

Do It Now: We'll Show You How

Lose weight...

Tone up...

Get fit...

Get ready for that special occasion, wedding etc...

Run a marathon...

Improve your times for events from 800m to 10k...

Improve body condition...

Build stronger bones...

Ensure future health & fitness...

For looking good and feeling great...



Adam Jones

Student Number: xxxxxxxx

NCEF Personal Training Course

December 2010

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1. Health Screening, Exercise History & Attitude Questionnaire

1.1. Introduction

Having recently graduated from the National Certificate in Exercise and Health Fitness programme, my goal now is to further advance my skills and qualifications as a personal trainer. I also hope to draw on my background as an athletics coach in pursuing this goal, as I have over 30 years experience in this field and a level 2 AAI-affiliated coaching qualification. I also had the honour of being selected Athletics Ireland inaugural “Coach of The Year” 2007.

As I had not met my client before and had no knowledge of her background, interests and goals, I wanted to keep our initial meeting relatively informal, in order to establish rapport and develop a working relationship. For this reason, with the exception of the consent form, no questionnaires or tests were completed until our second meeting. We arranged to meet twice a week, on Wednesdays at 8pm and Fridays at 6pm. The venue for all our meetings was my home gym, which is suitably equipped for this purpose.

1.2. Client’s State of Health and Fitness

My client is a 41 year old generally healthy female, who leads a physically inactive lifestyle and acknowledges that she is obese. She participated in sports including hockey and basketball during her school days, although not at a highly competitive level, and she used to swim regularly but not in recent years. Her office management job is stressful and sedentary, and involves 8-10 hours sitting at a desk and a two hour commute each day. Her husband works abroad and she only sees him on occasional weekends. She has a low level of fitness in most areas except flexibility, and consequently there is plenty of scope for improvement. Her lifestyle is the biggest barrier to progress but she has committed to train for at least one hour three times per week, and there are no medical or family history reasons for her not to undertake a moderate programme of exercise. She is a reformed smoker, having successfully quit a number of years ago, indicating that she is capable of the motivation levels necessary to stick to an exercise programme. She is strong and in good physical health apart from some possible discomfort from a back injury, incurred 15 years ago as a result of a horse riding accident. This injury has been well managed and should not be a barrier to a good

all round exercise programme; however I will be mindful of it when selecting tests and exercises, and will constantly monitor the situation.

1.3. Client's Goals and Preferences

My client has a positive self image, and appears happy within herself. This presents a challenge in motivating her to change her lifestyle. She does not exercise at present and has chosen to work with a personal trainer because she would like to improve her fitness level and also lose weight in the process. She enjoys walking and is not averse to general physical activity, and is likely to respond to an exercise programme which is varied, interesting, and motivational. In addition to her stated goals, it is my intention for her to exceed her ambitions with additional achievements. On the negative side the client's social and business life does not allow for much spare time and possibly contributes to an excessive calorie intake, involving frequent eating out, often hurried and not always healthy meals. The weight loss may be the greatest challenge, as specific nutritional advice is outside the scope of my role as a personal trainer, and the best I can do is encourage and educate where possible. I provided the client with a food diary to allow for a detailed analysis of her eating habits. As I am accustomed to dealing with athletes who are highly motivated and practice a high level of fitness, this client provides a real challenge and I am determined to achieve some success.

Health Screening Questionnaire: See Appendix 1

Exercise History & Attitude Questionnaire: See Appendix 2

2. Fitness Assessment

2.1. Tests Selected, Results & Rationale

Component of Fitness	Test	Results	Rationale
Body composition	Physical Measurements	Normal Heart Rate: 75 Resting Heart Rate: 63 Blood pressure: 82/122 Cholesterol: normal Body Fat: 45.4% Measured on Impedance Balance Height: 1.68m Weight 93.7KG BMI: 33.199 (obese)	To establish a base line and to inform and educate client.

		Waist: 39.5 ins Hips: 48 ins Waist to hip ratio: 0.823 (not at risk from CHD)	
Cardiovascular	Single stage treadmill walking	34.123 ml.kg.min VO2 Max	Test was chosen to establish a base line number to be compared with retest later. It also provided knowledge and education for the client, who had not exercised for some time, was simple to operate and was unlikely to upset client.
LME	Modified press up Lateral raise, 2KG dumbbells Seated shoulder press, 2KG dumbbells	20 (average) 18 reps to point of exhaustion 10 reps to point of exhaustion	Best test to establish 1RM for those with back problems These tests gave very useful information to establish weights and reps for LME programme.
Flexibility	Static posture analysis	Anterior view: Ear height/head tilt/rotation: ok Clavicles –levels: ok Shoulders – levels: ok Ribcage – level/rotated: ok Arm gap: same each side Iliac crests: even heights Knuckles: same direction Fingertip – levels: equal Knees: slightly knocked Feet – direction, arch, weight bearing (shoes): ok Q angle: above normal Side view: Head position: ok Cervical curve: slightly increased Shoulder alignment: ok Thoracic curve: normal Lumbar curve: ok Pelvis – ASIS v PSIS – tilt: no Knee – joint angle & alignment: ok Ankle – joint angle: ok Posterior view: Ear height/head tilt/rotation: ok Shoulders – levels: ok Scapulae – levels/prominence: ok Spine alignment (scoliosis): none Arm gap: same each side Iliac crests: even heights Knees : slightly knocked	Test chosen to establish all aspects of client’s physique to enable proper analysis for programme design to include corrective postural issues.

		Q angle: above normal Ankles: fall slightly in Feet – direction, arch, weight bearing: ok	
Muscle length	Wall test Hand Behind Back Hand Behind Neck Lumbar Side Flexibility Modified Thomas Test Calf Soleus Pectorals/Lats Pectoralis Minor Straight Leg Raise Ely's Test Sit and Reach Test Shoulder Elevation Test	Normal Even Even Good Hip Flexors and Rectus Femoris: normal flexibility Min 90% each side Excellent Moderate distance between floor & shoulder L 92%, R 91% Even but not touching 34.50CM 80 (average)	Rationale for these tests is the same as for the Static Posture Analysis tests.

2.1. Analysis of Test Results

The client's heart rate, blood pressure and cholesterol levels are all within the acceptable range. Her body fat, which was measured on an impedance balance, indicates obesity. Her waist to hip ratio is not a high risk for CHD. The result of the single stage treadmill walking test indicates a low level of cardiovascular fitness, but not too low to commence a CV programme at a moderate level immediately. The client's score in the modified press-up test shows that she is strong even if not very fit. I am satisfied that we can build on this strength with a suitable LME exercise programme. In the hand behind back and hand behind neck tests, her right hand side is slightly more flexible than the left, but not enough to be a cause for concern. The Ely's test result indicates a tightness in the quads which can be addressed in the flexibility programme. The shoulder elevation test result of 80 is good for a female. In analysing this bank of test results I have concluded that in the programme design there is a need for corrective exercises for shoulder adjustment, and her slightly knocked knees and inward ankle fall. Despite being obese this client has good posture generally, with straight and well positioned shoulders and strong pectoral muscles. There is a slight cervical curve, and her back muscles will need strengthening. Stretching of the pectorals and hip flexors will also help. This is a very important area in view of the client's occupation, and her long daily commute.

3. Programme Design

3.1. Detailed Overall Programme

Exercise	Reps	Weight/ Dumbbells	Sets	Rest
1. Warm up 10 mins walk on treadmill				
2. Gentle stretches of upper, middle and lower body				
3. Lateral raise (standing/dumbbells)	12/15	1.5kg	1/2	30 secs
4. Abdominal curls (on stability ball)	12/15	n/a	1/2	30 secs
5. Shoulder press (on stability ball)	12/15	1.5kg	1/2	30 secs
6. Back extensions (on stability ball)	12/15	n/a	1/2	30 secs
7. Bent over lateral raise (standing/dumbbells)	12/15	1.5kg	1/2	30 secs
8. Upright row (standing/barbells)	12/15	8kg	1/2	30 secs
9. 5-10 mins steady on stationery bike low/increased tension				
10. Bench press (on stability ball)	12/15	1.5kg	1/2	30 secs
11. Single arm upright row (each side, 3 point base)	12/15	5kg	1/2	30 secs
12. Supine fly (on stability ball)	12/15	1.5kg	1/2	30 secs
13. Press ups (modified)	12/15	n/a	1/2	30 secs
14. Back extensions (on mat)	12/15	n/a	1/2	30 secs
15. Forward lunges (each leg)	8/12	n/a	1	n/a
16. Core plank (20 secs)	3	n/a	1	n/a
17. Floor stretches for lower body and back				
18. Cool down 5 mins walk on treadmill				
19. Steady/brisk walk				

3.2. Schedule of Programme

Week 1

Day	Exercise	Progressions
Monday	20 min walk	
Tuesday	Rest day	
Wednesday	Exercises: 1, 2, 3, 4, 5, 10, 11, 12, 14, 16, 17, 18	12 reps, 1 set each exercise, core plank for 3 x 20 secs. Back extensions were done on mat.
Thursday	Rest day	
Friday	Exercises: 1, 2, 3, 4, 5, 6, 7, 10, 11, 12, 14, 16, 17, 18	12 reps, 1 set each exercise, core plank for 3 x 20 secs. Back extensions were done on stability ball.
Saturday	30 min walk	
Sunday	Rest day	

Week 2

Day	Exercise	Progressions
Monday	30 minute brisk walk	
Tuesday	Rest day	
Wednesday	Exercises: 1, 2, 3, 4, 5, 6, 8, 9, 10, 11, 12, 16, 17, 18	Increase to 15 reps for all LME exercises upright row and 5 mins steady on stationary bike added, omit Bent Over Lateral Raise, back extensions on ball only.
Thursday	Rest day	
Friday	Exercises: 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 13, 16, 17, 18	12 reps, 2 sets for each LME exercise, 30 secs rest between sets, core plank 3x20 secs. Increased to 8 minutes on bike.
Saturday	40 min brisk walk	
Sunday	Rest day	

Week 3

Day	Exercise	Progressions
Monday	40 minute walk	
Tuesday	Rest day	
Wednesday	Exercises: 1, 2, 3, 4, 5, 6, 7, 8, 9, 11, 12, 15, 16, 17, 18	12 reps ,2 sets for each LME exercise, 8 mins on bike, only one set of single arm upright row, forward lunges 8 each leg added, core plank 3x 20 secs.
Thursday	Rest day	
Friday	Rest day	Client went abroad for weekend.
Saturday	Rest day	
Sunday	Rest day	

Week 4

Day	Exercise	Progressions
Monday	40 min walk	
Tuesday	Rest day	
Wednesday	Exercises: 1, 2, 3, 4, 5, 6, 7, 9, 10, 12, 13, 15, 16, 17, 18	12 reps, 2 sets for each LME exercise, 10 mins on bike at increased tension, forward lunges 8 each leg, core plank 3 x 22 secs.
Thursday	Rest day	
Friday	Exercises: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 13, 15, 16, 17, 18	1 set of 15 reps and 1 set of 12 reps for each LME exercise, 10 mins on bike at increased tension, modified press ups 2 sets of 15 reps, forward lunges 10 each leg, core plank 3 x 22 secs.
Saturday	45 min walk	
Sunday	Rest day	

Week 5

Day	Exercise	Progressions
Monday	45 min walk	
Tuesday	Rest day	
Wednesday	Exercises: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 15, 16, 17, 18	2 sets of 15 reps for each LME exercise, 10 mins on bike at increased tension, Forward Lunges 10 each leg, core plank 3 x22 secs.
Thursday	Rest day	
Friday	Exercises: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 15, 16, 17, 18	2 sets of 15 reps for each LME exercise, 10 mins on bike at increased tension, forward lunges 12 each leg. Core plank 3 x 22 secs.
Saturday	40 min walk	
Sunday	30 min walk	

3.3. Rationale for Schedules

Based on the test results and the client's wishes I designed a training programme to progress the following components of fitness: body composition, aerobic endurance, muscular endurance and flexibility. To this end I have applied the principles of training through the use of FITT. For all components the aim is a frequency of 2 to 3 times per week. For body composition the target is to motivate the client to limit her calorie intake, and her body composition will also improve with progress in all the other components. For aerobic endurance the target is 50% to 65% maximum heart rate. The programme includes 10 to 50 minutes aerobic training, brisk walking, and the stationary bike. For muscular endurance the range is 50% to 75% of 1RM for all major muscle groups, with 12 to 15 reps. The client will be introduced to the stability ball as this will target core muscles and improve her posture. Compound exercises are used mainly to target all major muscle groups. Flexibility exercises are to the point of tension and include active, active-assisted and PNF stretching of 10 to 25 seconds per stretch, both pre and post exercise. I am also introducing her to the stationary bike to achieve improved cardiovascular fitness. Her posture analysis showed some anomalies, which can be corrected with a combination of strengthening, flexibility and toning, and I

have included these in the programme. I will carefully monitor the client's handling of the exercise workload, in view of her inactivity prior to commencing the programme. As the client's body composition improves hopefully this will encourage her to work on reducing her calorie intake and inspire her to lose more weight.

Cardiovascular endurance can be progressed slowly and this will improve circulation, lower the pulse rate and raise the oxygen carrying capacity in the blood. The stationary bike will open up new possibilities for the client's future exercise activity, and will also help improve her VO2 max. The client agreed to at least two walking sessions per week in addition to our twice weekly sessions.

The client scored well in the flexibility tests, and the aim is to maintain and build on this, and to work on her pectorals which appear strong. The programme includes a full range of motions for all joint movements, and pre and post exercise stretching to prevent any soreness and leave the client feeling relaxed and satisfied with the session.

Meeting twice per week in my home gym is ideal for implementing the training programme, the main purpose of which is to improve fitness and achieve weight loss. My programme design aims to achieve this using a combination of strength, local muscular endurance, and aerobic training during the sessions, and also by post exercise metabolic rate elevation, as studies have shown that the best results are achieved when intensity is high, and with a combination of diet, CV and LME. However, this aspect does have limitations in view of the client's present overall fitness, and the relatively short time frame available to work on this. The stretching and flexibility programme includes PNF in particular as a corrective therapy for tight pectorals, quads and hip flexors, and continued work in this area is necessary for corrective action.

3.4. Programme Progressions

Programme progressions are shown in detail as in the weekly programme tables above. The order of exercises was varied for each session both to provide variety and avoid continuous use of any muscle group.

3.5. Detailed Plan of 4th Session With Client

This is the fourth session at the end of the second week. When the client arrived she was in very good form and we had a brief chat about the earlier session that week, how she felt generally, and how her work day went etc. She was looking forward to the session and also I suspect to the weekend after a busy and stressful week at work. So far there were not any adverse issues to prevent a good workout and some progressions. As usual we discussed the programme ahead and her responses provided me with useful information about her progress and any possible contraindications. When mentioning the aspirations for weight loss I was careful not to labour the point too much.

Exercise	Reps	Weight/ Dumbbells	Sets	Rest
1. Warm up 10 mins walk on treadmill				
2. Gentle stretches of upper, middle and lower body				
3. Lateral raise (standing/dumbbells)	12	1.5kg	2	30 secs
4. Abdominal curls (on stability ball)	12	n/a	2	
5. Shoulder press (on stability ball)	12	1.5kg	2	30 secs
6. Back extensions (on stability ball)	12	n/a	2	30 secs
7. Bent over lateral raise (standing/dumbbells)	12	1.5kg	2	30 secs
9. 8 mins steady on stationery bike low/increased tension				
10. Bench press (on stability ball)	12	1.5kg	2	30 secs
11. Single arm upright row (each side, 3 point base)	12	5kg	2	30 secs
12. Supine fly (on stability ball)	12	1.5kg	2	30 secs
16. Core plank (20 secs)	3	n/a	1	20 secs
17. Floor stretches for lower body and back		Stretches included PNF stretching for quads & hip flexors		
18. Cool down 5 mins walk on treadmill				

4. Client Education & Support

4.1. Motivational Techniques Used

Education and motivational support was provided to the client during the entire programme. When I first met my client I knew that I would have a huge challenge on my hands. I was impressed with her outlook on life but had reservations about her approach to health and fitness. She is a very happy person and not very ambitious where fitness and body condition is concerned. From day one I talked about the benefits of fitness without preaching ideals as I feared that this may be off-putting for her. I tried to portray the happiness and joy of exercise, and I think I succeeded in this judging by her comments. Before the sessions I always discussed the benefits of the previous session and questioned her about how she felt after the last day. While she warmed up we chatted about the merits of fitness, good body composition and weight loss. I made her aware of the programme progressions and explained the benefits. My client always fully understood my rationale, and responded positively to my positivity and encouragement.

I explained that improved LME and strength, coupled with improved aerobic fitness, produces an elevated post-exercise metabolic rate which in turn uses more calories even while at rest, and my client was impressed with this concept. I also explained that when combined with controlled calorie intake body fat loss is greatest, and I pointed out that many conclusive studies have been done in this area. I appealed to her vanity and she agreed that she would be very proud to show improved fitness and weight loss to her husband, who lives abroad and who due to circumstances she can only meet occasionally. My work with the client in fitness and exercise instruction was educational, and as she is a fast learner she will have no problem performing most of the exercises well with a minimum of supervision. This opens the way for her to undertake a more comprehensive programme in the future. She worked very well on the stability ball and fully understood the additional benefits of engaging several muscle groups at once. I gave my client a food diary during our first session and asked her to keep records for her own benefit. I was hopeful that this would change her eating habits for the

better, and provide encouragement for better dietary discipline. I also explained to her the food pyramid and gave her a copy for reference.

4.2. Handouts and Literature Provided

I provided the client with a pedometer calibrated for her stride length, which she made good use of, and she gave me regular reports of the walks she did on other exercise days. Other handouts included:

From Natural Life : Stay Active this Winter

From National Fitness News: It's All about Motivation, by Maura O'Sullivan Ryan

From National Fitness News: Train your Brain: The Psychological Benefits of Physical Activity, by Ciara Losty

Published by Flahavans: Establishing the Facts about Sports Nutrition

From Health News: Regular Workouts Ward off the Common Cold, by Amanda Chan

From NHS Choices: Overcoming the Barriers to Exercise

From NHS Choices: Exercise Link to Low Depression

From Irish Mountain Log: Page on new website for walking enthusiasts

PDF copies of handouts included on CD.

5. Fitness Assessment Retest

5.1. Retest Results & Analysis

All of the tests done at the beginning of the programme were repeated here; results of these retests are detailed below.

Component of Fitness	Test	Results	Results Analysis
Body composition	Physical Measurements	Normal Heart Rate: 65 Resting Heart Rate: 58 Blood pressure: 73/118 Cholesterol: normal Body Fat: 40.03% Height: 1.68m Weight 93.1KG BMI: 32.986 Waist: 37.75 ins Hips: 46.5 ins	This is very encouraging for my client; all aspects of Body Composition have improved except Weight which showed only very marginal change. I pointed out that this is very important for further development as increasing muscle mass will bring higher resting

		Waist to hip ratio: 0.812 (no additional risk of CHD)	Metabolic Rate and consequent higher calorie consumption even while at rest.
Cardiovascular	Single stage treadmill walking	36.24 ml.kg.min	Client has improved CV fitness and continuing the walking and programme will bring further improvement.
LME	Modified press up Lateral Raise 2.00KG Shoulder Press Seated	39 (Excellent) 22Reps 16 Reps	I was very impressed with her LME progress, she showed great determination with these tests and should be very happy with the results.
Flexibility	Static posture analysis	<p>Anterior view: Ear height/head tilt/rotation: ok Clavicles –levels: ok Shoulders – levels: ok Ribcage – level/rotated: ok Arm gap: same each side Iliac crests: even heights Knuckles: same direction Fingertip – levels: equal Knees – slightly knocked Q angle: Above normal Feet – direction, arch, weight bearing (shoes): ok</p> <p>Side view: Head position: ok Cervical curve: slightly increased Shoulder alignment: ok Thoracic curve: normal Lumbar curve: ok Pelvis – ASIS v PSIS – tilt: no Knee – joint angle & alignment: ok Ankle – joint angle: ok</p> <p>Posterior view: Ear height/head tilt/rotation: ok Shoulders – levels: ok Scapulae – levels/prominence: ok Spine alignment (scoliosis): none Arm gap: same each side Iliac crests: even heights Knees : slightly knocked Q angle: Above normal Ankles: fall slightly in Feet – direction, arch, weight bearing: ok</p>	Static Posture analysis showed little or no change. The exercises performed were good for her posture and ensuring good technique confirmed client’s knowledge of good posture. More work can be done to maintain strong back correct and adjust” Q” angle.
Muscle length	Wall test Hand Behind Back Hand Behind Neck	Normal Improved Improved	Overall flexibility was good from the outset and maintaining this during the

	Lumbar Side Flexibility Modified Thomas Test	Good Hip Flexors and Rectus Femoris: normal flexibility Even both sides	programme was important. This was achieved.
	Calf Soleus	Min 90% each side	
	Pectorals/Lats	Excellent	
	Pectoralis Minor	Moderate distance between floor & shoulder	
	Straight Leg Raise	L 93*, R 92*	
	Ely's Test	Even but not touching Slight improvement	
	Sit and Reach Test	37CM	
	Shoulder Elevation Test	86 (Good)	

5.2. Evaluation of Programme to Date

Retest results were very interesting and showed positive progress in many areas if not all. It was important to maintain the client's interest with a variety of exercises and this has been achieved. Body condition has shown some improvement and further work will bring further improvement. Motivating the client to achieve weight loss using diet and limiting calorie intake will be the challenge for the future, but with continued exercise and body condition improvement weight loss will be achieved.

The client's goals have been met except for weight loss; however conversion of body fat to muscle mass will temporarily increase weight so with this in mind there was some progress. It will depend on a combined effort of continued exercise and diet. So far I have demonstrated to the client what can be achieved and this will help motivate her for the future.

6. Future Direction of Programme

In my opinion the most crucial issue of all is how my client will proceed for the future now that this programme is finished. My future plans for her include one day per week with me for a 1 to 1 1/2 hour session of exercises as per the detailed programme below. This programme is to be progressed as her fitness level improves and weight loss is achieved. In addition my plan is for a programme of brisk walking for 3 or 4 days per week of at least 40 minutes duration. To this end I will encourage the client to join or get involved with an outdoor walking group for weekend activity.

Exercise	Reps	Weight/ Dumbbells	Sets	Rest
1. Warm up 10 mins walk on treadmill				
2. Gentle stretches of upper, middle and lower body				
3. Lateral raise (standing/dumbbells)	15	1.5kg	2	30 secs
4. Abdominal curls (on stability ball)	15	n/a	2	30 secs
5. Shoulder press (on stability ball)	15	1.5kg	2	30 secs
6. Back extensions (on stability ball)	15	n/a	2	30 secs
7. Bent over lateral raise (standing/dumbbells)	15	1.5kg	2	30 secs
8. Upright row (standing/barbells)	15	8kg	2	30 secs
9. 15 mins steady on stationary bike higher tension				
10. Bench press (on stability ball)	15	1.5kg	2	30 secs
11. Single arm upright row (each side, 3 point base)	15	5kg	1	30 secs
12. Supine fly (on stability ball)	15	1.5kg	2	30 ecs
14. Back extensions (on mat)	15	n/a	2	30 secs
15. Forward lunges (each leg)	12	n/a	1	n/a
16. Core plank (25 secs)	3	n/a	1	n/a
17. Floor stretches for lower body and back				
18. Cool down 5 mins walk on treadmill				

This will take about 1 ½ hours but will continue to produce positive results in body composition and CV fitness. It is my intention to progress and vary the exercises to maintain variety and motivation for the client. I will also encourage the client to begin a lesser programme at home on one other day per week. Her knowledge and ability to adopt a good technique quickly is excellent, and I am hopeful that exercise will become an important and essential part of her daily life.

7. Client Feedback Form

Selecting my questions for this form was one of the most enjoyable tasks of the project. However I designed the questions to produce a fair assessment of my performance as a personal trainer from my client in this project. It is my opinion

that I was successful in this. Most importantly I felt that my client enjoyed the experience.

Client feedback form: see Appendix 3.

8. Self Evaluation

One-on-one training was something I did not have much experience with; however I enjoyed the interviews, doing the tests and completing the forms. I found analysing the tests very interesting and enjoyed the process of planning a suitable programme. There were issues to be considered, the client's opinion to be taken into account, and, most importantly, goals to be set and realised. I enjoyed planning the programme and presenting it to the client; I felt I did this well as some of the exercises were unfamiliar to her and involved breaking new ground. In almost all situations I did not have to make any changes. With a history of a back injury it was necessary to constantly monitor any discomfort in this area and as we did not encounter problems I felt I did well with the overall programme design and presentation.

The fact that my client was obese with very little recent exercise experience presented a challenge in the programme design. I am satisfied I did well in this area and the retests indicate progress. On the personal side I established a very good rapport with my client from the outset. I have no doubt she looked forward to the sessions and always went home happy, if sometimes tired after a long day. I like the one-on-one concept and my knowledge and background in sport will be useful in future both as a motivator and a role model for clients.

Negative aspects of my experience with this client include the fact that I usually have high expectations from clients and don't doubt that they share my enthusiasm for health and fitness. This is not always the case, and some clients won't be as highly motivated and will be happy to settle for less than the ideal. Some will set goals and never reach them and not be unhappy with the result. I will have to do some rethinking in this area and empathise more. I learned from this experience that there are many different people with vastly differing experiences of life and health and fitness ambitions. I found myself absorbed in

the job and was not always aware of time running over, this was not fair to the client or commercially sensible. I have learned that psychological factors often present more of a challenge than physiological ones.

9. Conclusion

The experience of working with this client whom I had never met prior to our first meeting was quite daunting at first but as each session progressed it became very rewarding and enjoyable. I found the tests and programme interesting but had a real problem with the motivational side where calorie intake was concerned. Despite my best efforts I felt I had not made significant progress. For future clients with weight loss as a goal I will have to find motivational methods that work. This was my most important lesson. I learned to deal with new problems using the skills and knowledge I have as a personal trainer and coach. For the past thirty years I have spent many hours each week preparing programmes and coaching athletes up to international level. In these circumstances motivation is rarely an issue. The role of personal trainer is very different and I will need all my skills, knowledge and persuasive powers to provide a top class service for my clients who will come in all shapes and sizes. Given my achievements as a former athlete and coach I have no doubt that I will be successful.

Appendices

Appendix 1: Health Screening Questionnaire

Personal Details:

Name: Client	Date of Birth: xx.xx.xxxx
Address: Co Kildare	Home Phone: (xx) xxxxxxxx
Mobile No: (xxx) xxxxxxxx	Email Address: @gmail.com
Occupation: Administration Manager	
Name of Doctor: Dr X	Phone No: (xx) xxxxxxxx
Emergency Contact: Ms X	Phone No: (xx) xxxxxxxx

Medical Screening:

Please provide correct answers to the following

Do you now or have you in the past had heart disease, heart problems, chest pain, stroke? **No**

Is there a history of heart disease/stroke in your immediate family?

No

If yes which relative and at what age?

N/A

Have you ever experienced any pain or discomfort in your chest while exercising? **No**

Do you suffer from high/low blood pressure? **No**

Do you have any form of illness or disease e.g. Asthma, diabetes, epilepsy, breathing problems, high cholesterol, triglycerides, rheumatic fever, gout, dizziness, chronic cough, stomach/duodenal ulcer, liver/kidney condition, infection or infectious disease, seizure, blackout or fainting, or any other illness or condition that may prevent you participating in exercise programme? **No**

Do you have a hernia or any other condition that may be aggravated by lifting weights? **No**

Are you currently on any medication? **No**

Are you pregnant or have you been pregnant in the past six months?

No

Do you suffer from any of the following: arthritis, joint pain, muscular pain, lower back pain, cramps, circulation problems, or any injury

that may limit your participation in exercise programme? **Yes - lower back injury 15 years ago, details given below**

Have you ever been advised by a Doctor not to exercise? **No**

Do you suffer from any allergies? **No**

Do you now smoke or have you smoked in the past? **Yes - past light smoker stopped 5 years ago**

Are you on any special diet plan? **No**

Do you use alcohol? **Yes - social light use of alcohol about 10 units per week**

Do you use drugs of any form or any performance enhancing substances? **No**

If yes to any of the above please give full information, use additional page if necessary? **Lower back injury 15 years ago, caused by riding accident. On occasions have some discomfort, have had treatment over long period; it is not a cause for concern at present. Have never had an MRI scan. Does not prevent participation in exercise.**

Lifestyle/Physical Activity

Do you engage in any regular physical activity? **No**

If yes specify details below **N/A**

List the type, frequency, intensity and duration of your weekly exercise **None at present**

List your specific goals for your exercise program e.g. Weight loss/Flexibility/Muscular tone/Strength/Cardio/ Reduce stress/Conditioning/Sports performance

Weight loss

Achieve fitness

Improve body condition

Areas of interest

Walking

Strength Equipment

Free Weight Equipment

Flexibility

Please rate your stress management levels? **Medium**

How often would you eat/drink any of the following?

Fruit/veg **Daily**

Takeaway's/fried food **Occasionally**

Meat/Poultry/Fish **Twice weekly**

Water **Daily**

Breads **2/3 times weekly**

Potatoes **2/3 times weekly**

Pasta/Rice **2/3 times weekly**

Soft drinks **occasionally**

Informed Consent

I, Client, declare that I intend to take part in the exercise class/programme offered by Adam Jones. I am aware that as with all types of exercise there is an inherent risk of heart attack, light headaches, fainting, cramps, muscle or joint injury etc. I acknowledge that it is my choice to participate in this exercise and I understand that I am free to withdraw for this exercise or modify my activity levels at any time. I understand that Adam Jones accepts no responsibility whatsoever for any injuries or death during or after participation in the programme/exercise class. I have read, understood and agreed to the contents of this informed consent agreement in its entirety.

Signed by Participant **Client** Date: **1.10.2010**

Signed by Instructor **Adam Jones** Date: **1.10.2010**

Appendix 2: Exercise and Attitude Questionnaire

Please fill out this questionnaire as accurately as possible, if you need help please ask. The information is purely for the purpose of designing an exercise programme and is totally confidential.

Name **Client**

Date **1.10.2010**

1. Please rate your exercise level on scale of 1-5, 5 indicating very strenuous, for each age range through to present age

15-20 **3** 21-30 **3** 31-40 **2** 41-50+ **n/a**

2. Did you take part in sport/exercise in second or third level? If yes give brief details. **Played basketball and did Physical Education in second level, also did swimming during second and third level.**

3. Do you have any negative feelings towards or have you had any bad experiences with physical activity. **No negative feeling but dont have great motivation for sport generally except swimming and walking. Had a riding accident in mid twenties and have a lot of treatment for and discomfort from lower back since.**

4. Do you have any negative feelings towards or have you had any bad experiences with fitness testing or assessment. If yes please specify. **No.**

5. How do you rate your present fitness level under the headings on scale of 1-5, 1 being the lowest

General overall fitness level	2
Aerobic fitness level	1
Muscular Capacity	2
Flexibility level	4

6. How often have you started an exercise programme and not finished in past 5 years. **3 times**

7. How many days per week and for how long each day are you prepared to exercise. **3/4 day per week and for approximately 1 hour**

8. Are you presently participating in any exercise programme. If yes please give brief details. **No**

9. What exercise activities have you participated in over the past 5 years. **Walking, Swimming non competitive**

10. What type of exercise are you primarily interested in? For example walking, jogging, weights training, body conditioning, strength training, aerobics, flexibility, dance. **Walking, swimming, weight training, flexibility**

11. What do you hope to achieve from this exercise programme?
Improved fitness and better body composition and a also some weight loss

12. How do you envisage your exercise activity 6 months from now
I would like to have found an exercise programme that suits and be settled in it.

1 year from now **Same as above**

5 years from now **I would like to be a regular exerciser and have regular contact with trainer or exercise professional**

13. Rank your goals and ambitions in the area of exercise/sport on scale of 1-5, 1 being very important, with regard to the following aspects

Improve aerobic fitness	3
Improve body condition	1
Improve body shape	1
Achieve weight loss	2
Improve flexibility and mobility	3
Increase strength	3
Improve appearance	1
Improve sports performance	4
Better health and feel good factor	4
Have fun and enjoy	4

Other **If I can find the right activity and enjoy on regular basis I would rate that as 1**

Do you have ambition to change body weight if so by how much?

Yes I would like to lose about 10kg long term

Thanks for taking time to complete this questionnaire, it will greatly help in designing a suitable exercise plan for your future.

Appendix 3: Training Evaluation Questionnaire

TRAINING EVALUATION QUESTIONNAIRE

Client name: Client

Date: 30.11.2010

Please evaluate the personal trainer's performance on a scale of 1-5 below.

Rating scale	
1	Poor
2	Fair
3	Satisfactory
4	Good
5	Excellent

	1	2	3	4	5
General appearance & attitude					√
Facilities offered					√
Initial meeting and information gathering			√		
Tests performed				√	
Composition and suitability of programme					√
Ability to demonstrate and give instruction					√
Correction and guidance skills					√
Atmosphere in which sessions were carried out				√	
Attention to detail					√
Professional and technical knowledge				√	
Ability to empathise			√		
Motivational skills					√
Your enjoyment of exercise process					√
Benefit of programme to you				√	

Would you use this trainer again?

Yes

No

Additional Comments:

Could not fault trainer's competence, diligence and enthusiasm. Would benefit more from programme if I took on board recommendations regarding diet and calorie intake – will make a more concerted effort in future.

THANK YOU FOR YOUR PARTICIPATION!