Fitness Facility Director and Medical Fitness Facility Director Resources for Test Blueprint

This Document represents a delineation of the tasks (T) performed and knowledge (K) or (M) applied by Medical Fitness Facility Directors in the practice of their profession. Fitness Facility Directors are responsible for all aspects of facility operation, including the physical plant, safety, staffing, user satisfaction, medical integration, financial soundness and ensuring a successful future.

- Knowledge statements marked with “K” are applicable to both the Fitness Facility and Medical Fitness Facility Director Credential.
- Items marked with “M” are applicable specifically to the Medical Fitness Facility Director exam and are not tested in the Fitness Facility Director exam.

NOTE: The percentages noted by each of the nine (9) task statements reflect the percentage of the exam devoted to that task. For example, the test is 100 questions, so there are 13 questions related to Task 1 (T-1) since the Test percentage is 13%. Listed at the end of each task are reference materials from which the item bank questions covering these tasks come.

(13%) T-1 Maintain the physical plant including building, furniture, fixtures and equipment in order to ensure readiness for use, cleanliness, safety and minimization of risks to staff and users.

The effective performance of this task requires knowledge of:

K-1 Preventive maintenance schedules
K-2 Opening and closing procedures
K-3 Equipment layout including specialized clinical equipment
K-4 Emergency/risk management procedures
K-5 Signage requirements (e.g., ANSI compliant)
K-6 Life safety systems and equipment
K-7 ADA requirements
K-8 Aquatic safety requirements (e.g., Virginia Graeme Law, certified pool operator)
K-9 Documentation requirements (e.g., maintenance, repair, AED tests, incident reports)
K-10 Childcare area requirements
K-11 Sanitation
K-12 Local, state and federal laws and regulations, and industry guidelines (e.g., OSHA, MSDS, HIPAA, CLIA, Joint Commission, MFA standards and guidelines, health codes)

M-1 Clinical fitness testing equipment
M-2 Knowledge of The Joint Commission Life Safety Standards

Resources:
- MFA's Standards & Guidelines for Medical Fitness Center Facilities, 2nd Edition
- The Ultimate Resource Manual for Implementing Health/Fitness Facility Standards and Guidelines
- ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed
(12%) **T-2 Recruit, select, train and evaluate staff** including direct service providers and support personnel to ensure the quality of programs and services, contribute to user satisfaction and promote staff retention.

The effective performance of this task requires knowledge of:

- **K-13** Background checks
- **K-14** Job descriptions and requirements/qualifications (e.g., education, NCCA or ISO 17024 accredited exercise professional certifications, clinical staff credentialing)
- **K-15** Fair labor standards
- **K-16** Interviewing techniques
- **K-17** EEOC Regulations
- **K-18** Mandated training requirements (e.g., biohazard, sexual harassment, emergency)
- **K-19** Personnel evaluation techniques
- **K-20** Initial training techniques
- **K-21** Progressive discipline terms/documentation
- **K-22** Fitness and health industry credentials
- **K-23** Contract labor and partnerships
- **M-3** Medical director and/or physician advisory board
- **M-4** Clinical ancillary staff (e.g., registered dietitians, nurses)
- **M-5** Systems for ongoing tracking of certifications and licenses of medically-integrated fitness staff (e.g., professional certifications, CPR/AED, continuing education)

**Resources:**

- MFA's Standards & Guidelines for Medical Fitness Center Facilities, 2nd Edition
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- Fitness Management, (Tharrett and Peterson) 3rd Edition
- ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed

(13%) **T-3 Select, develop and implement programs and services** in order to meet the requirements of targeted users and identified markets. (This may be accomplished in collaboration with others (e.g., health practitioners, program staff, users, external organizations)).

The effective performance of this task requires knowledge of:

- **K-14** Job descriptions and requirements/qualifications (e.g., education, NCCA or ISO 17024 accredited exercise professional certifications)
- **K-22** Fitness and health industry credentials
K-24 Available fitness and health-related programs and services and their budgetary implications
K-25 Techniques for identifying target markets and their needs
K-26 Program requirements and standards including venue and equipment
K-27 Components and administration of fitness and health-related programs (e.g., health risk appraisals, initial and follow-up fitness assessments, biometric testing, exercise prescription)
K-28 Techniques for identifying and analyzing program outcomes and effectiveness metrics
K-29 Staffing ratios
K-30 Safety/risk implications of programs
K-31 Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians)

M-6 Techniques for identifying and implementing clinically-integrated outcomes-based programs and services
M-7 Mechanisms for clinically-relevant reporting to medical professionals
M-8 Methods for developing referral networks with medical professionals

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- ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed

(10%) T-4 Develop, implement and regularly evaluate a marketing and communications plan to promote the facility’s programs and services to potential users.

The safe and effective performance of this task requires knowledge of:

K-22 Fitness and health industry credentials
K-24 Available fitness and health-related programs and services and their budgetary implications
K-25 Techniques for identifying target markets and their needs
K-26 Program requirements and standards including venue and equipment
K-31 Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians)
K-32 Components of a marketing plan (i.e., market research, target market, positioning, competitive analysis, market strategy, branding, key messages, budget and metrics)
K-33 Communication vehicles/media (e.g., mass media, social media, print, digital, public relations, crisis communications)
K-34 Techniques for identifying and analyzing marketing outcomes and effectiveness metrics
M-9  Methodology to create and implement marketing of the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)
M-10  How to market medically integrated fitness as a part of preventive/chronic disease care

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- MFA's Standards & Guidelines for Medical Fitness Center Facilities, 2nd Edition
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- ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed
- Health Fitness Management (Bates), 3rd Edition

(10%) T-5  Develop, implement, and manage a sales process that converts prospects into facility users. This process includes, for example, developing referral sources, prospect management, needs analysis, effectiveness metrics, etc.

The safe and effective performance of this task requires knowledge of:

K-22  Fitness and health industry credentials
K-24  Available fitness and health-related programs and services and their budgetary implications
K-25  Techniques for identifying target markets and their needs
K-28  Techniques for identifying and analyzing program outcomes and effectiveness metrics
K-31  Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians)
K-32  Components of a marketing plan (i.e., market research, target market, positioning, competitive analysis, market strategy, branding, key messages, budget and metrics)
K-35  Program venue and equipment
K-36  Sales process and controls (e.g., lead generation, enrollment, membership types, financial aid, customer relationships management)
K-37  Elements of effective communication (e.g., active listening, feedback, reflecting)
K-38  Techniques for identifying motivation and readiness to change
K-39  Techniques for identifying individual needs
K-40  Industry benchmarks related to sales (e.g., conversion, retention)
M-11  Techniques for selling the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)
M-12  Techniques for selling medically integrated fitness as a part of preventive/chronic disease care

Resources:
- MFA's Standards & Guidelines for Medical Fitness Center Facilities, 2nd Edition
• The Ultimate Resource Manual for Implementing Health/Fitness Facility Standards and Guidelines
• ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed
• MFA Benchmarks for Success – 2017
• Health Fitness Management (Bates), 3rd Edition
• Fitness Management (Tharrett & Peterson) 2006

(12%) T-6 Develop, implement, and manage systems for **achieving financial objectives** by preparing budgets and analyzing, reporting and acting on variances. These systems include, for example, financial projections, benchmarks, trend analysis, standard financial ratios and establishing financial controls.

The safe and effective performance of this task requires knowledge of:

K-41 Industry financial benchmarks
K-42 Techniques for interpreting and analyzing financial reports
K-43 Key financial and performance metrics that warrant operational adjustments
K-44 Components of a budget (e.g., revenue, expenses, depreciation, allocations)
K-45 Capital and operational budgets
K-46 Financial controls (e.g., separation of duties, audits)

M-13 Requirements for insurance clinical services reimbursement including Medicare/Medicaid

**Resources:**

• MFA's Standards & Guidelines for Medical Fitness Center Facilities, 2nd Edition
• The Ultimate Resource Manual for Implementing Health/Fitness Facility Standards and Guidelines
• ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed
• MFA Benchmarks for Success – 2017
• Health Fitness Management (Bates), 3rd Edition
• Fitness Management (Tharrett & Peterson) 2006

(12%) T-7 Develop **relationship building techniques** to provide users with satisfying experiences that maximize retention and help them achieve their fitness and health-related goals.

The safe and effective performance of this task requires knowledge of:

K-25 Techniques for identifying target markets and their needs
K-27 Components and administration of fitness and health-related programs (e.g., health risk appraisals, initial and follow-up fitness assessments, biometric testing, exercise prescription)
K-30 Safety/risk implications of programs
Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians)

Elements of effective communication (e.g., active listening, feedback, reflecting)

Techniques for identifying motivation and readiness to change

Techniques for identifying individual needs

Service recovery techniques (e.g., responding to unsatisfied individuals)

Methods for obtaining and responding to user feedback (e.g., comment cards, satisfaction surveys)

Methods for developing and evaluating member engagement (e.g., utilization, participation in multiple activities)

Techniques for orienting new members

Methodologies and systems for coaching individuals through health-related behavior changes

Techniques for communicating with medical professionals and individuals about medically integrated fitness program needs and outcomes

Resources:
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- ACSM Health/Fitness Facility Standards and Guidelines, 2nd Ed
- MFA Benchmarks for Success – 2017
- Health Fitness Management (Bates), 3rd Edition

(10%) T-8 Periodically review programs, services and systems to determine how they can be improved to better meet facility and user goals and objectives. This includes, for example, analyzing current programs, identifying key stakeholders, gap analysis and determining actions to be taken.

The safe and effective performance of this task requires knowledge of:

Preventive maintenance schedules
Opening and closing procedures
Fitness equipment layout including specialized clinical equipment
Emergency/risk management procedures
Signage requirements (e.g., ANSI compliant)
Life safety systems and equipment
ADA requirements
Aquatic safety requirements (e.g., Virginia Graeme Law, certified pool operator)
Documentation requirements (e.g., maintenance, repair, AED tests, incident reports)
Childcare area requirements
Sanitation
Local, state and federal laws and regulations, and industry guidelines (e.g., OSHA, MSDS, HIPAA, CLIA, Joint Commission, MFA standards and guidelines, health codes)
K-13 Background checks
K-14 Job descriptions and requirements/qualifications (e.g., education, NCCA or ISO 17024 accredited exercise professional certifications)
K-15 Fair labor standards
K-16 Interviewing techniques
K-17 EEOC Regulations
K-18 Mandated training requirements (e.g., biohazard, sexual harassment, emergency)
K-19 Personnel evaluation techniques
K-20 Initial training techniques
K-21 Progressive discipline terms/documentation
K-22 Fitness and health industry credentials
K-23 Contract labor and partnerships
K-24 Available fitness and health-related programs and services and their budgetary implications
K-25 Techniques for identifying target markets and their needs
K-26 Program requirements and standards including venue and equipment
K-27 Components and administration of fitness and health-related programs (e.g., health risk appraisals, initial and follow-up fitness assessments, biometric testing, exercise prescription)
K-28 Techniques for identifying and analyzing program outcomes and effectiveness metrics
K-29 Staffing ratios
K-30 Safety/risk implications of programs
K-31 Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians, etc.)
K-32 Components of a marketing plan (i.e., market research, target market, positioning, competitive analysis, market strategy, branding, key messages, budget and metrics)
K-33 Communication vehicles/media (e.g., mass media, social media, print, digital, public relations, crisis communications)
K-34 Techniques for identifying and analyzing marketing outcomes and effectiveness metrics
K-35 Program venue and equipment
K-36 Sales process and controls (e.g., lead generation, enrollment, membership types, financial aid, and customer relationships management)
K-37 Elements of effective communication (e.g., active listening, feedback, reflecting)
K-38 Techniques for identifying motivation and readiness to change
K-39 Techniques for identifying individual needs
K-40 Industry benchmarks related to sales (e.g., conversion, retention)
K-41 Industry financial benchmarks
K-42 Techniques for interpreting and analyzing financial reports
K-43 Key financial and performance metrics that warrant operational adjustments
K-44 Components of a budget (e.g., revenue, expenses, depreciation, allocations)
K-45 Capital and operational budgets
K-46 Financial controls (e.g., separation of duties, audits)
K-47 Service recovery techniques (e.g., responding to unsatisfied individuals)
K-48 Methods for obtaining and responding to user feedback (e.g., comment cards, satisfaction surveys)
K-49 Method for developing and evaluating member engagement (e.g., utilization, participation in multiple activities)
K-50 Techniques for orienting new members
K-51 Methodologies and systems for coaching individuals through health-related behavior changes
K-52 Process improvement methodologies (e.g., gap analysis, plan-do-check-act, lean, Six-Sigma)
K-53 Techniques for implementing and managing change

M-1 Clinical fitness testing equipment
M-2 Knowledge of The Joint Commission Life Safety Standards
M-3 Medical director and/or physician advisory board
M-4 Clinical ancillary staff (e.g., registered dietitians, nurses)
M-5 Systems for ongoing tracking of certifications and licenses of medically-integrated fitness staff (e.g., professional certifications, CPR/AED, continuing education)
M-6 Techniques for identifying and implementing clinically-integrated outcomes-based programs and services
M-7 Mechanisms for clinically-relevant reporting to medical professionals
M-8 Methods for developing referral networks with medical professionals
M-9 How to market the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)
M-10 How to market medically integrated fitness as a part of preventive/chronic disease care
M-11 Techniques for selling the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)
M-12 Techniques for selling medically integrated fitness as a part of preventive/chronic disease care
M-13 Requirements for insurance clinical services reimbursement including Medicare/Medicaid
M-14 Techniques for communicating with medical professionals and individuals about medically integrated fitness program needs and outcomes

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(8%) T-9 Review on a regular basis the business, mission and goals of the facility in light of potential changes in the market and industry to produce a plan for the future that includes implementation, timelines and accountability.

The safe and effective performance of this task requires knowledge of:
Available fitness and health-related programs and services and their budgetary implications

Techniques for identifying target markets and their needs

Program requirements and standards including venue and equipment

Components and administration of fitness and health-related programs (e.g., health risk appraisals, initial and follow-up fitness assessments, biometric testing, exercise prescription)

Techniques for identifying and analyzing program outcomes and effectiveness metrics

Staffing ratios

Safety/risk implications of programs

Related and complimentary community agencies/organizations (e.g., hospitals, community services organizations, physicians, etc.)

Techniques for identifying and analyzing marketing outcomes and effectiveness metrics

Techniques for implementing and managing change

Components of and systems for developing strategic plans

Industry benchmarks

Techniques for identifying and analyzing process improvement for program components

Methods for collaborating with members of the local continuum of care (e.g., physicians, hospitals, nurse practitioners, physical therapists)

Systems for coordinating strategic plan with healthcare partners

Resources available through the Medical Fitness Association (e.g., benchmarking, education, certification)

Techniques for analyzing and comparing the quality of clinical programs

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Knowledge Summary

Preventive maintenance schedules

Opening and closing procedures

Fitness equipment layout including specialized clinical equipment

Emergency/risk management procedures

Signage requirements (e.g., ANSI compliant

Life safety systems and equipment

ADA requirements

Aquatic safety requirements (e.g., Virginia Graeme Law, certified pool operator)

Documentation requirements (e.g., maintenance, repair, AED tests, incident reports)

Childcare area requirements
K-11  Sanitation
K-12  Local, state and federal laws and regulations, and industry guidelines (e.g., OSHA, MSDS, HIPAA, CLIA, Joint Commission, MFA standards and guidelines, health codes)
K-13  Background checks
K-14  Job descriptions and requirements/qualifications (e.g., education, NCCA or ISO 17024 accredited exercise professional certifications)
K-15  Fair labor standards
K-16  Interviewing techniques
K-17  EEOC Regulations
K-18  Mandated training requirements (e.g., biohazard, sexual harassment, emergency)
K-19  Personnel evaluation techniques
K-20  Initial training techniques
K-21  Progressive discipline terms/documentation
K-22  Fitness and health industry credentials
K-23  Contract labor and partnerships
K-24  Available fitness and health-related programs and services and their budgetary implications
K-25  Techniques for identifying target markets and their needs
K-26  Program requirements and standards including venue and equipment
K-27  Components and administration of fitness and health-related programs (e.g., health risk appraisals, initial and follow-up fitness assessments, biometric testing, exercise prescription)
K-28  Techniques for identifying and analyzing program outcomes and effectiveness metrics
K-29  Staffing ratios
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Methods for obtaining and responding to user feedback (e.g., comment cards, satisfaction surveys)

Method for developing and evaluating member engagement (e.g., utilization, participation in multiple activities)

Techniques for orienting new members

Methodologies and systems for coaching individuals through health-related behavior changes

Process improvement methodologies (e.g., gap analysis, plan-do-check-act, lean, Six-Sigma)

Techniques for implementing and managing change

Components of and systems for developing strategic plans

Industry benchmarks

Techniques for identifying and analyzing process improvement for program components

Clinical fitness testing equipment

Knowledge of The Joint Commission Life Safety Standards

Medical director and/or physician advisory board

Clinical ancillary staff (e.g., registered dietitians, nurses)

Systems for ongoing tracking of certifications and licenses of medically-integrated fitness staff (e.g., professional certifications, CPR/AED, continuing education)

Techniques for identifying and implementing clinically-integrated outcomes-based programs and services

Mechanisms for clinically-relevant reporting to medical professionals

Methods for developing referral networks with medical professionals

How to market the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)

How to market medically integrated fitness as a part of preventive/chronic disease care

Techniques for selling the medical fitness difference to potential clients and the medical community (e.g., physicians, physician extenders, ancillary healthcare providers, corporations, insurers)

Techniques for selling medically integrated fitness as a part of preventive/chronic disease care

Requirements for insurance clinical services reimbursement including Medicare/Medicaid

Techniques for communicating with medical professionals and individuals about medically integrated fitness program needs and outcomes

Methods for collaborating with members of the local continuum of care (e.g., physicians, hospitals, nurse practitioners, physical therapists)

Systems for coordinating strategic plan with healthcare partners

Resources available through the Medical Fitness Association (e.g., benchmarking, education, certification)

Techniques for analyzing and comparing the quality of clinical programs

Questions? Please contact the MFA office at 910-420-8610 or info@medicalfitness.org.