pictorial questions also. VIVA questions are also</p>

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	based on the job role and the practical questions are assessed on the hands on performance.(Detailed Assessment Plan is attached in the folder)
<b>International comparability where known</b>	This Level 4 qualification compares with UK QP: Level 2 NOS Mapping is NA
<b>Date of planned review of the qualification.</b>	Post 10/02/2019

<b>Formal structure of the qualification</b>			
<b>Title and identification code of component.</b>	<b>Mandatory/ Optional</b>	<b>Estimated size (learning hours)</b>	<b>Level</b>
BWS/N9001 Prepare and maintain work area	<b>Mandatory</b>	<b>12</b>	<b>3</b>
BWS/N3003 Carry out health screening and fitness assessment of the client	<b>Mandatory</b>	<b>16</b>	<b>4</b>
BWS/N3004 Plan and Conduct personal training	<b>Mandatory</b>	<b>50</b>	<b>4</b>
BWS/N3134 Collect, integrate and analyze nutritional, health and lifestyle data of physically active clients	<b>Mandatory</b>	<b>160</b>	<b>4</b>
BWS/N3135 Develop and implement personalised nutrition and lifestyle programme for physically active clients	<b>Mandatory</b>	<b>240</b>	<b>4</b>
BWS/N3005 Motivate the clients	<b>Mandatory</b>	<b>50</b>	<b>4</b>
BWS/N9002 Maintain health and safety of workplace	<b>Mandatory</b>	<b>18</b>	<b>3</b>
BWS/N9003 Create a positive impression at the workplace	<b>Mandatory</b>	<b>12</b>	<b>3</b>
BWS/N3021 Plan and conduct session for improving Athletic performance of client	<b>Optional</b>	<b>96</b>	<b>4</b>
BWS/N3022 Enable minimization of Athletic Injuries & Conduct Fitness Assessment for Sports related activities of the client	<b>Optional</b>	<b>30</b>	<b>4</b>
BWS/N3014 Plan and conduct personal training for clients from different population groups	<b>Optional</b>	<b>96</b>	<b>4</b>

Please attach any document giving further detail about the structure of the qualification – e.g. a Curriculum Document or a Qualification Pack.

Give the titles and other relevant details of the document(s) here. Include page references showing where to find the relevant information.

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## **SECTION 1** **ASSESSMENT**

### **Body/Bodies which will carry out assessment:**

Confederation of Indian Industry (CII)

### **How will RPL assessment be managed and who will carry it out?**

Give details of how RPL assessment for the qualification will be carried out and quality assured.

The RPL assessment will be carried out through pre assessment, identifying the skills gaps, provide bridge training to cover the competency gap and then conduct final assessment of the candidates

### **Describe the overall assessment strategy and specific arrangements which have been put in place to ensure that assessment is always valid, reliable and fair and show that these are in line with the requirements of the NSQF.**

Assessment is done through third parties who are affiliated to B&WSSC as Assessment Body. Assessors are trained & certified by B&WSSC through Training of Assessors program. The assessment involves two processes. The first process is gathering the evidence of the competency of individuals. The second part of the assessment process is the judgement as to whether a person is competent or not. The assessment plan contains the following information:

The assessments are happening in online basis. There are three phases of assessments which is followed in all assessment process of different job roles-

- Theory- weightage 70%
- Practical+ VIVA- Weightage 30% (Hands on assessment + Oral questioner)

The theory questions are objective type with multiple choice option, out of which we have some pictorial questions also. VIVA questions are also based on the job role and the practical questions are assessed on the hands on performance.

- Criteria on decision making & process manual is attached in the folder (Attachment name – Assessment Process)

Please attach any documents giving further information about assessment and/or RPL.

Give the titles and other relevant details of the document(s) here. Include page references showing where to find the relevant information.

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## ASSESSMENT EVIDENCE

Complete a grid for each component as listed in “Formal structure of the qualification” in the Summary.

*NOTE: this grid can be replaced by any part of the qualification documentation which shows the same information – i.e. Learning Outcomes to be assessed, assessment criteria and the means of assessment.*

**Title of Component: Personal Trainer**

### CRITERIA FOR ASSESSMENT OF TRAINEES

**Job Role** Personal Trainer

**Qualification Pack** BWS/Q3003

**Sector Skill Council** Beauty & Wellness

#### Guidelines for Assessment

1. Criteria for assessment for each Qualification Pack will be created by the Sector Skill Council. Each Performance Criteria (PC) will be assigned marks proportional to its importance in NOS. SSC will also lay down proportion of marks for Theory and Skills Practical for each PC
2. The assessment for the theory part will be based on knowledge bank of questions created by the SSC
3. Individual assessment agencies will create unique question papers for theory part for each candidate at each examination/training centre (as per assessment criteria below)
4. Individual assessment agencies will create unique evaluations for skill practical for every student at each examination/training centre based on this criteria
5. To pass the Qualification Pack, every trainee should score a minimum of 60% in aggregate
6. In case of successfully passing only certain number of NOS's, the trainee is eligible to take subsequent assessment on the balance NOS's to pass the Qualification Pack

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		Marks Allocation			
Assessment outcomes	Assessment Criteria for outcomes	Total Marks	Out Of	Theory	Skills Practical
<b>1. BWS/N9001 (Prepare work area)</b>	PC1. ensure that environmental conditions are suitable for the client and the treatment to be carried out in a hygiene and safe environment	<b>100</b>	15	3	12
	PC2. select suitable equipment and products required for the treatment		19	5	14
	PC3. set up the equipment and prepare the products for treatments in adherence to the organization procedures and product/equipment guidelines		20	4	16
	PC4. familiarize members with the safe workings of machines		12	2	10
	PC5. explain contraindicated exercises/postures with the members		14	4	10
	PC6. evaluate trainers involvement with the members		10	2	8
	PC7. store records, materials and equipment securely in line with the organization's policies		10	2	8
			<b>100</b>	<b>22</b>	<b>78</b>
<b>2.BWS/N3003 (Carry out health screening and fitness assessment of the clients)</b>	PC1. build strong rapport with the clients	<b>100</b>	4	1	3
	PC2. collect data like lifestyle, time investment, medical background, exercise history, etc.		6	1	5
	PC3. ensure adequate communication to the clients in terms of maintaining confidentiality of their personal data collected		4	1	3

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PC4. discuss in various lifestyle and eating preferences and their impact on client's body as well as the benefits from an exercise programme	10	2	8
PC5. basis client's exercise preferences and lifestyle, identify the barriers to clients achieving their exercise goals	4	1	3
PC6. finalize the short and long-term fitness goals of the client	10	2	8
PC7. basis the client's fitness requirements, suggest the appropriate exercises	10	2	8
PC8. identify the strategies to prevent drop out or relapse	4	1	3
PC9. discuss in detail with clients, the relationship of fitness assessment outcomes with exercise plan; also discuss the kind of information about a person's anatomy will be collected to perform fitness assessment	10	2	8
PC10. ensure the working and availability of equipment to carry out the planned assessments	10	2	8
PC11. conduct fitness assessments which primarily include anthropometrics (i.e. bmi, waist to hip ratio etc.), body composition, cardiovascular fitness and capacity, muscular strength, etc.)	10	2	8
PC12. understand the various person specific concerns/ problems and related safety considerations while conducting fitness assessments	4	1	3
PC13. analyze the fitness assessment outcomes to provide recommendations for the exercise plan	10	2	8
PC14. refer to the superior in case there are any concerns or requirements	4	1	3

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	of the clients which require expert advice				
			<b>100</b>	<b>21</b>	<b>79</b>
<b>3.BWS/N3004</b> <b>(Plan and conduct personal training)</b>	PC1. deploy the knowledge and understanding of various aspects of human anatomy and physiology while providing fitness related recommendations	<b>100</b>	3	0.5	2.5
	PC2. understand in detail various human body systems like circulatory system, musculoskeletal system, joints and bones, muscles, respiratory system etc. and impact of fitness programmes on their functioning		3	0.5	2.5
	PC3. identify the potential sources of injury and keep the same under consideration while devising fitness programme to a client		3	0.5	2.5
	PC4. evaluate the impact of exercise and its intensity on the energy levels of a client and provide requisite recommendations in terms of exercise plan		3	0.5	2.5
	PC5. basis the health assessment and detailed understanding of anatomy & physiology of the client's body, plan a range of exercises for client to achieve his/ her fitness goals considering aspects like muscular fitness, cardiovascular fitness, agility & flexibility, etc.		4	0.5	3.5
	PC6. as per the client's preferences, identify the appropriate training techniques		3	0.5	2.5
	PC7. identify and plan for availability of equipment needed for suitable exercises		3	0.5	2.5
	PC8. explain in detail the fitness goals and planned exercise schedule to client		3	0.5	2.5
	PC9. communicate the physical demands of the planned exercises to clients		3	0.5	2.5
	PC10. discuss with client on any observed concerns/		3	0.5	2.5



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changes/ modifications required in the plan				
PC11. provide information and demonstration of various warm up activities to the client and their importance		3	0.5	2.5
PC12. observe the client carrying out the exercises and ensure right usage of the fitness equipment to prevent any injuries		3	0.5	2.5
PC13. develop phase wise detailed activity chart in consultation with the client which is challenging as well as achievable and duly agreed by the client		3	0.5	2.5
PC14. provide clear instructions and demonstrations that are technically correct, safe and effective and ensure client is following them accurately without hurting himself/ herself or damaging the equipment		4	0.5	3.5
PC15. plan outcomes and stages of achievement during personal training and agree on a progressive timetable of sessions		3	0.5	2.5
PC16. discuss the methods of monitoring and evaluation of the performance of the client		3	0.5	2.5
PC17. ensure that all the exercises are integrated in a single plan and being deployed by the client to achieve his/ her fitness goals; in case, there are any concerns faced by client to perform any of the exercises, provide alternate options		5	1	4
PC18. monitor the client's exercises and adherence to the planned schedule as well as analyse the performance of client on a daily basis		3	0.5	2.5
PC19. progress or regress exercises according to clients' performance		3	0.5	2.5
PC20. motivate the clients for increasing their performance and ensuring		3	0.5	2.5

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	adherence to exercise; provide any related support to the clients in this regard			
	PC21. explain the function of various joints and muscles during exercises to the client and impact of exercises on them	3	0.5	2.5
	PC22. communicate the anatomical changes in the body of client due to training programme	3	0.5	2.5
	PC23. record the performance and progress of the client through personal training sessions	3	0.5	2.5
	PC24. provide information and demonstration of various cool down activities to the client and their importance as per the intensity and type of physical exercises of the client	3	0.5	2.5
	PC25. observe the client carrying out the exercises and ensure right usage of the fitness equipment to prevent any injuries	3	0.5	2.5
	PC26. explain in detail the linkage of progress of the client with the achievement of fitness goals	3	0.5	2.5
	PC27. identify the signs of strain/ over work outs and recommend the strategies for prevention of the same	3	0.5	2.5
	PC28. adapt the training programme as per the client body's response, lifestyle changes, preferences etc.; discuss and agree of changes with the client	3	0.5	2.5
	PC29. update the fitness goals in line with the adaptations introduced	3	0.5	2.5
	PC30. in collaboration with personal training manager, discuss specific issues like cultural or social barriers to exercise and personal training	3	0.5	2.5
	PC31. provide the data to personal training manager in order to improvise/ addition in the existing portfolio of services	3	0.5	2.5

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	PC32. obtain regular feedback from the client and analyse effectiveness of the personal training programme basis the feedback and goals achievement		3	0.5	2.5
			<b>100</b>	<b>16.5</b>	<b>83.5</b>
<b>4. BWS/N3134</b>  <b>(Collect, integrate and analyze nutritional, health and lifestyle data of physically active clients)</b>	PC1. screening activities- nutrition tools like sga etc.	<b>100</b>	1	0.25	0.75
	PC2. select suitable methods for assessment		1	0.25	0.75
	PC3. identify standards by which data will be compared		1	0.25	0.75
	PC4. be able to interpret the same		1	0.25	0.75
	PC5. identify possible problem areas for making nutrition diagnoses		1	0.25	0.75
	PC6. obtain current anthropometric measurements including height, weight and weight changes, body mass index(bmi), body measurements, body composition analysis		1	0.25	0.75
	PC7. height - measure height using standard procedure and equipment (stadio meter) / individual enquiry		1	0.25	0.75
	PC8. weight, perform weight measurement using calibrated weighing machine under standardized conditions as outlined by the organization (empty stomach, shoes removed, minimal or standard clothing, and fluid status). collect information regarding weight history / recent weight changes		1	0.25	0.75
	PC9. bmi calculate body mass index		1	0.25	0.75
	PC10. compare bmi with standards as per nationality and interpret weight status and		1	0.25	0.75

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	consequent risk of co-morbidities			
	PC11. body measurements use specialized techniques and / or equipment and trained personnel to obtain body measurements of different body parts including (waist circumference, hip circumference and other measures)	2	0.5	1.5
	PC12. calculate waist hip ratio and / or waist height ratio to ascertain central obesity	1	0.25	0.75
	PC13. body composition analysis ( bca) perform bca to measure the amount and distribution of body fat, fat free mass and water in the body of an individual using standard procedure and under standardized conditions as per equipment available ( bio-electrical impedance – 2 electrodes or 4 electrodes / dexa)	2	0.5	1.5
	PC14. review individual's recent and past biochemical reports to ascertain nutritional and health status	1	0.25	0.75
	PC15. assesse current and past information related to personal, medical, family and social history: assesses the following: <ul style="list-style-type: none"> <li>• personal history relative to age, sex, race/ethnicity, language, education, role in the family or organization</li> <li>• client or family disease states, conditions, and illnesses that may have nutritional impact:-</li> <li>• family history of and risk factors for medical conditions and chronic diseases (e.g., diabetes, cardiovascular disease, hypertension, osteoporosis,</li> </ul>	2	0.5	1.5

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<p>dyslipidaemia, obesity, disordered eating, behavioural/mental health issues)</p> <ul style="list-style-type: none"> <li>client history of metabolic and hormonal conditions (e.g., diabetes, metabolic syndrome, polycystic ovary syndrome, thyroid abnormalities, exercise-induced asthma) or chronic diseases</li> <li>client menstrual history and status</li> </ul>			
<p>PC16. medication and dietary and herbal supplement use, including prescription and over-the-counter medications, herbal preparations and complementary medicine products</p>	2	0.5	1.5
<p>PC17. appropriateness of dietary and supplement intake (e.g., macro- and micro nutrients, fiber, bioactive substances, alcohol, caffeine, herbals) and supplements for health and exercise/task-specific physical performance</p>	2	0.5	1.5
<p>PC18. assesses sport/dietary supplements for the risk of adverse events associated with sport/dietary supplement intake.</p>	2	0.5	1.5
<p>PC19. evaluates sport/dietary supplements (safety, legality, efficacy, quality, application to sport)</p>	2	0.5	1.5
<p>PC20. considers recommendations that may include adding, maintaining, changing, or discontinuing sport/dietary supplements</p>	2	0.5	1.5
<p>PC21. considers dose and timing of medication/supplements relative to health and</p>	2	0.5	1.5

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<p>issues such as meals, training, competition, travel schedules, and time-zone change</p>			
<p>PC22. identifies actual or potential drug/sport/dietary supplement/food interactions</p>	2	0.5	1.5
<p>PC23. Beliefs and attitudes including nutrition-related concepts, body image and preoccupation with food and weight, and readiness to change nutrition-related behaviours:-</p> <ul style="list-style-type: none"> <li>• general food and nutrition knowledge/skills/strategies</li> <li>• sport-specific food and nutrition knowledge, skills, and/or strategies</li> <li>• beliefs and attitudes (e.g., behavioural mediators or antecedents related to sports nutrition, intentions, readiness and willingness to change, appropriateness of goals and coping strategies)</li> <li>• misinformation regarding health and nutrition for exercise/physical performance, weight management, and culture of sport or organization)</li> </ul>	2	0.5	1.5
<p>PC24. behaviour: including client activities and actions which influence achievement of nutrition-related goals</p> <ul style="list-style-type: none"> <li>• various influences (e.g., language, sport/organizational culture, ethnicity, religion) that relate to the potential for behaviour change</li> </ul>	2	0.5	1.5

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	<ul style="list-style-type: none"> <li>• assess social history (socioeconomic status, social and medical support, cultural and religious beliefs, and social isolation/connection.)</li> </ul>			
	PC25. evaluate composition, adequacy and appropriateness of food, beverages and nutrient intake, meal and snack patterns, and food allergies and intolerances	1	0.25	0.75
	PC26. adequacy of nutrition intake to maintain energy balance under various conditions (e.g., rest, physical activity, exercise/ task-specific physical performance)	4	1	3
	PC27. total food and beverage intake (type, amount, and pattern of intake of foods and food groups, indices of diet quality, intake of fluids), including intakes before, during, and after exercise and special dietary and beverage patterns associated with exercise/task-specific physical performance	4	1	3
	PC28. client history of food allergies/intolerances (e.g., gluten sensitivity or intolerance, lactose intolerance)	1	0.25	0.75
	PC29. current and past use of alcohol, specialized diets, sport foods/drinks, energy drinks, functional foods, liquid meal replacements, sport/dietary supplements and/or ergogenic aids	4	1	3
	PC30. energy balance assessment using measures of energy intake/expenditure (e.g., intake via calorie counts), including changes in body weight or composition, medication use, health	4	1	3

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	status, or attempts at weight gain or loss.			
	PC31. measures of energy availability for adequacy of energy intake	2	0.5	1.5
	PC32. special energy and nutrient needs (e.g., energy shakes, vitamin/mineral supplements) for health, weight management, exercise/task-specific physical performance	4	1	3
	PC33. daily fluid needs for health, fitness, exercise/task-specific physical performance based on sweat rate, environmental conditions, fluid balance assessments (e.g., urine-specific gravity), and patterns of fluid replacement (e.g., during and after exercise/task-specific physical performance)	4	1	3
	PC34. changes in appetite or usual intake (e.g., as a result of weight control, alteration in body composition/physique, change in training volume/intensity, travel, unfamiliar environments, phase of sport/competition or task-specific physical training, medical conditions, illnesses and injuries, treatment and rehabilitation), and psychological issues (e.g., stress, trauma, depression)	4	1	3
	PC35. changes in usual intake as a result of dietary manipulation to optimize exercise/task-specific physical performance (e.g., tapers, carbohydrate loading, glycogen restoration, rehydration, recovery nutrition following pre competition weigh-in)	4	1	3



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<p>PC36. food and nutrient administration including current and previous diets and diet modifications, eating environment</p> <ul style="list-style-type: none"> <li>• diet experience (e.g., previously prescribed diets, previous diet/nutrition duration/ counselling, self-selected diets followed, dieting attempts, food allergies, food intolerances)</li> <li>• eating environment (e.g., location, atmosphere, companion, eats alone)</li> <li>• more complex nutrition issues (e.g., controlled type 1 diabetes, managed gastrointestinal diseases and conditions) related to food intake and clinical complications in individuals exposed to variable exercise/task-specific physical performance situations</li> <li>• most complex issues (e.g., newly diagnosed type 1 diabetes, uncontrolled diabetes, recovery from injury/illness) related to food intake and clinical complications</li> </ul>	4	1	3
<p>PC37. assess any barriers or conflicts (e.g., communication, transportation, financial) that interfere with food access, selection and preparation</p>	2	0.5	1.5
<p>PC38. physical activity and function, including physical activity, history of physical activity and exercise/task-specific physical performance, cognitive and physical ability to engage in specific tasks:-</p>	4	1	3

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	<ul style="list-style-type: none"> <li>• physical activity/exercise: history, consistency, frequency, duration, intensity, type (e.g., leisure and recreational activities, exercise training, competitive sport, training)</li> <li>• physical inactivity: television/screen time and other sedentary activity time</li> <li>• environmental conditions (e.g., cold, heat, humidity, altitude) and nutrition-related complications (e.g., hydration status, nutrient deficiencies)</li> <li>• history of exercise, training, task-specific physical performance, sports participation</li> <li>• training state/fitness level, competitive status, performance goals and results</li> <li>• additional exercise performed outside of scheduled exercise/task-specific physical performance training</li> <li>• effect of current and past dietary interventions on exercise/ physical performance in training and competition</li> </ul>			
PC39. exercise, training, or competition issues that alter appetite, ingestion, digestion, absorption, metabolism, utilization of nutrients, and/or eating behaviours and patterns		4	1	3
PC40. identify standards by which data will be compared		2	0.5	1.5
PC41. document the entire relevant data accurately and timely as per the organisation's policy		1	0.25	0.75

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<p>PC42. include the following information for quality documentation:-</p> <ul style="list-style-type: none"> <li>• date and time of assessment;</li> <li>• pertinent data collected and compared with standards</li> <li>• name / signature of staff member collecting the data</li> <li>• individual /client's perceptions, values, and motivation related to presenting problems</li> <li>• changes in client's level of understanding, food-related behaviours, and other outcomes for appropriate follow-up</li> <li>• discussion with individual and /or interdisciplinary team throughout assessment process</li> <li>• reason for discontinuation or referral, if appropriate</li> </ul>	2	0.5	1.5
<p>PC43. accurately interpret anthropometric data ,body composition analysis , dietary, health and medical data and biomedical profile against relevant standards</p>	2	0.5	1.5
<p>PC44. evaluate diet and exercise / physical activity</p>	2	0.5	1.5
<p>PC45. make judgement about potential impact of health and medical, social, psychological, economic and personal factors on nutrition and fitness</p>	2	0.5	1.5
<p>PC46. organize and cluster nutrition risk factors, complications, and assessment data to identify possible problem areas for determining nutrition and activity diagnoses</p>	1	0.25	0.75
<p>PC47. integrate assessed data in order to assign</p>	1	0.25	0.75

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	priorities for nutrition planning and lifestyle modification				
	PC48. define nutritional and activity problems / diagnosis as a prelude to planning management		1	0.25	0.75
			<b>100</b>	<b>25</b>	<b>75</b>
<b>5. BWS/N3135</b>  <b>(Develop and implement personalised nutrition and lifestyle programme for physically active clients )</b>	PC1. estimate the energy, macro nutrient and relevant micro-nutrient intake for elderly individuals from food intake collected during comprehensive nutritional assessment , using food composition tables	<b>100</b>	3	1	2
	PC2. evaluate physical activity/ exercise level levels		3	1	2
	PC3. estimate nutrient and fluid needs based on age, sex, medical condition, activity level, current nutritional state, medications, and goals of medical nutrition therapy		4	1	3
	PC4. use predictive equation for energy needs based on age, height, weight and activity level / determine energy needs from bmr values obtained by bca taking into account activity level		2	0.5	1.5
	PC5. determine protein requirement based on clinical condition and body weight in kilograms		2	0.5	1.5
	PC6. determine the split of energy from other macro-nutrients		2	0.5	1.5
	PC7. determine any specific micro-nutrient consideration		2	0.5	1.5
	PC8. compare the current nutrient intake with rdas for the age and sex or estimated requirements		2	0.5	1.5
	PC9. identify and describe an actual occurrence of, risk of or potential for developing a nutrition problem that can be		2	0.5	1.5

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	resolved or improved through nutrition intervention			
	PC10. derive the nutrition diagnosis from the assessment data <ul style="list-style-type: none"> <li>• identify and label the problem</li> <li>• determine etiology (cause, contributing risk factors)</li> <li>• cluster signs and symptoms (defining characteristics)</li> </ul>	2	0.5	1.5
	PC11. use clinical judgment (e.g., selects from a range of possibilities with consideration to health, fitness, exercise, task-specific physical performance, medical condition) when ranking activity diagnoses in order of importance and urgency for the client	4	1	3
	PC12. use clinical judgment and experience that reflects the significant differences between active individuals (e.g., beginner, competitive, or elite), others (e.g., , military service member, air hostess) and/or clinical conditions (e.g., newly diagnosed type 1 diabetes, uncontrolled type 1 diabetes, extreme environmental conditions, clinical complications) when ranking activity diagnoses in order of importance and urgency for the patient/client	2	0.5	1.5
	PC13. document the nutrition diagnosis in the pes format : problem (p), etiology (e), and signs and symptoms (s)	2	0.5	1.5
	PC14. re-evaluate and revise nutrition diagnoses when additional assessment data become available	2	0.5	1.5
	PC15. identify appropriate, purposefully planned actions designed with	3	1	2

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	<p>the intent of changing a nutrition-related behaviour, risk factor, environmental condition, or aspect of health status for a client with the goal to promote health and increase the capacity to exercise, train, improve recovery, promote training adaptation, and enhance exercise, and physical performance</p>			
	<p>PC16. prioritizing the nutrition diagnoses based on the severity of the problem, safety, client needs, likelihood that nutrition intervention/plan of care will influence problem, and client perception of importance. prioritization consideration may include:-</p> <ul style="list-style-type: none"> <li>• immediacy of the problem</li> <li>• client's available resources and support</li> <li>• readiness of patient/client to receive selected nutrition interventions</li> <li>• presence of medical conditions (e.g., diabetes, dyslipidaemia, depression, eating disorders, low bone mass, anaemia)</li> <li>• timing of the problem relative to training /competition plan, or duty schedule</li> </ul>	6	2	4
	<p>PC17. determining client-centered plan, goals, and expected outcomes in observable and measurable terms.</p>	2	0.5	1.5
	<p>PC18. setting smart (specific, measurable, achievable, realistic and time bound) short term and long term goals in collaboration with client and other members of health care team</p>	2	0.5	1.5

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	<p>PC19. selecting appropriate intervention. considerations for the intervention plan may include:-</p> <ul style="list-style-type: none"> <li>• intervention to address current issues (e.g., fatigue, dehydration, muscle cramping, inadequate recovery, exercise, task-specific physical performance improvement ,diarrhoea and other gastrointestinal issues; illness; injury; disordered eating; dietary and sports/dietary supplement use; or other clinical issues)</li> <li>• identification of barriers to successful implementation (e.g., client compliance, food availability and preparation issues, financial issues, regulations of sport governing bodies and associations, organization policies, situations in occupational settings, influence of team - athlete-coach-family dynamics)</li> <li>• address issues related to off-season/transition weight change, detraining, and scheduled and unscheduled breaks in training, such as holiday, and extended travel</li> </ul>	8	3	5
	<p>PC20. develops the nutrition prescription based on scientific evidence, best practices, and professional experience considering the educational needs of the client, constraints such as time (e.g., exercise training, competition, recovery,</p>	6	2	4

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	traveling), finances, ability to store and prepare food			
	PC21. define time and frequency of care including intensity, duration, and follow-up	2	0.5	1.5
	PC22. initiates and individualizes the nutrition intervention/plan of care	2	0.5	1.5
	PC23. implements, initiates or modifies orders for diet, nutrition supplements, dietary supplements, food texture modifications for dentition or individual preferences, nutrition-related laboratory tests and medications, and nutrition education and counselling consistent with competence and approved clinical privileges an organizational policy	6	2	4
	PC24. advise the use of dietary supplements, sports and functional foods (e.g., portion or dosage adjustments based on energy needs or laboratory results, addition of new dietary supplements, sports foods functional foods or modifications for fluid intake) consistent with organization policy	6	2	4
	PC25. use appropriate goal setting and behaviour change strategies and techniques to facilitate self-management and self-care	3	1	2
	PC26. follows up and verifies that nutrition intervention/plan of care is occurring	2	0.5	1.5
	PC27. communicates with the interdisciplinary or multidisciplinary team to verify progress and adjust strategies	2	0.5	1.5
	PC28. adjusts nutrition intervention/plan of care	2	0.5	1.5



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	strategies, if needed, as response occurs				
	PC29. use a variety of educational approaches, tools, and materials as appropriate		3	1	2
	PC30. adapt nutrition educational tools to individualized learning styles and method of communication and to the culture of the organization		3	1	2
	PC31. adjust nutrition intervention (e.g., energy balance, macro- and micronutrient needs, hydrations guidelines) according to training/competition plan		6	2	4
	PC32. maintain clear and concise records, in accordance with the organization's policy <ul style="list-style-type: none"> <li>• date and time of consultation</li> <li>• specific treatment goals and expected outcomes</li> <li>• recommended interventions</li> <li>• adjustments to the plan and justification</li> <li>• client receptivity and comprehension</li> <li>• barriers to change</li> <li>• other information relevant to providing care and monitoring progress over time</li> <li>• plans for follow-up and frequency of care</li> <li>• rationale for discontinuation or referral if applicable</li> <li>• timely update the records</li> <li>• maintain statistics and other reports required of the organization</li> </ul>		2	0.5	1.5
			<b>100</b>	<b>30</b>	<b>70</b>
<b>6.BWS/N3005 (Motivate the clients)</b>	PC1. observe the clients' exercise pattern and his/her attitude towards exercise to determine	<b>100</b>	6	2	4

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	the level of readiness towards following the plan				
	PC2. identify and articulate the client's needs and preferences for a fitness programme		10	2	8
	PC3. communicate in detail the benefits to be reaped by client through this programme		6	2	4
	PC4. identify various options of incentives and rewards available for the clients to follow their exercise plan		10	2	8
	PC5. ensure on a regular basis that the programme is in line with the client's liking and preferences as well as giving results to the client; modify the plan, in case, client is not getting the desired results		10	2	8
	PC6. identify perceived barriers to clients for following the exercise plan and discuss the way forward with clients to reduce these		6	2	4
	PC7. in collaboration with clients, devise a long term strategy to adhere to exercise plan; collaborate to develop mutual trust, openness and a willingness to take responsibility for their own fitness and related lifestyle changes		10	2	8
	PC8. support the clients to develop their own motivational strategies for adhering to the exercise plan		6	2	4
	PC9. use influencing skills and personal attitudes to positively influence clients for adhering to the plan		10	2	8
	PC10. apply a variety of motivational techniques when training the clients		6	2	4
	PC11. deploy effective verbal and nonverbal communication skills when instructing clients		8	2	6

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	PC12. take care of the client by monitoring his/ her performance regularly and provide feedback on a regular basis		6	2	4
	PC13. identify on-going barriers to continuation of long term exercise and provide tips/ recommendations as and when required		6	2	4
			<b>100</b>	<b>26</b>	<b>74</b>
<b>7.BWS/N9002 (Maintain health and safety at the workplace)</b>	PC1. set up and position the equipment, chemicals, products and tools in the work area to meet legal, hygiene and safety requirements	<b>100</b>	10	3	7
	PC2. clean and sterilize all tools and equipment before use		10	3	7
	PC3. maintain one's posture and position to minimize fatigue and the risk of injury		10	3	7
	PC4. dispose waste materials in accordance to the industry accepted standards		12	2	10
	PC5. maintain first aid kit and keep oneself updated on the first aid procedures		15	3	12
	PC6. identify and document potential risks and hazards in the workplace		10	3	7
	PC7. accurately maintain accident reports		10	3	7
	PC8. report health and safety risks/ hazards to concerned personnel		10	3	7
	PC9. use tools, equipment, chemicals and products in accordance with the organization's guidelines and manufacturers' instructions		13	3	10
			<b>100</b>	<b>26</b>	<b>74</b>
<b>8. BWS/N9003 (Create a positive impression at the workplace)</b>	PC1. maintain good health and personal hygiene	<b>100</b>	8	2	6
	PC2. comply with organisation's standards of grooming and personal behaviour		9	3	6

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PC3. meet the organisation's standards of courtesy, behaviour and efficiency
PC4. stay free from intoxicants while on duty
PC5. wear and carry organisation's uniform and accessories correctly and smartly
PC6. take appropriate and approved actions in line with instructions and guidelines
PC7. record details related to tasks, as per procedure
PC8. participate in workplace activities as a part of the larger team
PC9. report to supervisor immediately in case there are any work issues
PC10. use appropriate language, tone and gestures while interacting with clients from different cultural and religious backgrounds, age, disabilities and gender
PC11. communicate procedure related information to clients based on the sector's code of practices and organisation's procedures/ guidelines
PC12. communicate role related information to stakeholders in a polite manner and resolve queries, if any
PC13. assist and guide clients to services or products based on their needs
PC14. report and record instances of aggressive/ unruly behaviour and seek assistance
PC15. use communication equipment (phone, email etc.) as mandated by your organization
PC16. carry out routine documentation legibly and accurately in the desired format

5	1	4
6	1	5
6	1	5
6	2	4
5	2	3
5	1	4
3	1	2
7	2	5
7	2	5
7	2	5
4	1	3
4	1	3
4	1	3
4	1	3

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	PC17. file routine reports and feedback		4	1	3
	PC18. maintain confidentiality of information, as required, in the role		6	2	4
			<b>100</b>	<b>27</b>	<b>73</b>
<b>OPTIONAL NOS -Personal Trainer- Special population expert</b>					
<b>1. BWS/N3021 (Plan and conduct session for improving athletic performance of the client)</b>	PC1. study in depth and apply various principles of human anatomy, control of skeletal muscles by nervous system and various muscle groups with their motion patterns and motion ranges	<b>100</b>	3.5	0.5	3
	PC2. coach athlete to increase speed <ul style="list-style-type: none"> <li>• during the off-season, athletes should perform speed training on tuesdays and thursdays and lift on mondays, wednesdays, and fridays. speed technique workouts should also be performed twice per week during the in-season</li> <li>• athletes should be tested for speed twice per month on either a 40-yard (37-meter) or a 20-yard (18-meter) sprint.</li> <li>• record the times so that the progress can be tracked</li> <li>• video analysis is a great way to learn precisely what needs work, it heightens the athlete's awareness of proper sprinting technique</li> <li>• athletes should have about 30 seconds of rest between sprints so that they are breathing easily before their next sprint.</li> <li>• perform flexibility training six times per week. to improve speed, one must stretch correctly.</li> </ul>		10	2	8

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<ul style="list-style-type: none"> <li>• perform plyometric twice per week, minimum</li> <li>• perform parallel squat.</li> <li>• perform the straight-leg deadlift to strengthen and stretch the gluteus and hamstrings at the same time</li> </ul>			
<p>PC3. coach athlete to increase strength</p> <ul style="list-style-type: none"> <li>• start the workouts with barbell exercises</li> <li>• the squat, deadlift, bench press, and shoulder press are the best strength-building exercises. they can be assistance lifts to complement the bench and shoulder press, keeping athlete's pulling muscles in balance with the pressing ones.</li> <li>• focus on raising and lowering the weights in a controlled manner, pausing for a one-second count at the top of the lift. using an arbitrary tempo can lessen tension on muscles or force to use varying amounts of weight, slowing the progress. the only way to be sure that one is getting stronger is if the loads consistently increase.</li> <li>• write down the exercises, sets, reps, and the fate of each workout. keep track of the best lifts and the most reps done with a certain weight on an exercise. constantly strive to improve those numbers</li> <li>• try to stick to three or four lifts per workout. keeping your workouts short helps you take advantage of hormonal surges. when too many exercises are done in a session, at least some of them get done</li> </ul>	10	2	8

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	<p>half. all that is needed is one main lift per workout (one of the big four), one or two assistance lifts (for keeping the body in balance and further strengthening the muscles that perform the main lift), and then core or specialty work at the end (ab exercises or some forearm or calf moves, depending on your goals). doing any more lessens your results.</p> <ul style="list-style-type: none"> <li>the athlete should rotate many different rep ranges in the workouts, but sets of five seem to offer the best blend of muscle size and strength gains.</li> <li>the main reason athlete's plateau and stop gaining strength is that they go too heavy for too long. one should do main lifts using 10% less than the most weight one can lift for the given rep range. increase the weight each session — but by no more than 10 pounds</li> <li>cardio is a must if one wants to be lean and healthy, but long-distance running or cycling increases levels of hormones that break down the muscle tissues. to get stronger while getting leaner, one must do cardio in short, intense bursts. go to a moderately steep hill and sprint to the top, then walk back down.</li> </ul>			
	<p>PC4. the two of the most important factors that combine to create an athlete's endurance profile are :-</p> <ul style="list-style-type: none"> <li>vo2 max, or the maximum rate at which an athlete's body can consume oxygen during exercise, is the</li> </ul>	8	1	7

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	<p>most popular measurement of aerobic capacity</p> <ul style="list-style-type: none"> <li>• lactate threshold, or the level of exertion at which lactate accumulates in the muscles. to improve lactate threshold—and therefore the ability to workout harder for longer periods of time</li> </ul>			
	<p>PC5. coach athlete to increase stamina</p> <ul style="list-style-type: none"> <li>• rest up-to go long and hard, athletes need fresh muscles</li> <li>• eat right-when it comes to exercise nutrition, carbs is the key, since the body uses glycogen for fuel. once glycogen runs out, the body turns to energy from other sources, and begins to burn fat. for extended cardio sessions, one should consume 30-60 grams of carbs every hour, depending on body weight. studies have also found a mix of carbs and protein can enhance endurance performance and reduce muscle damage</li> <li>• hiit- high intensity interval training—aka quick bouts of intense exercise—can help improve endurance in conjunction with traditional training. running for some stairs or trying a track workout for some speed. one should not ignore to get plenty of recovery after these workouts as they're very intense</li> <li>• add some strength-when it comes to endurance training, variation is important. resistance training can strengthen the bones, ligaments, tendons, and muscles—helping improve</li> </ul>	12	2	10



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	<p>overall fitness and helping with that final sprint to the finish. mix up aerobic exercise with kettle bells, dumbbell, and bodyweight exercises to help improve stamina</p> <ul style="list-style-type: none"> <li>• turn on the tunes- listening to music has been shown to boost endurance performance while walking and because of this the mind-body connection is especially strong among endurance athletes</li> <li>• work on what's weak- people often find their fitness niche and stick to it. instead, athletes should mix it up in order to build endurance</li> <li>• drink beet juice- one study found nitrate-rich beets may help increase stamina up to 16 percent by reducing oxygen intake in athletes</li> <li>• train smart- using the gradual adaption principle— that is, slowly and steadily increasing mileage and speed—is a great way to build endurance. there are ways to do this safely to avoid injury, from running on soft surfaces, to getting enough sleep and drinking tons of water.</li> </ul>				
	PC6. analyse various principles of group dynamics and group management		4	1	3
	PC7. conduct an exhaustive planning of exercises suitable for groups in a cycling set up		3.5	0.5	3
	PC8. conduct benchmarking study to identify various interesting options for making the training sessions more engaging		3.5	0.5	3
	PC9. identify common reasons for which athletes don't attend the training sessions and design interventions to address these reasons		3.5	0.5	3

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PC10. select exercises that will help athletes to achieve goals like muscular fitness, improve lung capacity, boost energy levels and increase metabolism.	3.5	0.5	3
PC11. select appropriate equipment's	3.5	0.5	3
PC12. anticipate the potential risks relevant to the programme and identify various mechanisms to minimize the same	3.5	0.5	3
PC13. identify and finalize the fitness objectives to be achieved through the session.	3.5	0.5	3
PC14. plan intensity and resistance assessment techniques	3.5	0.5	3
PC15. ensure catering to the requirements of different set of clients i.e. the beginners, experts etc.	3.5	0.5	3
PC16. obtain the information of group members in terms of their fitness profiles, training history, exercise preferences etc. in order to identify the needs and potential of the clients so as to encourage them for the participation in the group session	3.5	0.5	3
PC17. change teaching positions during the session to improve observation and ask questions	3.5	0.5	3
PC18. deploy effective verbal and visual communication while delivering the sessions	3.5	0.5	3
PC19. identify the risks associated and plans accordingly in order to overcome them by describing the correct demonstrations of the body movement and positions and also the expected outcome from it	3.5	0.5	3
PC20. the training sessions to be observed very carefully so that the	3.5	0.5	3

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	<p>proper feedback and instructing points can be provided in a timely manner in order to enhance the confidence and motivation of the clients</p>				
	<p>PC21. identify and address the issues/ concerns related to inappropriate behaviours of certain athlete/s</p>		3.5	0.5	3
			<b>100</b>	<b>16</b>	<b>84</b>
<p><b>2. BWS/N3022 (Enable minimization of Athletic Injuries &amp; Conduct Fitness Assessment for Sports related activities of the client)</b></p>	<p>PC1. to reduce athletic injuries , following can be of great help:-</p> <ul style="list-style-type: none"> <li>• take time off. plan to have at least 1 day off per week from a particular sport to allow the body to recover.</li> <li>• wear the right gear. players should wear appropriate and properly fitting protective equipment such as pads (neck, shoulder, elbow, chest, knee, and chin), helmets, mouthpieces, face guards, protective cups, and/or eyewear.</li> <li>• strengthen muscles. conditioning exercises during practice strengthen muscles used in play.</li> <li>• increase flexibility. stretching exercises before and after games or practice can increase flexibility. stretching should also be incorporated into a daily fitness plan.</li> <li>• use the proper technique. this should be reinforced during the playing season.</li> <li>• take breaks. rest periods during practice and games can reduce injuries and prevent heat illness.</li> <li>• play safe. strict rules against headfirst sliding (baseball and softball), and spearing</li> </ul>	<b>100</b>	30	5	25

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	<p>(football) etc. should be enforced.</p> <ul style="list-style-type: none"> <li>• stop the activity if there is pain.</li> <li>• avoid heat injury by drinking plenty of fluids before, during and after exercise or play; decrease or stop practices or competitions during high heat/humidity periods; wear light clothing.</li> </ul>				
	<p>PC2. educating the client about the benefit of fitness assessment</p> <ul style="list-style-type: none"> <li>• obtain scientific baseline measurements of your fitness levels</li> <li>• discover your movement style and how that affects your exercise programming</li> <li>• develop a personal awareness of your physical health</li> <li>• establish attainable goals and maintain accountability to them</li> <li>• recognize your potential risks of injury</li> <li>• increase your self-confidence in any workout environment</li> </ul>		30	5	25
	<p>PC3. fitness tests for specific fitness components. physical fitness is a complex, multifaceted phenomenon composed of:-</p> <ul style="list-style-type: none"> <li>• aerobic power- when developing a series of fitness tests, the sce should first refer to other coaching and sport science information. there they may find established tests which are proven for their own sport or at least suitable tests designed for similar sports that can be used with or without minor modifications. this will obviously greatly</li> </ul>		40	7	33

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	<p>reduce the time required to deliver an effective series of tests, while providing the coach with reassurance that the tests they are using are appropriate.</p> <ul style="list-style-type: none"><li>• anaerobic power and anaerobic capacity- tests for aerobic fitness must use the same type of exercise as the sport in which the individual participates and should generally last in the region of 8-15 minutes, any shorter and the increased anaerobic energy contribution may make the test less valid.</li><li>• muscular endurance- these tests may assess either dynamic muscular endurance (the capacity to repeat contractions) or static muscular endurance (the capacity to sustain a muscular contraction). to be specific to a sport it is important to ensure that the test uses the appropriate muscle groups, through relevant ranges of movement and at suitable speeds. often this may not be entirely feasible and therefore standard endurance exercises such as the sit-up and press-up may be used.</li><li>• muscular strength- tests for muscular strength should ensure that the muscles being assessed are appropriate and are used through a relevant range of movement, or in the case of static strength at a specific joint angle. in a laboratory setting, equipment such as dynamometers are often</li></ul>				
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	<p>used but selecting and using fitness tests. such as cricket the test may be conducted over the distance between the wickets. in order to ensure the test is even more specific, the test should be conducted in full clothing and kit.</p> <ul style="list-style-type: none"><li>• flexibility and joint mobility- field tests for flexibility/joint mobility range from simple “yes / no” assessments of whether the individual can perform a specific task, to the measurement of joint angles and ranges of movement (e.g. sit and reach test). by breaking down a movement into its component parts, the coach will be able to determine which joint movements are essential to performance and need to be assessed. for example, in hurdling good hip mobility and hamstring flexibility are necessary for good technique, whereas in team sports (e.g. football) an appropriate level of flexibility is required to reduce injury risk. when standardizing tests of flexibility/joint mobility the coach must pay close attention to, and note the position of all limbs, not just those being assessed. for example, if measuring hamstring flexibility in one leg the position of the other leg will influence the results. similarly, if measuring hip flexibility, movement in the back or pelvis may cause the measurement to be overestimated.</li></ul>				
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	<ul style="list-style-type: none"> <li>• speed and acceleration tests- in many sports the performers must change direction rapidly. this may be assessed using tests such as star runs, where the performer runs from a central marker to other markers (usually 6-12) situated around the central marker while being timed. alternatively a zigzag setup can be used to assess dodging/dribbling skills. the coach may wish to incorporate an assessment of turning ability and/or running forwards, backwards and sideways, as deemed applicable to the participants sport (e.g. football, hockey, tennis, etc)</li> </ul>				
			<b>100</b>	<b>17</b>	<b>83</b>
<b>OPTIONAL NOS - Sports Conditioning Expert</b>					
<b>1. BWS/N3014 (Plan and conduct personal training for clients from different population groups)</b>	PC1. deploy the knowledge and understanding of various aspects of human anatomy and physiology while providing fitness related recommendations	<b>100</b>	3	1	2
	PC2. understand in detail various human body systems like circulatory system, musculoskeletal system, joints and bones, muscles, respiratory system etc. and impact of fitness programmes on their functioning		4	1	3
	PC3. identify the potential sources of injury and risks as per the needs and case of the client and keep the same under consideration while devising fitness programme		3	1	2
	PC4. understand in detail the medical history of the client and ask for a doctor's recommendation		3	1	2

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	before planning for a fitness plan			
	PC5. evaluate the impact of exercise and its intensity on the energy levels of a client and consider the capacity of the client to perform the devised exercises basis his/ her background i.e. pre/post natal woman, disabled client etc.	4	1	3
	PC6. basis the health assessment and detailed understanding of anatomy & physiology of the client's body, plan a range of exercises for client to achieve his/ her goals	4	1	3
	PC7. as per the client's preferences, identify the appropriate training techniques	4	1	3
	PC8. identify and plan for availability of equipment needed for suitable exercises	3	1	2
	PC9. display sensitivity and empathy to the special set of clients which are emotionally vulnerable	4	1	3
	PC10. ensure proper communication and support to the attendants of special category clients (if applicable)	4	1	3
	PC11. explain in detail the planned exercise schedule to client	4	1	3
	PC12. communicate the physical demands of the planned exercises to clients	3	1	2
	PC13. discuss with client on any observed concerns/ changes/ modifications required in the plan	3	1	2
	PC14. observe the client carrying out the exercises and ensure right usage of the fitness equipment to prevent any injuries	3	1	2



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PC15. develop phase wise detailed activity chart in consultation with the client	3	1	2
PC16. provide clear instructions and demonstrations that are technically correct, safe and effective and ensure client is following them accurately without hurting himself/ herself or damaging the equipment	3	1	2
PC17. plan outcomes and stages of achievement during personal training and agree on a progressive timetable of sessions	3	1	2
PC18. discuss the methods of monitoring and evaluation of the performance of the client	4	1	3
PC19. ensure that all the exercises are integrated in a single plan and being deployed by the client to achieve his/ her goals; in case, there are any concerns faced by client to perform any of the exercises, provide alternate options	4	1	3
PC20. monitor the client's exercises and adherence to the planned schedule as well as analyse the performance of client on a daily basis	3	1	2
PC21. progress or regress exercises according to clients' performance	3	1	2
PC22. motivate the clients for ensuring adherence to plan; provide any related support to the clients in this regard	3	1	2
PC23. communicate the anatomical changes in the body of client due to training programme	4	1	3

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	PC24. identify the signs of strain/ over work outs and recommend the strategies for prevention of the same		4	1	3
	PC25. adapt the training programme as per the client body's response, lifestyle changes, preferences etc.; discuss and agree of changes with the client		4	1	3
	PC26. discuss specific issues like cultural or social barriers to exercise and personal training		3	1	2
	PC27. provide the data to fitness manager in order to improvise/ addition in the existing portfolio of services		3	1	2
	PC28. obtain regular feedback from the client and analyse effectiveness of the personal training programme basis the feedback and goals achievement		4	1	3
	PC29.obtain feedback from technical standpoint		3	1	2
			<b>100</b>	<b>29</b>	<b>71</b>

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<b>Means of assessment 1</b>
<b>Means of assessment 2</b>
<b>Pass/Fail</b>

## **SECTION 2** **EVIDENCE OF LEVEL**

Awarding bodies will enter a proposed NSQF level for the qualification in the Qualification File Summary. This section asks for the evidence on which that proposal is based. The evidence must refer to the level descriptors of the NSQF.

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## OPTION A

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
Process	<p>The job holder is expected to independently perform the health screening &amp; fitness assessment, perform the process of collecting/integration/ analysis of nutritional/health/lifestyle data of clients, perform the process of developing and implementing the personalised nutrition &amp; lifestyle programmes, along with maintaining work area, health &amp; safety at workplace and positive impression at the workplace. The job holder is even expected to optionally plan and conduct session for improving Athletic performance of the client by reducing his/her athletic injuries for regular clients &amp; from different population groups</p>	<p>The job holder is expected to understand the equipments/products used in different services and the process for providing the services. The role holder is expected to perform <b>work of familiar, predictable and routine nature within situations of clear choice</b>, such as preparing the regular equipment's, products and workplace ahead of sessions, deploying right methodologies and equipments to assess the health and fitness level of the client and identify his/ her preliminary fitness needs, on the basis of the results of client's fitness assessments finalize their fitness goals/monitor their progress/identify corrective action if needed and applying various motivational techniques to ensure that clients adhere to their goals.</p> <p>Since the job holder is expected to independently perform work of familiar, predictable and routine nature within situations of clear choice as mentioned above s/he can be placed at Level 4.</p> <p>This role requires the job holder to work in a familiar, predictable, routine of clear choice and the activities that s/he is expected to perform are not limited in range. For example, collect/integrate and analyze nutritional/health and lifestyle data of physically active clients, develop and implement personalized nutrition and lifestyle programme for physically active clients, motivate the clients. Therefore the job holder can't be placed at Level 3</p> <p>As the job holder is not required to exhibit well developed skill in Fitness services such as supervising the personal / group</p>	4

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
		trainers or manage club/ gym members or promote healthy lifestyle amongst the clients or consult and advise clients or manage & lead a team personal / group trainers, hence s/he does not qualify for Level 5.	
Professional knowledge	The job holder is expected to know the various types of products, equipment and methodology for conducting personal fitness trainings, knowledge of developing and implementing the personalized nutrition & lifestyle programmes along with health and safety regulations & guidelines.	<p>The job holder is expected to exhibit <b>factual knowledge of the field of</b> applicable legislations, fitness industry standards &amp; practices for health assessments and their interpretation, understanding of human psychology/ anatomy/physiology. S/he should possess factual &amp; detailed knowledge of fitness equipment like cardio machines, exercise balls, bars, steps, weights etc. knowledge various signs and symptoms of strain/ over training, role of intrinsic and extrinsic motivation in exercise behaviour and etc.</p> <p>Since all the above mentioned areas are related to factual knowledge in the field of Fitness services, the role qualifies for Level 4.</p> <p>The job holder is expected to know more than basic facts and principles, such as s/he develop and implement personalized nutrition and lifestyle programme for physically active clients keeping in all relevant context along with its proper documentation. Since this role requires factual knowledge of field of Fitness services, it cannot be pegged at level 3</p> <p>Further, since the job holder is not expected to be aware of principles/ general concepts in the field of Fitness services like principles of customer relationship management. Hence, it can't be pegged at level 5</p>	4

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
Professional skill	<p>The job holder is expected to plan and organize the regular trainings to be conducted for clients as well as keep a record of clients' bookings and schedule of services. Further, the job holder must be able to take the day to day decisions and solve problem/s at work. The job holder should also be able to critically analyse the information gathered about client/ product/ service/ others and arrive at a conclusion.</p>	<p>The job holder is expected to <b>recall and demonstrate practical skills, and s/he should be routine and repetitive in a narrow range of application</b> such as decision making ability <b>using appropriate rules &amp; tools</b>, documentation of customer's feedback, building customer relationships, being a problem solver by promptly referring to the superior in case there are any concerns or requirements of the clients which require expert advice etc. The job holder must also be able to periodically share knowledge acquired <b>using appropriate rules and tools</b> and practically apply learning from feedback and other sources <b>using quality concepts</b> to improve their output by obtaining regular feedback from the client and analyzing the effectiveness of the personal training programme basis the feedback and goals achieved.</p> <p>Since all the above mentioned professional skill are related to demonstrating practical skills, which are routine and repetitive in a narrow range and using appropriate rule and tool, the role qualifies for Level 4.</p> <p>The Job holder is expected to possess professional skills more than just demonstrating practical skills, which are routine and repetitive in a narrow range but also using appropriate rule &amp; tools such as advising the use of dietary supplements/ sports and functional foods (e.g., portion or dosage adjustments based on energy needs or laboratory results/ addition of new dietary supplements/ sports foods functional foods or modifications for fluid intake) consistent with organization policy. S/he is also expected to use quality concepts such as clarifying the client's expectation prior to the beginning of the Fitness services by doing proper probing &amp; para phrasing in regards to what the</p>	4

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
		<p>client can expect on the completion of the Fitness service. Hence, the job holder can't be placed at Level 3.</p> <p>Further since the job holder doesn't require to use cognitive skills to accomplish tasks and solve problems at the workplace such as resolving issues related to any of the Fitness products/ services/equipments being witnessed by the clients, etc. and that's why s/he can't be placed at level 5</p>	
Core skill	<p>The individual is expected to exhibit sound communication skills including effective client relationship establishment and maintenance, perform respective record maintaining work using basic arithmetic/ algebraic principles and possess basic understanding of environment to cater to the different requirements of varied types of clientele.</p>	<p>The job holder is expected to exhibit <b>written and verbal communication skills, with the minimum level of clarity expected), the skill of basic arithmetic and algebraic principles and basic understanding of the social, political and natural environment</b> such as knowledge of documenting call logs/reports by recording the performance and progress of the clients through personal training sessions, knowledge of drafting memos and e-mail providing work updates and enquiring relevant information's without language errors. The incumbent should keep oneself abreast about new fitness products and services and should know what to say, when to say &amp; how to say to the customers without using jargon, slang or acronyms by deploying effective verbal and nonverbal communication skills when instructing clients. Considering these outcomes the job holder can be placed at level 04</p> <p>Since all the above mentioned core skills are related to exhibiting effective oral &amp; written communication skills along with understanding of the social, political and natural environment such as clarifying the client's understanding and expectation prior to beginning with the Fitness services , therefore the role qualifies for Level 4.</p>	4

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
		<p>The Job holder expected to possess core skills more than just demonstrating minimum clarity in oral &amp; written communication such as communicate in detail the benefits to be reaped by client through this programme. Hence, the job holder can't be placed at Level 3.</p> <p>Further since the job holder doesn't require to use mathematical skill or skill of collecting &amp; organizing information such as reaching out to clients to capture feedback of the Fitness services experienced by the clients or analyzing the customer feedback score on personal/ group fitness services etc., that's why s/he can't be placed at level 5</p>	
Responsibility	<p>The individual is responsible to plan/ demonstrate and monitor exercises performed by the members. The Personal trainer collects information, plans gym programmes, monitors client progress and focuses on individual assigned clients in meeting their fitness goals through effective motivation and continuous adaptation.</p>	<p>The job holder is expected to take <b>responsibility for own work &amp; learning</b> such as to independently planning, demonstrating, supervising and monitoring exercises performed by the members. The trainer collects information, plans gym programmes, monitors client progress and focus on individual assigned clients in meeting their fitness goals through effective motivation and continuous adaptation. Overall a trainer maintains punctuality, personal neatness, cleanliness and, hygiene, at the work place.</p> <p>Given that the incumbent doesn't require any supervision while conducting the above mentioned Fitness services and can perform independently thus s/he can be placed at level 4</p> <p>As its evident from the above examples that the incumbent is fully responsible rather than just responsible in defined limit collecting/ integrating and analyzing nutritional/health and</p>	4



## NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

Title/Name of qualification/component: Personal Trainer		Level: 4	
NSQF Domain	Key requirements of the job role	How the job role relates to the NSQF level descriptors	NSQF Level
		<p>lifestyle data of physically active clients, develop and implement personalized nutrition and lifestyle programme for physically active clients. Also responsible for optionally to Plan and conduct session for improving Athletic performance of client and enable minimization of Athletic Injuries &amp; Conduct Fitness Assessment for Sports related activities of the client or to Plan and conduct personal training for clients from different population groups, therefore s/he can't even be placed at Level 3</p> <p>And since s/he is neither expected to be responsible of other work by managing &amp; leading a team of Gym Assistants, hence s/he can't be placed at level 5</p>	

## India-EU Skills Development project: Qualification File

### **SECTION 3** **EVIDENCE OF NEED**

**What evidence is there that the qualification is needed?**

Please refer to the attached list of job roles and occupations as per the attachment and their career paths as per Annexure 1, which have been derived through extensive industry interactions facilitated from four workshops, and site visits conducted and interaction with representatives from different organizations all over the country. Research was conducted in the Beauty & Wellness sector to capture revenue and manpower requirement estimates till 2022. The research provides the data that the discussed qualification is one of the critical roles in the sector. The details of statistics and research analysis are provided separately as a research analysis report.

**What is the estimated uptake of this qualification and what is the basis of this estimate?**

The increase in manpower requirements (as per projections) from 2013 to 2022 is approx. seven times for Spa and four times for Beauty & salons. For rest of the subsectors it is approx. twice the current size. All the numbers are provided in research analysis study

**What steps were taken to ensure that the qualification(s) does/do not duplicate already existing or planned qualifications in the NSQF?**

Under the DGT course curriculum of NCVT, in the Fitness sub-sector, there is one course listed –FIT601 Advance Fitness Training course (Certificate I) .The course listed is inactive. No other course in the NCVT ecosphere.

**What arrangements are in place to monitor and review the qualification(s)? What data will be used and at what point will the qualification(s) be revised or updated?**

The comments, feedback and suggestions were collected through interaction with industry during Jan'15 to Sep'15. The same will be compiled and justifiable changes will be incorporated in the next/updated version of the QP. This QP is set to be revised post 10/02/2019.

Please attach any documents giving further information about any of the topics above.

Give the titles and other relevant details of the document(s) here. Include page references showing where to find the relevant information.

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

## **SECTION 4** **EVIDENCE OF PROGRESSION**

**What steps have been taken in the design of this or other qualifications to ensure that there is a clear path to other qualifications in this sector?**

1. Discussing the growth trajectory within each occupation after studying organisational charts of various industry players across small, medium and large scale organizations.
2. Exploring various lateral career opportunities for the discussed qualification
3. Ensuring that there is a clear role up in terms of performance criteria qualification experience and skill requirement from lower NSQF Level to higher levels in the hierarchy.

Please refer to attached career path as per annexure 1 which clearly defines the career path.

Please attach any documents giving further information about any of the topics above.

Give the titles and other relevant details of the document(s) here. Include page references showing where to find the relevant information.

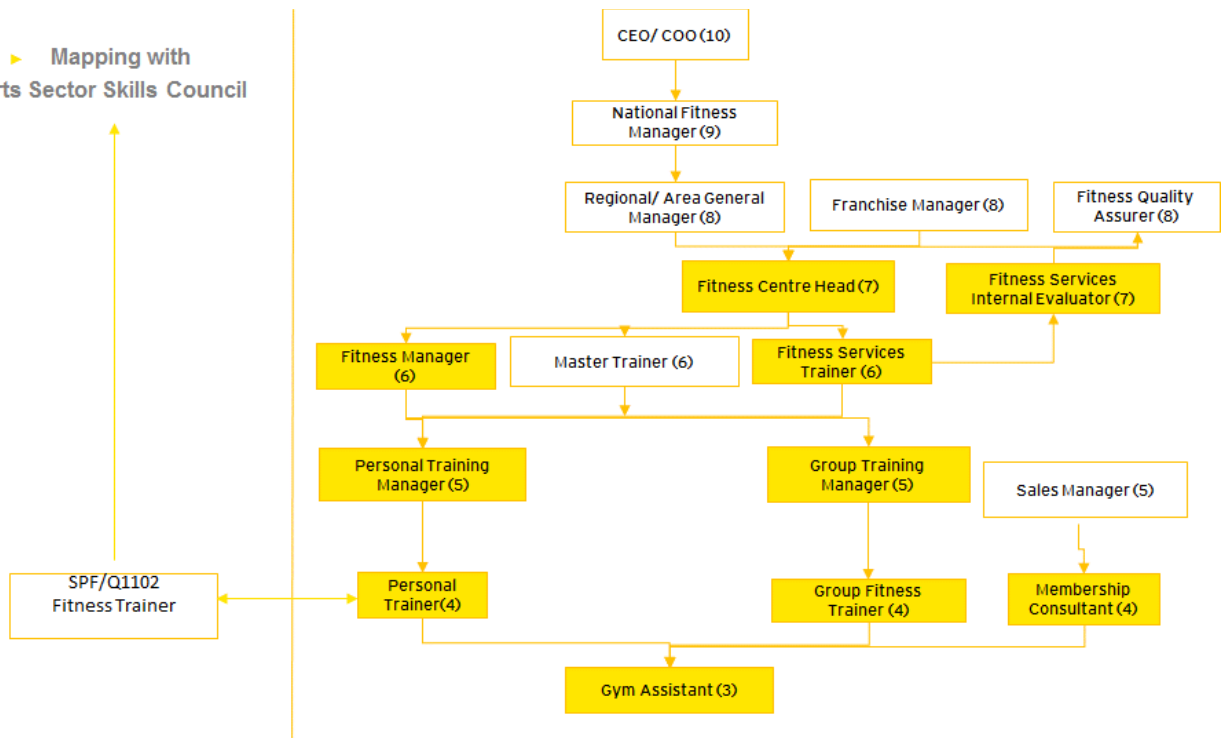
1. Career Map of Personal Trainer - Annexure 1
2. QP BWS/Q3003 - Annexure 2

# NSQF QUALIFICATION FILE

Version 6: Draft of 08 March 2016

## Annexure 1: Career Map

► Mapping with Sports Sector Skills Council



## Annexure 2: QP BWS/Q3003