

Medical Fitness Association Facility Certification Examiner Application

CRITERIA FOR APPOINTMENT AS A CERTIFICATION EXAMINER

In order to be considered as an Examiner for the Medical Fitness Association, the following requirements must be met:

Eligibility Requirements

1. Lead: A Lead Examiner must have a minimum of ten (10) years' experience in operating or consulting with a medically integrated health and fitness center(s), must have completed any and all updated training requirements by the Medical Fitness Association, and must be approved by the Certification Committee as a Lead Examiner. Five (5) of the ten (10) years operational experience must be in a Director Position in a medically integrated health and fitness center, or an acceptable equivalent leadership position as approved by the Certification Committee.
2. Second: Five (5) years' experience in the field with 2.5 years in a Department Head or equivalent position in a health and fitness center.
3. Both Lead and Second Examiners must be a Member of the Medical Fitness Association ("MFA") for at least one (1) full calendar year.
4. Both Lead and Second Examiners must indicate on their application form that they have attended an Examiner Training Workshop and reviewed the current Examiner Training Manual within 6 (six) months of submitting their application.
5. No employee of the MFA and no person paid by the MFA for services rendered in connection with any aspect of the MFA facility certification process, except for "Examiner Compensation" shall be eligible to serve as a Lead or Second Examiner without approval of the Certification Committee and the Board of Directors.

Service Requirements

1. Examiner term is for three (3) years and during that period examiner must have completed three (3) facility examinations.
2. Lead Examiners must have a positive review by each facility in which they were Lead Examiner.
3. If either the Lead or Second Examiner receives a negative review the chair of the Examiner Sub-Committee will discuss the negative review with the Examiner and determine the course of action regarding the Examiner status.
4. Current examiners must attend, either in person, or by webinar, the annual examiner training offered at the annual conference, or by webinar.
5. Every three (3) years Examiners who have met all the Service Requirements will automatically be renewed as examiners for an additional three (3) years. Those who have not completed the service requirements and wish to remain as an active examiner, must re-apply in order to renew his/her examiner status and provide a detailed explanation for why they did not meet the minimum service requirements during their previous term. Additionally, they must attest on the application that they have reviewed the current Facility Standards and Guidelines Book and attended the current year's Examiner Training in person, or via Webinar.
6. In order for a Second Examiner to become a Lead Examiner, he/she must:
 - A. meet all Lead Examiner eligibility requirements;
 - B. apply to become a Lead Examiner
 - C. have completed at least one (1) exam of a Center that includes aquatics facilities and programming, and one (1) other center of any size and program scope; and
 - D. have a positive review from at least two (2) Lead Examiners they assisted within one year of their application to advance to Lead.
 - E. There must be a vacancy on the Lead Examiner Roster.

Applicants must complete the following:

SECTION A:

1. Submit a current Resume or CV containing:
 - Employment History
 - Professional Activities
 - Education and Training
 - MFA Membership History
2. Complete an Examiner Candidate Questionnaire
3. Attend an Examiner Training Workshop in person or via webinar

SECTION B:

1. After appointment, the examiner will be sent a Letter of Agreement from the MFA office committing him/her to:
 - Maintain the confidentiality of the certification process. This includes, but not limited to:
 - Signing the confidentiality agreement, reading the confidentiality statement at the Summation Conference, committing to maintain the confidentiality of all parties interviewed during the site visit..
 - Perform at least three (3) facility exams within a three-year period.
 - Be thoroughly familiar with all pertinent documents and examination forms prior to arrival on-site.
 - Maintain a professional presentation and manner. Remember that as an examiner, you are both gathering information and serving as a resource for the facility's personnel. To perform these roles well, you must be impartial but supportive, polite, non-judgmental (especially in the hearing of anyone associated with the facility), objective, observant, helpful and friendly.
 - Return expense voucher and evaluation to the MFA Office within two (2) weeks of the site visit.
 - Return the report to the MFA Office within two (2) weeks of the site visit.

**Medical Fitness Association
Facility Certification Examiner Application
EXAMINER CANDIDATE QUESTIONNAIRE**

Full Name: _____ Preferred Name: _____

Birthday: _____

Emergency Contact: _____ Emergency Phone: _____

Employer: _____

Work Address: _____ Home Address: _____

Phone: _____ Cell Phone: _____

Preferred E-mail: _____ Alt E-mail: _____

Where would you prefer to receive information related to facility examinations you conduct?

Home

Work

Which type of Examiner Appointment are you the requesting?

Lead

Second

1. What educational degrees and national accredited credentials do you hold? _____

2. Do you have medical fitness center management experience? If so, please explain and include length of experience. Attach an additional form, if necessary.

3. Have you attended an MFA Facility Examiner Training Workshop? Yes No
If Yes, When? _____

4. (a) Has your current facility been certified by MFA? Yes No

(b) If yes, what year? _____

(c) If yes, to what extent did you participate in the certification?

Applied and was responsible for the certification application.

Participated in the certification.

5. Are you trained or appointed as an examiner for another certifying agency?

Yes No

If yes, please list agency name: _____

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6. Characteristics of the facility where you currently are employed or have previously been employed (check all that apply).

Certified Facility

Medical Oversight

Emergency Response

Facilities & Services

Aquatics

Staffing & Training

Quality Outcomes

Accessibility & Safety

Youth Fitness

7. Are you multi-lingual?

Yes

No

If yes, which languages?

8. Do you have a valid Passport

Yes

No

If yes, what is your passport number and expiration date? _____

9. List additional skills:

Certified Pool Operator

Facility Construction Experience

Facility Development Experience

Written Publication Experience

Other: _____

10. Current MFA Member? ____ Yes ____ No If yes, # of years _____

Conflict of Interest and Confidentiality

Conflicts of interest must be avoided. Examiners must decline any assignment in which a real or potential conflict of interest may be perceived. This includes assignment to facilities in which close personal friends (or competitors), former associates, former students or relatives are employed, or facilities of which the examiner has been employed. Examiners should also disqualify themselves if at any time in the past they have served as a consultant to the facility. Conflict of interest may also arise when a clear disparity in the values, philosophies, or orientations of the facility and the examiner would make an objective evaluation difficult or impossible.

Confidentiality must be maintained. The process of certification is credible only to the extent that examiners respect, recognize, and maintain the confidentiality of all information obtained before, during and after the certifying process.

I have read and understand the Conflict of Interest Statement and will maintain confidentiality regarding all aspects of facility certification.

Print Name: _____

Sign Name: _____ Date: _____

Please email the completed form to: Bob.Boone@medicalfitness.org or mail the completed form to: Medical Fitness Association, 90 Cherokee Road, Suite 3A, Pinehurst, NC 28374